



HUMAN SERVICES STANDING COMMITTEE MEETING

Thursday, April 2, 2026

1:00 P.M. – 3:00 P.M.
130 Cremona Drive, Suite B
Goleta, California

Conference Room 1

Councilmember Luz Reyes-Martín
Councilmember Stuart Kasdin
Jaime A. Valdez, Assistant City Manager
JoAnne Plummer, Neighborhood Services Director
Cassidy Le Air, Senior Management Analyst
Melissa Cure, Management Assistant

Public Participation

If you wish to make a general public comment or to comment on a specific agenda item, the following methods are available:

Distribution to the Human Services Standing Committee - Submit your comment via email prior to 9:00 a.m. on the morning of the meeting to the Human Services Standing Committee meeting. Please submit your comment to Melissa Cure at: mcure@cityofgoleta.gov. Your comment will be placed into the record and distributed appropriately.

Please register for the Human Services Standing Committee Meeting on April 2, 2026, at 1:00 P.M. PDT at:

ELECTRONIC PARTICIPATION: Join Meeting Electronically at:

Zoom Link: https://us06web.zoom.us/webinar/register/WN_ryMG8rV7QAitgI8MD0sACQ

Zoom Webinar ID: 882 4705 0832

Or dial: For higher quality, dial a number based on your current location.

Mobile Options: US: +1 408 638 0968 or +1 669 900 6833 or +1 253 215 8782 or +1 346 248 7799 or +1 646 876 9923 or +1 301 715 8592 or +1 312 626 6799

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After registering, you will receive a confirmation email containing information about joining the webinar.

You will be connected to audio using your computer's microphone and speakers (VoIP). A headset is recommended.

AGENDA

- I. Public Comment
- II. Review of Community Development Block Grant (CDBG) Planning Documents
- III. Review of the Goleta City Grant Applications

Americans with Disabilities Act: In compliance with the ADA, if special assistance is needed to participate in a City Council meeting (including assisted listening devices), please contact the City Clerk's office at (805) 961-7505. Notification at least 72 hours prior to the meeting helps to ensure that reasonable arrangements can be made to provide accessibility to the meeting.



MEMORANDUM

DATE: April 2, 2026

TO: Human Services Standing Committee

FROM: JoAnne Plummer, Director of Neighborhood Services

CONTACT: Cassidy Le Air, Senior Management Analyst

SUBJECT: Item II. Review of Community Development Block Grant (CDBG) Planning Documents

ITEM III. Review of Community Development Block Grant (CDBG) Planning Documents

RECOMMENDATION

Review and provide feedback on the proposed CDBG planning documents, including the Substantial Amendment to the 2025-2029 Consolidated Plan and the Program Year 2026-27 Annual Action Plan.

BACKGROUND

Since 2004, the City of Goleta has been an Entitlement Grantee receiving an annual allocation of federal funds from the U.S. Department of Housing and Urban Development (HUD) through its Community Development Block Grant (CDBG) Program. This program is designed to benefit low- and moderate-income residents by supporting activities that provide decent housing, create suitable living environments, and expand economic opportunities.

The CDBG Program is a formula-based block grant authorized under the Housing and Community Development Act of 1974 (Act), a bipartisan federal law¹, with funding levels determined through the federal budget appropriation process. Although annual funding is subject to federal appropriations, the Act establishes the program's eligibility criteria, national objectives, and funding distribution formulas.

CDBG was created to consolidate seven federal community development grant programs into a single formula-based block grant, providing states and units of local government with greater flexibility to address community needs and determine which eligible activities to fund. Prior to its establishment, the federal government exercised greater control over how funds were

¹ [CDBG Laws and Regulations - HUD Exchange](#)

allocated among individual programs and which projects were funded under federal grant programs.

To continue receiving these funds as an Entitlement Grantee, the City is required to prepare a series of planning documents, including a Citizen Participation Plan (CPP), a Five-Year Consolidated Plan, and an Annual Action Plan. Together, these documents establish the City's priorities for the use of CDBG funds and guide implementation of eligible activities, ensuring alignment with local needs and priorities while meeting federal national objectives. In addition to maintaining eligibility as an Entitlement Grantee, the City must comply with all applicable federal statutes, regulations, and administrative requirements governing the program. While the City retains flexibility in selecting activities, all funded activities must meet one of the national objectives established by the Act and comply with all applicable requirements.

Under the CDBG entitlement formula, the City's annual allocation varies based on the amount approved through the federal budget process. Since becoming an Entitlement Grantee, the City has received between \$156,000 and \$320,000 annually. Based on those allocations, up to approximately \$23,000 to \$48,000 (respectively) has been available each year for nonprofit activities under the Public Services category.

DISCUSSION

When establishing program goals and funding recommendations, CDBG funds are generally distributed among three eligible categories: Public Services, Administration, and Capital Projects. The Administration category is capped at 20 percent, the Public Services category at 15 percent, and the Capital Projects category is not subject to a maximum. As a result, funding for Capital Projects may exceed 65 percent of the total CDBG allocation when the Administration and Public Services categories are funded below their maximum allowable levels.

Over the past year, staff has evaluated how best to align community needs with federal program requirements, including changes in federal guidance. Under the CDBG Program, the City has discretion to adjust the goals, objectives, and funding priorities established in the Consolidated Plan. Given the City's existing General Fund support for nonprofit services and the significant unmet need for public facility and infrastructure improvements, staff recommends amending the 2025-2029 Consolidated Plan to reduce funding for Public Services and concentrate future CDBG funding on Administration and Capital Projects. Staff further recommends processing a Substantial Amendment to implement this change by allocating 20 percent of the annual CDBG entitlement to Administration and the remaining 80 percent to Capital Projects. Allocating the full allowable amount to Administration would support the City's ongoing compliance, reporting, environmental review, and program administration responsibilities.

The City's need for Capital Project funding is significant, with approximately \$28,000,000 in currently unfunded public facility and infrastructure needs. Concentrating limited CDBG resources on capital projects would allow the City to address those identified needs. When providing Public Services subawards, subrecipients are subject to all applicable federal requirements associated with CDBG funding, and the City is responsible for ensuring subrecipient compliance. Focusing CDBG funds on capital improvements would reduce the level of subrecipient monitoring required while directing available federal funds to eligible

projects. Capital projects funded with CDBG would be selected to benefit low- and moderate-income persons by improving public facilities and infrastructure and addressing barriers to accessibility.

Regarding Public Services, the City currently provides \$250,000 annually from the General Fund to nonprofits through the Goleta City Grant Program. In recent years, this funding level has increased, including an increase from \$150,000 to \$250,000 in Fiscal Year 2022-23. That increase was initially supported by American Rescue Plan Act (ARPA) funds and has since been replaced with General Fund support. Staff recommends maintaining that funding level and using the Notice of Funding Availability (NOFA) process to prioritize funding goals and objectives and maximize the community impact of City Grant funding. Through that process, the City can continue supporting nonprofit service providers even if future CDBG funding is focused on capital improvements and administration. Staff can return to the Human Services Standing Committee to discuss the NOFA for Fiscal Years 2027-28 and 2028-29, as well as related funding priorities.

Substantial Amendment to the 2025-2029 Consolidated Plan

The Substantial Amendment to the 2025-2029 Consolidated Plan would revise the Public Services goal beginning in Year Two of the plan and reallocate those funds to the existing Capital Improvements goal. The proposed changes include:

- Reduction of the Public Services Goal by \$192,552 to \$48,138
- Increase to the Capital Improvements Goal by \$192,552 to \$1,235,562

No further changes are proposed to the Consolidated Plan. The proposed revisions are limited to adjusting the goals for Years Two through Five of the Five-Year plan. As the City is currently in Year One of the plan, no amendments are proposed to the goals for the current Program Year.

Program Year 2026-27 Action Plan

HUD has not yet released the annual allocation amounts for Program Year 2026-27. Accordingly, the City is using the Program Year 2025-26 annual allocation of \$320,925 for planning purposes. Based on that amount, the City proposes allocating \$64,185 (20%) to Administration and \$256,740 (80%) to Capital Projects. The Action Plan also includes contingency language providing that the proposed activities will be adjusted proportionately once the actual allocation amount is known.

The capital project selected for funding for Program Year 2026-27 is Americans with Disabilities Act (ADA) Improvements at the Goleta Community Center pickleball courts. The project includes construction of ADA-compliant pathways, improvements to entry points to ensure compliant clearances and maneuverability, upgrades to signage and wayfinding, and enhancements to improve connectivity among accessible parking, entrances, restrooms, and recreational facilities.

This project was selected for funding because it will remove architectural barriers and improve access to a publicly available recreational facility. The proposed improvements will eliminate existing barriers to access and help ensure that individuals with mobility limitations, including

seniors and persons with disabilities, can safely and fully use the facility.

In addition, the project is consistent with the City's adopted Consolidated Plan priorities related to accessibility, improvement of public facilities, and CDBG national objectives. By improving the path of travel and overall site accessibility, the project promotes equitable access to recreational opportunities and supports a suitable living environment. The project is anticipated to be released for bid in summer 2026.

Next Steps

Both the Substantial Amendment to the 2025-2029 Consolidated Plan and the Program Year 2026-27 Annual Action Plan are scheduled to be released for public review beginning April 3, 2026. Staff is scheduled to conduct a public hearing before the City Council on April 21, 2026. Following the public review period, the plans will be submitted to HUD. Both plans must be submitted by May 15, 2026, to meet HUD-established deadlines.



MEMORANDUM

DATE: April 2, 2026

TO: Human Services Standing Committee

FROM: JoAnne Plummer, Director of Neighborhood Services

CONTACT: Cassidy Le Air, Senior Management Analyst

SUBJECT: Item III. Review of Fiscal Year 2026-27 Goleta City Grant Applications

ITEM II. Review of the FY 2026-27 Goleta City Grant Applications (60 Minutes)

BACKGROUND

The 2026–2027 Goleta City Grant cycle opened on January 5, 2026, and closed on February 6, 2026. In December 2025, the Goleta City Grant Program Guidelines were updated to clarify eligible uses of funds and other program requirements ahead of opening this year’s grant cycle. Staff conducted a preliminary screening of applications for compliance with the Grant Guidelines. Applications determined to be ineligible under the Guidelines were removed from consideration. A Notice of Funding Availability (NOFA) was released on January 5, 2026, detailing the Grant Program Guidelines, eligibility requirements, and application procedures (Attachment 1).

For this grant cycle, the City received ninety-six (96) applications requesting \$790,426 in funding. This is an increase over last year’s ninety-four (94) applications totaling \$873,156. Applications were submitted across ten (10) categories: Educational Programs, The Arts, Food/Nutrition, Programs for Low-Income & Homeless, Programs for Seniors, Recreational Activities, Youth Programs, Environmental/Wildlife and Animal Programs, Community Engagement, and Miscellaneous Programs.

Of the ninety-six (96) applications received:

- Fifty-seven (57) will be reviewed by the Human Services Standing Committee
- Eighteen (18) will be reviewed by the Parks and Recreation Commission
- Six (6) Community Engagement applications will be reviewed by the Economic Development and Revitalization Standing Committee
- Six (6) will be reviewed by the Homelessness Issues Standing Committee
- Nine (9) were deemed ineligible and not accepted

The Human Services Standing Committee (Committee) will review applications for human services, educational, health and wellness, food/nutrition, senior programs, the arts (music, dance, theater, art), youth services, and miscellaneous programs. The Committee is authorized to award a total of \$150,000, which can be distributed amongst the various categories at the Committee's discretion.

Review Criteria

The 2026-27 NOFA outlined the review criteria for evaluating applications and recommending funding for this grant cycle.

The funding parameters are as follows:

- Minimum Grant Award: \$1,000
- Maximum Grant Award: \$10,000
- Total Funding Available for the Committee: \$150,000

Applications are evaluated based on the following criteria:

- To what extent does the organization's mission or the project/program/service meet a Strategic Plan or General Plan goal?
- To what extent will the grant funds be utilized for the benefit of the residents of the City of Goleta, and will the program or project clearly be able to demonstrate that the services provided are of benefit to Goleta residents? Is the applicant located in Santa Barbara County? (e.g., consider how many Goleta residents will be served by the applicant)
- Is the amount of funding requested appropriate/reasonable for the project/program/service?
- To what extent does the project/program/service satisfy an unmet or under-met need in the community?
- To what extent does the applicant or organization appear to be staffed and equipped to carry out the project/program/service effectively?
- Will the applicant's program/project/event provide a service that the City does not or cannot provide?
- To what extent does the project or program further or advance the City's Diversity, Equity, and Inclusion (DEI) goals? Is it committed to ensuring equity, inclusion, and access for all participants?

Grant Applications

	Applicant	Project/Program	FY 26-27 Amount Requested
1	A to Z Cooking School	After School Culinary Education	\$10,000
2	AHA	Social Emotional Learning for Goleta Youth	\$10,000
3	Boxtales	Youth Theater Public Series	\$10,000
4	Breast Cancer Resource Center	Lay Patient Navigation and Support Services	\$10,000
5	Cafecito Connect	Community Nutrition Chats	\$8,000
6	Center for Successful Aging	General Operating Support	\$10,000
7	Channel Islands Young Men Christian Association	After School Enrichment Program	\$10,000
8	Children's Creative Project	Summer Dance Education Program	\$10,000
9	Clay Studios	Clay Ball for All Affordable Community Days	\$10,000
10	CommUnify	Seniors Safe at Home	\$10,000
11	Dos Pueblos	After Prom	\$2,500
12	Creative Network	Hip-Hop and Street Dance Program	\$10,000
13	E3 Learning	High Impact Tutoring Program	\$7,000
14	Easy Lift	Dial-A-Ride Paratransit Services	\$10,000
15	Elk's Lodge	Math Fact Fluency Initiative	\$10,000
16	Family Service Agency	Long-Term Care Ombudsman	\$10,000
17	Food Bank	Feeding Nutritional Security for the City of Goleta	\$4,000
18	Food From the Heart	General Operating Support	\$10,000
19	Freedom For Youth	Peer to Peer Mentoring Groups	\$10,000
20	Future Leaders of America	Future Leaders of America	\$10,000
21	Gateway Educational Services	Educational Support for Latinx Students in Goleta	\$10,000
22	Goleta Shimmy Mob	Community Dance and Domestic Violence Awareness Program	\$2,695
23	Goleta Union School District	Arts Education	\$9,000
24	Grace Fisher Foundation	Disability Awareness Field Trips	\$7,920
25	Historias de Goleta	Latina/o Oral Historiography & Community Theater	\$10,000

26	Hospice of Santa Barbara	Support for Goleta Patients with a Life-Threatening Illness	\$10,000
27	La Patera PTA	La Patera PTA	\$4,800
28	LEAP	Integrated Support Services for Low-Income Goleta Families	\$10,000
29	Lights Up	Lights Up! Theatre Company Season 9	\$10,000
30	Mental Wellness Center	Continued Funding for Goleta Students Responding to Ongoing Teacher and Principal Requests for Additional Classrooms Served	\$7,000
31	Mosaic Therapy Collective	Mosaic Therapy Collective Equity Fund	\$6,000
32	Mothers Helpers	Mothers' Helpers Everyday Essentials Program	\$10,000
33	Moxi	Goleta School STEAM Programs	\$10,000
34	Nomad Tango	Nomad Tango 5th Season	\$3,000
35	Octobot Robotics	Octobots Robotics	\$10,000
36	Organic Soup Kitchen	Basic Needs: Nutrition and Food Security	\$10,000
37	Parkinsons Association of Santa Barbara	Support Staff for Parkinson's Exercise Program	\$4,000
38	Postpartum Education for Parents	Postpartum Education for Parents (PEP)	\$7,500
39	Safety Town	Safety Town of Santa Barbara County	\$7,500
40	Santa Barbara Channelkeeper	2026-27 Channelkeeper "What the Channel Means to Me" Student Art Show	\$1,500
41	Santa Barbara County Education Office	Job Readiness Training & Internship Program for High School Youth	\$5,000
42	Santa Barbara Dance Institute	2026 Goleta Summer Dance Camp and Early Childhood Inclusion Classes	\$10,000
43	Santa Barbara Education Foundation	Innovate DP	\$7,000
44	Santa Barbara Museum of Art	Education for All with the Santa Barbara Museum of Art	\$10,000
45	Santa Barbara Scholarship Foundation	Scholarships	\$10,000
46	Santa Barbara Sevent Day Adventist Church	Nedley Depression and Anxiety Community Recovery Program	\$7,500
47	Santa Barbara Strings	Early Strings Training Program (ESTP)	\$6,000

48	Santa Barbara Symphony	Music Education Programs for Goleta Youth (MEPs)	\$10,000
49	Sarah House	Home & Hospice Care for Low-Income Individuals	\$10,000
50	SEE International	SEE Vision Care (SVC) Goleta Program	\$5,000
51	Standing Together to End Sexual Assault	Crisis Intervention Program	\$3,000
52	Storyteller	Early Childhood Education Program	\$5,000
53	The Quiet Between	Community Film Education & Cultural Arts Program	\$10,000
54	United Boys and Girls Club	United Boys & Girls Clubs, Goleta Club	\$10,000
55	Unity Shoppe	Client Service Center: Unity Delivers and Job Smart	\$10,000
56	Veggie Rescue	SYV Fruit & Vegetable Rescue	\$7,000
57	VNA Health	VNA Health Subsidized Charity Care and Community Programs for Goleta Seniors	\$10,000
Total			\$467,915

The application forms for each application are included as Attachment 2. To facilitate review, the Committee members were provided with digital access to the grant applications and supplemental attachments, the latter of which are voluminous and are not included in this packet. The applications and supplemental attachments are available for public review in the City Clerk's Office at City Hall. The City Clerk can be reached at (805) 961-7505.

DISCUSSION

The Committee is being asked to review and make funding recommendations for fifty-seven (57) City Grant applications totaling \$467,915 in requested funding. The requested funding exceeds the \$150,000 total available to award by the Committee.

ATTACHMENTS:

- I. Notice of Funding Availability – Fiscal Year 2026-27
- II. City Grant Applications
- III. Goleta City Grants Summary Spreadsheet

Attachment I

Notice of Funding Availability – Fiscal Year 2026-27



Notice of Funding Availability (NOFA) Goleta City Grant Program

I. Introduction

The City of Goleta invites applications for the Fiscal Year 2026-2027 Goleta City Grant Program. This Notice of Funding Availability outlines the available funding, eligibility, application requirements, and review process for this grant cycle. Applicants must also comply with the City’s adopted Goleta City Grant Program Guidelines.

II. Timeline

- Application Opening: Monday, January 5, 2026
- Technical Assistance Webinar: January 8, 2026, 10:00 a.m. - 11:00 a.m. (PST)
- Applications Due: February 6, 2026, at 5:00 p.m. (PST)
- Application Review: February - March 2026
- Recommendations to City Council: May 5, 2026
- Recommended Award Notifications: May 2026
- Final Budgets Due: May 29, 2026
- Agreements Released: June 2026
- Grant Start Date: July 1, 2026
- Grant End Date: June 30, 2027
- Year-End Report Due: July 31, 2027

III. Available Funding & Categories

Total Funding Available: \$250,000
 Maximum Award: \$10,000
 Minimum Award: \$1,000
 Grant Period: July 1, 2026 – June 30, 2027 (12 months)

Available funding is allocated across program categories as follows:

Category	Available to Award
Community Engagement Programs and Events, Economic Development	\$ 25,000
Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.	\$ 150,000
Environmental/Wildlife/Animal Programs, Parks and Recreation Programs	\$ 50,000
Homeless & Low-Income Programs	\$ 25,000
Grand Total Available	\$ 250,000

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Goleta City Grant Program

Applicants will be required to select the funding category they are applying for within the application. One category may be selected per application, and applicants may not submit duplicate applications for multiple categories.

IV. Eligible Applicants

Eligible organizations:

- Nonprofit organizations.
- Government or quasi-governmental agencies.
- The use of nonprofit sponsors is permitted.

Eligible organizations must possess and maintain current corporate and tax status as non-profit entities.

Ineligible organizations:

- For-profit organizations.
- Individuals.
- Organizations primarily involved in political action, legislation, and lobbying.
- Organizations that are located outside Santa Barbara County and do not have an existing operational presence within Santa Barbara County.

V. Eligible Services, Activities, and Projects

All services and activities funded through the City of Goleta's Community Grant Program must directly benefit Goleta residents and be sponsored by an eligible organization.

Categories of services and activities eligible for funding include:

- Civic projects and services.
- Cultural programs in music, art, dance, and related fields.
- Recreational activities, including fitness, camps, sports, and outdoor programs.
- Educational programs.
- Community festivals, special events.
- Environmental and wildlife programs.
- Public services, including services for seniors, youth, low-income individuals, and people experiencing homelessness.
- Health, wellness, food security, and nutrition programs.
- Services or activities that address community needs and demonstrate a public benefit.

The City's 2025-2027 strategic goals focus on environmental stewardship, community and recreational vitality, financial and economic stability, strong infrastructure, revitalizing Old Town, ensuring public safety, promoting transparent and efficient operations, and advancing equity, inclusion, and access. The complete 2025-2027 City of Goleta Strategic Plan is available [here](#).

Notice of Funding Availability (NOFA)
Goleta City Grant Program

VI. Restrictions and Limitations

Ineligible uses of funds:

- Capital improvements, including construction, facility renovations, or the purchase of real property.
- Fundraising, debt service, endowments, or reserves.
- Alcohol and gambling-related expenses.
- Political campaigning, lobbying, legislative, or related activities.
- Religious activities, including worship, proselytization, and religious instruction.
- Services or activities that do not comply with the Americans with Disabilities Act (ADA), including those offered in facilities that are not accessible to individuals with disabilities.
- Services or activities located outside of Santa Barbara County.
- Any other use deemed inconsistent with City policy or public interest.

VII. Application Instructions

Applications must be submitted through the City's online grants portal, Submittable. Applicants must create an account, complete all required fields, and upload all required documents before the deadline. Applications submitted by email, mail, or hand delivery will not be accepted. The complete application, including all narrative questions and required uploads, is available in Submittable.

The grant portal can be accessed here:

<https://cityofgoleta.submittable.com/submit>.

The following information is required:

- Name and general purpose of the applicant providing or sponsoring the proposed service or activity.
- Contact name and information for the grant application.
- Description of the project or program.
- Number of Goleta residents would be served by the proposed service or activity.
- Two references who may be contacted regarding the proposed service or activity.
- If the activity is taking place at or within school grounds, the application must state that permission and approval were received by the affected school.
- If the applicant is receiving other city funds or is applying for other city grant programs, the applicant must disclose other sources to ensure there is no duplication.

Required documents:

- Proof of non-profit or government status (IRS determination letter).
- List of board members.
- Most recent Year-end Balance Sheet or Profit/Loss Statement.
- Most recent Year-end 990.
- Organization budget.

Notice of Funding Availability (NOFA)
Goleta City Grant Program

- For applicants using a fiscal sponsor, a letter of commitment from the fiscal sponsor agreeing to serve as the fiscal sponsor of the program.

If the applicant is using a fiscal sponsor, the above required documents must be submitted for the fiscal sponsor. The sponsored program may provide supplemental materials, but the fiscal sponsor must provide all organizational documentation.

VIII. Technical Assistance Webinar

The City will host a Technical Assistance Webinar for the Goleta City Grant Program to review the Notice of Funding Availability (NOFA), provide an overview of the Submittable application platform, and address questions related to eligibility, evaluation criteria, required documentation, and reporting obligations. Attendance is not mandatory to apply but is highly encouraged for all prospective applicants.

- Webinar Date: Thursday, January 8, 2026
- Time: 10:00 AM to 11:00 AM (PST)
- Registration Link: [Goleta City Grants FY 26-27 Workshop \(Teams\)](#)

Prospective applicants are encouraged to register in advance. The webinar will include a Submittable demonstration, a brief presentation, and a question-and-answer period. Questions may also be submitted in advance to CityGrants@CityofGoleta.gov.

IX. Review Criteria

Applications will be reviewed and funding determined based on the following criteria.

- To what extent does the organization's mission or the project/program/service meet a Strategic Plan or General Plan goal?
- To what extent will the grant funds be utilized for the benefit of the residents of the City of Goleta, and will the program or project clearly be able to demonstrate that the services provided are of benefit to Goleta residents? Is the applicant located in Santa Barbara County? (e.g., consider how many Goleta residents will be served by the applicant)
- Is the amount of funding requested appropriate/reasonable for the project/program/service?
- To what extent does the project/program/service satisfy an unmet or under-met need in the community?
- To what extent does the applicant or organization appear to be staffed and equipped to carry out the project/program/service effectively?
- Will the applicant's program/project/event provide a service that the City does not or cannot provide?
- To what extent does the project or program further or advance the City's Diversity, Equity, and Inclusion (DEI) goals? Is it committed to ensuring equity, inclusion, and access for all participants?

Notice of Funding Availability (NOFA)
Goleta City Grant Program

X. Review Process

Grant applications will be reviewed by one of the following groups:

- City Council’s Human Services Standing Committee
- City Council’s Homelessness Issues Standing Committee
- City Council’s Economic Development and Revitalization Standing Committee
- Parks and Recreation Commission

Applicants will be notified when the appropriate Committee/Commission reviews their application. While attendance at the review meetings is not required, it is recommended that a representative be present to answer any questions the reviewers have about the application or program.

Recommendations of the Committees and Commission will be forwarded to the City Council for final approval and action of funding awards. The tentative schedule of review meetings is listed below.

Committee/Commission	Applications Reviewed	Date
Economic Development and Revitalization Standing Committee	Community Engagement Programs and Events, Economic Development	March 30, 2026, at 1:30 p.m.
Human Services Standing Committee	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.	1st meeting: Feb 23, 2026, at 3:30 p.m. 2nd meeting: March 6, 2026, at 9:00 a.m.
Parks and Recreation Commission	Environmental/Wildlife/Animal Programs, Parks and Recreation Programs	March 18, 2026, at 6:00 p.m.
Homelessness Issues Standing Committee	Homeless & Low-Income Programs	March 10, 2026, at 3:00 p.m.

XI. Final Budget

Following notification of the award, Grantees shall submit a final budget detailing how the awarded funds shall be used based on the actual award amount. Upon notification of the award, the final budget document will be made available within the Submittable platform.

XII. Grant Agreement & Reporting

All grant recipients must sign a Grant Agreement with the City. The agreement will be sent via DocuSign. Grantees will be asked to provide signatory information within the Submittable platform. A final year-end report will be due on July 31, 2027, detailing how

Notice of Funding Availability (NOFA)
Goleta City Grant Program

the funds were used, program accomplishments, and number of persons served. The report will be made available in the Submittable platform.

XIII. Grant Credit

As a condition of funding, grantees must acknowledge the City of Goleta's support in all promotional, informational, or published materials. The City logo must be used in accordance with the City's logo use policy.

XIV. Submittable Help

For technical questions regarding Submittable, customer support is available through its online portal, [Submittable Help - For Submitters | Submittable](#).

- Applicant training video: [How to use Submittable \(for applicants\) | Submittable Help Center](#)
- Frequently asked questions: [Help for Applicants | Submittable Help Center](#)

Applicants are strongly encouraged to submit early to account for technical issues, including internet connectivity or upload delays. The City cannot provide technical support for Submittable and will not accept late applications for any reason, including technical difficulties.

XV. Contact Information

For questions regarding this NOFA, eligibility criteria, or the Goleta City Grant program, please contact:

CityGrants@CityofGoleta.gov or (805) 690-5126.

Additional applicant resources can be found at: www.cityofgoleta.org/grants.

Attachment II
City Grant Applications

Title	Afterschool Enrichment - Culinary Education	02/05/2026
	by Nancy Martz in FY 2026 Goleta City Grant	id. 53090791
	nancy@atozcookingschool.org	

Original Submission	02/05/2026
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Score	n/a
	Part 1: Program Information
Program Name	Afterschool Enrichment - Culinary Education
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	<p>We are seeking funding to support our afterschool enrichment classes in Goleta schools. Students attend weekly cooking classes, where they learn how to cook together, eat together, and clean up together. They learn knife skills, kitchen safety and cooking skills. We teach them how to set the table, practice table manners, and how to wash the dishes and clean up together.</p> <p>Classes are 90 minutes.</p> <p>All students are welcome to register.</p> <p>Classes are taught by trained Culinary Educators.</p>
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	150
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Young people today are not learning to cook, and many parents may not have learned how to cook. As a result of these factors, we have seen skyrocketing rates of Type II diabetes, heart disease, obesity, obesity-related illness, and loneliness.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

We do not have any limitations for individuals with disabilities. We can accomodate varying abilities and access.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

We set the schedule at the beginning of each semester. We have been at Brandon, Isla Vista, Hollister, La Patera, El Camino, and Foothill.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

The City's grant funding would cover the gap between the amount that the market will bear for an afterschool class (\$330) and the amount that it costs for us to run the classes (\$560). Our costs include groceries, Educator wages, and business overhead. For the 2026-2027 school year, we will apply to the Ann Jackson Family Foundation, Sprouts market, US Bank, Williams Corbett Foundation, Northern Trust, American Riviera Bank, Monroe Foundation, Deckers, and the Lewis Kingsley Foundation.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

If we do not receive full funding from the City of Goleta, we will have to make up the funding gap by asking other donors. We cannot raise our class fees for families. And we cannot lower our costs. We need to pay our staff a living wage.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

We charge \$30 per class per child. (So a 10-week class would be \$300). We offer scholarships to families who request it. And we work with PTAs who have scholarship funds.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

We bring people together over shared meals by teaching children, teens and adults how to prepare delicious, nutritious, affordable meals made from seasonal and local ingredients.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.	We will teach 150 Goleta students in the 2026-2027 school year – 4 classes of 12 students, for 3 semesters. We teach classes across southern Santa Barbara County, reaching approximately 1,900 students (children, teens and adults) each year. We teach afterschool classes in all districts. And we offer camps during summer and school holidays. Many Goleta residents attend our summer and holiday camps, as well; however these programs are not part of this proposal.
Is a nonprofit sponsor being used to sponsor the program?	No
Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.	We are celebrating our 10th anniversary this year! We have proven capacity to deliver weekly afterschool cooking classes. Our staff consists of a management team plus 18 trained Culinary Educators. Our team is led by a seasoned non-profit executive, an experienced chef, and a pediatrician. Our board reviews financials on a monthly bases, and oversees policies and procedures.
Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?	No
Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?	No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Kristin Castorino, D.O., Sansum Diabetes Research Institute, 805-708-2630 Jenny Edwards, Kellogg PTA rep since 2019 - 559-696-0542

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[AtoZ_501c3_IRS_determination_letter.pdf](#)

[AtoZ_Board_2025.pdf](#)

[AtoZ_Cooking_School_Form_990_2023.pdf](#)

[AtoZ_2025-2026_Org_Budget_1.pdf](#)

[ProfitandLoss_23.pdf](#)

Optional Miscellaneous Documents

[What_we_do_-_2026.pdf](#)

Organization Contact Nancy
Martz

Title Executive Director

Email Address nancy@atozcookingschool.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$ 125,000.00
Donations/Fundraising	\$ 35,880.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 170,880.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 92,785.00	Santa Barbara
Fringe Benefits & Payroll Taxes	\$ 10,650.00	
Occupancy (Rent and Utilities)	\$ 24,000.00	
Equipment	\$ 5,000.00	
Supplies and Materials	\$ 4,350.00	
Direct Client Support / Participant Assistance	\$ 33,120.00	\$ 10,000.00
Marketing & Outreach (Printing, Advertising)	\$ 975.00	
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)		
Total Expenditures	\$ 170,880.00	\$ 10,000.00

Title	Social Emotional Learning for Goleta Youth	02/03/2026
	by Kira Redmond in FY 2026 Goleta City Grant	id. 53074414
	kira.ahasb@gmail.com	

Original Submission 02/03/2026

Score	n/a
	Part 1: Program Information
Program Name	Social Emotional Learning for Goleta Youth
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	AHA! provides Social-Emotional Learning to 400 Goleta youth (ages 11-18) annually. At GVJH, AHA! Peace Builders meet weekly during AVID class; 5 classes will receive 5-week Councils. ALLY groups meet at SMHS and DPHS weekly after school for 1.5 hours during the school year. AHA!'s summer programs meet for 3 hours, 4 days a week (Monday-Thursday) for 3 weeks in July. All programs are monitored by AHA! research staff, who collect and analyze data from pre- and post-surveys.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	400
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Yes. Teens are facing mounting mental health challenges and are longing for meaningful connection while struggling with bullying and other pressures. AHA! meets this under-met need by creating safe spaces for teens to connect and find community.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

AHA!'s programs in Goleta are held in classrooms on campus at GVJH, SMHS, and DPHS, which are accessible to all. We serve many youth on the autism spectrum, and receive special training and consult with clinical staff/parents to best support them.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

GVJH: Clanci Chiu Merritt, Principal; SMHS: Devany Bechler, Dean of Student Engagement; DPHS: Bethany Bodenhamer, Dean of Student Engagement

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative City of Goleta funds would go toward staff salaries.

Personnel

Lead Facilitator \$40/hr x 952.5 hrs

Clinical Facilitator \$35/hr x 780 hrs

Support Facilitator \$27/hr x 812.5 hrs

Facilitator \$22/hr x 910 hrs

Prog Mgr \$41.93/hr x 1022.5 hrs

Clin Dir \$67/hr x 132 hrs

Ex Dir \$61.33/hr x 216 hrs

Research Dir (evaluation), \$48.44 x 402 hrs

Research Assistant, \$27/hr x 363 hrs

Payroll Tax & Benefits \$40,319.22

Supplies \$9000

Mileage \$4500

Marketing \$1000

Overhd \$2500

Other: (snacks for teens) \$3000

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

<p>Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.</p>	<p>Yes. Demand for AHA!'s programs has surged, but recent school budget cuts have left a major funding gap. City of Goleta funds are vital to sustain services and leverage other donors; without full funding, we may have to reduce our scope of services.</p>
<p>Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?</p>	<p>No</p>
<p>Is there a cost to participate in the program?</p>	<p>No</p>
	<p>Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.</p>
<p>What is your organization's mission statement?</p>	<p>AHA!'s mission is to empower youth, educators, and families through programs and services that foster grit, connection, and joy.</p>
<p>Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.</p>	<p>AHA! signs an annual Memorandum of Understanding (MOU) with the Santa Barbara Unified School District (SBUSD) which contracts us to serve students at GVJHS, DPHS, and SMHS with our in-school programs, which are delivered on these campuses. AHA! tables at these schools' orientation and back to school nights as well as at numerous community events throughout the year to recruit youth to participate in our after-school and summer programs.</p>
<p>Is a nonprofit sponsor being used to sponsor the program?</p>	<p>No</p>

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

AHA! has 26 years of experience serving youth in Goleta and surrounding communities and has successfully partnered with local school districts to deliver our social-emotional learning programs for 20 years. Our 31-member staff includes licensed therapists, educators, and bilingual professionals. We maintain strong financial controls, utilize a 3rd party accounting firm, and have strong Board oversight and a proven record of successfully implementing and reporting on many City of Goleta grants.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Clanci Chiu-Merritt, Principal of Goleta Valley Junior High School: cchiu@sbunified.org (805) 967-3486; Devany Bechler, Dean of Students at San Marcos High School, dbechler@sbunified.org, (805) 967-4581 x5543

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[AHA_-_501c3_IRS_Ltr.pdf](#)

[2026_AHA_BOD.pdf](#)

[AHA_BS_PL_6.30.2025.pdf](#)

[Aha_2023_990_for_Public_Disclosure_FINAL.pdf](#)

[AHA_Budget_2025-2026_simple.pdf](#)

Optional Miscellaneous Documents

Organization Contact Molly
Green

Title Senior Director of Development

Email Address molly@ahasb.org

Title	Boxtales Youth and Family Theatre Public Performance Series	02/07/2026
	by Matthew Tavianini in FY 2026 Goleta City Grant	id. 53107808
	boxtales@yahoo.com	

Original Submission 02/07/2026

Score	n/a
	Part 1: Program Information
Program Name	Boxtales Youth and Family Theatre Public Performance Series
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Boxtales Theatre Company seeks support for Boxtales Youth and Family Theatre Public Performance Series, presenting 2 free public performances at 2 venues in Goleta. Led by Artistic Director Andrews and Managing Director Tavianini, the series will be offered in partnership with local nonprofits, such as Girls Inc. and the Goleta Valley Community Center. Using world mythology, music, masks, movement, and storytelling, we will provide accessible live theatre for 500 Goleta youth and families.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	500
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Boxtales advances community vitality and equity in Goleta through free, inclusive youth and family theatre performances that address limited access to the arts and live theatre for families facing economic, language, or cultural barriers.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Boxtales is committed to inclusive arts access to community performances. Programs are held in ADA-compliant Goleta spaces, and we partner with nonprofit community staff to accommodate physical, learning, and emotional needs.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

City funds will support Boxtales Youth and Family Theatre Public Performance Series in Goleta. The \$10,000 request will be allocated as follows:

- **\$4,000:** Artist fees (2 guest performers at \$350 each for 2 performances, totaling \$700; and 2 Boxtales staff/performers totaling \$3300)
- **\$1,000:** Rent
- **\$5,000:** Outreach and coordination (\$1000 graphics design, \$1,000 printing, \$3000 publicist)

These funds will be leveraged with additional public and private support to expand our reach throughout Goleta.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

Revenue.xlsx

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

These funds are essential to support the Boxtales Youth and Family Theatre Public Performance Series in Goleta. Partial funding would require scaling back our program and seek additional support from grants, donors, and earned revenue.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

Yes

If yes, please list each source and provide the amount, purpose, and funding period or expiration date. This includes grants, contracts, sponsorships, in-kind contributions, or any other financial support from any City department or program. Clearly identify whether the funding is confirmed, pending, or anticipated. Describe how the funding request differs from what is already being funded or asked for.

Yes. Boxtales was awarded \$3,000 in City of Goleta funding for in-school assemblies, supporting performances at Goleta elementary schools in the 2025-26 school year. This funding was confirmed and will be fully expended during that period.
The current request seeks new funding to support two youth and family theatre performances in the 2026-27 program cycle and does not duplicate or replace previously funded activities.

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Boxtales' mission is to bring myths and folktales from around the world to young audiences using masks, movement, music, and storytelling. Our shows and assemblies fire imaginations, inspire creativity, strengthen cultural pride, encourage tolerance, and engage young people in the excitement and immediacy of live performance.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

Boxtales serves Goleta residents by providing accessible, standards-based performances of world mythology across Santa Barbara County. Through strong partnerships with Goleta elementary schools, community leaders, and local nonprofits such as Goleta Valley Community Center, our performance series will include two free public performances at two Goleta venues, expanding access to live theatre for Goleta youth and families.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

For the past four years, Boxtales has successfully managed City of Goleta grants, delivering our programs to students at multiple Goleta schools. Boxtales has been led by Artistic Director Andrews and Managing Director Tavianini. With strong local roots, Tavianini was also the director for Goleta Valley Junior High's spring musical for 10 years. Our experienced team ensures artistic excellence, financial oversight, and flexible, culturally rich performances that engage and inspire students.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Marianne Clark, Administrative Director, Lobero Theatre - mclark@lober.org - 805.966.4946; Abby Vasquez Principal Hollister Elementary School - avasquez@goleta.k12.ca.us

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter)

checked

List of Board Members

checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[IRS_letter_Boxtales.pdf](#)

[Boxtales_2026_Board_of_Directors_List.pdf](#)

[2025Boxtales_Theatre_Company_Profit_and_Loss.pdf](#)

[2025Boxtales_Theatre_Company_Balance_Sheet.pdf](#)

[2024_Form_990_for_BOXTALES.pdf](#)

[Boxtales_Annual_budget_2026.pdf](#)

Optional Miscellaneous Documents

[Bring_Boxtales_To_Your_School_2024-2025.jpg](#)

[Boxtales_Fall_Newsletter_2025.pdf](#)

[Boxtales_Marquee_at_Alcazar_Theatre.jpg](#)

[Boxtales_Monte_Vista_Letter_012325.pdf](#)

[Waldorf_School_Teacher_Evaluation.pdf](#)

[Boxtales_2024-25_Music_Center_evaluation_report.pdf](#)

[Boxtales_Waters_of_the_Earth_Poster.jpg](#)

[Boxtales_Assembly_Directory_Ad_2025_BRER.pdf](#)

[2025_Boxtales_Summer_Theate_Camp.jpg](#)

[Boxtales_-_Family_Photo.jpg](#)

Organization Contact Michael Andrews

Title Executive Artistic Director

Email Address boxtales@yahoo.com

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	\$ -
Federal	
State	\$ 10,000.00
County	\$ 15,000.00
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$ 12,500.00
Donations/Fundraising	\$ 1,200.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 48,700.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 28,400.00	\$ 4,000.00
Fringe Benefits & Payroll Taxes	\$ -	
Occupancy (Rent and Utilities)	\$ 4,000.00	\$ 1,000.00
Equipment	\$ -	
Supplies and Materials	\$ -	
Direct Client Support / Participant Assistance	\$ -	
Marketing & Outreach (Printing, Advertising)	\$ 16,300.00	\$ 5,000.00
Travel, Mileage & Training (Program-Related)	\$ -	
Other Expenditures (Note 1)	\$ -	
Total Expenditures	\$ 48,700.00	\$ 10,000.00

Title	Lay Patient Navigation and Support Services	02/05/2026
	by Silvana Kelly in FY 2026 Goleta City Grant	id. 53094603
	info@bcrcsb.org	

Original Submission	02/05/2026
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Score	n/a	
	Part 1: Program Information	

Program Name	Lay Patient Navigation and Support Services
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Amount Requested	10000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	BCRC provides free lay patient navigation services, peer counseling, and support services for individuals during and after breast cancer treatment. Services address emotional, educational, and practical needs through support, educational outreach, webinars, wellness programs, and integrative care. Plus practical assistance: free soup, post-operative care packages, and wigs at no cost. Support is available Monday–Friday by phone, video, or in person. Intake forms track participant activity.
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	400
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Cancer treatment doesn't address the emotional, social, or practical challenges many face with breast cancer. BCRC fills the gap by offering a safe space for connection, guidance, and resources—easing anxiety, restoring hope, and building confidence.
---	--

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

No problem. BCRC provides inclusive, barrier-free access in a fully accessible facility. Programs are adaptable and offered in person, by phone, or via video, with bilingual support and individualized navigation to ensure full participation for all.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Goleta City Grant funds will help offset the cost associated with BCRC providing free educational programs, lay patient navigation, peer counseling, educational outreach, soup and wellness programs to all who can benefit during breast cancer and in survivorship wellness phase. All services are available to and include Goleta resident participants. Funds cover program costs mentioned above, including soup, integrative therapies and personnel to provide programming.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

The requested funds are vital to sustaining BCRC's free programs. If partial funding is received, BCRC will continue to pursue fundraising while carefully prioritizing core services to ensure all programs remain available to those who rely on them.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

The Breast Cancer Resource Center of Santa Barbara is a 501(c)(3) non-profit organization, committed to serve as a community resource center that empowers individuals who have been diagnosed with breast cancer to advocate for themselves and make informed decisions regarding breast health and cancer treatment. At the BCRC, clients are heard and find emotional support in actively navigating their cancer treatment and survivorship health.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

BCRC serves all of Santa Barbara County, including Goleta residents, through free educational programs, support groups, lay patient navigation, and wellness services. We provide in-person, phone, and video access, plus bilingual outreach to underserved communities. Partnerships and field education efforts promote early detection and breast health, ensuring Goleta residents can access resources, guidance, and compassionate care close to home.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

BCRC has 28+ years of experience delivering free breast cancer education, peer support, lay patient navigation, and wellness programs. Led by experienced staff with data driven and financial oversight, BCRC maintains proven fiscal controls, diversified funding, and a track record of successful grant management, ensuring programs are effectively delivered and accessible to all community members.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Organic Soup Kitchen: Andrea Slaby, email: andrea@organicsoupkitchen.org , (805) 364-2790. UCLA Health: Robbie Gluckson, Director of Market Development & Community Engagement, Email: RGluckson@mednet.ucla.edu , tele: (818)-262-3556.

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[501c3_BCRC.pdf](#)

[Board_Roster_2026.pdf](#)

[Dec_2025_Bal_ProfitLoss.pdf](#)

[Breast_Cancer_Resource_Center_990_FY_2024_for_public_disclosure.pdf](#)

[BCRC_2026_Projected_Operating.pdf](#)

[BCRC-2025_Highlights_Programs.pdf](#)

[BCRC_Client_testimonial.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Silvana
Kelly

Title Executive Director

Email Address silvana@bcrcsb.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	\$ -
County	\$ -
Municipal (Other Cities)	\$ -
School District	\$ -
Foundations/Trusts	\$ 35,000.00
Donations/Fundraising	\$ 100,000.00
Fees	\$ -
Other Sources/Revenues (Note 3)	\$ -
Total Revenue	\$ 145,000.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 63,432.00	\$ 5,000.00
Fringe Benefits & Payroll Taxes	\$ 6,000.00	
Occupancy (Rent and Utilities)	\$ 43,792.00	
Equipment	\$ -	
Supplies and Materials	\$ 4,750.00	
Direct Client Support / Participant Assistance	\$ 7,500.00	\$ 5,000.00
Marketing & Outreach (Printing, Advertising)	\$ 10,480.00	
Travel, Mileage & Training (Program-Related)	\$ -	
Other Expenditures (Note 1)	\$ -	
Total Expenditures	\$ 135,954.00	\$ 10,000.00

Title	Cafecito Connect - Community Nutrition Chats	02/05/2026
	by Martha Donelan in FY 2026 Goleta City Grant	id. 53086193
	martha.donelan@gmail.com	

Original Submission	02/05/2026
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Score	n/a
	Part 1: Program Information
Program Name	Cafecito Connect - Community Nutrition Chats
Amount Requested	8000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Rooted Santa Barbara County requests \$8,000 for two Cafecito Connect - Community Nutrition Chats. The free, five-session nutrition series is hosted quarterly by Rooted and the Foodbank of Santa Barbara County. Led by registered dietitian Mary Galindo, these conversations offer practical, culturally relevant nutrition tips via Zoom in Spanish/English. Monitoring will be through surveys - the target population is those interested in improving their health through fiber-forward nutrition.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	20000
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Rooted Santa Barbara County transforms community health by shifting the focus from treatment to prevention through food as medicine. Healthy food is healthcare—and everyone deserves access to make nourishing choices that benefit long-term health.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

The program is live on Zoom. We make recordings available for those who have impaired vision, and transcripts for the hearing-impaired.. Sessions are in English and Spanish.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Rooted seeks \$8,000 to conduct two quarterly sessions - one in Spanish and one in English. The bulk of the budget is for the dietician's salary, plus planning, preparation, evaluation, and follow-up. Each five-part program costs \$4,000. Rooted is actively exploring other funding options including grants from corporations, foundations, and individuals.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes, they are necessary. Rooted is currently fundraising for this program in addition to other essential initiatives from individuals and corporations.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Rooted partners with individuals, families, and care teams to make food literacy, food as medicine, and evidence-based lifestyle practices part of everyday health. Our programs build the skills, confidence, and connections that empower every neighbor to eat more plants, prevent and manage chronic disease, and feel their best. Through hands-on education prioritizing equitable access and culturally resonant programs, we bridge knowledge with practice so everyone can eat to thrive.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

We partner with the Goleta-based Foodbank of Santa Barbara County to provide culturally-relevant nutrition education to our entire community.

Is a nonprofit sponsor being used to sponsor the program? Yes

Fiscal Sponsor Letter of Support (Required for Fiscal Sponsors)

[Fiscal_Sponsorship.pdf](#)

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.	Rooted is headed by Beth Skidmore, MSACN. Beth earned her M.S. in Applied Clinical Nutrition with honors from Northeast College of Health Sciences in 2019, and a B.A. in Communications from UCSB. She has 25 years of experience in nonprofit leadership, development, and community building, nutrition education and communications. Curriculum development and program delivery are being led by Mary Galindo RD, a bilingual registered dietitian with extensive experience in nutrition education.
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Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?	No
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Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?	No
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Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Lacey Johnston, Foodbank President. lbaldiviez@foodbanksbc.org. 805.967.5741 x206. Dr. Frederic Kass, MD, JA, MA. Fred.kass.md@gmail.com. (805) 563-0041

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[Tax_Determination_Letter_2012_4.pdf](#)

[2026_BOD.pdf](#)

[SBF-990-and-990-T-Public-Disclosure-2024.pdf](#)

[SBF_Audited_Financials.pdf](#)

[Rooted_Budget.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Beth
Skidmore

Title Executive Lead

Email Address hello@rootedsantabarbara.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	
Donations/Fundraising	\$ 3,500.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 3,500.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 2,250.00	\$ 2,250.00
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)		
Equipment		
Supplies and Materials		
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)	\$ 5,750.00	\$ 5,750.00
Total Expenditures	\$ 8,000.00	\$ 8,000.00

Title	General Operating Support	02/06/2026
	by Steven Sharpe in FY 2026 Goleta City Grant	id. 53101845
	admin@csasb.org	

Original Submission 02/06/2026

Score	n/a
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Part 1: Program Information

Program Name	General Operating Support
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Amount Requested	10000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	The Center for Successful Aging (CSA) is seeking support for our three core programs: the Senior Peer Counseling Program, the CareLine Telephone Reassurance Program and Real Help. All of these programs support seniors of all income levels between Carpinteria and Goleta.
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	25
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	We are the only local organization providing these services to seniors in our area. We are advancing equity, inclusion and access with our programs to seniors.
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Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

We have no barriers, all our programs take place in accessible facilities. In fact. several of our groups are held via Zoom so individuals can participate from the comfort of their homes.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

We are requesting staff support since that is by far our largest budget category. We are requesting support for the salaries of both our Administrative Director and Clinical Director (each paid \$50,000 per year.) All of our other counselor salaries are covered (reimbursed) by our contracts. In Other we have included our insurance cost (\$5,000) other small misc. expenses. In Marketing we have included the cost of our newspaper, which serves as an important promotion and communication tool.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes, the funds are critical to our ability to offer our programs to seniors at no cost to them. We have several contracts (County and Fees) which assist in supporting our expenses. We are requesting staff support since that is our largest expense.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

Our private counseling sessions are offered at a sliding scale fee basis. No one is turned away due to inability to pay. All of our other programs are offered free of charge.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

The Center for Successful Aging seeks to promote the physical, psychological, emotional, social and spiritual needs of seniors and their families in the greater Santa Barbara area.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

Goleta residents are able to attend any of our support groups as well as receive one-on-one counseling either at their home or at our office in downtown Santa Barbara. We also distribute our newspaper throughout the Goleta community.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

We operate on a relatively low budget. Our Administrative Director has over 35 years managing non-profits and fundraising and serves in an important role managing our funds and finances. Our Board is provided with financial reports on a monthly basis, enabling them to oversee our fiscal health. Our Clinical Director has over 40 years experience as a therapist, and he supervises our programs and the volunteers and interns providing our services.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Pat Snyder, snyderpatra@aol.com, 805-455-0390; Sally Saenger, 4lifelongfitness@gmail.com, 805-680-8039

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[2024_CSA_Form_990_Public_Disclosure.pdf](#)

[Board_of_Directors_2025.pdf](#)

[CSA_IRS_Exempt_Letter.pdf](#)

[ProfitandLoss2025.pdf](#)

[CSABudget2026.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Steven
Sharpe

Title Administrative Director

Email Address admin@csasb.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$10,000
City of Goleta (Other) (Note 2)	
Federal	
State	
County	\$63,000
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$56,000
Donations/Fundraising	\$58,800
Fees	\$109,500
Other Sources/Revenues (Note 3)	\$17,000
Total Revenue	\$ -

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$181,500	\$10,000
Fringe Benefits & Payroll Taxes	\$16,200	
Occupancy (Rent and Utilities)	\$9,050	
Equipment		
Supplies and Materials	\$3,000	
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)	\$9,050	
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)	\$19,810	
Total Expenditures	\$ -	\$ -

Title	After School Enrichment Program	02/06/2026
	by Raul Macias in FY 2026 Goleta City Grant	id. 53106240
	raul.macias@ciymca.org	

Original Submission	02/06/2026
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Score	n/a	
	Part 1: Program Information	

Program Name	After School Enrichment Program
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Amount Requested	10000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Program provides bilingual and bicultural after-school programs M-F year-round for youth grades 5-12 academic tutoring daily throughout the school year with flexible hours to accommodate early release day and serves as a safe drop-in center away from gang activities, alcohol, and other drug use. Community members are also welcome to attend our community events throughout the year at no cost. Data is tracked through our internal registration in which our entire association oversees.
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	400
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	As mentioned in Goleta's Strategic Plan to enhance opportunities for childcare and enhanced educational programming- SGYC contributes to the city's effort by providing supervision, community cultural engagement, access to resources, and support.
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Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Our program does not have any barriers where individuals with disabilities encounter barriers. Our building is ADA compliant.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

City of Goleta will support operate a cost-free youth program all year round for over 200 unduplicated youth by subsidizing program frontline staff salaries, benefits, and taxes. Other sources of funding for the program include support from governmental and local grants, private and in-kind donations, campaigns and special events. Note 1: \$788 are association IT Reserves which include IT support and technology/software maintenance.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

The St. George Youth Center is funded through foundations, government funding, UCSB Associated Students, private donations, and through annual fundraising campaign and special events, the YMCA will remain active in identifying alternative resources.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

We're for youth development, healthy living, and social responsibility

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

Channel Islands YMCA

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

The Channel Islands YMCA completed its most recent fiscal year audit by a 3rd party firm. We rotate firms every 3 years to ensure an unbiased opinion. There were no significant findings or deficiencies reported to our Board of Directors. In addition, the program requesting funding support is fully staffed with experienced employees who are vetted into our extensive background check software (Department of Justice) and are fully trained in childcare safety.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Kimberly Kiefer, Parks & Recreation Department (805) 680-4300
kkiefer@ivparks.org, Myah Mashhadialireza, Community Programs and Engagement Director 805-770-2752
communityengagement@islavistacsd.com

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[IRS_Determination_Letter_122024.pdf](#)

[Approved_Budget_All_Major_Groups_2025-2026.pdf](#)

[IRS_990_Public_Disclosure_FYE_063024.pdf](#)

[SB_-_Board_Roster_3.pdf](#)

[St._George_December_2025.pdf](#)

Optional Miscellaneous Documents

Organization Contact Raul
Macias

Title Program Director

Email Address raul.macias@ciymca.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 4,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	\$ 1,000.00
School District	
Foundations/Trusts	
Donations/Fundraising	\$ 100,057.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 105,057.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 110,811.00	\$ 10,000.00
Fringe Benefits & Payroll Taxes	\$ 31,219.00	
Occupancy (Rent and Utilities)	\$ 20,290.00	
Equipment	\$ 1,500.00	
Supplies and Materials	\$ 7,658.00	
Direct Client Support / Participant Assistance	\$ 11,350.00	
Marketing & Outreach (Printing, Advertising)	\$ 420.00	
Travel, Mileage & Training (Program-Related)	\$ 6,950.00	
Other Expenditures (Note 1)	\$ 788.00	
Total Expenditures	\$ 190,986.00	\$ 10,000.00

Title	Goleta Summer Dance Education Program	02/06/2026
	by Yoseline Gonzalez in FY 2026 Goleta City Grant	id. 53106633
	ygonzalez@sbceo.org	

Original Submission	02/06/2026
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Score	n/a	
	Part 1: Program Information	

Program Name	Goleta Summer Dance Education Program
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Amount Requested	10000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Children’s Creative Project (CCP), a program of the County Education Office, in partnership with SB Dance Institute and Goleta Union School District (GUSD), proposes a two-week program embedded within GUSD summer school. Teaching artists will provide dance instruction to students and participate in professional development aligned with California State Arts Standard. CCP will coordinate and monitor implementation to expand access to quality arts education and strengthen local teaching capacity.
--	---

Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	200
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	This program supports Goleta schools in meeting State Standards amid limited district staffing capacity. By developing well-trained teaching artists, CCP expands equitable access to quality arts education while supporting workforce development.
---	--

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

No. The program is designed to be accessible and inclusive. CCP partners with GUSD and school staff to identify and support student needs through instructional flexibility, communication supports, and appropriate accommodations.

If your program takes place on school grounds, have you received permission and approval from the appropriate school? Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

Goleta Union School District, Director of Expanded Learning Ryan Sparre

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Grant funds will support the planning, coordination, and delivery of a two-week summer program in partnership with GUSD and SBDI. Major costs include teaching artist instruction for students, professional development facilitation aligned with California State Arts Standards, and CCP program staff responsible for coordination, oversight, and monitoring. City of Goleta funds will be used in coordination with partner and donor support to ensure high-quality implementation and equitable access.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes. City of Goleta funds are necessary to ensure program delivery and equitable access for GUSD students. If partial funding is received, CCP will leverage partner contributions, and additional foundation/donor funding to deliver the program.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Children's Creative Project (CCP) sparks curiosity and cultivates creativity through inclusive arts education for students, preschool to grade 12.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

CCP serves Goleta residents through direct partnerships with Goleta Union School District, delivering arts education on school campuses during the school day and summer school. Programming is provided in collaboration with district leadership and school staff to ensure alignment with instructional goals. Through this work, CCP supports student access to arts education while strengthening the local pool of vetted, standards-aligned teaching artists serving Goleta schools.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

CCP has the experience, staffing, and oversight necessary to manage public funds and deliver high-quality arts education programs. As a program of the County Education Office, CCP ensures all contracted teaching artists are vetted, trained, and aligned with State Arts Standards. CCP maintains established fiscal controls, with Board-reviewed financial oversight and dedicated program staff responsible for planning, coordination, implementation, and monitoring.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Jose Chicote, 6th grade teacher at El Camino Elementary. (805) 794-9049
Dr. Mary Kahn, Superintendent for the Goleta Union School District,
MKahn@gusd.us

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[IRS_Tax_Exempt_Letter_CCP_1.pdf](#)

[24_990.pdf](#)

[CCP_Board_of_Directors_5.pdf](#)

[EOY_Balance_Sheet.pdf](#)

[CCP_Budget.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Yoseline
Gonzalez

Title Program Manager

Email Address ygonzalez@sbceo.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$ 7,000.00
Donations/Fundraising	\$ 8,789.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 25,789.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 19,789.00	\$ 10,000.00
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)		
Equipment		
Supplies and Materials	\$ 6,000.00	
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)		
Total Expenditures	\$ 25,789.00	\$ 10,000.00

Title	Clay Ball for All: Affordable Community Days	02/06/2026
	by Jacob Adivi in FY 2026 Goleta City Grant	id. 53105866
	programs@makerhouse.org	

Original Submission 02/06/2026

Score	n/a
	Part 1: Program Information
Program Name	Clay Ball for All: Affordable Community Days
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Clay Ball for All offers bi-monthly, low-cost weekend clay events for Goleta residents, welcoming ~200 visitors per event. Activities include wheel-throwing lessons, handbuilding, paint-your-own pottery, and a ceramic flash sale. All materials, firing, and tools are included, using reclaimed clay and unclaimed work to reduce waste. The program removes cost, time, and skill barriers and serves all ages, students, and working residents through accessible, grant-supported drop-in experiences.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	1200
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Past low-cost programs sold out immediately and produced large waitlists, showing demand far exceeded our capacity. Expanding this program supports Goleta's strategic goals related to community well-being and arts and cultural opportunity access.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

All program areas are ground-floor and fully ADA accessible, with 5 designated ADA parking spaces. Event layouts support wheelchair access, and staff assist and adapt instruction as needed. Reasonable accommodations are available upon request.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Total program cost \$16,442 (6 events):

- \$2,640 - 4 wheel instructors at \$40/hr for total of 66 hours
- \$9,246 - 6 studio techs at \$23/hr for a total of 402 hours - check-in, setup, cleanup, POS, customer service, trimming work, organizing, glazing, loading and unloading kiln.
- \$1,120- 70 bags of clay at \$16 per bag
- \$600 - Underglaze set at \$100/event
- \$840 - kiln costs at \$420 (6 glaze firings) + \$420 (6 bisque firings)
- \$1,396 ≈ Estimated payroll taxes for \$11,886
- \$600 - Marketing 6 events

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Fees cover only a part of staffing, materials, and firing. We cannot increase materials or staff hours without grant support. Partial funding would require fewer events, reduced materials, or higher fees, limiting access for low-income participants.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

A \$20 fee will be charged for certain activities to offset some costs. Some activities, such as handbuilding without firing, will be completely free. The fee helps manage variable costs while remaining intentionally low to ensure accessibility.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

To create and sustain an inclusive ceramic arts center that promotes exploration, innovation, and self-expression through the transformative medium of clay.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.	We serve Goleta residents of all ages, from TK-6th students to retirees. Our onsite programs include workshops, 8-week classes, and memberships. Offsite programs bring clay to spaces with limited access, including Isla Vista Elementary and Maravilla. With partnerships with organizations like Girls Inc., Slingshot, Children’s Creative Project, and the Newcomers Group, we extend our reach across Santa Barbara County. We are actively looking for additional partnerships with organizations in Goleta.
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Is a nonprofit sponsor being used to sponsor the program?	No
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Describe your organization’s capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.	Our organization has the capacity to manage grant funds and deliver this program using a proven model refined through ongoing assessment. We track staff hours and resources to ensure proper staffing and efficient material use. A professional financial advisor oversees funds to guarantee their appropriate use. Our experienced staff has managed similar programs and budgets, demonstrating responsible grant administration. In 2025, expenses were within 98% of the budget, showing strong cost control.
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Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?	No
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Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?	No
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Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Jessica Swenson, VP of Fundraising, Monte Vista Elementary School PTA (805)680-3191 fundraising@mvpta.org and Sarah York Rubin, Executive Director of SBC Arts & Culture, (805) 568-3992 sarah@sbac.ca.gov

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[501c3_Notice_IRS_20-0131_1.pdf](#)

[Maker_House-List_of_Board_Members.pdf](#)

[Final_2024_990_-_Maker_House.pdf](#)

[MAKER_HOUSE_CLAY_STUDIO_-_2026_Approved_Budget.pdf](#)

[MAKER_HOUSE_CLAY_STUDIO_-_2025_Balance_Sheet.pdf](#)

Optional Miscellaneous Documents

[MH-Facilities.pdf](#)

[MH-Participation.pdf](#)

[MH-Voices.pdf](#)

[MH-Youth-and-Community-Impact.pdf](#)

[MAKER_HOUSE_CLAY_STUDIO_-_2025_Budget_vs_Actuals.pdf](#)

Organization Contact Erin
Smith

Title Studio Director

Email Address Erin@makerhouse.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 11,886.00	\$ 5,444.00
Fringe Benefits & Payroll Taxes	\$ 1,396.00	\$ 1,396.00
Occupancy (Rent and Utilities)	\$ 840.00	\$ 840.00
Equipment		
Supplies and Materials	\$ 1,720.00	\$ 1,720.00
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)	\$ 600.00	\$ 600.00
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)		
Total Expenditures	\$ 16,442.00	\$ 10,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	
Donations/Fundraising	
Fees	\$ 6,442.00
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 16,442.00

Title	Seniors Safe at Home	02/07/2026
	by Lynn Carlisle in FY 2026 Goleta City Grant	id. 53107568
	602 Anacapa St. Santa Barbara, California 93101 CA United States 805-964-8857 lcarlisle@CommUnifysb.org	

Original Submission 02/07/2026

Score	n/a
	Part 1: Program Information
Program Name	Seniors Safe at Home
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Free of charge, Seniors Safe at Home provides income-qualified low-income senior (aged 62+) households with services based on need, including: home repairs; installation of slip-and-fall prevention adaptations; one-time rent/utility support; weatherization and appliance upgrades; wellness workshops; and critical information that supports seniors' independence and quality of life. Program impact is measured through client surveys, inspection by field staff and an annual financial audit.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	10

Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

Only countywide program providing comprehensive services for low-income seniors;
Seniors—long-standing residents--remain contributing community members;
Well-maintained homes support neighborhood vitality, home price value, property tax base.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Taking place in seniors' homes, the program actually addresses clients' disabilities by increasing livability and home safety. Wellness workshops are held in fully accessible locations in the community. Client-facing personnel are bilingual.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Expenses

Personnel: In-house staff manage client contact, review home assessments, coordinate w/ contractors

Fringe/Taxes: Standard rate

Supplies/Materials: Supports for seniors such as grab bars and specialized toilet seats

Direct Client Support: Contract labor for slip&fall device installation, minor repairs, weatherization, rent/utility assistance. Annual bid process. Goleta City Grant used here.

Revenue

Pending: Item 2, 9 (partial)

Received: Item 4, 6, 9 (partial)

Ongoing fundraising

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Requested funds help us assist as many Goleta-based seniors as possible. If partially funded, we will seek support from other sources and/or limit the number of seniors who will be assisted by the program.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?	No
	Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.
What is your organization's mission statement?	In partnership with the community, we provide education and supportive services to residents of Santa Barbara County resulting in improved economic security and self-sufficiency.
Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.	CommUnify provides programs/services that improve the quality of life for 7,000 - 10,000 low-income children, youth, families and seniors countywide. CommUnify operates the Goleta Head Start Center, which in addition to childcare, offers wraparound support for the whole family. CommUnify maintains a wide referral and partnership network to maximize benefits to those we serve and operates the countywide 211 Helpline that provides critical information to thousands of callers annually.
Is a nonprofit sponsor being used to sponsor the program?	No
Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.	<p>Organizational capacity:</p> <ul style="list-style-type: none"> • One of the largest non-medical nonprofits serving Santa Barbara County • Has provided programs and resources for low-income populations for 59 years countywide • Operated Senior Safe at Home since 2018 with experienced staff and contractors • Manages federal and state financial awards • Established strict internal fiscal control systems, led by CFO who is a CPA • All activities verified by the Auditor/Accountant, Accounting Manager and/or Controller.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

1) Barbara Finch, SBC DSS, (805) 681-4678, bfinch@countyofsb.org 2) Angela Miller Bevan, Unity Shoppe, (805) 965-4122, Angela@unityshoppe.org

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

Yes

If yes, describe the nature and details of the conflict, the parties involved, and any steps taken or proposed to mitigate the conflict.

Goleta City Councilmember James Kyriaco serves as Chair of CommUnify’s Board of Directors. In situations where a conflict of interest may arise on any matter considered by the Goleta City Council, Councilmember Kyriaco recuses himself from discussions, deliberations and voting. Similarly, in situations where a conflict of interest may arise on any matter considered by the CommUnify’s Board of Directors, Mr. Kyriaco recuses himself from discussions, deliberations and voting.

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[CommUnify-CAC_501c3_IRS_Tax_Exempt_Status_Letter.pdf](#)

[Board_of_Directors_Roster_January_2026.pdf](#)

[CommUnify_Organization_Financial_Summary_123125.pdf](#)

[CommUnify_Balance_Sheet_123125.pdf](#)

[CommUnify_990_2024.pdf](#)

[CommUnify_Organizational_Budget_2026.pdf](#)

Optional Miscellaneous Documents

[CommUnify_Seniors_Safe_at_Home_Intake_form.pdf](#)

[15_CommUnify_Client_Satisfaction_Survey.pdf](#)

Organization Contact Kemba
Lawrence

Title Community Services Director

Email Address Klawrence@communifysb.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$10,000
City of Goleta (Other) (Note 2)	\$0
Federal	\$201,640
State	\$0
County	\$100,000
Municipal (Other Cities)	\$0
School District	\$0
Foundations/Trusts	\$100,000
Donations/Fundraising	\$0
Fees	\$0
Other Sources/Revenues (Note 3)	\$0
Total Revenue	\$ -

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 4,800.00	\$ -
Fringe Benefits & Payroll Taxes	\$ 2,105.00	\$ -
Occupancy (Rent and Utilities)	\$ -	\$ -
Equipment	\$ -	\$ -
Supplies and Materials	\$ 6,400.00	\$ -
Direct Client Support / Participant Assistance	\$351,455	\$ 10,000.00
Marketing & Outreach (Printing, Advertising)	\$ -	\$ -
Travel, Mileage & Training (Program-Related)	\$ -	\$ -
Other Expenditures (Note 1)	\$ -	\$ -
Total Expenditures	\$ 13,305.00	\$ 10,000.00

Title	<p>Creative Network's Hip-Hop and Street Dance Programming</p> <p>by Kelli Forman in FY 2026 Goleta City Grant</p> <p>442 W 80th St Chicago, Illinois 60620 United States 413-404-6505 kelli@creativenetwork.org</p>	<p>02/06/2026</p> <p>id. 53097546</p>
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Original Submission 02/06/2026

Score	n/a	
	Part 1: Program Information	
Program Name	Creative Network's Hip-Hop and Street Dance Programming	
Amount Requested	10000	
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.	
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Creative Network will expand accessible afterschool Hip Hop dance programming for 250 underserved Goleta youth (K-5th, majority Latinx) at Title I elementary schools, Jul 1, 2026-Jun 30, 2027, 2-5:30pm, 1-2 one-hr classes/wk/site, across three 10-wk sessions (Fall, Winter, Spring); youth build toward 2 family dance celebrations. Led by teaching artist-mentors, the program integrates dance, wellness, and SEL; CN monitors attendance and documents youth outcomes and family engagement (500 served).	
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	750	

Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

CN meets the need for cultural arts access, wellness, inclusion and community vitality. Only 1 in 5 CA schools have arts teachers. CN provides afterschool dance and family events supporting whole child learning for low-income and ELL youth.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

CN programs are in ADA-compliant sites. CN accommodates all disabilities; provides bilingual instruction; offers alternate formats (large print, braille, ASL, verbal description). Accessibility is advanced through collaboration and capacity building.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

Foothill ES: Karen Pierce, GFS ASE Committee; La Patera ES: Katie Unruh, Erika Hueneke, PASEC Coord.; Montessori ES: Anne Curtin, Dir. of Afterschool.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative The \$10,000 City of Goleta grant will support CN's Goleta program alongside federal, county, foundation, donation, and fee revenue. Funds cover \$5,000 Personnel (program oversight by Exec. Director, Creative Director, SB Program Managers and teaching artist wages); \$500 Payroll Taxes; \$1,000 Supplies (tech, attire, learning materials); \$1,000 Marketing/Advertising; \$1,000 Travel/Training (mileage, trainings, professional dev.); \$1,500 Other Expenditures (program operations, consultants).

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

This grant is vital to expand and fund Goleta programming, and offer equitable sliding-scale or full scholarships. Partial funding would be sourced from other foundation and government grants to ensure uninterrupted, high-quality delivery.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

Programs are offered on a sliding scale of \$90-\$130 for 9-13 classes per session, depending on the program location. Families can request partial or full need-based scholarships during the registration process.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Creative Network inspires, educates, and builds community through dance. Through curriculum-based Hip Hop dance programs, CN develops next generation leaders, builds a network of street/club artists, and increases access to cultural education. CN preserves art forms rooted in African-American and Latinx communities while promoting equity, empowerment, healing, school engagement, career success, and intergenerational connection through family events, dance history, and performance opportunities.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

CN serves 250 Goleta youth at elementary schools (Ellwood, Kellogg, Brandon, Montessori, Hollister, Isla Vista, La Patera, Foothill), offering afterschool Hip Hop dance programming with 10 trained teaching artists. Through school partnerships, family events, wellness workshops and performances for 500 attendees, CN provides culturally-relevant arts, mentoring, and enrichment, tracking progress via surveys, assessments, discussions, and documentation to ensure impact and continuous improvement.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

Creative Network has capacity to manage grant funds and deliver high quality programs; led by Exec Dir. Kelli Forman and Creative Dir. Charles Parks, internationally-recognized teaching artists/community organizers; supported by local program managers and alumni. CN's Board meets monthly, approves budgets, reviews quarterly financials, 990s and CPA reviews. CN has successfully received and reported on Goleta grants in the last two cycles, leveraging funds to deliver impactful programming.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Jenny Edwards, After School Enrichment Coordinator, Kellogg ES, 559-696-0542, ase@kelloggpta.org; Kelli Kearns, Benafsha Kaladjian, PTA ASE Coordinators, Isla Vista ES, PTA E: IVPTAASE@gmail.com, C: 805-698-2064, C: 657-248-9900.

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter)	checked
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List of Board Members	checked
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Most Recent Year-End Balance Sheet or Profit/Loss Statement	checked
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Most Recent Year-End Form 990	checked
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Most Recent Organization Budget, Reviewed and Approved by Board of Directors	checked
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Required Documents File Upload

[IRSLetter_CreativeNetworkk.pdf](#)

[Creative_Network_Board_Members_2026.docx.pdf](#)

[BalanceSheet-FY25.pdf](#)

[990_FY24_SignedNoPW_3.pdf](#)

[CNBudget_FY26.pdf](#)

Optional Miscellaneous Documents

[CN_Impact_Booklet.pdf](#)

[CN_Brochure.pdf](#)

Organization Contact	Kelli Forman
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Title	Executive Director
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Email Address	kelli@creativenetwerk.org
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Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	\$ -
Federal	\$ 10,000.00
State	\$ -
County	\$ 12,000.00
Municipal (Other Cities)	\$ -
School District	\$ -
Foundations/Trusts	\$ 95,000.00
Donations/Fundraising	\$ 3,000.00
Fees	\$ 10,000.00
Other Sources/Revenues (Note 3)	\$ -
Total Revenue	\$ 140,000.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 91,000.00	\$ 5,000.00
Fringe Benefits & Payroll Taxes	\$ 4,000.00	\$ 500.00
Occupancy (Rent and Utilities)	\$ -	\$ -
Equipment	\$ -	\$ -
Supplies and Materials	\$ 10,000.00	\$ 1,000.00
Direct Client Support / Participant Assistance	\$ -	\$ -
Marketing & Outreach (Printing, Advertising)	\$ 7,500.00	\$ 1,000.00
Travel, Mileage & Training (Program-Related)	\$ 10,000.00	\$ 1,000.00
Other Expenditures (Note 1)	\$ 17,500.00	\$ 1,500.00
Total Expenditures	\$ 140,000.00	\$ 10,000.00

Title	Dos Pueblos after prom event	01/08/2026
	by Sandy Reid in FY 2026 Goleta City Grant	id. 52773089
	sandyareid@yahoo.com	

Original Submission 01/23/2026

Score	n/a
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Part 1: Program Information

Program Name	Dos Pueblos after prom event
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Amount Requested	2500
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Please select the category of funding being requested.	Community Engagement Programs and Events, Economic Development.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	This special annual event at Bowlero provides a safe environment for our Dos Pueblos seniors and their guests to attend after the prom. It has historically been a huge success, keeping the kids off the roads and away from unsafe activities and environments.
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	350
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	There are some kids that would need assistance paying for their tickets.
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Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

no

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

This grant would cover the venue costs associated with the event. It is the same cost and amount as last year's grant.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes. We would make up via higher ticket prices.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Keeping teenagers in our community safe after prom night.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

We educate our Goleta children as the premier high school in the area.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

We have a full PTSA board overseeing this event's program and budget. We have been doing this event for more than 7 years.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Alexis Weaver, PTSA President and Bill Woodard, DP Principal

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[Letter_of_Determination_1943.pdf](#)

[2025-26_DPHS_PTSA_Board_Contact_Information.pdf](#)

[2025-11_Treasurer_Report.pdf](#)

[2025-11_Budget_vs_Actual.pdf](#)

[501c3Treasury_Dept_FTB_Letter_1943.pdf](#)

[2024-25_Form_990EZ_-_Final.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Sandy
Reid

Title Board member

Email Address sandyareid@yahoo.com

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)		
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)	\$ 17,000.00	\$ 2,500.00
Equipment		
Supplies and Materials		
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)		
Total Expenditures	\$ 17,000.00	\$ 2,500.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 2,500.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	
Donations/Fundraising	\$ 24,500.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 27,000.00

Title	High Impact Tutoring Program	02/01/2026
	by Victoria Ben-Yaacov in FY 2026 Goleta City Grant	id. 53045589
	vicki@e3learningpartners.org	

Original Submission 02/01/2026

Score	n/a
	Part 1: Program Information
Program Name	High Impact Tutoring Program
Amount Requested	7000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	<p>High Impact Tutoring/Mentoring</p> <p>Location: Goleta Valley Junior High School</p> <p>Hours: GVJH – 50 minutes/classes, 1-2 sessions/week, 6-8 classes total from October 2025 to June 2026.</p> <p>Program monitoring: The program is monitored by school teachers appointed by the Santa Barbara Unified School District. All tutors fulfil the screening requirements from Santa Barbara Unified School District and/or the Santa Barbara County Education Office.</p> <p>Target population: GVJH Students who are struggling in math.</p>
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	150

Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

GVJH serves 700+ students, most living in City of Goleta. Last year's CA Dashboard shows GV students scored 4.3 points below standard in Math on average, with an achievement gap of over 100 points between White/Asian and Hispanic students.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

no

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

Goleta Valley Junior High, Clanci Chiu Merritt, Principal

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative City of Goleta funds will partially cover the stipend for a GVJH site coordinator and program cost. The coordinator recruits and trains volunteers, handles background checks, and communicates with tutors, teachers, and administrators. They also gather feedback to support program success. The role runs Sept–June, about 10 hours/week for 40 weeks at \$25/hr. Other funding sources will cover remaining and additional operational expenses.
Other Expenditures - cost for volunteer background check.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

The requested funding is essential to keep the program free for low-income students and maintain its quality. To ensure long-term sustainability, we need to retain key staff members, who should be fairly compensated.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta? Yes

If yes, please list each source and provide the amount, purpose, and funding period or expiration date. This includes grants, contracts, sponsorships, in-kind contributions, or any other financial support from any City department or program. Clearly identify whether the funding is confirmed, pending, or anticipated. Describe how the funding request differs from what is already being funded or asked for.

For the 2025-2026 school year, Goleta Valley Junior High School is providing a small funding to our program. We are hoping to continue this funding agreement for the 2026-2027 school year.

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Expand equitable access to STEM education to middle school students through community-based learning support that helps to ensure student success in middle school, high school, and beyond.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

Since 2021, we've been partnering with GVJH to support the students and we aim to continue it through the 2026-2027 academic year. We place 2-3 tutors in 6 high-needs classrooms to provide small group or 1-on-1 tutoring. Each student receives support once or twice a week, depending on their needs. All activities are supervised by classroom teachers. Our focus is to help students improve their math skills and develop self advocating skills.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

Our organization has the capacity to manage grant funds and deliver the program. A dedicated site coordinator oversees volunteers, training, scheduling, and school communication. We use clear budgets, expense tracking, and board oversight. Prior grants have been managed successfully with strong outcomes. Teachers, volunteers, and students consistently provide excellent feedback, citing improved engagement, effective coordination, and meaningful academic support.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Clanci Chiu-Merritt, Principal, Goleta Valley Junior High, cchiu@sbunified.org, 805.967.3486 x 2507; Lyndsay Coakley, Math 8 PLC Lead, Goleta Valley Jr. High, lcoakley@sbunified.org, 805.967.3486 x2521

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[501c3_2.pdf](#)

[2024_990e-Postcard_View.pdf](#)

[E3_Learning_Partners_Financial_statement_2024_2025_-_Google_Sheets.pdf](#)

[E3_Learning_Partners_Budget_signed.pdf](#)

[E3_Learning_Partners_Board_of_Director.pdf](#)

Optional Miscellaneous Documents

Organization Contact Victoria
Ben-Yaacov

Title Executive Director

Email Address vicki@e3learningpartners.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 7,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	\$ 4,000.00
Foundations/Trusts	
Donations/Fundraising	
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 11,000.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 10,000.00	\$ 7,000.00
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)		
Equipment		
Supplies and Materials	\$ 200.00	
Direct Client Support / Participant Assistance	\$ 200.00	
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)	\$ 200.00	
Other Expenditures (Note 1)	\$ 500.00	
Total Expenditures	\$ 11,100.00	\$ 7,000.00

Title	Dial-A-Ride Paratransit Service	02/03/2026
	by Polly Sumner in FY 2026 Goleta City Grant	id. 53073510
	price@easylift.org	

Original Submission 02/03/2026

Score	n/a
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Part 1: Program Information

Program Name	Dial-A-Ride Paratransit Service
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Amount Requested	10000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Easy Lift requests funds for its ADA mandated Dial-A-Ride paratransit service, which operates 373 days a year, sixteen hours a day. Constituents are either physically or cognitively impaired and cannot feasibly use common types of public transportation such as the bus. Dial-A-Ride allows clients to access medical and other service centers essential to their physical and mental health, shop, and visit family. Over 80% of passengers are low income and elderly, and 35% require mobility devices.
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	750
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Yes, Dial-A-Ride satisfies the need for wheelchair-accessible and other specialized transportation for the senior as well as physically and cognitively impaired residents of the community. There is no other non-profit paratransit service in Goleta.
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Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

No. Easy Lift's transportation is in fact the means of access to eradicate barriers for those with disabilities to reach their place of employment, attend meetings and obtain health and social services.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Funds will support the operations of over 25 paratransit vans, drivers and essential staff to provide Goleta 12,000 specialized transit rides. Major expenses are listed under Equipment (Fuel, Vehicle Maintenance, Licensing) and Other Expenditures (Auto, Workers' Compensation and General Liability Insurances, Scheduling Software, Professional Fees). Goleta City Grant funds will support the Foundation/Trusts goal along with an average ten major foundations, to supplement other revenue subsidies.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Easy Lift operates on a balanced operating budget each year, on the basis not each grant will be fully funded. Easy Lift has built a Reserves fund to act as contingency to ensure that Dial-A-Ride will continue despite funding opportunity shortfalls.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

Yes

If yes, please list each source and provide the amount, purpose, and funding period or expiration date. This includes grants, contracts, sponsorships, in-kind contributions, or any other financial support from any City department or program. Clearly identify whether the funding is confirmed, pending, or anticipated. Describe how the funding request differs from what is already being funded or asked for.

Easy Lift has a confirmed contract with the City of Goleta effective 7/1/2025-6/30/2026 for an annual amount of \$27,500 as part of the Measure A tax dollars allocation process. This is not a grant, but a municipality contract based on Easy Lift being the designated Consolidated Transportation Service Agency (CTSA) for south Santa Barbara County.

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

The Dial-A-Ride service is \$5 for a one-way ride per passenger (current organization actual operating cost is \$68/ride). A passenger who cannot pay will never be denied a ride, however. A copy of the Rider's Guide, which states the fare, is attached.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Easy Lift's mission is to fulfill our community's need for specialized transportation to allow individuals and organizations access to essential programs and services. Easy Lift's vision is to become the community's recognized advisor for specialized transportation needs.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

Easy Lift serves Goleta residents individually through direct enrollment in the Dial-A-Ride service. Ther organization tables at senior fairs for Goleta and Santa Barbara, and is a part of the Office of Emergency Services Emergency Operations Plan for Santa Barbara, as well as an active member in Voluntary Organizations Active in Disasters (VOAD). In 2024 Easy Lift joined the Santa Barbara Airport Emergency Plan, and during Covid provided hundreds of free rides for vaccinations.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

Easy Lift has been providing community paratransit services for 47 years and its leadership team has decades of experience with the organization. The Executive Director, Operations Manager and Chief Financial Officer/Grants Coordinator have all been at Easy Lift for over twenty years. The team is overseen by the Board of Directors Finance Committee monthly to ensure operations, mission and financial management. Easy Lift has received all prior grants applied for with the City of Goleta.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract? No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation? No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Jerry Estrada, General Manager, Metropolitan Transit District - 805.963.3364 x232, jestrada@sbmtd.gov, Sarkes Khachek, Santa Barbara County Association of Governments - 209.402.4445, skhachek@sbcag.org

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter)	checked
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List of Board Members	checked
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Most Recent Year-End Balance Sheet or Profit/Loss Statement	checked
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Most Recent Year-End Form 990	checked
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Most Recent Organization Budget, Reviewed and Approved by Board of Directors	checked
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Required Documents File Upload

[Easy_Lift_501_c3_tax_exempt_status.pdf](#)

[FY_2026_Board_of_Directors.docx](#)

[Easy_Lift_June_2025_Financials.pdf](#)

[EASY_LIFT_TRANSPORTATION_INC_Form990.pdf](#)

[Easy_Lift_Org_Budget_FY26.pdf](#)

Optional Miscellaneous Documents

[Easy_Lift_Rider_Guide_9-2025_-_digital.pdf](#)

Organization Contact	Polly Sumner
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Title	Chief Financial Officer/ Grants Coordinator
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Email Address	price@easylift.org
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Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 1,498,875.00	\$ 6,000.00
Fringe Benefits & Payroll Taxes	\$ 321,485.00	\$ 2,000.00
Occupancy (Rent and Utilities)	\$ 77,054.00	
Equipment	\$ 296,115.00	\$ 2,000.00
Supplies and Materials	\$ 11,779.00	
Direct Client Support / Participant Assistance	\$ -	
Marketing & Outreach (Printing, Advertising)	\$ 17,720.00	
Travel, Mileage & Training (Program-Related)	\$ 8,846.00	
Other Expenditures (Note 1)	\$ 377,473.00	\$ 2,000.00
Total Expenditures	\$ 2,609,347.00	\$ 12,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	\$ 20,625.00
Federal	\$ -
State	\$ 542,850.00
County	\$ 292,500.00
Municipal (Other Cities)	\$ 239,791.00
School District	\$ -
Foundations/Trusts	\$ 38,400.00
Donations/Fundraising	\$ 39,600.00
Fees	\$ 1,389,565.00
Other Sources/Revenues (Note 3)	\$ 36,016.00
Total Revenue	\$ 2,609,347.00

Title	<p>Make Sure it Sticks by Sixth! – Support for the Goleta Union Elementary School District's (GUSD) Math Fact Fluency Initiative</p> <p>by Paulette Le Blanc in FY 2026 Goleta City Grant</p> <p>p.leblanc@verizon.net</p>	<p>02/05/2026</p> <p>id. 53094108</p>
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Original Submission	02/05/2026
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Score	n/a	
	Part 1: Program Information	
Program Name	Make Sure it Sticks by Sixth! – Support for the Goleta Union Elementary School District's (GUSD) Math Fact Fluency Initiative	
Amount Requested	10000	
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.	
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	<p>BPOE Lodge #613, Santa Barbara wants to support the development of math fact fluency for GUSD's students via their district-wide initiative that aims to help all students develop strong number sense/fact fluency by 6th-grade.</p> <ul style="list-style-type: none"> • GUSD and its nine schools will monitor the funds • Schools: Brandon, El Camino, Ellwood, Foothill, Hollister, Isla Vista, Kellogg, La Patera and Mountain View • Program will operate during regular school hours • Our target population is GUSD's students, Kindergarten thru Grade 6 	
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	3326	

Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

Yes - it satisfies an under-met need in the community. In 2024-2025, CA was ~37% proficient in math, whereas GUSD was at 54%. While GUSD acknowledges that their scores are higher than the state's average, they are not satisfied and are aiming higher.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

No. GUSD maintains excellent special education and support services. All facilities are ADA compliant.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

GUSD, Kristina Munoz, GUSD Director of Educational Services

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative Lodge #613 requests funds to support a GUSD math initiative. We will match 50% of our award from internal monies raised for charitable and educational purposes. The money will support the following:

- Purchase *Math Fact Fluency* by Jennifer Bay-Williams for all 1st–6th grade teachers to ensure a shared instructional approach
- Purchase instructional materials for in-classroom small-group games and home use
- Offer learning opportunities for teachers like a self-paced e-course - <https://factswise.com>

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.	Yes. To ensure successful program delivery, Lodge #613 will match 50% of our grant award from monies raised from our weekly Thursday night Bingo events. These monies are earmarked for charitable and educational purposes
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Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?	No
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Is there a cost to participate in the program?	No
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Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

<p>What is your organization's mission statement?</p>	<p>To inculcate the principles of Charity, Justice, Brotherly Love and Fidelity; to recognize a belief in God; to promote the welfare and enhance the happiness of its Members; to quicken the spirit of American patriotism; to cultivate good fellowship; to perpetuate itself as a fraternal organization, and to provide for its government, the BPOElks Lodge #613, Santa Barbara, will serve the people and communities through benevolent programs, demonstrating that Elks Care and Elks Share.</p>
<p>Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.</p>	<p>Lodge #613 serves Goleta via community-focused, charitable and patriotic events. Key activities include educational grant writing, hosting weekly Bingo charitable fundraisers, supporting veterans and providing scholarships. We support local Boy Scout and Girl Scout troops and partner with local non-profits to support the local community. We focus on charitable giving, support local community initiatives and help children with disabilities. Our Lodge is in Goleta at 150 North Kellogg Avenue.</p>
<p>Is a nonprofit sponsor being used to sponsor the program?</p>	<p>No</p>
<p>Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.</p>	<p>We have a history of local charitable, youth and community support. Our volunteer committees coordinate grants/their programs. Lodge leadership oversees all grant monies. In 2025, the we wrote a grant that received \$5,000; we 50% matched it from internal fundraising. The funds purchased culturally significant books and art supplies for GUSD. In 2022, Lodge volunteers delivered 515 dictionaries to 4th-grade GUSD students. Funds included a \$3,550 Goleta grant and \$6,450 from internal fundraising.</p>
<p>Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?</p>	<p>No</p>

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation? No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached. Imelda Delgado, GUSD Teacher on Special Assignment (Mathematics), 805-681-1200 x 2264, idelgado@gusd.us; Kristina Munoz, GUSD Director of Educational Services, 805-681-1200 x 2224, kmunoz@gusd.us

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[SB_Elks_Lodge_613_2004_IRS_Tax_Exempt_Determination_Letter_-_Lodge_613.pdf](#)

[SB_Elks_Lodge_613__2025-2026_BOD_List.pdf](#)

[SB_Elks_Lodge_613_2025-12_December_02_PL_with_MTD__YTD.pdf](#)

[SB_Elks_Lodge_613_2025-2026_SB_Budget.pdf](#)

[SB_Elks_Lodge_613_Latest_Form_990.pdf](#)

Optional Miscellaneous Documents

Organization Contact Paulette Le Blanc

Title BPOE Lodge #613 Member/Grant Writer

Email Address p.leblanc@verizon.net

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)		
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)		
Equipment		
Supplies and Materials	\$ 15,000.00	\$ 10,000.00
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)		
Total Expenditures	\$ 15,000.00	\$ 10,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	
Donations/Fundraising	\$ 5,000.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 15,000.00

Title	Long-Term Care Ombudsman	02/05/2026
	by Paul Katan in FY 2026 Goleta City Grant	id. 53088172
	fsagrants@fsacares.org	

Original Submission	02/05/2026
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Score	n/a
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Part 1: Program Information

Program Name	Long-Term Care Ombudsman
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Amount Requested	10000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Long-Term Care Ombudsman (LTCO) program advocates on behalf of all residents (currently 157) of Goleta’s nine residential care facilities for the elderly. We ensure resident wellbeing by conducting unannounced visits monthly and as needed to verify clean & safe environment; investigate/resolve quality of care issues; witness Advanced Health Care Directives; prevent evictions; and provide information. LTCO operates a crisis line and is open M-F 9AM – 6PM (other times as needed).
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	157
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	There is no other program in Goleta providing vulnerable long-term care residents with the support and advocacy of trained, state-certified Ombudsman representatives. This service aligns with the City's Strategic Plan Goals 2 and 9.
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Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

The program does not have barriers, as the services are provided directly to residents of long-term care facilities who are older adults, majority of whom are living with a disability.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

The City of Goleta grant funds will be used to supplement personnel costs for LTCO program staff that provide direct assistance to residents and their family members. Additionally, this grant helps to satisfy a required funding match from the program's primary source of funds--Older American's Act monies provided through the local Area Agency on Aging (AAA). Other Expenses line is for Indirect Costs, per FSA's Federally Negotiated Indirect Cost Rate (15%).

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes, this grant helps satisfy a funding match required for the primary source of funds. If no public match is secured, we would lose funding from the AAA and be unable to operate LTCO. Reduced funding effectively reduces program budget and the match.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Our mission is to strengthen and advocate for families and individuals of all ages and diversities, helping to create and preserve a healthy community.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

LTCO advocates for every resident in Santa Barbara County long-term care facilities, including nine in Goleta. In addition to engaging residents and care facility operators, we provide care information to family and community members. LTCO has MOUs with 1) Adult Protective Services; regarding jurisdictions; 2) Legal Aid Foundation, regarding referral & legal procedures; 3) Tri-Counties Regional Center, regarding cases of suspected abuse/neglect; 4) District Attorney's office for referrals.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

85% of our budget comes from public sources, including local, state, and federal funds. FSA has strong internal controls and segregation of duties. Our financials are audited annually. The LTCO Manager has over 30 years' experience working with seniors. He is a member of multiple state and national professional organizations. Certified Ombudsman representatives must pass background checks, attend 36 hours of training, shadow a certified Ombudsman, and complete 18 hours of training annually.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Megan Rheinschild, Santa Barbara County District Attorney's Office, (805) 568-2408, mriker@countyofsb.org ; Barbara Finch, Santa Barbara County Dept. of Social Services , (805) 681-4678, bfinch@countyofsb.org

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[FSAs_501c3.pdf](#)

[FSA_BOD_2025-26_grid_format_-_with_region_and_yrs.docx.pdf](#)

[Generic_PnL_and_BS_as_of_06.30.2025.pdf](#)

[FSA_June_2024_Form_990_Public_Disclosure_Copy.pdf](#)

[FSA-FY2526_Generic_Revised-Budget-10-28-2025.pdf](#)

Optional Miscellaneous Documents

Organization Contact Lisa
Brabo

Title Chief Executive Officer

Email Address fsagrants@fsacares.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	\$ 44,000.00
State	
County	\$ 15,000.00
Municipal (Other Cities)	\$ 24,000.00
School District	
Foundations/Trusts	\$ 10,000.00
Donations/Fundraising	
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 103,000.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 63,300.00	\$ 10,000.00
Fringe Benefits & Payroll Taxes	\$ 18,990.00	
Occupancy (Rent and Utilities)	\$ 1,575.00	
Equipment		
Supplies and Materials	\$ 1,200.00	
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)	\$ 4,500.00	
Other Expenditures (Note 1)	\$ 13,435.00	
Total Expenditures	\$ 103,000.00	\$ 10,000.00

Title	‘FEED’ing Nutritional Security for the City of Goleta	02/06/2026
	by Hannah Ryckman in FY 2026 Goleta City Grant	id. 53104932
	hryckman@foodbanksbc.org	

Original Submission	02/06/2026
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Score	n/a
	Part 1: Program Information
Program Name	‘FEED’ing Nutritional Security for the City of Goleta
Amount Requested	4000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	FBSBC pairs nutritious food distribution with vital services to support long-term health and food security in Goleta. Programs operate year-round, primarily on weekdays, through partner sites such as schools and community centers and are open to anyone experiencing food insecurity. In FY2025, we served 5,552 unduplicated Goleta neighbors, including children, older adults, veterans, and neighbors experiencing homelessness. Services are monitored through partner reporting and distribution data.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	5000
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Amid high food insecurity and rising living costs, data shows 40% of county households do not earn enough to meet basic needs. We address this need in Goleta by providing food assistance and supporting community health, stability, and resilience.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

We are an Equal Opportunity employer and extend this policy to clients and volunteers. Foodbank and partners have ADA accessible facilities. Services include bilingual materials, Mixteco interpretation, and home delivery to ensure inclusive access.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

Goleta Union School District, Rosalinda Greening, Expanded Learning Office Manager & Regina Davis, Assistant Director Expanded Learning Programs

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

FBSBC respectfully requests your consideration of \$4,000 in grant funding to purchase nutrient dense, culturally important food to be distributed to neighbors in need of food assistance in the City of Goleta. Grant funds will be used in coordination with other funding. We actively seek a variety of funding opportunities to ensure sustainability. Our budget categories differ. Food purchases has been put in "direct client support" and relevant categories have been lumped into category of best fit.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Fundraising efforts are vital to supporting our work, but our team ensures we are not reliant on any one opportunity. If one funding source falls short of the budget, other funding sources are pursued to fill in the gaps so services are not limited.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

All Foodbank programs and food distributions are free to individuals and families. To sustain operations, we provide food to partners via a cost-sharing model: donated food at \$0.19/lb, purchased food at cost +10%, and all produce free of charge.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

The Foodbank of Santa Barbara County's mission is to end hunger and transform the health of Santa Barbara County through good nutrition.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

FBSBC is a vital part of the local food system and community, serving as both a countywide safety net and a central hub for nutrition. Our operations address immediate hunger needs while promoting long-term health through nutrition education, vital service connections, and disaster resilience.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

FBSBC has over 40 years of experience managing public and private grants and delivering large-scale nutrition programs. Experienced staff oversee logistics, nutrition education, and partner coordination, supported by strong financial controls and reporting systems. Through 200+ partners, we efficiently monitor distribution, outcomes, and compliance, ensuring grant funds are responsibly managed and programs are delivered effectively.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Jesus Lopez, Director of Operations: jlopez@foodbanksbc.org, 805-451-0633; Dr. Lacey Baldiviez, PhD, President, lbaldviez@foodbanksbc.org, 805-280-2064

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[Foodbank_SB_County-501_c_3.pdf](#)

[Foodbank_Board_of_Trustees_FY2026.pdf](#)

[FY26_Common_Grant_Financial_Statement.pdf](#)

[Foodbank_SB_County-FY24_990_2023.pdf](#)

[FY25-26_GENOPS_Budget_Final.pdf](#)

Optional Miscellaneous Documents

[FBSBC_Annual_Report_FY2025.pdf](#)

[MM_New_Year.pdf](#)

[Foodbank_of_SB_County_FY25_Audited_Financials.pdf](#)

Organization Contact Hannah
Ryckman

Title Grants Manager

Email Address hryckman@foodbanksbc.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 205,076.00	
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)	\$ 41,792.00	
Equipment		
Supplies and Materials	\$ 1,876.00	
Direct Client Support / Participant Assistance	\$ 56,908.00	\$ 4,000.00
Marketing & Outreach (Printing, Advertising)	\$ 5,163.00	
Travel, Mileage & Training (Program-Related)	\$ 2,036.00	
Other Expenditures (Note 1)		
Total Expenditures	\$ 312,851.00	\$ 4,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 4,000.00
City of Goleta (Other) (Note 2)	
Federal	\$ 600.00
State	\$ 18,000.00
County	\$ 1,575.00
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$ 80,000.00
Donations/Fundraising	\$ 200,000.00
Fees	\$ 10,000.00
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 314,175.00

Title	General Operating Support	02/06/2026
	by Steven Sharpe in FY 2026 Goleta City Grant	id. 53099227
	admin@sbfoodfromtheheart.com	

Original Submission	02/11/2026
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Score	n/a
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Part 1: Program Information

Program Name	General Operating Support
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Amount Requested	10000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	FFTH is requesting funds to support our weekly preparation and delivery of bags of freshly prepared meals to low-income individuals living in Goleta who are battling illness or recovering from major surgery, live alone, and do not have the financial resources to hire a caregiver our outside food service. The City of Goleta funds will be used to purchase food and packaging supplies for our clients who live in Goleta.
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	65
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	We focus on food insecurity issues, ensuring those we serve are well fed as they manage their illness, and do not need to worry as much about where their meals will come from. We also focus on providing nutritious meals to aid in their recovery.
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Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

We have no limitations, our facility is fully accessible. Plus, we deliver the prepared meals to our clients.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

The City of Goleta funds will be used to support our core costs of purchasing food and packaging to prepare our meals. This grant will directly support the residents in the City of Goleta who we serve each week. Other expenditures in the budget include insurance cost and misc. operational expenses.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

We focus on fundraising from multiple sources, and are very diligent in our efforts to ensure we have adequate funds to support our work.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

In every community, there are individuals who are home-bound and suffering from illness or injury who have no support network. Part of the healing process is being cared for nutritionally. Food From The Heart recognizes that need by preparing nutritious healing meals delivered by caring volunteers to those in crisis due to illness, injury, or under the care of hospice, visiting nurses or other medical professionals. Food From The Heart does not charge for this service.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

We deliver each week on Wednesdays to low-income residents in the city of Goleta who qualify for our service.

Is a nonprofit sponsor being used to sponsor the program? No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance. We have been operational without interruption the entire 32 years of our existence, even during the entire Pandemic. We are very aware that our clients depend on our service to remain well fed.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract? No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation? No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Kelly Onnen, owner SB Airbus, seekonnen@cox.net, 805-451-7174; Kathy Denlinger, Board Treasurer, kdenlinger@msn.com, (805) 284-2229

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[Federal_Exemption_Letter.pdf](#)

[Board_of_Directors_2025.pdf](#)

[BalanceSheetDec2025.pdf](#)

[2024_Public_Form_990.pdf](#)

[FFTHBudget2026.pdf](#)

Optional Miscellaneous Documents

[Sample_Menu_Halloween_2025.pdf](#)

[MajorAccomplishments2025.pdf](#)

Organization Contact Steven
Sharpe

Title Executive Director

Email Address admin@sbfoodfromtheheart.com

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$ 270,000.00
Donations/Fundraising	\$ 193,000.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 473,000.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 181,313.00	
Fringe Benefits & Payroll Taxes	\$ 19,000.00	
Occupancy (Rent and Utilities)	\$ 83,200.00	
Equipment	\$ 3,000.00	
Supplies and Materials	\$ 142,700.00	\$ 10,000.00
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)	\$ 250.00	
Travel, Mileage & Training (Program-Related)	\$ 2,000.00	
Other Expenditures (Note 1)	\$ 41,138.00	
Total Expenditures	\$ 472,601.00	\$ 10,000.00

Title	Peer-to-Peer Mentoring Groups	02/06/2026
	by Dylan Griffith in FY 2026 Goleta City Grant	id. 53105842
	187 S Patterson Ave Suite A Santa Barbara, California 93111 United States 805-895-9665 dylan@freedom4youth.org	

Original Submission	02/06/2026
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Score	n/a
	Part 1: Program Information
Program Name	Peer-to-Peer Mentoring Groups
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	F4Y requests \$10,000 to support weekly peer mentoring groups at San Marcos High School (October-June) and summer field trips for 30-40 youth ages 14-18. Led by credible messengers, programming focuses on relationship building, substance use prevention, leadership development, and restorative justice. Youth are referred through an MOU with SBUSD & a contract with SB County Probation. Progress is tracked via Vertical Change system, with participants showing 13.6% improvement in stability metrics.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	70

Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

Aligns with priorities: youth services, education, wellness, equity, and community connection, while filling a gap in services for youth considered high risk. Trauma-informed programs strengthen protective factors and pathways to positive outcomes.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Programs are held at accessible school campuses and the F4Y Center, with transportation provided. Extra care is taken to ensure enrichment trips and activities are inclusive, with accommodations as needed, so there are no barriers to participation.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

San Marcos High School - Dean Becks and Principal Holdren

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative This budget reflects one of four core F4Y program areas. Goleta City Grant funds support the San Marcos High School peer mentoring program, covering a proportional share of personnel, rent, supplies, transportation, field trips (Note 1), and direct youth support. Costs were calculated by allocating one-quarter of total program expenses across four program areas and three school sites, with City funds coordinated alongside foundation and school-based support.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes. City funds are essential to keep weekly mentoring and summer enrichment. Without summer support last year, youth lost connection and fall reengagement suffered. If partially funded, we'll cover gaps via foundations, donors, & fundraising events.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

<p>What is your organization's mission statement?</p>	<p>Freedom 4 Youth uplifts and empowers youth that are involved in or impacted by the criminal legal system to build safe and compassionate communities through healing-centered, restorative, and youth-led solutions. Through legal advocacy, diversion, culturally responsive programs, and case management support, we disrupt cycles of criminalization and address the root cause of substance use, creating real pathways to accountability, healing, long-term stability, and transformative systems change.</p>
<p>Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.</p>	<p>Freedom 4 Youth serves Goleta residents through weekly school-based programs at San Marcos High School, services at the accessible F4Y Center in Goleta, and enrichment activities at various locations. In partnership with SBUSD, SB County Probation, the Freedom 4 Youth Advocates at UCSB, and community organizations, we provide mentoring, transportation, restorative justice, and prevention-focused supports for youth facing academic, economic, and system-related barriers.</p>
<p>Is a nonprofit sponsor being used to sponsor the program?</p>	<p>No</p>
<p>Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.</p>	<p>Freedom 4 Youth has over 15 years of experience delivering youth programs and managing public and private grants, including multi-year prevention funding from Sierra Health Foundation and Elevate Youth California. F4Y maintains strong financial controls, board oversight, and program tracking systems. Experienced leadership, trained staff, and peer mentors ensure timely reporting, fiscal compliance, and successful delivery of school-based and community programs.</p>
<p>Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?</p>	<p>No</p>

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Dean Becks, San Marcos High School Contact: dbechler@sbunified.org, (805) 966-9101 & Santa Barbara Unified School District Contact: Christina Fernandez, mcfernandez@sbunified.org, (805) 963-4338 x6248

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter)

checked

List of Board Members

checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[Board_Contact_List_2025.pdf](#)

[F4Y9902024.pdf](#)

[Freedom_4_Youth_-_IRS_Letter_of_Determination.pdf](#)

[F4Y_Statement_of_Financial_Position2025.pdf](#)

[F4Y_2025_Budget.pdf](#)

Optional Miscellaneous Documents

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[2B3C3AB56-70B1-4F06-B644-15D536B622DE_1_105_c.jpeg](#)

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Organization Contact Billi Jo Starr

Title Co-Executive Director

Email Address billijo@freedom4youth.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	\$ 12,000.00
Foundations/Trusts	\$ 30,000.00
Donations/Fundraising	\$ 2,500.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 54,500.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 25,000.00	\$ 4,500.00
Fringe Benefits & Payroll Taxes	\$ 4,000.00	\$ 1,000.00
Occupancy (Rent and Utilities)	\$ 4,000.00	\$ -
Equipment	\$ 1,500.00	\$ -
Supplies and Materials	\$ 3,000.00	\$ 750.00
Direct Client Support / Participant Assistance	\$ 4,000.00	\$ 250.00
Marketing & Outreach (Printing, Advertising)	\$ 1,000.00	\$ -
Travel, Mileage & Training (Program-Related)	\$ 2,000.00	\$ 500.00
Other Expenditures (Note 1)	\$ 10,000.00	\$ 3,000.00
Total Expenditures	\$ 54,500.00	\$ 10,000.00

Title	Future Leaders of America (FLA)	02/06/2026
	by Layhearn Tep in FY 2026 Goleta City Grant	id. 53106518
	layhearn@futureleadersnow.org	

Original Submission	02/06/2026
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Score	n/a
	Part 1: Program Information
Program Name	Future Leaders of America (FLA)
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	FLA seeks funding to engage a cohort of at least 18 low-income Latino high school youth in Goleta through intensive year-round leadership development. Youth participate in a six-day, five-night Youth Leadership Conference and biweekly peer-led meetings facilitated by trained mentors. The cohort based model prioritizes measurable growth in college readiness, leadership, and civic engagement tracked via pre- and post-assessments. FLA promotes a college-going culture and closes opportunity gaps.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	18
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Latino youth in Goleta face persistent gaps in college readiness; only half meet UC/CSU requirements. FLA addresses gaps through youth-led, culturally grounded education and leadership programs aligned with Strategic Goal 2.1 community development.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

FLA is fully committed to accessibility. Our meeting spaces and campsite are ADA accessible. We also provide interpretation services, transportation, and offer accommodations as needed to ensure full participation for individuals with disabilities.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

The funds will be used to sponsor Goleta youth to attend FLA's Youth Leadership Conference (YLC). The majority of the budget (\$8,000) will cover lodging for Goleta students. Our campsite provides youth with a safe learning environment during our 6-day, 5-night immersive conference. The remaining funds will go towards transportation. By funding these essential components, the grant will make this life-changing opportunity accessible to all, allowing Goleta youth to partake in the YLC at no cost.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

<p>Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.</p>	<p>Funding is vital to ensure access by covering transportation and camp costs. At \$790 per student for the 6-day conference, City support sustains core programming. Any funding gap will be met through grants, individual donors, and fundraising events.</p>
<p>Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?</p>	<p>No</p>
<p>Is there a cost to participate in the program?</p>	<p>No</p>
	<p>Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.</p>
<p>What is your organization's mission statement?</p>	<p>FLA develops youth resiliency and leadership to create long-lasting systemic change by empowering and mobilizing youth leaders to advocate for policies that improve their lives and the lives of their peers and their communities.</p>
<p>Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.</p>	<p>FLA serves low-income Goleta youth through leadership programming based out of our Santa Barbara office. To ensure equitable access, we provide transportation for Goleta youth to attend biweekly FLA youth meetings, university seminars, family leadership camp, and our six-day Youth Leadership Conference. Outreach includes school visits, youth-led prevention presentations, tabling, flyers, social media, and partnerships with local schools and community organizations across Santa Barbara County.</p>
<p>Is a nonprofit sponsor being used to sponsor the program?</p>	<p>No</p>

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

FLA has had over 40 years of experience managing private and public funds, with a budget approved by our board. We consistently meet grant requirements and deliver impactful programs led by experienced staff, including a program director and youth organizer, under senior leadership's oversight. Financial controls include annual external audits, with finances overseen by our Executive Affairs Manager. Our staff's lived experience mirrors that of the youth we serve, strengthening trust and impact.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

MariaElena Plaza: organization:CSUCI, phone number:805-437-8425, email: mariaelena.plaza@csuci.edu, and Eder Gaona: organization: Executive Director of the Fund for SB, phone number:(805) 962-9164, email: egaona@fundforsantabarbara.org

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[501c3_Tax_Letter___Future_Leaders.pdf](#)

[FLA_2024_990.PDF](#)

[FLA_Board_Roster_2025.pdf](#)

[FLA_Profit_and_Loss_2025.pdf](#)

[FLA_Annual_Budget_2025.pdf](#)

Optional Miscellaneous Documents

Organization Contact Layhearn
Tep

Title Director of Development

Email Address Layhearn@futureleadersnow.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)		
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)	\$ 45,600.00	\$ 8,000.00
Equipment		
Supplies and Materials	\$ 3,000.00	
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)	\$ 600.00	
Travel, Mileage & Training (Program-Related)	\$ 7,000.00	\$ 2,000.00
Other Expenditures (Note 1)	\$ 5,000.00	
Total Expenditures	\$ 61,200.00	\$ 10,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	\$ 6,250.00
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$ 25,000.00
Donations/Fundraising	\$ 20,000.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 61,250.00

Title	Educational Support for Latinx Students in Goleta	02/04/2026
	by Connie Alexander in FY 2026 Goleta City Grant	id. 53085858
	gatewaycamps@gmail.com	

Original Submission 02/04/2026

Score	n/a
	Part 1: Program Information
Program Name	Educational Support for Latinx Students in Goleta
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	<p>Our nonprofit learning center provides students (3rd-9th grade) in Goleta with the tools to reach grade equivalency. The center is open 1pm-6:30pm Monday - Thursday and on Friday by appointment only.</p> <p>We measure academic gains through pre and post-testing and compare our results with the STAR reports (California Standardized Testing and Reporting).</p> <p>The target population is students of color in Goleta who have been identified by school counselors because they are falling behind grade level.</p>
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	60
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	The program addresses an unmet need for equitable educational opportunities for students of color. County data show a major opportunity gap for students of color compared to their white peers. Our work helps students reach grade-level equivalence.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Our programs are accessible to everyone. Our facility meets ADA standards for accessibility. Our desks and computers also meet ADA requirements. All materials will be available online for students if requested and in large print format if required.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

The largest program cost, and the purpose of this funding, is to cover the cost of our program staff, who provide the one on one mentorship and educational guidance to the students we serve.

Note 1:

Curriculum: \$8,000

Staff Training/development: \$6,000

Insurance: \$2,000

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes, your funds are necessary for us to expand our reach. Your grant will help us to expand our assessment-based and individualized educational support to 10 additional Latinx students in the Goleta Unified School District in 2026-27.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

Yes. There is a fee for services, and we have attached a fee schedule. The students we serve are 60% Latinx, 25% White, and 15% Black/African American.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Through academic development, we create the opportunity for all students to succeed with programs specifically designed for their needs, with outstanding teaching, and with creativity.

<p>Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.</p>	<p>Our program uses assessment to identify reading comprehension and/or math challenges, then prescribes a program for improvement through one-to-one sessions with a specific curriculum to develop academic skills. We focus on reading and math interventions that align with Common Core Standards. Students participate three times per week for 12 weeks each spring. For students who complete our program, there is an average improvement of 18.8% (compared to the state average of 6-11%) in 12 months.</p>
<p>Is a nonprofit sponsor being used to sponsor the program?</p>	<p>No</p>
<p>Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.</p>	<p>GES was established in 2009 and is the only nonprofit learning center in the region led and operated by women of color. Connie and Audrey oversee staff, programming, and operations. Our board meets monthly to review financials, programming, and specific initiatives. Our team has the experience, relationships, and capability to reach communities of color. We operate two locations (Goleta and Lompoc). We are expanding our Goleta site in 2026 to double its original size.</p>
<p>Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?</p>	<p>No</p>
<p>Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?</p>	<p>No</p>

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Anna Wines, Latino Community Foundation, wines.anna@gmail.com ;
Kemba Lawrence, Community Services Director, CommUnify, klawrence@CommUnifySB.org. BUDGET NOTE: We do not have a board approved 2026 budget or 2025 P&L, we can provide when it's ready.

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[Gateway_IRS_Approval_Letter.pdf](#)

[GES_Board_of_Directors_2025.pdf](#)

[GES_PL_July_2025.pdf](#)

[GES_990_2023_Short.pdf](#)

[GES_Budget_2025.pdf](#)

Optional Miscellaneous Documents

[GES_2026_Fee_Schedule.pdf](#)

Organization Contact Connie
Alexandar

Title Co-Executive Director

Email Address gatewaycamps@gmail.com

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	\$ -
Federal	
State	\$ 10,900.00
County	
Municipal (Other Cities)	
School District	\$ 5,000.00
Foundations/Trusts	\$ 59,500.00
Donations/Fundraising	\$ 46,000.00
Fees	\$ 30,000.00
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 161,400.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 95,000.00	\$ 10,000.00
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)	\$ 39,000.00	
Equipment	\$ 3,400.00	
Supplies and Materials	\$ 8,000.00	
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)	\$ 16,000.00	
Total Expenditures	\$ 161,400.00	\$ 10,000.00

Title	Goleta Shimmy Mob Community Dance & Domestic Violence Awareness Program: This program engages Goleta residents of all ages in an accessible, low-cost dance experience that builds community connection, promotes wellness, and supports DV prevention services through public performance and education.	02/06/2026 id. 53106851
	by Selena Whitney in FY 2026 Goleta City Grant terraplhr@gmail.com	

Original Submission	02/06/2026
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Score	n/a
	Part 1: Program Information
Program Name	Goleta Shimmy Mob Community Dance & Domestic Violence Awareness Program: This program engages Goleta residents of all ages in an accessible, low-cost dance experience that builds community connection, promotes wellness, and supports DV prevention services through public performance and education.
Amount Requested	2695
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.

Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).

The Shimmy Mob Goleta program is a community-based dance event for Goleta residents. Participants attend rehearsals over 8-10 weeks to learn a choreographed group dance, culminating in a "flash mob" to support local domestic violence providers and awareness of emotional abuse. Rehearsals will be held in the evenings, weekends, and online. The program is open to all ages, experience levels, and abilities. Shimmy Mob is an international organization with 16 years of successful programming.

Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).

100

Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

The program addresses an under-met need for inclusive, low-cost arts and wellness programming that builds community connection while supporting human services. It advances Goleta's goals for community vitality, arts access, and social awareness.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

The program will be held in ADA-accessible facilities. The choreography is modified for different abilities, including a seated option. Instruction is provided verbally and visually. The performance venue will be ADA compliant.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative	Grant funds secure the rehearsal space, event insurance, and permitting fees; sponsor participant registrations for disadvantaged community members; support marketing and outreach; and enable fiscal sponsor fees ("Other"). These costs directly enable safe, accessible program delivery. New Hope Creative Alliance provides in-kind support, including volunteer coordination and technical equipment. Private donations fund additional equipment and the dance instructor. See attached "Shimmy Mob budget."
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Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.	City funding is vital to keep participation affordable, accessible, and in accordance with permit and insurance requirements. If partial funding is received, the program may not occur due to the costs for the insurance, permitting, and marketing.
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Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?	No
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Is there a cost to participate in the program?	Yes
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If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

Participation will cost approx. \$65/person in 2027. The fee covers all rehearsals, event participation, and donation to selected DV nonprofit through Shimmy Mob. The grant funds five sponsored registrations to Goleta residents needing assistance.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

New Hope Creative Alliance (NHCA)'s purpose is the advocacy of education in the creative and performing arts through interactive, imaginative experiences. Our mission includes supporting local community organizations and charities; promoting quality performing and martial arts productions; and providing education in the performance arts to make them inclusive and accessible, including supporting costume and prop creation.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

NHCA serves Goleta residents by delivering inclusive arts, fandom, and fitness programs through Saberlyte Academy, Galactic Fringers events, dance performances, and community workshops. We have partnered with many local nonprofits and businesses (see attached cover letter). Specifically within or adjacent to Goleta, we have supported The Dance Network, Foothill Elementary School, the UCSB Middle East Ensemble, Alpha Resource Center, Hope Refuge, and the Santa Barbara Airport.

Is a nonprofit sponsor being used to sponsor the program?

Yes

Fiscal Sponsor Letter of Support (Required for Fiscal Sponsors)

[Fiscal_Sponsor_Support_Letter_signed.pdf](#)

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

NHCA has demonstrated capacity to manage grant-funded programs and deliver community arts initiatives. Program Manager Selena Whitney has 10+ years of experience managing grants and grant funding. Supported by NHCA, she led Shimmy Mob teams in 2023 and 2024, raising funds for Domestic Violence Solutions and Hope Refuge. The Dance Network in Goleta donated rehearsal space, demonstrating strong community partnerships. NHCA has successfully produced other public events and fundraisers since 2018.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

(1) Karyn Laver, The Dance Network, (805) 225-6078, thedancenetwork.sb@gmail.com (2) Jeff Henson, Alpha Resource Center, (805) 683-2145, jhenson@alphasb.org (3) Francesca Anastasi, Shimmy Mob, 604-722-9545, shimmymob@gmail.com

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

Yes

If yes, describe the nature and details of the conflict, the parties involved, and any steps taken or proposed to mitigate the conflict.

Program Manager Selena Whitney works for Environmental Science Associates, a consulting firm working with the City's Planning and Environmental Review Department. She occasionally works with City staff and participates in City hearings/meetings. However, her work is not related to this grant-funded program, whatsoever. NHCA Board member Mike Whitney may be hired using grant funds for graphic design and marketing assistance, but if that is a conflict, we will hire someone outside of NHCA.

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter)

checked

List of Board Members

checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement

checked

Most Recent Year-End Form 990

checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors

checked

Required Documents File Upload

[NHCA_Board_Members.docx](#)

[NHCA_2024_Form_990.pdf](#)

[IRS_Nonprofit_Confirmation_Letter.pdf](#)

[2025_Year-End_Statement.pdf](#)

[NHCA_Org_Budget_2026-2027_approved.pdf](#)

Optional Miscellaneous Documents

[Grant_Application_Cover_Letter.pdf](#)

[Shimmy_Mob_budget.pdf](#)

Organization Contact Selena Whitney

Title Program Manager

Email Address terraplnr@gmail.com

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 1,260.00	\$ 360.00
Fringe Benefits & Payroll Taxes	\$ -	\$ -
Occupancy (Rent and Utilities)	\$ 780.00	\$ 780.00
Equipment	\$ 579.00	\$ -
Supplies and Materials	\$ 180.00	\$ 160.00
Direct Client Support / Participant Assistance	\$ 830.00	\$ 765.00
Marketing & Outreach (Printing, Advertising)	\$ 390.00	\$ 390.00
Travel, Mileage & Training (Program-Related)	\$ -	\$ -
Other Expenditures (Note 1)	\$ 240.00	\$ 240.00
Total Expenditures	\$ 4,259.00	\$ 2,695.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 2,695.00
City of Goleta (Other) (Note 2)	\$ -
Federal	\$ -
State	\$ -
County	\$ -
Municipal (Other Cities)	\$ -
School District	\$ -
Foundations/Trusts	\$ -
Donations/Fundraising	\$ 1,564.00
Fees	\$ -
Other Sources/Revenues (Note 3)	\$ -
Total Revenue	\$ 4,259.00

Title	GUSD Arts Education	02/06/2026
	by Kat Klein in FY 2026 Goleta City Grant - Government/Special Application	id. 53102854
	kklein@gusd.us	

Original Submission	02/20/2026
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Score	n/a
	Part 1: Program Information
Program Name	GUSD Arts Education
Amount Requested	9000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	The Goleta Union School District Art Program serves students in grades TK-6 across 9 elementary schools. We meet with every student once per week for 30 minutes (TK and K), or 45 minutes (grades 1-6) to offer an Arts Education in a variety of mediums and subject studies. The program is monitored by myself (Kat Klein) the Art Lead, as well as Letitia Bradley, the Assistant Superintendent of Educational Services.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	3450
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	The program fulfills the California State Content Standards for Fine Arts. The program advances equity and inclusion by providing accessible scaffolded arts lessons representing a variety of people, cultures, and geographic areas.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

The program is offered at each school site. There are no current barriers for implementation. All of the classrooms are accessible to everyone, and paraeducators accompany students that need additional assistance.

If your program takes place on school grounds, have you received permission and approval from the appropriate school? Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

El Camino, Hollister, Kellogg, Mountain View, Foothill, Isla Vista, Ellwood Elementary, La Patera, & Brandon, approved by Mary Kahn, Superintendent

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

GUSD has an Art Program with an Art Specialist at each site. We cover 12 different mediums and a variety of subject matter. This year, we layered in cultural curriculum, with a specific heritage focus each month. We would like to continue our advancement of equity through culture-based art and need additional books and materials to do so.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

Revenue.xlsx

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Any funding we receive will go directly to enhancing equity through our cultural curriculum. We would purchase more books representing different cultures around the world, as well as supplies that are not the basic ones provided from the district.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

The Goleta Union School District (GUSD) mission is to maximize academic, intellectual, and personal growth to enable each student to prosper in and positively influence a diverse, dynamic world. The district focuses on providing a safe, inclusive environment that fosters critical thinking, creativity, and a love of learning.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

Goleta Union School district serves the public by providing education to all elementary students within Goleta, grades TK-6.

Is a nonprofit sponsor being used to sponsor the program? No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance. The district has a strong capacity and will work alongside school sites and fiscal services will monitor grant funds.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract? No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation? No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Letitia Bradley, Assistant Superintendent of Educational Services, lbradley@gusd.us, 805-681-1200, Jordan Goines, Assistant Superintendent of Fiscal Services, jgoines@gusd.us, 805-681-1200

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter)	checked
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List of Board Members	checked
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Most Recent Year-End Balance Sheet or Profit/Loss Statement	checked
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Most Recent Year-End Form 990	checked
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Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[Board.pdf](#)

[Tax_Letter.pdf](#)

[Fund_01.pdf](#)

[Budget_Form_01.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Letitia
Bradley

Title Assistant Superintendent of Educational Services

Email Address kklein@gusd.us

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 9,000.00
City of Goleta (Other) (Note 2)	\$ -
Federal	\$ -
State	\$ 541,914.00
County	\$ -
Municipal (Other Cities)	\$ -
School District	\$ 2,250.00
Foundations/Trusts	\$ -
Donations/Fundraising	\$ -
Fees	\$ -
Other Sources/Revenues (Note 3)	\$ -
Total Revenue	\$ 553,164.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)		
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)		
Equipment		
Supplies and Materials	\$ 9,000.00	\$ 9,000.00
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)		
Total Expenditures	\$ 9,000.00	\$ 9,000.00

Title	Disability Awareness Field Trips	02/06/2026
	by Jana Brody in FY 2026 Goleta City Grant - Government/Special Application	id. 53103228
	jana@gracefisherfoundation.org	

Original Submission 02/06/2026

Score	n/a
	Part 1: Program Information
Program Name	Disability Awareness Field Trips
Amount Requested	7920
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Disability Awareness cost free Field Trips are led by Grace Fisher, Creative Director; Grace Fisher Foundation. The program has the potential to serve all students in grades K–6 across nine Goleta Union School District elementary schools. Grace and her team will conduct one-hour, in-person presentations twice per year at each school. Students engage in Q&A, adaptive mouth painting, and reflection. Impact is monitored through student feedback, teacher feedback, and participation in GFF programs.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	2700
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	An unmet need is met by allowing students to meet Grace Fisher, a quadriplegic, and learn disability awareness and inclusion. Schools often lack funding for onsite interactive programs, and this grant makes experiential learning accessible to all.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

No. The Inclusive Arts Clubhouse and the participating Goleta school sites are fully accessible and designed for people of all abilities. Founded by a quadriplegic, the program includes accommodations

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

The grant supports GFF's Disability Awareness Field Trips in 9 GUSD elementary schools, with 2 visits per school (grades 1–3 and 4–6). Each visit includes a \$350 facilitator and assistant fee (18 visits = \$6300). Materials cost \$2 per student for 30 students per class (18 classes = \$1,080). Admin/coordinator costs of \$30 per visit totals = \$540)*noted on other),. Total project cost is \$7,920 for direct services.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

<p>Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.</p>	<p>Yes, the funds are vital to serve schools without outreach resources. Without the full funding, the number of field trips will be reduced. Any gap other will be filled through donations, and GFF operating support.</p>
<p>Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?</p>	<p>No</p>
<p>Is there a cost to participate in the program?</p>	<p>No</p>
	<p>Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.</p>
<p>What is your organization's mission statement?</p>	<p>Mission: to empower individuals with disabilities by providing free access to music, art, dance, and other artistic programs in our state-of-the-"art" facility, The Inclusive Clubhouse. We are dedicated to fostering an accessible and welcoming space that promotes community inclusion, education, creative expression, and self-discovery. Through the arts, we aim to enrich lives, celebrate diversity, and build a vibrant community where everyone can explore their potential and connect with others.</p>
<p>Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.</p>	<p>Offsite GFF has successfully served Goleta school children two years in a row. At our onsite facility GFF serves Goleta residents through free arts programming at the Inclusive Arts Clubhouse, open Wed.- Sun., 11:00–5:00. We offer adaptive classes in art, music, and dance for people of all abilities, partnering with 20 local nonprofits that share our mission of community access for all, including the Down Syndrome Assoc., MS Society, Autism Embrace, Mosaic Therapy and 3 schools districts.</p>

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

The Grace Fisher Foundation has a strong capacity to manage grant funds and deliver programs successfully. We have received this City of Goleta grant for two years with consistent, on-time reporting and program delivery. Our Director of Operations oversees grant management, budgeting, and compliance, supported by established financial controls and experienced program staff.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Dana Susko, EdD, PTA Co-President, IV School, iveschoolpta@gmail.com, 610-360-2150 & Allegra Perry aperry@gusd.us, School Office Manager Mountain View School (805) 681-1284

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[IRS_Determination_Letter_501c3.pdf](#)

[GFF_Board_list_2025_1.docx](#)

[Grace_-_2025_PL_-_Prelim.pdf](#)

[Draft_Budget_-_City_of_Goleta.pdf](#)

Optional Miscellaneous Documents

[Bi-fold_pamphlet_1_2.png](#)

[paint_with_mouth.PNG](#)

[Gracemouthpainting.PNG](#)

[Screenshot_39.png](#)

[GFF_collage.JPG](#)

[GFF_Partner_list_as_of_2_25_1.docx](#)

[local_hero_2025_GrACE.PNG](#)

[Bi-fold_pamphlet_2_1_1_1.png](#)

[20250612_142354_6A9F63.jpeg](#)

[20250612_142354_659C6E.jpeg](#)

Organization Contact Jana
Brody

Title Director of Development/ Operations

Email Address jana@gracefisherfoundation.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 6,300.00	\$ 6,300.00
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)		
Equipment		
Supplies and Materials	\$ 1,080.00	\$ 1,080.00
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)	\$ 540.00	\$ 540.00
Total Expenditures	\$ 7,920.00	\$ 7,920.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 7,920.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	
Donations/Fundraising	
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 7,920.00

Title	Historias de Goleta: Latina/o Oral Historiography & Community Theater in the California Central Coast	02/06/2026
	by Ben Olguin in FY 2026 Goleta City Grant	id. 53105345
	ben.olguin@ucsb.edu	

Original Submission 02/06/2026

Score	n/a
	Part 1: Program Information
Program Name	Historias de Goleta: Latina/o Oral Historiography & Community Theater in the California Central Coast
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Funds are to be used for 4 free public music and theater performances with light refreshments for an oral historiography and community theater initiative. Student staff paid by UCSB Global Latinidades Center will manage logistics. Students from 2 courses (summer & fall 2026) will interview Goleta residents and produce 10-minute plays featuring their stories. Each public event will be from noon-2pm on Saturday and Sunday at the Goleta Community Center. Mariachi musicians open and close events.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	200

Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

This program to interview and feature Goleta residents, especially Latina/os, addresses the following Strategic Plan goals:
1) Return Old Town to a Vital Center of the City
2) Ensure Equity, Inclusion, and Access in City Programs, Services & Activities

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

This project's public events are held in the Goleta Community Center small auditorium, which is fully accessible and in compliance with the ADA. Additionally, our program and media will be published in large print and bilingual English and Spanish.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

This event expands the 2025 Summer and Fall pilot project (funded by several UCSB sponsors for approximately \$32,000). For the 2026 Summer and Fall iteration of this ongoing initiative, we seek \$10,000 funding from the City of Goleta's Community Grant Program for 4 public music and theater productions and refreshments for 50 Goleta community residents for each of the events, for a total of 200 people at no cost to the attendees.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

Revenue.xlsx

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

This program has an ideal budget of \$110,000 targeted sponsors and grants (eg, ACLS Digital Justice Grant of \$100,000 under review). It can be abbreviated at \$32,000 (same as pilot phase) if \$10,000 is provided by the Goleta Community Grant Program.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

Yes

If yes, please list each source and provide the amount, purpose, and funding period or expiration date. This includes grants, contracts, sponsorships, in-kind contributions, or any other financial support from any City department or program. Clearly identify whether the funding is confirmed, pending, or anticipated. Describe how the funding request differs from what is already being funded or asked for.

The budget for the expanded program involving a digital component is \$110,000, but an abbreviated non-digital program can be produced for \$32,000 (same as pilot project). Funding requests are:
1) UCSB Salary & Benefits for 2 courses (2026 Summer & Fall): in kind (app. \$45,000 salary + \$20,000 benefits), confirmed
2) Professor Ben Olguin, Robert and Liisa Erickson Presidential Chair: \$15,000, confirmed
3) ACLS Digital Justice Grant: \$100,000, pending
4) Multiple UCSB units & faculty: \$17,000, pending

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

The Global Latinidades Project was founded in 2017 in the English Department of the University of California at Santa Barbara. It seeks to map Latinidades—Latinx history, culture, identity, and politics—in local and global contexts, emphasizing new, evolving, and possible future developments, challenges, and opportunities in the field of Latinx Studies as well as intersecting and allied fields and areas.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

The UCSB Global Latinidades Center seeks to bridge the town-gown divide through programming and educational partnerships with local community organizations such as the SB County Immigrant Legal Defense Center, Isla Vista Food Forest & Healing Justice Santa Barbara. Since 2017, the Global Latinidades Center has received over \$2.5 million in grants for research, teaching, and programming, with an emphasis on creating service learning opportunities for students with local organizations.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

The UCSB Global Latinidades Center has received over \$2.5 million in grants from the University of California System, various UCSB units, National Endowment for the Arts, and other funders. Grants have been administered by UCSB in accordance to the UCSB Office of Research grants management protocols. The UCSB Office of Research has been notified of this grant application and the administrative unit for the English Department has confirmed its willingness to manage this grant if awarded.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation? No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached. James Kearney, Chair, UCSB English Department (kearney@ucsb.edu); Ralph Armbruster Sandoval, Former Chair, UCSB Chicana/o Studies Department (ralpharmbruster@ucsb.edu)

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[Olguin_Grant_2026--Non-Profit_Proof.pdf](#)

[Olguin_Grant_2026--Board_Members.pdf](#)

[Olguin_Grant_2026--Most_Recent_Budget.pdf](#)

[Olguin_Grant_2026--Year_End_Form_990.pdf](#)

Optional Miscellaneous Documents

[Olguin_Grant_2026--Histoias_Project_Overview.pdf](#)

[Olguin_Grant_2026--Evidence_of_Success--Pilot_Project_Flier.pdf](#)

[Olguin_Grant_2026--Histoias_Project_Budget_Itemization.pdf](#)

Organization Contact Ben Olguin

Title Professor, English Department

Email Address ben.olguin@ucsb.edu

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	
Donations/Fundraising	\$ 32,000.00
Fees	\$ -
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 42,000.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 76,032.00	
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)		\$ 1,900.00
Equipment	\$ 23,500.00	
Supplies and Materials		
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)	\$ 468.00	\$ 2,632.00
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)		\$ 5,468.00
Total Expenditures	\$ 100,000.00	\$ 10,000.00

Title	Support for Goleta Patients with a Life-Threatening Illness	02/05/2026
		id. 53086424
	by Heather Stevenson in FY 2026 Goleta City Grant	
	hstevenson@hospiceofsb.org	

Original Submission	02/05/2026
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Score	n/a	
	Part 1: Program Information	
Program Name	Support for Goleta Patients with a Life-Threatening Illness	
Amount Requested	10000	
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.	
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	<p>Patient Care Services delivers free, bilingual support to people with a life-threatening illness and their families. It addresses social determinants of health like housing, poverty, language, and access to medical care. Services include medical care coordination, connection to community resources, volunteer help, spiritual care, counseling, and financial aid. Operating weekdays with flexible hours, the program prioritizes low-income, senior, and Latino patients and their families.</p>	
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	150	
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	We support Goleta’s goals to “Maintain a Safe and Healthy Community” and “Ensure Financial Stability” through free, bilingual care coordination, emotional support, and financial aid to seriously ill residents who are low-income or Spanish-speaking.	

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Our office is wheelchair accessible and provides accommodations for visitors and employees. Program staff spend most of their time in the field, meeting patients at their homes, hospitals, etc. We are proficient in telehealth as well.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Note 1: Other Expenditures

This is IT support

Note 3: Other Sources of Revenue

SB Hospice Foundation.: \$218,928 (SB Hospice Foundation exists solely to support Hospice of SB)

Reserves/Bequests: \$162,343

General Notes

City of Goleta funds will go toward the salary of a bilingual/bicultural care coordinator who ensures that Spanish-speaking patients receive the medical care and resources they need to successfully treat their illness and not slip through the cracks of the medical care system.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Funding would be used for the salary of one of our two bilingual/bicultural Care Coordinators; 39% of our patients are Latino, most prefer to communicate in Spanish, making this position critical. See budget for other funding sources.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

Yes

If yes, please list each source and provide the amount, purpose, and funding period or expiration date. This includes grants, contracts, sponsorships, in-kind contributions, or any other financial support from any City department or program. Clearly identify whether the funding is confirmed, pending, or anticipated. Describe how the funding request differs from what is already being funded or asked for.

We currently have a grant from last year's City of Goleta grant opportunity for the same purpose as this year's request. The current grant expires on June 30, 2026. We do not have any other City of Goleta grants.

Is there a cost to participate in the program?	No
<p>Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.</p>	
What is your organization's mission statement?	The mission of Hospice of Santa Barbara (HSB) is to care for anyone experiencing the impact of a life-threatening illness or grieving the death of a loved one. HSB was founded in 1974, and is the second oldest hospice organization in the country.
Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.	We offer medical care coordination, connection to services like housing and food, volunteer help, spiritual care, grief counseling, and financial aid to Goleta residents with a life threatening illness like cancer and their immediate family members. Our goal is to help patients improve their ability to manage their illness, feel less isolated, and connect to supportive resources that help meet their basic needs.
Is a nonprofit sponsor being used to sponsor the program?	No
Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.	We have a proven track record of successfully managing grant funds and delivering the promised outcomes. The program has 85 highly trained volunteers and 7 staff (2 bilingual). Patient to staff ratio is currently about 18 to 1. Two bilingual staff are enough to meet the needs of our Spanish-speaking patients right now. Our care managers must be social workers or licensed MFTs. Care coordinators tend to have experience working in the health care field or other helping professions.
Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?	No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation? No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Lori Mendez, RN, Palliative Care Consultation Service at Cottage Health: 805-722-9127 Dana VanderMey, Hospice of Santa Barbara Board President: 805-895-5081

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[HSB_IRS_Tax_Exemption_Letter.pdf](#)

[Hospice_Board_01.2026.pdf](#)

[Hospice_SB_2024_990.pdf](#)

[HSB_2026_Org_Budget.pdf](#)

[Hospice_of_SB_Financials_12.2025.pdf](#)

Optional Miscellaneous Documents

[PCS_1-page_Summary_2026.pdf](#)

[PCS_Story.pdf](#)

Organization Contact Heather Stevenson

Title Grants and Development Manager

Email Address hstevenson@hospiceofsb.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 696,964.00	\$ 10,000.00
Fringe Benefits & Payroll Taxes	\$ 95,041.00	
Occupancy (Rent and Utilities)	\$ 55,823.00	
Equipment	\$ -	
Supplies and Materials	\$ 10,905.00	
Direct Client Support / Participant Assistance	\$ 10,000.00	
Marketing & Outreach (Printing, Advertising)	\$ -	
Travel, Mileage & Training (Program-Related)	\$ 13,500.00	
Other Expenditures (Note 1)	\$ 20,873.00	
Total Expenditures	\$ 903,106.00	\$ 10,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	\$ -
Federal	\$ -
State	\$ -
County	\$ 25,000.00
Municipal (Other Cities)	\$ 15,700.00
School District	\$ -
Foundations/Trusts	\$ 155,938.00
Donations/Fundraising	\$ 315,197.00
Fees	\$ -
Other Sources/Revenues (Note 3)	\$ 381,271.00
Total Revenue	\$ 903,106.00

Title	La Patera PTA	02/06/2026
	by Hillary Yoder in FY 2026 Goleta City Grant	id. 53107323
	lapateraptapresident@gmail.com	

Original Submission 02/06/2026

Score	n/a
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Part 1: Program Information

Program Name	La Patera PTA
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Amount Requested	4800
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	The La Patera PTA seeks funding to continue its Lunchtime Recess Activities Program, currently operating two days per week for students in grades 1–6. The program offers free, inclusive enrichment during the school day, like chess, pickleball, origami, and a Chinese club. Open to all students, it removes barriers such as cost and after-school pickup. Activities are supervised and monitored by the PTA and school staff, supporting student engagement and a positive lunchtime environment.
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	290
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Yes. The program addresses an under-met need for free, accessible extracurricular enrichment. It supports Goleta's goals for community vitality, recreation, and equity by removing cost and after-school barriers.
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Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

No. The program is held on a school campus that is fully ADA accessible. Activities are inclusive and adaptable, and reasonable accommodations can be provided as needed to ensure students with disabilities can participate fully.

If your program takes place on school grounds, have you received permission and approval from the appropriate school? Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

La Patera School, Brigitte Haley - Principal

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

This \$4,800 request funds lunchtime enrichment classes. Funds pay **approved vendors** to lead structured activities, promoting health and social skills. Calculation: \$800 per 8-week session (\$100/class) x 2 classes = \$1,600. Over 3 trimesters, this totals \$4,800. City funds cover vendor fees to ensure equitable access. The PTA manages logistics and scheduling. This budget provides high-quality programming during the school day for all La Patera students.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

If partially funded, PTA fundraising will bridge the gap or we'll scale back to one class per trimester.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

PTA's mission is to make every child's potential a reality by engaging and empowering families and communities to advocate for all children.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

The La Patera PTA serves Goleta residents by supporting students and families through educational enrichment, family engagement, and community-building activities. Serving the Old Town area, the PTA partners with school staff to provide free or educational resources and enrichment on an accessible school campus, removing barriers related to cost, transportation, and language while fostering a safe, inclusive environment.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

Our board manages a \$50,000+ budget and 15+ annual events with precision. We strictly follow PTA bylaws for financial reviews and transparency, ensuring full accountability. As a prior City of Goleta grant recipient, we have a proven track record of successful fund management. With experienced volunteer leadership and rigorous internal financial controls, the La Patera PTA possesses the full capacity to manage these funds effectively and deliver the proposed enrichment program as planned.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Brigitte Haley, La Patera School Principal (805) 681-1280
bhaley@gusd.us/ Krista Beard, La Patera School Teacher, (805) 681-1200
kbeard@gusd.us

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[501c3Treasury_Dept_FTB_Letter.pdf](#)

[CA_Franchise_Board_Tax_Exemption_Letter.pdf](#)

[La_Patera_PTA.pdf](#)

[Tax_2024_Form990-EZ3.pdf](#)

[La_Patera_Year_End_BalanceSheet.pdf](#)

[BudgetReport_-_Approved_PTA_9-9-25.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Hillary
Yoder

Title La Patera PTA President

Email Address lapateraptapresident@gmail.com

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 4,800.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	
Donations/Fundraising	
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 4,800.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)		
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)		
Equipment		
Supplies and Materials		
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)	\$ 4,800.00	\$ 4,800.00
Total Expenditures	\$ 4,800.00	\$ 4,800.00

Title	LEAP Family Resource Center (FRC): Integrated Support Services for Low-Income Goleta Families	01/29/2026
	by Sheba Lux in FY 2026 Goleta City Grant	id. 52996864
	grants@leapcentralcoast.org	

Original Submission 01/29/2026

Score	n/a
	Part 1: Program Information
Program Name	LEAP Family Resource Center (FRC): Integrated Support Services for Low-Income Goleta Families
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	LEAP's Family Resource Center operates M–F, 8–6:30, providing free, essential services to low-income Goleta residents (majority immigrant/language diverse), including emergency food and diaper distribution, benefits enrollment assistance, housing and employment assistance/referrals, parenting/wellness workshops, immigration support and case management. Impact is monitored through service tracking to assess improved access to supports, reduced unmet basic needs, and strengthened family stability.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	825

Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

Services address under-met needs for accessible, culturally responsive support for low-income Goleta residents, advancing the City's strategic goals: equity, inclusion and access by improving service access, family stability and community wellbeing.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

No. Programs are accessible/inclusive, facilities are ADA-compliant and requested accommodations are provided. Bilingual, trauma-informed staff provide responsive support and adaptations to eliminate physical, communication and program barriers.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Funds will assist with LEAP's Family Resource Center operations and services for low-income individuals and families in Goleta. The requested \$10,000 will help fund two categories essential to Goleta services: \$5,000 - rent for our Goleta FRC office; \$5,000 - support services (includes all FRC services, including direct support and other essentials) for Goleta residents in need. City funds are needed to leverage other revenue, ensuring uninterrupted service access and meeting increasing demand.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

Revenue.xlsx

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes. Requested funds are vital to sustain FRC services for Goleta residents. Other sources include United Way, Hutton Parker and Bower Foundations, CA Dept. of Social Services and other public/private sources to ensure uninterrupted service delivery.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

Yes

If yes, please list each source and provide the amount, purpose, and funding period or expiration date. This includes grants, contracts, sponsorships, in-kind contributions, or any other financial support from any City department or program. Clearly identify whether the funding is confirmed, pending, or anticipated. Describe how the funding request differs from what is already being funded or asked for.

Other Goleta Funding:
- \$10,000 12/22/2025/12 months - Support for Goleta Families Impacted by ICE Activities - Confirmed
- \$6,500 8/11/2025/12 months - Diaper Bank - Confirmed
This request seeks support specifically for FRC rent and direct client support for low-income Goleta residents, which are not covered by the existing grants and are essential to sustaining core service delivery.

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?	LEAP: Learn • Engage • Advocate • Partner mitigates the effects of poverty, racism, and trauma by providing high-quality, trauma-informed child care, comprehensive, culturally sensitive family support, and visionary community leadership..
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Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.	Goleta residents are served through the FRC (Hollister Ave.) and at two Children's Centers (Phelps Rd/UCSB). LEAP convenes the Goleta Valley Partnership Network and has strong collaborations with numerous nonprofits, local schools, healthcare providers, and county agencies. These partnerships support coordinated delivery of early childhood ed., family advocacy, case management and basic needs assistance. Outreach includes bilingual, culturally responsive engagement by trusted family advocates.
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Is a nonprofit sponsor being used to sponsor the program?	No
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Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.	LEAP has extensive experience administering City of Goleta, municipal, county, state and foundation grants. Qualified program managers oversee implementation, documentation and outcomes; established financial controls including segregated accounts, board oversight, written fiscal policies and regular financial review ensure accountability. LEAP consistently meets performance and reporting standards, manages funds within approved budgets and submits timely, accurate financial and program reports.
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Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?	No
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Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation? No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Eileen Monahan, ECE Consultant: 805-451-8720, eileen@eileenmonahanconsulting.com. Angie Swanson-Kyriaco, Planned Parenthood, LEAP Board Member: 805-455-6209, angieswanson@me.com

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement

checked

Most Recent Year-End Form 990

checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors

checked

Required Documents File Upload

[LEAP_formerly_IVYP_Tax_Exemption_Letter_IRS.pdf](#)

[LEAP_Approved_Budget_FY_25-26.docx.pdf](#)

[23-24-LEAP-Form-990-Public-Disclosure.pdf.pdf.pdf](#)

[20250630_LEAP_June_Close_P_L.pdf](#)

[LEAP_Board_Roster_25-26.Usable.pdf](#)

Optional Miscellaneous Documents

Organization Contact

Lori
Goodman

Title

Chief Executive Officer

Email Address

lorig@leapcentralcoast.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 450,000.00	
Fringe Benefits & Payroll Taxes	\$ 114,000.00	
Occupancy (Rent and Utilities)	\$ 52,000.00	\$ 5,000.00
Equipment	\$ 2,500.00	
Supplies and Materials	\$ 42,000.00	
Direct Client Support / Participant Assistance	\$ 166,500.00	\$ 5,000.00
Marketing & Outreach (Printing, Advertising)	\$ 2,000.00	
Travel, Mileage & Training (Program-Related)	\$ 3,000.00	
Other Expenditures (Note 1)	\$ 25,000.00	
Total Expenditures	\$ 857,000.00	\$ 10,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	\$ 16,500.00
Federal	\$ 22,500.00
State	\$ 160,000.00
County	
Municipal (Other Cities)	
School District	\$ 40,000.00
Foundations/Trusts	\$ 100,000.00
Donations/Fundraising	\$ 358,000.00
Fees	
Other Sources/Revenues (Note 3)	\$ 150,000.00
Total Revenue	\$ 857,000.00

Title	Lights Up! Theatre Company Season 9	02/05/2026
	by Erica Schreiber in FY 2026 Goleta City Grant	id. 53095539
	erica@lightsupsb.com	

Original Submission 02/05/2026

Score	n/a
	Part 1: Program Information
Program Name	Lights Up! Theatre Company Season 9
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Season 9 includes two musicals, one play, and classes for youth aged 9–18. Rehearsals, classes, and performances are held after school, evenings, and weekends. Programming is open to all, with need-blind admissions and scholarships ensuring access regardless of ability to pay. Progress is monitored through close relationships with company members, their families, and audiences. We serve youth and families, including Goleta residents, through inclusive arts education and community engagement.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	75
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Our program advances Goleta’s goals of community vitality, youth development, and equitable access by providing high-quality arts education that is limited or unavailable in schools. Scholarship fund = no one is turned away for financial need.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

We accommodate youth (and staff) with an array of needs, including intellectual and physical disabilities through accessible building access; and through written and signed inclusivity and accommodation expectations for our teaching staff.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Day to Day Personnel : Keep the lights on, lead programs, execute plans, strategic planning, fundraising

Rehearsal, Production, Teaching Personnel: Make our programs possible

Prof: CPA, Bookkeeper

Occupancy: Rehearsal space (625/month) Rest=venues

Supplies & Materials: Sets, costumes, office expenses

Client Support: 100% = Scholarships

Other Revenue = Tuition (168,520) + Ticket Sales (42,400)

Net Income \$3613 (see budget) Scholarships = tuition revenue reduction, not expense, as in your charts.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

City funding is vital to sustaining need-blind access. If partial funding is received, we will prioritize scholarships and seek additional individual donations and foundation support to ensure no student is turned away.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

Musical Tuition: \$2500-2900 Play Tuition: \$1500 Classes: \$600 for a series of 12 classes. We grant scholarships to EVERY actor/family with need ranging from 25%-100%. 30% of our actors receive scholarships.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

<p>What is your organization's mission statement?</p>	<p>Lights Up! provides professional training and performance experience in a nurturing environment. We offer a secure and accepting theatrical home for developing performers, while challenging them with professional acting, singing and dance training.</p>
<p>Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.</p>	<p>Lights Up! serves Goleta residents through youth participation, family engagement, and public performances. We reach out to teacher and students from Goleta schools, offer scholarships to Goleta families, and present performances attended by Goleta audiences. Outreach occurs throughout Santa Barbara County, with a strong and growing Goleta presence.</p>
<p>Is a nonprofit sponsor being used to sponsor the program?</p>	<p>No</p>
<p>Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.</p>	<p>Lights Up! has successfully managed public and private grants, including prior City of Goleta funding. Financial oversight includes board review of budgets and financials and professional bookkeeping/fractional CFO. Through a grant from the Manitou fund, we were (finally!) able to hire an ED in Aug 2025. She is a former CEO who is laser focused on organizational (including and especially financial) clarity and sustainability. We are much more organized, streamlined, and culturally refreshed.</p>
<p>Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?</p>	<p>No</p>

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Amy Love, Artistic Director, amy@lightsupsb.com, 310-874-1881, David W. Machacek, Ph.D. (Bookkeeper/Fractional CFO), david@davidmachacek.com (805) 452-7460

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter)

checked

List of Board Members

checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[Lights_Up_Season_8_Budget.pdf](#)

[LU_IRS_letter.jpg](#)

[Lights_Up_2025_StatementofFinancialPosition.pdf](#)

[Lights_Up_2025_StatementofActivity.pdf](#)

[Lights_Up_Board_Member_List_2026.pdf](#)

[Lights_Up_Theater_-_2024_Tax>Returns_-_FINAL_-_10.14.2025.pdf](#)

Optional Miscellaneous Documents

[Goleta_Resident_as_Dorothy_in_Wizard_of_Oz_Dec_2025.jpg](#)

Organization Contact Erica Schreiber

Title Executive Director

Email Address erica@lightsupsb.com

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	\$ -
Federal	\$ -
State	\$ -
County	\$ -
Municipal (Other Cities)	\$ -
School District	\$ -
Foundations/Trusts	\$ 25,500.00
Donations/Fundraising	\$ 90,044.00
Fees	
Other Sources/Revenues (Note 3)	\$ 212,920.00
Total Revenue	\$ 338,464.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 209,315.00	\$ -
Fringe Benefits & Payroll Taxes	\$ -	\$ -
Occupancy (Rent and Utilities)	\$ 34,427.00	\$ -
Equipment	\$ -	\$ -
Supplies and Materials	\$ 31,970.00	\$ 3,000.00
Direct Client Support / Participant Assistance	\$ 31,071.00	\$ 7,000.00
Marketing & Outreach (Printing, Advertising)	\$ 1,979.00	\$ -
Travel, Mileage & Training (Program-Related)	\$ -	\$ -
Other Expenditures (Note 1)		
Total Expenditures	\$ 308,762.00	\$ 10,000.00

Title	<p>Mental Health Matters (MHM) - Continued Funding for Goleta Students Responding to Ongoing Teacher and Principal Requests for Additional Classrooms Served</p> <p>by Sheba Lux in FY 2026 Goleta City Grant</p> <p>slux@mentalwellnesscenter.org</p>	<p>01/27/2026</p> <p>id. 52974722</p>
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Original Submission	02/20/2026
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Score	n/a	
	Part 1: Program Information	
Program Name	Mental Health Matters (MHM) - Continued Funding for Goleta Students Responding to Ongoing Teacher and Principal Requests for Additional Classrooms Served	
Amount Requested	7000	
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.	
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Suicide is the 2nd leading cause of death among teens—early intervention is needed. MHM provides essential mental health education to Goleta middle/high school students via week-long, 60-minute, in-classroom sessions, responding to urgent requests from principals and teachers to reach more students. Curriculum covers symptoms, warning signs, and how to seek help for oneself or peers, using age-appropriate discussion and materials. Outcomes are monitored through pre/post tests/ongoing evaluation.	
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	900	

Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

MHM fills an under-met need for youth mental health services and aligns with City goals of healthy community and service inclusion/access. As mental illness often emerges during adolescence, MHM provides equitable access to crisis-prevention tools.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Programming is delivered in classrooms designed under ADA guidelines. Programming also incorporates varied learning modes—verbal learning, visual presentations, interactive discussions and multimedia materials—to address different learning needs.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

La Patera: Gil, Hernandez, M; Ellwood: Farver, C; Foothill: Eymann, H; IV: Todd, Hepburn, S; Brandon: Wood, Muhr, Varela; San Marcos: Holdren, D

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Funds will assist with 1. Program staff costs. Duties include: oversight/implementation of programming, outreach, materials preparation, database management, coordination of instructors and classrooms, outcome documentation etc. 2. Program supplies, including printed curricula, student workbooks, presentation materials, visual and digital teaching tools, and evaluation materials. Additional funding will come from Orfalea Fnd, Lippincott Fnd, Barker Fnd, Crawford Idema Fnd and individual donors.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes, funding is vital to meet increasing demand from GUSD teachers for MHM in additional classrooms. Other public and private funds will supplement City support to meet urgent demand for this impactful program during students' most vulnerable years.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

<p>What is your organization's mission statement?</p>	<p>To advance mental wellness in Santa Barbara by providing our community with essential mental health services and programs, mental health education, and safe and affordable housing for adults living with mental health issues.</p>
<p>Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.</p>	<p>MWC serves Goleta residents through direct partnerships with GUSD and local schools. The MHM team taught 100% of GUSD elementary schools—Brandon, El Camino, Ellwood, Foothill, Hollister, Isla Vista, Kellogg, La Patera, and Mountain View—providing early mental health education to Goleta students. MWC also supports student-led Wellness Connection Clubs at Goleta high schools and collaborates with educators and community partners countywide to promote youth wellbeing, prevention, and help-seeking.</p>
<p>Is a nonprofit sponsor being used to sponsor the program?</p>	<p>No</p>
<p>Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.</p>	<p>Mental Wellness Center has a proven capacity to manage grant funds to deliver MHM, which has served 18,000+ local students. Eighty+ years of providing mental health services locally has been sustained through deep institutional expertise and staffing, and rigorous financial, administrative and programmatic oversight. We maintain the Platinum Seal from Candid, reflecting superb accountability and transparency, and successful administration of public and private funding to support needed services.</p>
<p>Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?</p>	<p>No</p>

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation? No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Gabriela Dodson, Director of Programming, Mental Wellness Center, gdodson@mentalwellnesscenter.org, (805) 884-8440 ext 3296; Ann Lippincott, Retired Educator, MWC Board, annlippincott1@me.com, (805) 962-0309

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[MWC_IRS_Designation_Letter.pdf](#)

[Mental_Wellness_Center_2025-2026_Board_of_Directors_Including_Years_FINAL.pdf](#)
[2022_2023_990.pdf](#)

[MWC_Financials_Combined_FY_2025.pdf](#)

[2025-2026_General_Operating_Budget_Mental_Wellness_Center.pdf](#)

Optional Miscellaneous Documents

[Student._Parent._Teacher._Testimonials_FINAL.pdf](#)

[Mental_Health_Matters.Anecdotes_FINAL.pdf](#)

Organization Contact Liat Wasserman

Title Director of Development and Communications

Email Address lwasserman@mentalwellnesscenter.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 120,120.00	\$ 6,500.00
Fringe Benefits & Payroll Taxes	\$ 36,036.00	
Occupancy (Rent and Utilities)		
Equipment		
Supplies and Materials	\$ 7,000.00	\$ 500.00
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)		
Total Expenditures	\$ 163,156.00	\$ 7,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$ 146,000.00
Donations/Fundraising	\$ 7,156.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 163,156.00

Title	Mosaic Therapy Collective Equity Fund	02/06/2026
	by Mosaic Therapy Collective Santa Barbara in FY 2026 Goleta City Grant	id. 53105266
	mosaictherapycollective@gmail.com	

Original Submission	02/06/2026
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Score	n/a
	Part 1: Program Information
Program Name	Mosaic Therapy Collective Equity Fund
Amount Requested	6000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	The Mosaic Equity Therapy Fund provides free or deeply subsidized therapy for low-income families of children ages 0–18 with diagnosed disabilities. Licensed speech, mental health, occupational, and physical therapists deliver services 6 days/week, 8am–7pm in our sensory-friendly clinic. Eligibility is determined by application review based on income, residence, disability impact, and access to services. Funds are administered by a care coordinator and paid directly to providers.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	14
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Yes. The program advances Goleta’s goal of equity, inclusion, and access by addressing gaps in therapy services for children with disabilities. High costs, long waitlists, and limited public services leave many families without adequate care.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

No. Mosaic operates in a fully ADA-compliant, sensory-friendly clinic. Services are designed for individuals with disabilities and offered in inclusive formats. Staff are trained in accessible communication, and bilingual materials are available.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Grant funds will support the Equity Fund, providing free therapy to low-income families (direct client support category), while other revenue supports overall operations. Personnel includes part-time administrative and care coordination support. Occupancy covers clinic rent, utilities, cleaning, and maintenance. Supplies, equipment, and training ensure high-quality service delivery. Other expenditures include insurance, banking fees, and program-related events necessary for safe operations.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes. Funds are essential to provide therapy to families unable to afford services. If partially funded, Mosaic will supplement through foundation grants, donations, membership dues, and fundraising to ensure continued program delivery.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

Yes

If yes, please list each source and provide the amount, purpose, and funding period or expiration date. This includes grants, contracts, sponsorships, in-kind contributions, or any other financial support from any City department or program. Clearly identify whether the funding is confirmed, pending, or anticipated. Describe how the funding request differs from what is already being funded or asked for.

Mosaic Therapy Collective received \$4,000 in confirmed funding from the City of Goleta in 2025 to support the Mosaic Equity Therapy Fund, which provides subsidized therapy for low-income families of children with disabilities. These funds have been fully allocated. The current request seeks additional funding for the same program to meet increased demand and serve more eligible families during the FY 2026–27 grant period.

Is there a cost to participate in the program?

Yes

<p>If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.</p>	<p>Therapy services have a fee set independently by each licensed provider and vary by discipline and experience. All of our therapists offer sliding-scale rates. Participants served through the Equity Fund receive fully subsidized (free) sessions.</p>
	<p>Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.</p>
<p>What is your organization's mission statement?</p>	<p>Mosaic Therapy Collective's mission is to make exceptional therapy accessible to all by breaking down barriers to affordable, high-quality coworking solutions. Every therapist deserves a supportive, collaborative environment that fosters growth, creativity, and wellness. By providing innovative, accessible spaces, we aim to enhance the well-being of both therapists and the families they serve. Mosaic is committed to inclusivity, accessibility, and equity to create a vibrant, diverse community.</p>
<p>Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.</p>	<p>Since opening in 2023, Mosaic has served hundreds of families (over 1,000 people) across Santa Barbara County, including Goleta residents, through in-person services at our sensory-friendly clinic. We provide speech, occupational, physical, and mental health therapy, free community programs, and outreach to preschools and families. Mosaic therapists offer sliding-scale services, and City of Goleta support has enabled financial aid through our Equity Therapy Fund for low-income families.</p>
<p>Is a nonprofit sponsor being used to sponsor the program?</p>	<p>No</p>
<p>Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.</p>	<p>Mosaic Therapy Collective has successfully administered City of Goleta grant funding for this program in prior years with full compliance. We work with a professional bookkeeper and maintain board financial oversight through an active Treasurer. Clear internal controls, expense tracking, and board review ensure responsible use of funds. Prior City support directly enabled equitable therapy access for families in need.</p>

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract? No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation? No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Brittany Avila Wazny (Executive Director), Teddy Bear Cancer Foundation, (805)-962-7466, brittany@teddybearcancerfoundation.org. Grace Fisher (grace@gracefisherfoundation.org), Jana Brody (janabrody44@gmail.com), Grace Fisher Foundation, 805-705-8007

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter)	checked
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List of Board Members	checked
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Most Recent Year-End Balance Sheet or Profit/Loss Statement	checked
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Most Recent Year-End Form 990	checked
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Most Recent Organization Budget, Reviewed and Approved by Board of Directors	checked
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Required Documents File Upload

[Mosaic_IRS_Determination_Letter.pdf](#)

[Mosaic_2026_Board_List.pdf](#)

[Mosaic_202425_990.pdf](#)

[Mosaic_202425_Year-End_Financials.pdf](#)

[Mosaic_202526_Org_Budget.pdf](#)

Optional Miscellaneous Documents

[Mosaic_Therapy_Collective_Stories.pdf](#)

Organization Contact	Sharon MacDonald
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Title	Executive Director
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Email Address	mosaictherapycollective@gmail.com
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Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 20,000.00	
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)	\$ 47,038.00	
Equipment	\$ 1,500.00	
Supplies and Materials	\$ 5,600.00	
Direct Client Support / Participant Assistance	\$ 13,487.00	\$ 6,000.00
Marketing & Outreach (Printing, Advertising)	\$ 1,185.00	
Travel, Mileage & Training (Program-Related)	\$ 7,140.00	
Other Expenditures (Note 1)	\$ 6,050.00	
Total Expenditures	\$ 102,000.00	\$ 6,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 6,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$ 24,300.00
Donations/Fundraising	\$ 30,500.00
Fees	\$ 41,200.00
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 102,000.00

Title	Mothers' Helpers Everyday Essentials Program	02/07/2026
	by Michelle Erickson in FY 2026 Goleta City Grant	id. 53107660
	madison@mothershelpers.org	

Original Submission 02/20/2026

Score	n/a
	Part 1: Program Information
Program Name	Mothers' Helpers Everyday Essentials Program
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Mothers' Helpers' Everyday Essentials Program provides free baby items to low income families in Santa Barbara County with children aged 36 months or younger. Families apply online or are referred by partner agencies. Donations are sorted and quality checked at the Goleta Support Center and distributed year round by appointment or delivery. The program is monitored through application, inventory, and distribution tracking and serves families facing high costs and gaps in public assistance.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	70
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Mothers' Helpers aligns with the City's goal to ensure equity, inclusion, and access by providing free essential baby items to low income families, removing financial barriers not addressed by WIC/SNAP and supporting infant and family stability.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Mothers' Helpers reduces barriers through accessible pickup options, flexible scheduling, local delivery when needed, and partner referrals. Applications are available online or via caseworkers, with accommodations for mobility and family needs.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Mothers' Helpers requests \$10,000 to support our Everyday Essentials Program. Program expenses include Support Center rent, two part-time staff (a Program Manager and a Support Center Coordinator), and essential supplies, primarily purchasing car seats through our new Ready to Ride initiative. Due to limited in-kind donations, 40% of car seat requests went unfulfilled in 2025. Funding will help sustain core operations and ensure families now receive critical safety equipment for their infants.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes, the requested funds are vital to fully serve families. If partial funding is received, we will leverage donations, grants, and partner contributions to cover gaps and ensure all program services continue without disruption.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Mothers' Helpers provides essential baby items to low-income families throughout Santa Barbara County, ensuring every child has the opportunity to thrive and no parent faces the journey alone. We gather baby items from families who no longer need them and distribute them to those who do, alleviating financial stress and allowing parents to focus on what matters most—nurturing their children.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

Mothers' Helpers serves Goleta residents through our Support Center at 160 N Fairview Ave, Suite 3, where baby items are stored and distributed by appointment. We receive referrals from Family Service Agency, Public Health, Cottage Hospital, Child Welfare Services, MICOP, Good Samaritan, and Hearts Aligned, working with social workers and nurses to ensure timely support for families in need.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

Mothers' Helpers has secured grant funding from various organizations and funders including the Women's Fund. Our Executive Director, alongside a grant writer, manages the grant portfolio and ensures compliance and timely reporting throughout each grant period. The Executive Director also oversees financial controls and uses software such as Salesforce to track program outcomes and strengthen grant management. All reporting clearly demonstrates appropriate use of funds and documented impact.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

(1) Kathy Gonzales Administrative Office Professional Sr. County of Santa Barbara Health Department T 805.681.4933 kgonzales2@sbcphd.org
(2)Vivian Solodkin Founder and Executive Director Hearts Aligned Inc. O: 805.679.5505 www.heartsaligned.org

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[501c3_IRS_Exemption_Letter_MH.pdf](#)

[Mothers_Helpers_September_30_2024_Form_990EZ_-_Public_Disclosure.pdf](#)

[MH_BOD_2026.pdf](#)

[MH_2025_Financials.pdf](#)

[MH_2026_Budget.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Michelle
Erickson

Title Executive Director

Email Address michelle@mothershelpers.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 43,800.00	\$ 2,500.00
Fringe Benefits & Payroll Taxes	\$ 14,292.00	
Occupancy (Rent and Utilities)	\$ 31,448.00	\$ 2,500.00
Equipment		
Supplies and Materials	\$ 12,000.00	\$ 5,000.00
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)		
Total Expenditures	\$ 101,540.00	\$ 10,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	\$ -
State	\$ -
County	\$ -
Municipal (Other Cities)	\$ -
School District	\$ -
Foundations/Trusts	\$ 90,000.00
Donations/Fundraising	\$ 43,000.00
Fees	\$ (115.00)
Other Sources/Revenues (Note 3)	\$ 83,070.00
Total Revenue	\$ 225,955.00

Title	Goleta School STEAM Programs	02/06/2026
	by Kate MacNaughton in FY 2026 Goleta City Grant	id. 53097373
	125 State Street Santa Barbara, California 93101 United States 805-770-5000 development@moxi.org	

Original Submission 02/06/2026

Score	n/a
	Part 1: Program Information
Program Name	Goleta School STEAM Programs
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	In the 2026_27 school year, MOXI's School Programs in Goleta will provide equitable, hands-on STEAM learning for Goleta students during and beyond the school day. The programs include free and reduced-cost weekday field trips to MOXI, free afterschool programs hosted at Goleta schools, and school science nights for students and families. Programs serve Goleta-area schools, prioritizing Title I and low-income students, and are monitored through attendance tracking and participant feedback.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	1570

Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

MOXI partners with Goleta public schools to close STEAM access gaps by removing cost and transportation barriers for Title I students, expanding inclusive learning, and supporting Goleta's goal of equitable opportunities for all youth and families.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

MOXI is fully ADA-compliant, w/accessible entrances, restrooms, elevators & exhibit pathways. School programs follow district accessibility requirements & staff provide accommodations, adaptive tools & support to ensure all students can participate.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

Some include Brandon; El Camino; Isla Vista & La Patera; Regina Davis, Director, GUSD State Preschools and Asst. Director of Expanding Learning Prog.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative The \$87,000 budget supports education, facilities, admin, and exhibit staff, plus materials and operational costs for hands-on educational programs at MOXI and onsite in Goleta schools. Other expenses include utilities, IT, insurance, and maintenance. MOXI requests \$10,000 from the City of Goleta (11.5% of total budget) for education staffing. Other revenue sources include foundations, a small contribution from the GUSD, individual donations, and \$13,500 from paid museum admissions.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Funding is vital to provide equitable STEAM access for Goleta students. A partial grant will be supplemented by support from foundations, corporate sponsors, and individual donors to ensure full program delivery and accessibility.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

MOXI's mission is to ignite learning through interactive experiences in science and creativity.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

MOXI partners with Goleta Unified and community groups to serve students with the greatest need for STEAM learning opportunities, targeting low-income students and under-resourced schools. School programs include free/reduced field trips during the school day at the museum (125 State Street, SB) and afterschool programs and science nights at schools serving Goleta students (5–8 schools annually), removing barriers and ensuring equitable access to high-quality STEAM learning for all.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

MOXI has extensive experience managing grants and delivering STEAM programs, with skilled educators, dedicated program staff, and strong financial controls. Proven success includes growing participation in free and equitable school field trips, afterschool programs, and science nights, serving Goleta students with consistent, high-quality outcomes.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Director, GUSD State Preschools,Assistant Director, Expanded Learning Programs, (805) 681-1200 Ext. 2271, rdavis@gusd.us; Ryan Sparre, GUSD Director of Expanded Learning Programs, 805-681-1200 ext. 2211, rsparre@gusd.us

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[IRS_Tax_Exempt_Status_06.07.22.pdf](#)

[2026_MOXI_Board_Members_Positions_MST_Updated_Jan_2026.pdf](#)

[MOXI_2024_990_Copy_-_Public_Inspections.pdf](#)

[2025_Statement_of_Financial_Activity_BS_Unaudited_MOXI.pdf](#)

[MOXI_Operating_Budget_2026_Board_Approved.pdf](#)

Optional Miscellaneous Documents

[Goleta_School_Programs_Letters_of_Support.pdf](#)

[Goleta_School_Programs_Overview_-_MOXI_2026_27.pdf](#)

Organization Contact Kate
MacNaughton

Title Chief Advancement Officer

Email Address development@moxi.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 71,750.00	\$ 10,000.00
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)		
Equipment		
Supplies and Materials	\$ 5,000.00	
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)	\$ 10,250.00	
Total Expenditures	\$ 87,000.00	\$ 10,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	\$ -
Federal	\$ -
State	\$ -
County	\$ -
Municipal (Other Cities)	\$ -
School District	\$ 4,000.00
Foundations/Trusts	\$ 47,000.00
Donations/Fundraising	\$ 12,500.00
Fees	
Other Sources/Revenues (Note 3)	\$ 13,500.00
Total Revenue	\$ 87,000.00

Title	Nomad Tango 5th Season	02/06/2026
	by Alejandra Folguera in FY 2026 Goleta City Grant	id. 53106752
	info@nomadtango.org	

Original Submission 02/20/2026

Score	n/a
	Part 1: Program Information
Program Name	Nomad Tango 5th Season
Amount Requested	3000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Nomad Tango's 2026 season features weekly Monday Practicas (7-9pm, all-levels), movie nights, and the "Beethoven Tango" premiere (9/11/26). We serve Santa Barbara's public and local artists. Operations include rehearsals, shows, and a cultural trip. Success is monitored via attendance logs and surveys. Funding covers venues, artists, and fixed admin costs (software) to keep fees low. We rebuild community through accessible grassroots events and world-class performances.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	500
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	We fulfill the human need for connection and belonging, recognizing the serious consequences of isolation. We prioritize cultural inclusivity, incorporating local talents and master performers to provide diverse cultural experiences.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

We include everybody in our activities. In fact, many of our participants are older and have mobility restrictions. There are many ways to participate: dancing, conversing, sharing in food and attending performances.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

No

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

We seek funding for printing and local design. Materials are produced at Goleta's **Graphicink**. We also support artist **Jazmin Choi**, who creates our signature "character designs." These funds cover her professional fees and production costs for posters and postcards. By prioritizing local talent and vendors, we ensure high-quality outreach while reinvesting in the Santa Barbara creative economy

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Funds are vital as we have no endowment. If partial, we'll use stock photos and non-local printing. We bridge gaps via ticket sales and donors. City support grants the credibility needed to secure additional community sponsors.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

Yes

If yes, please list each source and provide the amount, purpose, and funding period or expiration date. This includes grants, contracts, sponsorships, in-kind contributions, or any other financial support from any City department or program. Clearly identify whether the funding is confirmed, pending, or anticipated. Describe how the funding request differs from what is already being funded or asked for.

Nomad Tango appreciates the funding received by the City of Goleta in the amount of \$750 each of the 2024 and 2025 FY.

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

The Monday Practica costs \$5. We keep our ticket prices as low as possible and offer discounts for seniors and students. In addition, we have resolve to never deny entry to anybody that wants to come but can't afford it.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Nomad Tango is a nonprofit promoting Tango Argentino as UNESCO heritage. We connect local enthusiasts through curated programs supporting artists and musicians. By bridging social dance and High Arts, we integrate Latin American culture into SoCal to engage underserved Latino populations. We believe this artistic ritual is built together, fostering a space that grows and lives intensely for its community.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

Nomad Tango serves numerous Goleta residents, fostering community through dance. Our 2025 activity spawned a new tango program at the Brazilian Cultural Arts Center in Goleta. We apply a lean model and proven management to ensure high impact. We are dedicated to accessible arts, believing that such spaces grow with the community and that every participant is a vital part of our collective success.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

Nomad Tango has successfully managed grants for 3 years, scaling reach via a lean, efficient model. Alejandra Folguera leads alongside Rodney Gustafson (30 years at State Street Ballet). Together, they ensure impeccable fiduciary oversight and transparency. Our disciplined operations maximize impact by directing funds to programming and artists. With a proven track record of growth, we are reliable stewards of cultural investment.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract? No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation? No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Please see attached document: "NomadTangoReferences.pdf"

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter)	checked
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List of Board Members	checked
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Most Recent Year-End Balance Sheet or Profit/Loss Statement	checked
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Most Recent Year-End Form 990	checked
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Most Recent Organization Budget, Reviewed and Approved by Board of Directors	checked
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Required Documents File Upload

[IRSletternonprofit_.pdf](#)

[NomadTangoBoardofDirectors.pdf](#)

[2024-form990ez-872414098--accepted.pdf](#)

[NOMAD_TANGO_Balance_Sheet_2025.pdf](#)

[NOMAD_TANGO_Profit_and_Loss.pdf](#)

[NOMAD_TANGO_budget_2026.pdf](#)

[april25ver2.jpg](#)

[aug.jpg](#)

[5x7cachivache.jpg](#)

Optional Miscellaneous Documents

[NomadTangoReferences.pdf](#)

[Beethoven_Tango_Poster.jpeg](#)

[20250214_152301.jpg](#)

[20250803_192011.jpg](#)

[IMG-20250909-WA0011_1.jpg](#)

Organization Contact	Alejandra Folguera
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Title	Director
Email Address	ale@nomadtango.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 13,500.00	\$ 1,000.00
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)	\$ 13,500.00	
Equipment		
Supplies and Materials	\$ 1,000.00	
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)	\$ 12,000.00	\$ 2,000.00
Travel, Mileage & Training (Program-Related)	\$ 3,000.00	
Other Expenditures (Note 1)	\$ 9,000.00	
Total Expenditures	\$ 52,000.00	\$ 3,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 3,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	
Donations/Fundraising	\$ 30,000.00
Fees	\$ 19,000.00
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 52,000.00

Title	Octobots Robotics	02/03/2026
	by Michael Ramsey in FY 2026 Goleta City Grant	id. 53067665
	1525 San Miguel Avenue Santa Barbara, California 93109 United States (805) 452-4483 octobotsteam@gmail.com	

Original Submission	02/03/2026
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Score	n/a
	Part 1: Program Information
Program Name	Octobots Robotics
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Octobots Robotics serves youth ages 10-18 year-round. High school program meets Mon/Fri 6-9pm, increasing to 20hrs/week during Jan-Apr competition season. Students gain hands-on experience in engineering, programming, CAD, and business. Summer camps serve ages 10-14 for 7 weeks using VEX curriculum. Open to all students regardless of experience or background. Success monitored through competition rankings, student engagement, skill assessments, and college readiness in STEM fields.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	250

Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

As the only program filling the gap of providing free advanced hands-on STEM education we advance equity and access goals through student-led engagement while developing critical workforce skills and inspiring Goleta's future leaders.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Our program at Dos Pueblos High School is ADA-accessible. We offer multiple participation pathways allowing students to contribute based on abilities. We work individually with students to accommodate their learning or physical abilities.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

Dos Pueblos High School, Bill Woodard, Principal

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative Total program budget: \$125,000. Goleta grant (\$10,000) covers: Materials (\$5,000) - aluminum stock, motors, electronics, needed to build competition robot. Travel (\$5,000) - transportation, meals, lodging for 15 students x \$333/student to attend regional competitions, essential for program completion. No personnel costs requested. Other funding: corporate sponsors (\$85,000), individual donations (\$15,000), in-kind (\$15,000). Goleta funds reduce barriers for low-income students.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Goleta funds are vital to eliminate financial barriers for students and provide supplies needed for hands-on experience. We will pursue corporate and community funds; if underfunded, fewer students can participate fully.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

Yes

If yes, please list each source and provide the amount, purpose, and funding period or expiration date. This includes grants, contracts, sponsorships, in-kind contributions, or any other financial support from any City department or program. Clearly identify whether the funding is confirmed, pending, or anticipated. Describe how the funding request differs from what is already being funded or asked for.

City of Goleta funding for 2025 in the amount of \$3,000.

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

CA

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

Octobots inspires students to become science and technology leaders through mentor-based programs building engineering, business, and technology skills. Students are deeply involved in robot design, fabrication, assembly, programming, and presentation, gaining hands-on engineering experience. They manage business operations including logistics and fundraising. To promote STEM education, students present and demonstrate robots at local schools, engaging youth throughout our region.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

Octobots Robotics is a 501(c)(3) nonprofit with proven program delivery since 2023. We maintain financial controls including segregated duties, board oversight, and annual reviews. Our leadership team includes experienced engineers, educators, and business professionals. Finances are managed by a local grant accounting firm. We successfully manage our annual budget from multiple sources, demonstrating fiscal responsibility and operational excellence.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Lane Fuller, Simulation and Systems Engineer at Advanced Scientific Concepts LLC lanegfuller@gmail.com 805-708-8067; Michael Cameron, Sr. Manufacturing Engineer at Arthrex mcameron19@cox.net 805-698-5976

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter)

checked

List of Board Members

checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement

checked

Most Recent Year-End Form 990

checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors

checked

Required Documents File Upload

[2025-form990ez-882617875--accepted.pdf](#)

[Octobots_Robotics_Board_Members_2025-2026.pdf](#)

[IRS_Determination_Letter_Octobots_Robotics_1.pdf](#)

[2025-2026_Budget.pdf](#)

[BasicCompanyFinancials_1.pdf](#)

Optional Miscellaneous Documents

[Summer_camp_newsletter_1.pdf](#)

Organization Contact Diana Pereira

Title Team Admin/Board Secretary

Email Address info@teamoctobots.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ -	
Fringe Benefits & Payroll Taxes	\$ -	
Occupancy (Rent and Utilities)	\$ 1,800.00	
Equipment	\$ 25,000.00	
Supplies and Materials	\$ 50,700.00	\$ 5,000.00
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)	\$ -	
Travel, Mileage & Training (Program-Related)	\$ 47,500.00	\$ 5,000.00
Other Expenditures (Note 1)		
Total Expenditures	\$ 125,000.00	\$ 10,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$ 15,000.00
Donations/Fundraising	\$ 75,000.00
Fees	
Other Sources/Revenues (Note 3)	\$ 25,000.00
Total Revenue	\$ 125,000.00

Title **Basic Needs: Nutrition and Food Security** 01/19/2026
id. 52893539

by **Andrea Slaby** in **FY 2026 Goleta City Grant**

315 Meigs Rd
Ste A #369
Santa Barbara, California
93109
United States
805-284-3552
contact@organicsoupkitchen.org

Original Submission 01/19/2026

Score n/a

Part 1: Program Information

Program Name Basic Needs: Nutrition and Food Security

Amount Requested 10000

Please select the category of funding being requested. Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.

Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population). Organic Soup Kitchen’s core programs include a Medically Tailored SoupMeal Program delivering nutrient-dense, organic soups to support immune health for seniors, cancer patients, and people with chronic illness; a Food Security Initiative providing weekly home-delivered SoupMeals; and Community Nutrition Education focused on disease prevention. We primarily serve low-income, chronically ill, and senior (62+) residents in Goleta facing financial or mobility barriers.

Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit). 275

Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

Yes, Organic Soup Kitchen supports low-income Goleta seniors and chronically ill residents with medically tailored, home-delivered meals that promote health, independence, and healthy aging, aligning with goals of the Goleta Strategic Plan.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Organic Soup Kitchen removes access barriers with ADA-compliant facilities, an accessible website in 12 languages, and strong non-discrimination policies. We welcome staff, volunteers, and clients of all abilities, including disabled volunteers.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

We are respectfully requesting \$10,000 to go towards our increased ingredients and delivery costs for the City of Goleta. Note 1 total expenses (not listed in budget below) \$539,683.57 for entire program entire county. Note 3 is \$828,000 entire program income for the entire county. See entire org budget.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes, the requested funds are vital to fully serve Goleta residents. Partial funding would reduce the number of clients served, with remaining costs covered through donations, grants, and, healthcare partners to ensure continued program delivery.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

The cost is dependent on income. 90% of our clients are probono and 10% are on a sliding scale donation.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Organic Soup Kitchen provides metabolic oncology nutrition and food security to support the health and wellness of low-income seniors and other individuals with cancer or chronic illness.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

Organic Soup Kitchen serves all Goleta zip codes through its Basic Needs Food Security Program, with four dedicated delivery routes operating every Wednesday across the city. On Thursdays, we partner with CenCal Health to deliver Medically Tailored Meals to eligible Goleta residents within a 16-mile radius of our downtown kitchen.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

OSK has over 17 years of experience managing public and private grants and delivering medically tailored nutrition programs. Our professional staff includes a COO, Executive Director, Registered Dietitian, program administrators, program assistants and trained volunteers. We maintain strong financial controls using audited financials, QuickBooks, and board oversight. OSK has a proven track record of successfully administering grants and meeting all reporting and program outcomes.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Maria McCall (Montecito bank and Trust) --mmccall@montecito.bank and
Dona Lopez (CenCal Health) dlopez@cencalhealth.org

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter)	checked
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List of Board Members	checked
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Most Recent Year-End Balance Sheet or Profit/Loss Statement	checked
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Most Recent Year-End Form 990	checked
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Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[OSK_IRS_Tax_Exempt_PDF.pdf](#)

[2026_Board_of_Directors_OSK_LetterHead.pdf](#)

[*2024_OSK_Form_990_Public_Disclosure_Copy.pdf](#)

[2024_Organic_Soup_Kitchen_Reviewed_Financial_Statements.pdf](#)

[StatementofActivity.pdf](#)

[OSK_2025_2026Budget_-_2026_OSK_Budget.pdf](#)

Optional Miscellaneous Documents

[FOR_IMMEDIATE_RELEASE__Organic_Soup_Kitchen.pdf](#)

[NUTRITION_FACTS_8.5_x_11_in.pdf](#)

Organization Contact Andrea
Slaby

Title Chief Operating Officer

Email Address Andrea@organicsoupkitchen.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	\$ -
Federal	\$ -
State	\$ -
County	\$ -
Municipal (Other Cities)	\$ 27,000.00
School District	\$ -
Foundations/Trusts	\$ 485,000.00
Donations/Fundraising	\$ 61,000.00
Fees	\$ 30,000.00
Other Sources/Revenues (Note 3)	\$ 828,000.00
Total Revenue	\$ 1,441,000.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 400,000.00	\$ -
Fringe Benefits & Payroll Taxes	\$ 36,000.00	\$ -
Occupancy (Rent and Utilities)	\$ 290,000.00	\$ -
Equipment	\$ 1,200.00	\$ -
Supplies and Materials	\$ 280,000.00	\$ 5,000.00
Direct Client Support / Participant Assistance	\$ -	\$ -
Marketing & Outreach (Printing, Advertising)	\$ 38,000.00	\$ -
Travel, Mileage & Training (Program-Related)	\$ 8,000.00	\$ 5,000.00
Other Expenditures (Note 1)	\$ 539,683.57	\$ -
Total Expenditures	\$ 1,592,883.57	\$ 10,000.00

Title	Support Staff for Parkinson's Exercise Program	02/06/2026
	by Barbara Levi in FY 2026 Goleta City Grant	id. 53104542
	bglevi@msn.com	

Original Submission 02/06/2026

Score	n/a
	Part 1: Program Information
Program Name	Support Staff for Parkinson's Exercise Program
Amount Requested	4000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	PASB seeks funding for its weekly, chair-based exercise program, tailored by trained instructors for people with Parkinson's Disease and offered free of charge. The class size is growing and there is demand for a second class. To support the instructor, we need to hire a trained assistant (rather than an unreliable volunteer) to set up the equipment and chairs, monitor the participants for safety and hydration. The same assistant can facilitate our monthly education programs.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	50
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	The program serves Strategic Goal 2.2 by enhancing the quality of life for Goleta residents and Goal 9 by ensuring that Goleta is inclusive, accessible and supportive of its aging population.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

PASB serves a population with physical challenges, so we must offer all activities in easily accessible spaces. For those who are home-bound, we offer some Zoom support groups and we post tapes of educational programs when possible.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

PASB pays \$75/week (\$3750/yr) for a trained instructor but has no budget for assistants to set up equipment and assure safety. Love and Care Home Health agency has provided a caregiver for one class but we need a second helper as the class has grown and expanded to a second day. We seek to hire an assistant for 2 hours each week at \$75/week for 50 exercise classes (\$3750/yr). The same person could stay an additional hour on the 10 days we have an educational program (\$375) after the exercise.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

It's vital to have assistants for the exercise program. PASB would make up for any partial funding from its own funds. We would encourage more participants to make a voluntary contribution of \$5/class or possibly \$10/class.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Our mission is to offer education, motivation, friendship, and support to people with Parkinson's, their caregivers, family members, and friends. We strive to help people maintain a positive quality of life.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

PASB provides valuable help to those affected by Parkinson free of charge with its month exercise programs, numerous support groups and monthly educational programs held at St. Andrew's Church near Goleta . Over 225 attend its annual Parkinson's Symposium at the Elks Club in Goleta (scholarships are available). We estimate that 400 people (100 from Goleta) participate in our programs. We partner with Center for Successful Aging for support groups and with Love and Care for exercise programs.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

PASB has a part-time administrator, many experienced board members, and the services of a CPA. Despite its small size, it has run a reliable program of exercise, support groups and educational programs for nearly 50 years. For 16 years, it has held a successful annual Symposium attended by over 225 people and featuring nationally known Parkinson's experts. PASB has received and successfully managed grants from the Parkinson Foundation, Santa Barbara Foundation and Montecito Bank and Trust.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Jeanne West, healthcare consultant, retired community engagement manager for Hospice of Santa Barbara/ 805 886 4234/ jeannewestsb@gmail.com and Josette Fast, Owner (fit' nis) Physical Therapy, LLC P/ 805-722-8035/ josettefast@gmail.com

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[PASB501c3Authorization.pdf](#)

[2026-01-09_BOD_Roster.pdf](#)

[2025.12.31_Full_Year_PL.pdf](#)

[PASB_Final_2026_Budget.pdf](#)

[PASB_2024_Form_990_-_Returns.pdf](#)

Optional Miscellaneous Documents

Organization Contact Barbara
Levi

Title Grant Writer

Email Address bglevi@msn.com

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$7875	\$ 4,000.00
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)	\$ 1,200.00	
Equipment		
Supplies and Materials		
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)		
Total Expenditures	\$ 1,200.00	\$ 4,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$4000
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	
Donations/Fundraising	\$ 5,075.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 5,075.00

Title	Postpartum Education for Parents (PEP)	02/05/2026
	by Jules Sweeney in FY 2026 Goleta City Grant	id. 53087994
	chair@sbpep.org	

Original Submission 02/05/2026

Score	n/a
	Part 1: Program Information
Program Name	Postpartum Education for Parents (PEP)
Amount Requested	7500
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	<p>Weekly Groups, are 2-hour sessions, held weekly in-person for parents of infants ages 0-4 months. Each session provides a safe space for parents to share experiences, ask questions, find resources and receive support from peers, trained facilitators and educational speakers.</p> <p>Attendance is tracked, and feedback is collected through surveys to assess the effectiveness of the sessions. Our services are aimed at parents in the County of Santa Barbara with a special focus on those experiencing PMADs.</p>
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	600
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	We are the only free resource offering a comprehensive range of support for parents during the critical 0–4 months postpartum period. Through our Groups, parents of infants can build community, share experiences, and learn from educational speakers.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

We ensure all of our programs are accessible to people with disabilities. When in person, we use facilities that are ADA compliant. We are additionally building out our Spanish services to have an even more inclusive program for the community.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

The **\$13,500** budget covers core costs for PEP's weekly groups. We request **\$7,500** for **Occupancy**, covering rent for ADA-compliant spaces. The remaining **\$6,000** (balance of rent, babysitting, and supplies) is funded by **private donations**. This 100% volunteer-run program ensures all grant funds directly support Goleta families.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

The funds are vital for PEP to continue serving the community. If we do not receive the grant money, we will pursue other grants/fundraisers for PEP. Our volunteers are very passionate about our mission to serve new parents in Santa Barbara County.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Our mission is to support growing families in Santa Barbara County by providing opportunities for education, encouragement, and social engagement in a non-judgmental, inclusive, and community-focused environment. As a 100% volunteer-run organization, we prioritize keeping costs low and offering our core services free of charge to ensure accessibility for low- and moderate-income families.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

We have our services in locations near bus stops, so residents can commute, or with free parking nearby, additionally we partner with local businesses to support our community with the proper care they need while navigating early parenthood. We are inclusive of all communities and cultures. Our programs reach community members from all socioeconomic statuses. While many of our services are utilized by low-income residents, they are not the only demographic we serve.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

PEP has been serving the Santa Barbara community for close to 50 years, we are a proven resource within Santa Barbara County. We started our Warmline service in 1977 with a \$500 grant from AAUW. Our Board of Directors has professionals versed in each service so that the organization can be run smoothly. We have a proven track record, putting our grant funds directly back into our services and have never had to shut down our services due to lack of finances.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Melissa Drake, OBGYN: (805) 570-3694, melissadrakemd@gmail.com and Stacie Furia, Santa Barbara Foundation (805) 880-9371, staciefuria@gmail.com

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[StatementofActivity-2025.pdf](#)

[StatementofFinancialPosition-2025.pdf](#)

[BudgetApproved-2025.pdf](#)

[PEP_2026_Board_of_Directors.pdf](#)

[IRS_501c3_Certification_2001.pdf](#)

[PEP_determination_letter.pdf](#)

[Form-990N-2024.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Jules
Sweeney

Title Chair of the Board

Email Address chair@sbpep.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)		
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)	\$ 12,286.00	\$ 7,500.00
Equipment		
Supplies and Materials	\$ 51.00	\$ -
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)	\$ 1,163.00	\$ -
Total Expenditures	\$ 13,500.00	\$ 7,500.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 7,500.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	
Donations/Fundraising	\$ 6,000.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 13,500.00

Title	Safety Town of Santa Barbara County	01/27/2026
	by Gail Johnson in FY 2026 Goleta City Grant	id. 52969402
	supportst@sbsafetytown.org	

Original Submission 01/27/2026

Score	n/a
	Part 1: Program Information
Program Name	Safety Town of Santa Barbara County
Amount Requested	7500
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Safety Town is a week long, half-day, enrichment program for children who are 5-and-6 years old and are entering kindergarten or first grade. Safety Town is held on accessible school sites. There are 6 to 8 weekly sessions each summer. The program provides safety education for approximately 340-425 local children and serves a variety of children from diverse backgrounds, socioeconomic groups, ethnicities, cultures, home languages, and abilities. Scholarships are also provided based on need.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	250
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Personal safety education is critical for these youngsters. The wide range of topics presented are age-appropriate and interactive. Safety Town is the only program in South Santa Barbara County that focuses on safety education for this age group.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Safety town does not have any of the above barriers. The program is held on local elementary school campuses that are ADA compliant. We welcome children with disabilities and credentialed teachers guide each lesson. Parents also provide an aide.

If your program takes place on school grounds, have you received permission and approval from the appropriate school? Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

All Goleta Unified School District elementary school sites. Superintendent, Mary Kahn, gives permission; Sylvia Williams, Administrator, is the contact

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative Proposed **revenue** is \$95,650, including City of Goleta funds.

Expenses:

Salaries/ Wages: \$\$42, 860 (Program Dir, Technical Dir, 2 Curriculum Dirs, 2 CIT Training Dirs, 2 4 Asst Dirs/Prog Assts), Payroll taxes and processing fees; onboarding: \$9,550; Equipment/Facilities: \$9,100; Supplies: \$13,660; Advertising: \$2,500.

City of Goleta funds will cover .08% of expenses or ~\$7500.

Note 1: Admin Expense: \$20,154 (Insurance, Software, Prof. Services, Office Expense)

Note 2: Interest income

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

A major goal is to solicit grants and individual donations for scholarships and transportation for children attending LEAP, Storyteller of Santa Barbara, St. Vincent's Childcare Center, the State Preschools, and the local underserved community.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

The 2026 registration fee is \$250.00 per child. Individual scholarships of \$225 are for families whose income is extremely-low to moderately-low in the HUD income ranges and to LEAP, Storyteller, and State Preschool kids. There is a \$25.00 co-pay.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Safety Town of Santa Barbara County provides a quality, comprehensive, safety education program for pre- and post- kindergarten children -- regardless of a family's ability to pay for services -- to teach them vital skills to last a lifetime.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

Safety Town is held at Goleta Union School District elementary school sites. Four to six weekly sessions are held in Goleta depending on enrollment. We partner with local safety agencies such as the Santa Barbara County Fire and Sheriff's Departments, AMR, US Forest Service, a personal safety training professional, and the UCSB Aquatics Center, who conduct safety training lessons. We also provide Counselor-In-Training opportunities for local high school students.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

In 2025, Safety Town celebrated its 50th anniversary of providing safety education and training in South Santa Barbara, which speaks to the quality and sustainability of the program. This is largely due to a dedicated and professional board and staff who work at the program. All teachers are credentialed in the State of California. Bookkeeping and accounting professional service firms are contracted to accurate financial reports and controls. Goleta funds are used for scholarships/busing.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract? No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation? No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

LEAP's CEO: Lori Lander Goodman, MSW Chief Executive Officer, LEAP: 805.705.6998 cell (preferred) Leapcentralcoast.org; Nancy Knight, retired GUSD School Principal, 69 Calaveras Ave Goleta, CA 93117-1332, nancykathryn@cox.net, 805 968 8523.

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[ST_Board_Roster_Dec._2025.pdf](#)

[City_of_Goleta_Budget_Narrative_Additional_Info.pdf](#)

[2025-26_Budget_V3.pdf](#)

[Safety_Town__PL_2024_Sept-2025_August.pdf](#)

[2024-2025_IRS_Form_990-EZ_2026-01-15_094657.pdf](#)

[1995_ST_IRS_Letter_of_Non_Profit_status_501c3.pdf](#)

[ST_name_change_approval_9_6_2017.pdf](#)

[Safety_Town_Balance_Sheet_8.31.25.pdf](#)

Optional Miscellaneous Documents

Organization Contact Gail Johnson

Title Board Treasurer, Grants/Fundraising Committee

Email Address SupportST@sbsafetytown.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 42,860.00	\$ 3,286.00
Fringe Benefits & Payroll Taxes	\$ 9,550.00	\$ 714.00
Occupancy (Rent and Utilities)	\$ -	\$ -
Equipment	\$ 3,600.00	
Supplies and Materials	\$ 13,660.00	\$ 1,000.00
Direct Client Support / Participant Assistance	\$ 5,500.00	\$ 2,500.00
Marketing & Outreach (Printing, Advertising)	\$ 2,500.00	
Travel, Mileage & Training (Program-Related)	\$ -	
Other Expenditures (Note 1)	\$ 20,154.00	
Total Expenditures	\$ 97,824.00	\$ 7,500.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 7,500.00
City of Goleta (Other) (Note 2)	\$ -
Federal	\$ -
State	\$ -
County	\$ -
Municipal (Other Cities)	\$ -
School District	\$ -
Foundations/Trusts	\$ 10,150.00
Donations/Fundraising	\$ 13,200.00
Fees	\$ 63,500.00
Other Sources/Revenues (Note 3)	\$ 1,300.00
Total Revenue	\$ 95,650.00

Title	2026-27 Channelkeeper “What the Channel Means to Me” Student Art Show	02/06/2026
	by Santa Barbara Channelkeeper in FY 2026 Goleta City Grant	id. 53105887
	development@sbck.org	

Original Submission 02/06/2026

Score	n/a
	Part 1: Program Information
Program Name	2026-27 Channelkeeper “What the Channel Means to Me” Student Art Show
Amount Requested	1500
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Santa Barbara Channelkeeper’s annual ocean-inspired Student Art Show, “What the Channel Means to Me” is open to high school students throughout southern Santa Barbara County. The goal of the show is to encourage local youth to create art inspired by and celebrating the natural world. A local artist juries the show and selects the awards. The winners are presented with their awards at a public exhibit and awards ceremony. The 24th annual student art show will take place in the spring of 2027.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	200

Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

The Student Art Show strengthens connection to art and the environment. To our knowledge, there's no other ocean-themed, juried art show awarding cash prizes to Santa Barbara County high school students to support nature-inspired artistic expression.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

We are not aware of any barriers or limitations. Information about the show is widely available online. We coordinate with local high school teachers to invite all students to participate and any local high student can submit art.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

The budget includes personnel time (education and outreach director and administrative support), event marketing, facility rental, supplies (art display materials, student awards, and reception expenses, such as food and beverages), and estimated travel of 70 miles at 0.70 cents per mile to drive to schools to pick up and return student artwork. City of Goleta funds would cover a portion of the funding needs in each of these budget categories.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

The City of Goleta's support for valued and impactful community events, such as the Student Art Show, provides vital public funding for this annual event. Private donations and in-kind contributions supplement total program expenditures.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Santa Barbara Channelkeeper's mission is to protect and restore the Santa Barbara Channel and its watersheds. As a grassroots non-profit organization, Channelkeeper works to achieve this mission through science-based advocacy, education, field work, enforcement, and community engagement.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

Channelkeeper serves all Goleta residents through programs that protect its watersheds, such as water quality monitoring, student education, and community engagement initiatives. This work touch areas such as Goleta Creek, Ellwood Mesa, and Goleta Beach, with a wide variety of outreach and partnerships with schools, community groups, and businesses across Santa Barbara County.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

Over Channelkeeper's twenty-five years of operation, the organization has a successful history of managing grant funds, implementing fiscal controls, and delivering on proposed programs for a variety of grant funders including local foundations, municipalities, state grant programs, and federal grant programs.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Katie Garibay, San Marcos High School Art Teacher, kgaribay@sbunified.org, 805.967.458 and Eliesa Bollinger, Dos Pueblos High School Art Teacher, ebollinger@sbunified.org, 805.968.2541 ext. 4536

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[SBCK_IRS_501c3_itr.pdf](#)

[2026_SBCK_Board_of_Directors_List1.pdf](#)

[SBCK_Profit_Loss_Statement_at_December_31_2025.pdf](#)

[Santa-Barbara-Channelkeeper_990_2024-PUBLIC-Final.pdf](#)

[2026_SBCK_Budget_summary.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Annie
Lovell

Title Development Director

Email Address annie@sbck.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 1,500.00
City of Goleta (Other) (Note 2)	\$ -
Federal	\$ -
State	\$ -
County	\$ -
Municipal (Other Cities)	\$ -
School District	\$ -
Foundations/Trusts	\$ 4,000.00
Donations/Fundraising	\$ 5,690.00
Fees	\$ -
Other Sources/Revenues (Note 3)	\$ -
Total Revenue	\$ 11,190.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 5,800.00	\$ 650.00
Fringe Benefits & Payroll Taxes	\$ 1,740.00	\$ -
Occupancy (Rent and Utilities)	\$ -	\$ -
Equipment	\$ 250.00	\$ 100.00
Supplies and Materials	\$ 1,600.00	\$ 600.00
Direct Client Support / Participant Assistance	\$ -	\$ -
Marketing & Outreach (Printing, Advertising)	\$ 1,500.00	\$ 100.00
Travel, Mileage & Training (Program-Related)	\$ 300.00	\$ 50.00
Other Expenditures (Note 1)	\$ -	\$ -
Total Expenditures	\$ 11,190.00	\$ 1,500.00

Title	Job Readiness Training & Internship Program for High School Youth	02/05/2026
	by Chelsea Duffy in FY 2026 Goleta City Grant	id. 53091933
	partners@sbceo.org	

Original Submission	02/05/2026
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Score	n/a
	Part 1: Program Information
Program Name	Job Readiness Training & Internship Program for High School Youth
Amount Requested	5000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	The Job Readiness Training and Internship Program serves up to 150 high school students annually from low income families across Santa Barbara County. Students complete a seven-week cycle of weekly in-person workshops focused on resumes, interviews, financial literacy, workplace rights, and career exploration. Eligible students may apply for paid 80 hour internships with case management support. Program quality is monitored through participation data, surveys, and internship outcomes.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	25
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	The program supports Goleta’s goals for economic stability and equity by addressing the under met need for paid career pathways. It provides low income youth with paid training and internships while strengthening the local workforce and opportunity.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

No. We select accessible venues and work to remove physical, communication, and programmatic barriers. We collect accommodation needs in advance and ensure appropriate supports are in place for all student and volunteer participants.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

Anne Hubbard, Superintendent; Darcie Campbell, Library Tech; Jennifer Rasmuseen, AVID Teacher; Karla Lara, Career Center Technician

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Each participant earns \$100 at an average total cost of \$115 including taxes. A \$5,000 City grant will allow approximately 25 Goleta residents to earn stipends while gaining skills that lead to paid internships, minimum wage employment, and longer term opportunities. Other funding includes \$40,000 from foundations, \$105,000 from donations/fundraising, and \$14,000 from the school districts covering student wages. However, these sources cannot always keep pace with rising minimum wage costs.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes, the remaining funds are secured or pending through President's Council, Mericos Foundation, Chevron, Edison, Hazen Family Foundation, Deckers, Santa Barbara County Education Office, City of Goleta, and individual contributions.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Partners in Education's mission is to empower students for the world ahead through business, school, and community collaboration. We create and support inspiring, skill building opportunities for youth along their TK-12 journey. We collaborate closely with employers, schools, and local agencies to support students, educators, and families and our approach is intentionally focused on filling service gaps rather than duplicating existing efforts.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

For this request, Partners in Education currently supports 25 Goleta students through countywide programming delivered in accessible community based settings. Services are provided through a mix of in person workshops and individualized coaching, with activities hosted at local schools and partner sites throughout Santa Barbara County to reduce barriers related to transportation, scheduling, and family availability.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

Partners in Education has served Santa Barbara County since 1996 and has nearly 30 years of experience managing public and private grant funds. Experienced staff oversee program delivery, employer partnerships, payroll, and compliance. Strong financial controls include board approved budgets, fund tracking by program, separation of duties, and annual audits. The organization consistently meets grant deliverables, reporting requirements, and outcomes, while continuously evaluating its programs.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Rakesh Prajapati, Host Supervisor, Bank Operations Manager, Goleta Branch, rprajapati@pacwest.com & Mario Barona, Career Coach, Montecito Bank and Trust, Goleta Branch, mbarona@montecito.bank

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[Board_List_and_Management_Roster_2025-26_Updated_7-21-25.pdf](#)

[0._Partners_IRS_Letter.pdf](#)

[SBPIE_2023-24_Form_990.pdf](#)

[Santa_Barbara_County_Education_Office_2024_Final_Financial_Statements.pdf](#)

[PSIP_Budget_Project_26-27.pdf](#)

[Org_Budget_26-27_.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Chelsea
Duffy

Title Executive Director

Email Address cpduffy@sbceo.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$70,062.00	
Fringe Benefits & Payroll Taxes	\$ 17,990.00	
Occupancy (Rent and Utilities)	\$10,123.00	
Equipment	\$2,000.00	
Supplies and Materials	\$1,750.00	
Direct Client Support / Participant Assistance	\$102,000	\$5,000.00
Marketing & Outreach (Printing, Advertising)	\$ 1,000.00	
Travel, Mileage & Training (Program-Related)	\$ 3,000.00	
Other Expenditures (Note 1)	\$9,882.00	
Total Expenditures	\$ 21,990.00	\$ -

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$5,000.00
City of Goleta (Other) (Note 2)	\$ -
Federal	\$ -
State	\$ -
County	
Municipal (Other Cities)	\$ -
School District	\$ 14,000.00
Foundations/Trusts	\$ 40,000.00
Donations/Fundraising	\$ 105,000.00
Fees	\$ 46,500.00
Other Sources/Revenues (Note 3)	\$ 4,132.00
Total Revenue	\$ 209,632.00

Title	Santa Barbara Dance Institute’s 2026 Goleta Summer Dance Camp and Early Childhood Inclusion Classes	02/04/2026
	by Rosalina Macisco in FY 2026 Goleta City Grant	id. 53085288
	424 E. Micheltorena St. Santa Barbara, California 93101 United States 805-245-0794 rosalina@sbdi.org	

Original Submission 02/04/2026

Score	n/a	
	Part 1: Program Information	
Program Name	Santa Barbara Dance Institute’s 2026 Goleta Summer Dance Camp and Early Childhood Inclusion Classes	
Amount Requested	10000	
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.	
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	SBDI’s Goleta USD Summer Dance Camp, Jun 10-Jul 24, 31 days, Mon-Fri, 4 hrs/day, and Early Childhood Inclusion Classes, Sept 9-May 27, Wed & Thurs, 61 days, at La Patera and Ellwood ES will serve 320 pre-K & TK–4th students through inclusive arts education led Rosalina Macisco and 4 teachers, uniting special and general education students, and fostering social-emotional learning, creativity and cultural exploration, with weekly showcases and a final presentation serving 100 families.	
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	420	

Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

SBDI programs provide free, culturally responsive dance and music education to underserved Goleta children, uniting special and general ed. students and fostering SEL, creativity and cultural exploration while providing family-engaging presentations.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

SBDI offers free programs in ADA-compliant spaces using Universal Design for Learning, collaborating with aides, providing class and performance adaptations and offering accessible communications, signage, and support for students with disabilities.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

Foothill ES: Ryan Sparre, Dir. of Expanded Learning Programs, rsparre@gusd.us.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative Salaries: Artistic Director/Instructor position. Program planning and dance instruction.

Direct Client Support: 4 contracted SBDI dance instructors.

Other Expenditures: \$1,900 liability insurance; contractors for admin, finance and tax \$7,600.

Please see below for other revenue sources.

Goleta City Grant Funds are especially critical for this year. We were always able to allocate California State Funds towards our projects, but with funding cuts, these funds have not been available anymore.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.	Other revenue sources: Earned income from GUSD (finalizing contract) Grant funding from SB Bowl Fnd (pending, repeat application) Towbes Fnd (pending, repeat application) Maus Family Fnd (committed) Kirby Jones Fnd (committed) Ind. Donations (pending).
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Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?	Yes
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If yes, please list each source and provide the amount, purpose, and funding period or expiration date. This includes grants, contracts, sponsorships, in-kind contributions, or any other financial support from any City department or program. Clearly identify whether the funding is confirmed, pending, or anticipated. Describe how the funding request differs from what is already being funded or asked for.

City of Goleta Grant 2025: Received \$3,500.
Funding Period until June 2026.

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Santa Barbara Dance Institute (SBDI) provides inclusive dance education that builds confidence, resilience, and a standard of excellence. Since 2005, SBDI has celebrated diverse dance and music cultures, serving young children to elders, including low-income and differently-abled communities. Through creative expression, cultural exploration, performance, and lifelong learning, SBDI fosters social-emotional growth, intergenerational connection, and well-being across Santa Barbara and Goleta.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

SBDI serves Goleta residents by delivering free inclusive dance programs at La Patera and Ellwood ES in partnership with Goleta USD. Outreach is bilingual (English/Spanish) and coordinated with schools for on-site sign-ups, ensuring access for families. Programs reach 320 pre-K–4th grade students, fostering SEL, cultural learning, and inclusion, with impact evaluated through attendance data, assessment of skill development, surveys, observations, and culminating showcases engaging 100 families.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

Led by Exec. & Artistic Director Rosalina Macisco, with 4 experienced teaching artists, SBDI has the capacity to manage funds and deliver high-quality, inclusive programming in partnership with Goleta USD. SBDI maintains strong financial controls, with board-reviewed budgets, quarterly financials, and annual 990 oversight. With 2 prior City of Goleta grants, SBDI successfully delivered programs at scale, met objectives, and demonstrated strong fiscal and programmatic accountability.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Ryan Sparre, Director of Expanded Learning Programs, (805) 681-1200 x2226, rsparre@gusd.us; Regina Davis, Assistant Director of Expanded Learning Programs, (805) 681-1200 x2271, rdavis@gusd.us

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[2024_SBDI_990.pdf](#)

[Balance_Sheet_Cash.pdf](#)

[SBDI_Budget.pdf](#)

[SBDI_IRS_Tax_Exempt_Approval.pdf](#)

[2026_SBDI_Board.pdf](#)

Optional Miscellaneous Documents

[SBDI_Annual_Report_2025.pdf](#)

[Santa_Barbara_Dance_Institute_Link_to_Video_Work_Sample.pdf](#)

Organization Contact Rosalina
Macisco

Title Executive and Artistic Director

Email Address rosalina@sbdi.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	\$ 22,855.00
Foundations/Trusts	\$ 25,000.00
Donations/Fundraising	\$ 5,493.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 63,348.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 24,450.00	\$ 4,000.00
Fringe Benefits & Payroll Taxes	\$ 2,678.00	\$ 500.00
Occupancy (Rent and Utilities)	\$ 4,660.00	
Equipment	\$ -	
Supplies and Materials	\$ 480.00	
Direct Client Support / Participant Assistance	\$ 18,470.00	\$ 5,000.00
Marketing & Outreach (Printing, Advertising)	\$ 450.00	
Travel, Mileage & Training (Program-Related)	\$ 1,340.00	\$ 500.00
Other Expenditures (Note 1)	\$ 10,820.00	
Total Expenditures	\$ 63,348.00	\$ 10,000.00

Title	Innovate DP	02/06/2026
	by Innovate DP in FY 2026 Goleta City Grant	id. 53103911
	innovate@sbunified.org	

Original Submission	02/06/2026
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Score	n/a
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Part 1: Program Information

Program Name	Innovate DP
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Amount Requested	7000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Innovate DP serves 220 9th-12th grade students at DPHS. The hands-on, project-based learning, universal access, and mental health services makes Innovate one of the most unique programs in the area. Many of the students are interested in running local businesses. This grant would start our small business internship program where students would spend a week in a small business in Goleta. This is a unique opportunity to try out careers before making a decision about their post-high school plans.
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	30
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	It directly relates to Goal 4 in the Strategic Plan. Students in local businesses would bring greater awareness to the community, allow for potential growth through apprenticeship, and create a collaboration between the high school and community.
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Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Our program is open to all students, including students with disabilities. We ensure that all students in the junior high learn about the program. We take counselor/teacher recs for students who may not advocate for themselves.

If your program takes place on school grounds, have you received permission and approval from the appropriate school? Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

Dos Pueblos High School, Bill Woodard

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

The main cost for this program will be stipends for the students. In order to create accountability, a small stipend of \$200 will be paid to each student who successfully completes the internship. This would allow us to place 30 students. The additional \$1000 would cover the cost for a teacher to run short job training sessions, time for making community connections, and time for following up on all students. The teacher rate is \$50 allowing the teacher 20 hours to run this program.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

The requested funds are necessary to carry out this program. If we receive partial funding, we will seek funds from local foundations.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Established in 1985, the Santa Barbara Education Foundation is a 501(c)3 organization that promotes private support of public education. SBEF serves as a fiscal sponsor for a broad range of valuable community programs. Innovate promotes independent, critical thinkers who express their unique voices and thrive through creativity and personalized, student-driven experiences that prepare them to contribute positively to their community and excel in college, their careers and personal endeavors.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.	SBEF serves as a fiscal sponsor for a broad range of educational programs. Innovate is the only program in our district to target students from low to moderate-income homes both academically and emotionally. Our students come from Goleta, Isla Vista, and Santa Barbara. We partner with Riviera Therapy, GVJH, Goleta Union Schools, Restoring Us, Michael Katz, and multiple local businesses. Students mentor younger students at both the local junior high and elementary schools.
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Is a nonprofit sponsor being used to sponsor the program?	Yes
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Fiscal Sponsor Letter of Support (Required for Fiscal Sponsors)

[SBEF_Innovate_DP_MOU_1.pdf](#)

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.	Innovate uses SBEF as our fiscal sponsor. All grant monies are managed through them. Innovate typically raises \$250,000 a year for mental health services and academic supports through grant writing. All expenditures are managed by the Innovate Director with 15 years of experience in running successful programs.
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Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?	No
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Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?	No
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Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Bill Woodard, Dos Pueblos High School, 805-968-2541, bwoodard@sbunified.org; Katie Spoza, Santa Barbara Education Foundation, 805-284-9125, katie@santabarbaraeducation.org

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[SBEF_501c3_Letter_of_Determination.pdf](#)

[SBEF_Board_August_2025.pdf](#)

[SBEF_PL_September_2025.pdf](#)

[SBEF_990_-_2024.pdf](#)

[SBEF_FY_2025_2026_Approved_Budget.pdf](#)

Optional Miscellaneous Documents

[Innovate_DP_Overview_1.pdf](#)

Organization Contact Kelly
Choi

Title Director, Innovate DP

Email Address kchoi@sbunified.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 1,000.00	\$ 1,000.00
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)		
Equipment		
Supplies and Materials		
Direct Client Support / Participant Assistance	\$ 6,000.00	\$ 6,000.00
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)		
Total Expenditures	\$ 7,000.00	\$ 7,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 7,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	
Donations/Fundraising	
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 7,000.00

Title	Education for All with the Santa Barbara Museum of Art	02/06/2026
	by Andrew Doran in FY 2026 Goleta City Grant	id. 53103594
	adoran@sbma.net	

Original Submission 02/06/2026

Score	n/a
	Part 1: Program Information
Program Name	Education for All with the Santa Barbara Museum of Art
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	SBMA requests support for its countywide student education program, serving K–12 students through free, curriculum-aligned arts learning. The program operates in partnership with school districts across Santa Barbara County, including the Goleta Union School District. Students participate in art-making classes in their classrooms and Museum-based gallery tours and workshops during the school day. SBMA tracks attendance, participation, and educator feedback.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	4000
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Yes. The program supports Goleta Strategic Goal 2.2 by enhancing community vitality through free cultural arts education. As school budgets shrink, access to arts education is under-met. SBMA improves quality of life for Goleta youth and families.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

No. SBMA is ADA accessible and designs programs to be inclusive. Accommodations include accessible facilities, flexible seating, sensory-friendly approaches, bilingual educators and materials, & advance coordination to meet individual access needs.

If your program takes place on school grounds, have you received permission and approval from the appropriate school? Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

El Camino Elementary School; Kimberli Corral, Art Teacher

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

City of Goleta grant funds will support the purchase of art supplies and materials for SBMA's student education programs serving Goleta schools throughout the year. Funds will cover consumable materials used in repeated classroom lessons and Museum-based workshops for hundreds of students. Costs are based on per-student supply kits, instructional materials, and replenishment needs to ensure high-quality, hands-on art experiences.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes. City of Goleta funds are vital to sustaining free student education programs amid school budget cuts. Any partial funding would be supplemented through foundation grants, individual donors, and institutional support to ensure program delivery.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

The mission of the Santa Barbara Museum of Art is to integrate art into the lives of people.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

SBMA serves Goleta residents through countywide education programs delivered both at the Museum and directly within Goleta schools. SBMA maintains an ongoing partnership with the Goleta Union School District, providing free, curriculum-aligned art instruction, classroom art-making, and Museum visits for students during the school day. Programs ensure consistent access to arts education for Goleta students.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

SBMA has extensive experience managing public and private grant funds to deliver education programs at scale. Dedicated education, development, and finance staff oversee program planning, budgeting, and compliance. Grant funds are tracked by program using established financial controls, internal review processes, and senior leadership oversight. SBMA has a strong record of meeting grant objectives, reporting requirements, and timelines, including foundation grants.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Patsy Hicks, Education Director at the Santa Barbara Museum of Art, phicks@sbma.net, 805-884-6432 ; Stacy Cullison, Director of Institutional Advancement, scullison@sbma.net, 805-884-6468

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[Board_of_Directors_Sheet_SBMA.pdf](#)

[SBMA_501c3_IRS_Tax_Exempt_Letter.pdf](#)

[SBMA_990.pdf](#)

[FY26_Budget_SBMA.pdf](#)

[SBMA_Balance_Sheet_FY23.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Andrew
Doran

Title Development Manager

Email Address adorán@sbma.net

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	\$ 25,000.00
Municipal (Other Cities)	
School District	\$ -
Foundations/Trusts	\$ 200,000.00
Donations/Fundraising	\$ 502,656.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 737,656.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 480,608.00	
Fringe Benefits & Payroll Taxes	\$ 128,162.00	
Occupancy (Rent and Utilities)	\$ -	
Equipment		
Supplies and Materials	\$ 98,886.00	\$ 10,000.00
Direct Client Support / Participant Assistance	\$ 20,000.00	
Marketing & Outreach (Printing, Advertising)	\$ -	
Travel, Mileage & Training (Program-Related)	\$ 10,000.00	
Other Expenditures (Note 1)		
Total Expenditures	\$ 737,656.00	\$ 10,000.00

Title	Scholarships	02/05/2026
	by DeeDee Conrad in FY 2026 Goleta City Grant	id. 53094998
	grants@sbscholarship.org	

Original Submission 02/05/2026

Score	n/a
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Part 1: Program Information

Program Name	Scholarships
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Amount Requested	10000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
--	--

Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	The program provides need-based scholarships to Santa Barbara County students pursuing undergraduate, graduate, or vocational education. Funds will support Goleta residents, with eligibility based on home address rather than high school due to transfers and private/home schools. Awards are monitored via enrollment and academic progress. UCSB research shows recipients graduate at or above national rates, confirming program effectiveness for low-income, first-generation, and Latinx students.
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	207
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Yes. The program advances equity, inclusion, and access by reducing financial barriers for low-income, first-generation, and Latinx Goleta students, strengthening long-term economic opportunity and college completion rates.
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Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

No. The program has no physical barriers and ensures inclusive access through accessible online applications, bilingual materials, alternative formats upon request, and individualized advising accommodations for students with disabilities.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

The proposed budget for this program totals \$10,000 and is funded by a grant from the City of Goleta. All funds are allocated exclusively to scholarship awards for eligible Goleta recipients. No personnel, administrative, operational, or overhead expenses are included, ensuring that 100% of the budget directly supports students through scholarship funding.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

This funding is vital to provide scholarships for Goleta students. If partially funded, SFSB will supplement awards through individual donors, private foundations, and existing scholarship funds to ensure students receive support.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

The Scholarship Foundation of Santa Barbara inspires, encourages, and supports Santa Barbara County students to and through college, graduate, and vocational school by providing information, advising, and scholarships.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

SFSB serves Goleta residents through countywide scholarship awards and free financial aid advising. Goleta students access services online, through high school partnerships, and at community-based workshops. SFSB collaborates with local schools, counselors, and nonprofits to ensure Goleta students are informed, supported, and able to pursue higher education.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

SFSB manages millions in scholarships annually with audits and 13 consecutive four-star Charity Navigator ratings. Staff oversee applications, advising, and donor reporting. Research data shows recipients graduate at or above national rates, proving effective scholarship management and student support in Goleta.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Marty Plourd, Community West Bank, mplourd@communitywestbank.com, (805) 692-5821 ; John Illgen, Retired from Northrup Grumann, johndesmondillgen@gmail.com, (805) 453-8362

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[SFSB_IRS_Determination_Letter.pdf](#)

[SFSB_Board_Roster_2025-2026.pdf](#)

[SFSB_Balance_Sheet_Ending_12.31.25.pdf](#)

[SFSB_Financial_Summary_Ending_12.31.25.pdf](#)

[SFSB-2024_990.pdf](#)

[SFSB_FY25-26_Budget.pdf](#)

Optional Miscellaneous Documents

[SFSB_Annual-Report-2024.pdf](#)

Organization Contact DeeDee
Conrad

Title Grant Writer

Email Address grants@sbscholarship.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	
Donations/Fundraising	
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 10,000.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)		
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)		
Equipment		
Supplies and Materials		
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)	\$ 10,000.00	\$ 10,000.00
Total Expenditures	\$ 10,000.00	\$ 10,000.00

Title	Nedley Depression and Anxiety Community Recovery Program	02/07/2026
	by Shannon Gott in FY 2026 Goleta City Grant	id. 53107488
	shannon.gott@gmail.com	

Original Submission 02/07/2026

Score	n/a
	Part 1: Program Information
Program Name	Nedley Depression and Anxiety Community Recovery Program
Amount Requested	7500
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	The proposed program core is an eight-week course meeting Tuesdays, 6:30–8:30 p.m. Open to adults and youth 12+ that seek to improve mental health and resilience, it benefits individuals with/without depression. Sessions guided by trained staff include video instruction, small groups, and lifestyle tracking. Progress is monitored through pre/post assessments and weekly check-ins to measure outcomes and support accountability. To date, 94% of 10,000+ participants improve by the program end.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	50
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Santa Barbara County's depression rates exceed state averages and 2030 targets, with behavioral health identified as a priority. This program meets that need, advancing Goleta's Strategic Plan to improve quality of life & support economic vitality.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

The program is held at the Goleta Community Center auditorium with step-free entry, accessible restrooms, large screens, and sound equipment. Activities are adaptable, with seating options, and extended time available to ensure inclusivity.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Funds support four categories: occupancy, supplies/materials, marketing, and food. Occupancy reflects 10 sessions at the Goleta Community Center (info session and graduation included). Supplies are prices online and based on 50 participants (kits, session props, decorations; kits paid by participants). Marketing covers local print/online ads and flyers; quotes supplied by vendors. Food funds in-session nutrition demos and a catered graduation; prices reflect food and labor costs from caterer.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Yes, the money is vital for us to hit our maximum participants quota and for the participants to experience the full program. Ways in which we could make up any differences is to fundraise or apply for grant funds through our organization.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

The fees cover the program participant kit materials (\$100/participant). Kits include online assessments and books/workbooks used in small group activities to support program topics. Fundraising provides scholarships to subsidize kit cost.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Because our organization has many levels, the mission of the group responsible for executing the program is as follows: To promote optimal health through holistic education that integrates lifestyle medicine, emotional resilience, and practical strategies within a compassionate community setting.

<p>Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.</p>	<p>We serve Goleta residents through accessible, evidence-based wellness programs focused on root cause prevention and recovery. The proposed program is held at the Goleta Community Center and open to all community members, whether experiencing depression or anxiety, seeking prevention strategies, or supporting loved ones. Outreach includes community announcements and word-of-mouth promotion, and collaboration with local wellness and support networks.</p>
<p>Is a nonprofit sponsor being used to sponsor the program?</p>	<p>No</p>
<p>Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.</p>	<p>Our organization has managed prior Nedley programs serving 43 participants, gaining experience in coordination, facilitation, and outcomes tracking. Trained staff and volunteers ensure quality delivery. Though previous funding was donation-based, we have sound financial controls and are prepared to manage grant funds responsibly. This experience and structure position us to scale the program and deliver measurable benefits to Goleta.</p>
<p>Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?</p>	<p>No</p>
<p>Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?</p>	<p>No</p>

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Cindy Gasser (Cindybriz@yahoo.com, 805-450-4686) and Carlene Latouche (Quinland.Carlene@gmail.com, 954-982-4995)

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[990_-_see_third_page_-_Santa_Barbara_Seventh_Day_Adventist_Church.pdf](#)
[2025_Organization_Budget_-_Santa_Barbara_Seventh_Day_Adventist_Church.pdf](#)
[IRS_Determination_-_Older_Form_-_Santa_Barbara_Seventh_Day_Adventist_Church.pdf](#)
[Balance_Sheet_-_Santa_Barbara_Seventh_Day_Adventist_Church.pdf](#)
[Profit_and_Loss_Statement_2025_-_Santa_Barbara_Seventh-Day_Adventist_Church.pdf](#)
[IRS_Determination_Letter_-_Santa_Barbara_Seventh_Day_Adventist_Church.pdf](#)
[Alternate_to_990_-_Audited_Statement_-_Santa_Barbara_Seventh_Day_Adventist_Church.pdf](#)
[Board_Members_-_Santa_Barbara_Seventh_Day_Adventist_Church.pdf](#)
[Organizational_Narrative.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Shannon
Gott

Title Santa Barbara SDA Church Board Member

Email Address shannon.gott@gmail.com

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)		
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)	\$ 2,192.00	\$ 2,192.00
Equipment		
Supplies and Materials	\$ 6,447.00	\$ 1,447.00
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)	\$ 2,665.00	\$ 2,665.00
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)	\$ 1,196.00	\$ 1,196.00
Total Expenditures	\$ 12,500.00	\$ 7,500.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 7,500.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	
Donations/Fundraising	
Fees	\$ 5,000.00
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 12,500.00

Title	Early Strings Training Program (ESTP)	02/04/2026
	by Kyle Abello in FY 2026 Goleta City Grant	id. 53083091
	sbstringsdirector@gmail.com	

Original Submission	02/04/2026
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Score	n/a	
	Part 1: Program Information	

Program Name	Early Strings Training Program (ESTP)
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Amount Requested	6000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Our “Early Strings Training Program” is in its fifth year, and our target demographic is those of significant socioeconomic need who would otherwise be unable to afford an instrument (we provide one), weekly one-on-one instruction (1-2 hours), and monthly group instruction (1-2 hours). Eligibility follows free and reduced lunch qualification. Professional string teachers provide all instruction supported by operations manager, Pilar Montes, who acts as liaison to each of the families.
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	100
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Yes. There are no longer string programs in public schools. Early exposure to these instruments is crucial for quality learning, There is no other program in SB County devoted to training the string instruments. Meets goal of City Key Initiative #2.
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Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

There are no barriers to instruction. Facilities are ADA accessible. We have bilingual outreach for Spanish speaking families and our instructors have experience teaching neurodivergent (Autism spectrum, etc.) children.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

The ESTP Program consists of professional string instructors providing quality musical education on student sized instruments to eligible kids. The largest cost is for the instructors (3 faculty provide approx. 600 hours of one on one and group instruction throughout the year). The second largest cost is for direct client support, namely scholarships that cover the full year of orchestra for ESTP students. Goleta grant funds would assist in these two areas.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

The requested fund are vital to expanding access through the ESTP program. We are pursuing other foundation grants such as the SB Bowl as well as from continuing donors. If we are unable to raise the full amount, we would reduce the number of kids.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

Most ESTP students are offered 100% scholarship due to demonstrated need. In rare cases, we use a sliding scale of up to 50% if a family has need but not free/reduced lunch eligibility.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Santa Barbara Strings is a non-profit organization providing comprehensive training for musicians from ages 4 to 19 in three progressive levels of string orchestras and chamber ensembles. Open to all students, Santa Barbara Strings aims to inspire lifelong understanding and appreciation of classical music of all eras.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

One half of our orchestra program students are Goleta residents, as are a majority of our faculty, Operations Director Pilar Montes, and board member and ESTP champion Chris Elstner. We provide complimentary concerts at local convalescent homes, and our two annual concerts reach hundreds of Goleta and greater Santa Barbara County residents. Additionally we have recently partnered with the City of Buellton to provide an afterschool strings program.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

SB Strings is a strong organization entering its 16th year. In addition to a dynamic and experienced Artistic Director (and founder) Mary Beth Woodruff, we have an excellent Operations Director, Pilar Montes, who manages logistics and family engagement, and we have recently hired our first Executive Director to handle our expanding outreach, administration, and grant writing needs. We have a stellar grant track record with Goleta, Buellton, SB Foundation, PASF, and many more community orgs.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Dr. Christopher Elstner, (805)450-7430, clelstner51@gmail.com; Andrew Jayich, (781)367-2720, jayich@gmail.com

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[IRS_Exemption_Letter.pdf](#)

[SBStringsBoard.docx](#)

[Santa_Barbara_Strings_Balance_Sheet_June_30_2025.pdf](#)

[Budget_FY26_Imported_to_QuickBooks.pdf](#)

[RRF1_with_990.pdf](#)

Optional Miscellaneous Documents

[IMG_9193.JPG](#)

[SBStringsSpring2025.jpg](#)

[SpringConcert1.JPG](#)

[Senalp_Family_Letter_to_SBS.pdf](#)

[KCBX_profile_of_SB_Strings_12.22_-_LINK.docx](#)

Organization Contact Kyle
Abello

Title Executive Director

Email Address sbstringsdirector@gmail.com

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 7,000.00	\$ 3,000.00
Fringe Benefits & Payroll Taxes	\$ -	
Occupancy (Rent and Utilities)	\$ -	
Equipment	\$ 500.00	
Supplies and Materials	\$ 300.00	
Direct Client Support / Participant Assistance	\$ 4,500.00	\$ 3,000.00
Marketing & Outreach (Printing, Advertising)	\$ 500.00	
Travel, Mileage & Training (Program-Related)	\$ 1,200.00	
Other Expenditures (Note 1)		
Total Expenditures	\$ 14,000.00	\$ 6,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 6,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$ 5,000.00
Donations/Fundraising	\$ 2,000.00
Fees	\$ 1,000.00
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 14,000.00

Title	Music Education Programs for Goleta Youth (MEPs)	02/06/2026
	by Juli Askew in FY 2026 Goleta City Grant	id. 53097555
	1330 State Street, STE 102 Santa Barbara, California 93101 United States 805 898 9386 grantwriter@thesymphony.org	

Original Submission 02/06/2026

Score	n/a	
	Part 1: Program Information	
Program Name	Music Education Programs for Goleta Youth (MEPs)	
Amount Requested	10000	
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.	
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	MEPs for Goleta youth include the free Music Van Program and Youth Ensembles Program (YEP) for 3-12th graders. MVP operates 1–2 days/week during the school year, delivering 2, 1-hour sessions at Title I Goleta schools during the school day @ 9 schools. YEPs provide dedicated instruction afterschool and rehearse Sep–May (1.5–2.5 hrs). YE presents 6 free community concerts annually. MEPs are monitored through school data, participation, and feedback guided by national music education assessments.	
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	520	

<p>Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.</p>	<p>Yes, by providing the only symphony-led music education in the County, prioritizing Title I schools and underserved students. It supports equitable access to the arts, aligns with Goleta goals, and helps schools meet CA's expanded learning mandate.</p>
<p>Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.</p>	<p>School programs operate on campuses in ADA-accessible classrooms. Instruction is adaptable collaborating with teachers to support students with disabilities. Youth Ensembles rehearse and perform in accessible venues with needed accommodations.</p>
<p>If your program takes place on school grounds, have you received permission and approval from the appropriate school?</p>	<p>Yes</p>
<p>If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.</p>	<p>Brandon,El Camino,Foothill,Hollister,Isla Vista,Kellogg,La Patera,Mountain View,St. Raphael's School,Kim Bruzzese, Dir. Instructional Services GUSD</p>
	<p>Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.</p>

Budget Narrative Other expenses include: Dues/subscription, contract services, music/video recording, YE guest conductors, and allocated admin. The MEP budget supports personnel, operating, and instructional costs calculated based on program use and standard rates. The \$10,000 Goleta City Grant will fund \$8,000 in teaching artist time and \$2,000 in supplies, coordinated with foundation, fundraising, and tuition fees from YEs to support high-quality, accessible programs for Goleta residents.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Funding assistance is vital to the Symphony's ability to provide free music education. Programs are supported by private foundations, corporations, and the City of Goleta's annual grant, plus a \$250,000 annual endowment draw to support operations.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta? Yes

If yes, please list each source and provide the amount, purpose, and funding period or expiration date. This includes grants, contracts, sponsorships, in-kind contributions, or any other financial support from any City department or program. Clearly identify whether the funding is confirmed, pending, or anticipated. Describe how the funding request differs from what is already being funded or asked for.

The Symphony was approved for a 2025_26 City of Goleta grant in support of its music education programs that serve Goleta students for \$5,700.

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

Music Van is provided for free. Youth Ensembles are tuition based (yearly fee, Camerata, \$535; Philharmonia, \$640; Youth Symph, \$760). Scholarships for tuition, free instruments & private lessons are offered to approx 30% low-income students in YE's

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

The mission of the Santa Barbara Symphony is to enrich the lives of Santa Barbara residents and visitors by producing and presenting the highest quality musical experiences performed with artistic excellence, which is accessible to the entire community, and to inspire a passion for symphonic music in the next generation of audience members, musicians, and stakeholders.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.	The Symphony provides free music instruction and enrichment for 3rd-12th-grade Goleta students through its Music Van Program at Goleta elementary schools. Youth Ensembles provide dedicated instruction and live performance opportunities, and scholarships are provided for low-income students. We partner with local school districts to expand access and enrichment opportunities and engage the community through free concerts, school outreach, and free family-accessible performances.
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Is a nonprofit sponsor being used to sponsor the program?	No
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Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.	The Symphony has over 70 years of experience delivering high-quality arts education and stewarding funds. Professional education staff, teaching artists, and administrators oversee program delivery, budgeting, and compliance. Financial controls include board oversight, segregation of duties, regular reporting, and annual independent audits. The Symphony has a strong record managing public and private grants, meeting requirements, and delivering programs on time and on budget.
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Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?	No
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Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?	No
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Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

1. Sandy Adams, Goleta Orchestra and Band Program/Teaching Artist, 805-967-2061, saninsb@yahoo.com
2. Krista Beard at La Patera Elementary, 805-403-4384, kbeard@gusd.us

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[501c3_IRS_Non_Profit_Ltr_SBSymphony.pdf](#)

[2025-26_Board_List_SBS_MST.pdf](#)

[01_Statements_of_Financial_Position-SBS.pdf](#)

[FY2026_Operating_Budget_SBS_Approved.pdf](#)

[FY2024_990_Public_Disclosure_Copy_SBS.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Juli
Askew

Title Development Manager

Email Address grantwriter@thesymphony.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	\$ -
State	\$ -
County	\$ -
Municipal (Other Cities)	\$ -
School District	\$ -
Foundations/Trusts	\$ 221,240.00
Donations/Fundraising	\$ 125,000.00
Fees	\$ 75,560.00
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 431,800.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 235,844.00	\$ 8,000.00
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)	\$ 22,556.00	
Equipment	\$ 7,200.00	
Supplies and Materials	\$ 4,000.00	\$ 2,000.00
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)	\$ 5,100.00	
Travel, Mileage & Training (Program-Related)	\$ 3,216.00	
Other Expenditures (Note 1)	\$ 153,884.00	
Total Expenditures	\$ 431,800.00	\$ 10,000.00

Title	Home & Hospice Care for Low-Income Individuals	01/31/2026
	by Kate Grove in FY 2026 Goleta City Grant	id. 53014726
	kate@sarahhousesb.org	

Original Submission 01/31/2026

Score	n/a
	Part 1: Program Information
Program Name	Home & Hospice Care for Low-Income Individuals
Amount Requested	10000
Please select the category of funding being requested.	Homeless & Low-Income Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Sarah House offers a final home and hospice care for low-income individuals with substandard housing or who are currently unhoused in Santa Barbara County. When an individual comes to Sarah House, we create a personalized care plan and they move into a private bedroom. Our 24/7 caregivers meet the patient's needs, which range from medical needs to human touch and spiritual support, until the end of their lives. We operate year-round, serving about 70 low-income, terminal individuals annually.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	11
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	There is no other organization like Sarah House in the City of Goleta for low-income individuals at the end of their lives. Our services align with the City's goal to provide social welfare assistance for disadvantaged and/or marginalized groups.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Sarah House is ADA-compliant. 100% of our residents are disabled by the nature and characteristics of their hospice diagnosis. Hence, all our services are focused on the accommodation of our guests from the moment they arrive until their death.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Sarah House requests a \$10,000 grant to support the salaries of our Residential Assistant Caregivers. All of our caregivers are Certified Nursing Assistants. Sarah House funded the education of these staff members and covers the costs of all continuing education and certifications. They provide 24/7 care for those we serve and carry a significant burden of grief everyday. Sarah House is proud that every employee is paid a Santa Barbara living wage.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

<p>Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.</p>	<p>Sarah House provides a critical service for residents of Goleta that funding from the City would help to support. We will continue to seek funding from other sources, including local foundations, individuals, and the City and County of Santa Barbara.</p>
<p>Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?</p>	<p>No</p>
<p>Is there a cost to participate in the program?</p>	<p>Yes</p>
<p>If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.</p>	<p>Sarah House operates on a sliding scale with the cost being 80% of a resident's monthly income, 30% which goes towards rent and 70% towards the cost of supportive care and services. This comes out to around \$40-\$60 per month for most residents.</p>
<p></p>	<p>Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.</p>
<p>What is your organization's mission statement?</p>	<p>Sarah House offers a final home and hospice care at 2612 Modoc Road in Santa Barbara for approximately 70 low-income individuals with substandard housing or who are currently unhoused each year. Sarah House continues its original mission by providing for people with HIV/AIDS. Additionally, it offers comfort and assistance to the family and friends of its residents. It trusts that its work adds to the growing body of hospice wisdom. All of this is carried out with "extraordinary kindness."</p>

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

11 of 70 individuals served in 2025 came to us from Goleta, representing over 15% of the population served. Sarah House provides low-income adults aged 18+ with inadequate housing and/or care with a home at the end of their lives, including a private bedroom, 24/7 care from our bilingual and bicultural Caregivers, home-cooked meals, and support for their family and friends who are left behind. Our residents pay a highly subsidized rate of \$40-60/month compared to \$8,000+ at other facilities.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

Sarah House's Board of Directors and leadership staff have extensive experience managing grants and contracts. Our Executive Director has been with the organization since 2019 and House Manager since 2004. We are currently managing grants from the City and County of Santa Barbara, as well as many private foundations. In the past, the organization has also managed contracts with the State.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

1. Kate Grove, Executive Director at Sarah House: kate@sarahhousesb.org and 805-745-9116
2. Paloma Espino, House Manager at Sarah House: paloma@sarahhousesb.org and 805-637-8048

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[Sarah_House_IRS_Determination_Letter.pdf](#)

[Sarah_House_Board_Roster.pdf](#)

[Sarah_House_2023_Form_990.pdf](#)

[Sarah_House_FY_2025-26_Budget.pdf](#)

[Sarah_House_SB_Internal_Audited_Financials_FY_2025.pdf](#)

Optional Miscellaneous Documents

[Sarah_House_Sliding_Scale_Fee_Schedule.pdf](#)

Organization Contact Kate
Grove

Title Executive Director

Email Address kate@sarahhousesb.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	\$ 25,000.00
Municipal (Other Cities)	\$ 17,900.00
School District	
Foundations/Trusts	\$ 613,000.00
Donations/Fundraising	\$ 140,000.00
Fees	\$ 120,634.00
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 926,534.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 667,000.00	\$ 10,000.00
Fringe Benefits & Payroll Taxes	\$ 128,000.00	
Occupancy (Rent and Utilities)	\$ 85,800.00	
Equipment		
Supplies and Materials	\$ 86,475.00	
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)	\$ 650.00	
Travel, Mileage & Training (Program-Related)	\$ 6,700.00	
Other Expenditures (Note 1)	\$ 106,000.00	
Total Expenditures	\$ 1,080,625.00	\$ 10,000.00

Title	SEE Vision Care (SVC) Goleta Program	02/05/2026
	by Guadalupe Schweitzer in FY 2026 Goleta City Grant	id. 53086327
	grants@seeintl.org	

Original Submission	02/20/2026
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Score	n/a	
	Part 1: Program Information	
Program Name	SEE Vision Care (SVC) Goleta Program	
Amount Requested	5000	
Please select the category of funding being requested.	Homeless & Low-Income Programs.	
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	SEE Vision Care (SVC)—Goleta provides free eye care to uninsured and low-income residents of California’s Central Coast. The clinic operates Monday–Friday, 9am–5pm, offering screenings, comprehensive exams, free prescription glasses, and referrals for surgery and specialty care through partners. Services are monitored through patient data, outcomes, and referrals. In 2025, the Goleta clinic served 4,000 patients—over half of all SVC clients—improving access and health equity.	
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	4000	
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	SEE Vision Care addresses an under-met health need by providing free eye exams, glasses, and surgery referrals to uninsured and underserved residents, advancing the City of Goleta’s goals of health equity, access to care, and community well-being.	

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

No, SVC does not have any barriers that would prevent a person with a disability from gaining employment or obtaining services. Our clinics comply with ADA accessibility guidelines.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

Yes

If yes, list the school's name and the name and position title of the authorized representative from whom permission was obtained.

Liz Christen, Lead Nurse, Santa Barbara Unified School District, Hilda Maldonado, Superintendent

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Goleta City Grant funds will support core program costs, including staff time for the Director of Local Initiatives, the Domestic Program Specialist, and a full-time optometrist—three essential roles in delivering free vision care—as well as clinic rent and utilities for the Goleta site where residents receive services. Additional funding includes \$150,000 from individual donors, \$220,106 from foundation grants, and \$67,017 in Medi-Cal reimbursements.

Note 1 (other exp)* -\$17,944 Admin expenses

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

City funds are vital to deliver care in Goleta. Any partial funding is supplemented through local donors, corporate and foundation grants, community campaigns, sponsorships, and unrestricted funds, ensuring uninterrupted, high-quality vision care.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

SEE International envisions a world where preventable blindness no longer exists, and quality eye care is accessible to all. SEE breaks the cycle of hardship caused by visual impairment through direct vision services, training ophthalmologists in cost-effective cataract surgery, advocating for vision health, and investing in sustainable programs that address inequities in eye care in the U.S. and across more than 45 countries and local communities.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

SEE Vision Care serves Goleta residents through its year-round clinic at 295 Pine Ave and local outreach events. SVC partners with Goleta and Santa Barbara Unified School Districts, County agencies, and local clinics to provide free screenings, exams, glasses, and surgical referrals to low-income children, seniors, veterans, and uninsured families across Santa Barbara County

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

SEE Vision Care has a strong capacity to manage grant funds and deliver services. The program is led by Anisha Verdialez, Director of Local & Domestic Programs, who oversees strategy, partnerships, staffing, and compliance, and Dr. Elise Swanson, full-time optometrist at the Goleta clinic. SEE has decades of successful grant performance, established financial controls, experienced bilingual staff, and a proven track record delivering high-quality vision care to underserved communities.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Dr. Randall Goodman, MD, FACS - Ophthalmologist, Shepard Eye Center
dr.goodman@shepardeye.com - (805) 406- 3627
Dru A. Hartley - Director of Philanthropy, Sansum Clinic
dhartley@sansumclinic.org - (805) 681-7726

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter)	checked
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List of Board Members	checked
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Most Recent Year-End Balance Sheet or Profit/Loss Statement	checked
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Most Recent Year-End Form 990	checked
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Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[SEE_International_2025_Balance_Sheet.pdf](#)

[SEE_2024-Form-990-Federal-return-public-inspection.pdf](#)

[SEE_Int_IRS_501C3_Letter.pdf](#)

[2026_Board_of_Directors.pdf](#)

[2026_Organization_Budget-SEE_INTERNATIONAL.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Margaret
Drake

Title Director of Development

Email Address grants@seeintl.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 5,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$ 220,106.00
Donations/Fundraising	\$ 150,000.00
Fees	\$ 67,017.00
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 442,123.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 370,797.00	\$ 2,500.00
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)	\$ 52,264.00	\$ 2,500.00
Equipment		
Supplies and Materials	\$ 20,800.00	
Direct Client Support / Participant Assistance	\$ 11,204.00	
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)	\$ 17,944.00	
Total Expenditures	\$ 473,009.00	\$ 5,000.00

Title	Crisis Intervention Program	02/07/2026
	by Nestor Frausto in FY 2026 Goleta City Grant	id. 53107598
	nestor@sbstesa.org	

Original Submission 02/07/2026

Score	n/a
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Part 1: Program Information

Program Name	Crisis Intervention Program
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Amount Requested	3000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	The program offers survivors of sexual assault, their families, and friends a 24-hour hotline, case management, advocacy, accompaniment, and information and community referrals. It serves ages 13 years and older. Services are available to all segments of the community, particularly low-income individuals and families, the unhoused, and persons with disabilities. Office hours are Monday to Friday, 9:00 am to 5:00 pm.
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	30000
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	Yes, the program helps to "Maintain a Safe and Healthy Community." The program goals are to mitigate the trauma of the sexual assault and build a survivor's resiliency. It gives survivors a safe space and helps them on their healing journey.
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Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

STESA clients access services via the 24-hour hotline, virtually, or by visiting the office with or without an appointment. Brochures are available with large font, no pictures, or other unnecessary characters. All facilities are ADA-compliant.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

The City of Goleta is a long-term partner in supporting the organization's mission and vision. The continuity of funding ensures stability and assurance that programs and services will remain open to survivors of sexual assault and assist in reaching the program's goal. City of Goleta funds will cover the partial salaries of Crisis Intervention staff members when they respond to survivors and their significant others who are Goleta residents.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

<p>Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.</p>	<p>Yes. If funds are not allocated, we will have to consider various scenarios that may impact the availability of services. This creates a waiting period for services, in particular for counseling services.</p>
<p>Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?</p>	<p>No</p>
<p>Is there a cost to participate in the program?</p>	<p>No</p>
	<p>Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.</p>
<p>What is your organization's mission statement?</p>	<p>Standing Together to End Sexual Assault (STESA) empowers people through healing and social change to eliminate all forms of sexual violence. We are committed to transforming lives by providing services and education to meet the needs of our diverse community.</p>
<p>Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.</p>	<p>Counseling without an appointment 24/7 over the phone through the hotline, in-person, or virtually. Ongoing counseling for up to ten sessions. Accompaniments to sexual assault-related appointments. Advocacy with other organizations or individuals on behalf of a client to achieve a particular goal or result desired by the client. In-person response to SART Exams to support survivors through the legal and medical collection of a forensic exam. All services are available in English and Spanish.</p>
<p>Is a nonprofit sponsor being used to sponsor the program?</p>	<p>No</p>

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

STESA's board of directors sets organizational policies and holds fiduciary responsibility. The Board establishes financial controls to create checks and balances within the organization. The organization conducts an annual audit to be compliant with CalOES Service Standards. STESA also takes part in Site Visits by CalOES every two years to ensure that the organization is meeting the standards of a Rape Crisis Center set by the government.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Melissa Guillen, University of California Cooperative Extension , 919-623-2302,melissadanehey@gmail.com. Scott McCann, Retired, 805-964-0294,scottkurtzmccann@gmail.com

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose? No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent Organization Budget, Reviewed and Approved by Board of Directors checked

Required Documents File Upload

[IRS_501c3_Status_2018.pdf](#)

[STESA_6.30.24_990_Copy_-_Public_Inspection.pdf](#)

[June_2025_revd_9.16.2025.pdf](#)

[STESA_Budget_2025-2026.pdf](#)

[Board_Roster_City_of_Goleta.pdf](#)

Optional Miscellaneous Documents

Organization Contact Nestor
Frausto

Title Executive Director

Email Address nestor@sbstesa.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 95,000.00	\$ 3,000.00
Fringe Benefits & Payroll Taxes	\$ 15,000.00	
Occupancy (Rent and Utilities)	\$ 50,000.00	
Equipment		
Supplies and Materials		
Direct Client Support / Participant Assistance	\$ 5,000.00	
Marketing & Outreach (Printing, Advertising)	\$ 2,000.00	
Travel, Mileage & Training (Program-Related)	\$ 1,000.00	
Other Expenditures (Note 1)		
Total Expenditures	\$ 168,000.00	\$ 3,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 3,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	\$ 30,000.00
Municipal (Other Cities)	\$ 40,000.00
School District	
Foundations/Trusts	\$ 65,000.00
Donations/Fundraising	\$ 30,000.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 168,000.00

Title	Early Childhood Education Program	02/05/2026
		id. 53092125
	by Melissa Walker in FY 2026 Goleta City Grant	
	grants@storytellercenter.org	

Original Submission	02/05/2026
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Score	n/a
	Part 1: Program Information

Program Name	Early Childhood Education Program
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Amount Requested	5000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Storyteller seeks \$10,000 to support its trauma-informed early childhood education program serving low-income children ages six weeks to five years in Santa Barbara County. The program operates Monday–Friday from 7:30am–5pm for 220 days a year across three sites, serving families facing food, housing, and income insecurity and providing wrap around support. Program quality is monitored through observational development assessments, surveys, licensing visits and NAEYC and QRIS accreditation.
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	27
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	We have a critical shortage of affordable childcare, especially for low-income families. We provide low-to-no cost early education for children facing adversity. Over 90% of parents are employed because their children attend our year-round program.
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Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

We do not have any barriers that would limit individuals with disabilities from participating in our program.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

A \$10,000 grant would support one of our most critical needs: our food program. We provide daily breakfast, lunch, and snacks, plus formula and purées for infants. With 96% of families facing chronic food insecurity, this support is essential. Our food program costs \$160,000 annually, while the Federal Child & Adult Care Food Program reimburses \$81,000, leaving us to raise over half each year. In response to rising economic hardship, we launched an on-site food pantry for families this year too.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

These are funds are critical to sustaining our food program for 148 unduplicated children over 220 days. As federal reimbursements cover only part of this cost; the rest must be fundraised. We continue to pursue diversified funding strategies.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Storyteller is a year-round therapeutic program providing high-quality early childhood education and comprehensive support services for children and their families facing adverse challenges in Santa Barbara County. Our vision is to empower every child and family we serve with the tools, education, and support needed to overcome adversity, thrive in our community, and build a brighter future.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

While our three locations are in central Santa Barbara, we serve low-income families across Santa Barbara County, with typically 30% from Goleta. Referrals come from agencies such as CADA, CALM, Tri-Regional Center, and local schools. Partners provide health screenings, family support services, and enrichment programs, while we collaborate with school districts to support IEPs and speech services, creating a connected, supportive community.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

Founded in 1988, Storyteller has a proven track record of delivering high-quality services to vulnerable children and families. We operate two fully licensed kitchens, with trained kitchen staff and annual Healthy Schools Act training for all employees. We serve over 39,000 meals annually. Strong financial controls and long-standing partnerships, including the Santa Barbara Food Bank, CACFP and the Santa Barbara Unified School District ensure effective grant management and program delivery.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Jon Clark, Storyteller Board, James S. Bower Foundation Work: (805) 564-8814 jon@jsbowerfoundation.org Carrie Towbes, Storyteller Board ,The Towbes Foundation Work: (805) 962-1500 ctowbesphd@cox.net

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[Storyteller_Budget_25-26_.pdf](#)

[IRS_Tax_Exmpt.pdf](#)

[Dec_25_PL.pdf](#)

[Dec_25_BS.pdf](#)

[Storyteller_6.30.24_990_Copy_-_Public_Inspection_3_1.pdf](#)

[Board_of_Directors_2025-2026.pdf](#)

Optional Miscellaneous Documents

[FY24-25_Impact_Report.pdf](#)

Organization Contact Melissa
Walker

Title Grant Writer

Email Address grants@wearestoryteller.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	\$ 81,000.00
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$ 20,000.00
Donations/Fundraising	\$ 49,000.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 160,000.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)		
Fringe Benefits & Payroll Taxes		
Occupancy (Rent and Utilities)		
Equipment		
Supplies and Materials		
Direct Client Support / Participant Assistance	\$ 160,000.00	\$ 10,000.00
Marketing & Outreach (Printing, Advertising)		
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)		
Total Expenditures	\$ 160,000.00	\$ 10,000.00

Title	The Quiet Between – Community Film Education & Cultural Arts Program	02/06/2026
	by Zilong Greyson in FY 2026 Goleta City Grant	id. 53106694
	visionz.inquiries@gmail.com	

Original Submission	02/06/2026
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Score	n/a
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Part 1: Program Information

Program Name	The Quiet Between – Community Film Education & Cultural Arts Program
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Amount Requested	10000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	This program provides a community-based arts and educational initiative led by a professional filmmaker. It includes a public educational workshop and moderated discussion focused on storytelling, filmmaking process, and creative career pathways. The program will be offered to Goleta residents and local artists, with emphasis on accessibility for emerging creatives and students. Activities will be monitored through attendance tracking and participant feedback.
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	25
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	This program addresses an under-met need for accessible arts education and creative career exposure in Goleta. It supports community vitality, expands access to arts, and aligns with City goals for inclusion, education, and cultural enrichment.
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Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

The program will be held in an ADA-accessible venue. No physical barriers are anticipated. Accommodations such as seating accessibility, clear communication, and advance notice of needs will be provided.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Grant funds will support direct program costs, including venue use, workshop materials, technical equipment, and professional facilitation time. Funds will also offset outreach and administrative costs required to deliver the educational program. Additional project costs are supported through fiscal sponsorship and private contributions.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

The requested funds are vital to deliver the program at no cost to participants. If partial funding is received, remaining costs will be covered through ongoing fundraising via Fractured Atlas, private donations, and in-kind support.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

The mission of Vision Z Productions, in partnership with Fractured Atlas, is to support independent storytelling through film and arts education by creating accessible, community-focused programs that foster creative expression, professional development, and cultural engagement.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

The organization serves Goleta residents through community-based arts education programs, including public workshops and discussions offered at accessible local venues. Outreach focuses on emerging creatives, students, and residents interested in arts education across Goleta and Santa Barbara County.

Is a nonprofit sponsor being used to sponsor the program?

Yes

Fiscal Sponsor Letter of Support (Required for Fiscal Sponsors)

[2026.2.6_The_Quiet_Between_IRS_Determination_Letter.pdf](#)

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

The program is led by an experienced independent filmmaker with a demonstrated record of managing project budgets, contracts, and production timelines. Fiscal oversight is provided through Fractured Atlas, which administers funds, reporting, and compliance. Prior projects have been completed on schedule and within budget, with successful festival outcomes, demonstrating the capacity to responsibly manage grant funds and deliver the proposed program

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Joyce Lao, theallyartistsgroup@gmail.com "The Ally Artists Group" Non Profit organization
Ian Shafer, iShafer@ucsb.edu. University of California, Santa Barbara 917-499-3702

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[2026.2.6_The_Quiet_Between_IRS_Determination_Letter.pdf](#)

[Board_List__Updated_2-27-2025.pdf](#)

[Fractured_Atlas.FY24.990.pdf](#)

[FY26_Operating_Budget_4.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Zilong
Greyson

Title Project director

Email Address visionz.inquiries@gmail.com

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 10,000.00	\$ 4,000.00
Fringe Benefits & Payroll Taxes	\$ -	\$ -
Occupancy (Rent and Utilities)	\$ 3,600.00	\$ 1,500.00
Equipment	\$ 3,000.00	\$ 2,000.00
Supplies and Materials	\$ 1,800.00	\$ 1,000.00
Direct Client Support / Participant Assistance	\$ -	\$ -
Marketing & Outreach (Printing, Advertising)	\$ 1,600.00	\$ 700.00
Travel, Mileage & Training (Program-Related)	\$ -	\$ -
Other Expenditures (Note 1)	\$ -	\$ 800.00
Total Expenditures	\$ 20,000.00	\$ 10,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	\$ -
Federal	\$ -
State	\$ -
County	\$ -
Municipal (Other Cities)	\$ -
School District	\$ -
Foundations/Trusts	\$ -
Donations/Fundraising	\$ 10,000.00
Fees	\$ -
Other Sources/Revenues (Note 3)	\$ -
Total Revenue	\$ 20,000.00

Title	United Boys & Girls Clubs, Goleta Club	02/04/2026
	by Taylor Swan in FY 2026 Goleta City Grant	id. 53082261
	tswan@unitedbg.org	

Original Submission 02/20/2026

Score	n/a
	Part 1: Program Information
Program Name	United Boys & Girls Clubs, Goleta Club
Amount Requested	10000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	<p>The Goleta Club offers homework assistance, organized athletics, computer lab, art and music lessons, STEAM programming, etc. Club hours are weekdays 2pm-6pm, Saturdays 10am-4pm, and school breaks and summer 8am-6pm.</p> <p>We monitor attendance via our Membership Tracking System; we monitor outcomes via the National Youth Outcomes Initiative (annual survey). Last year, we served 414 members in Goleta.</p> <p>The target population is youth in Goleta, primarily from low income and Latinx backgrounds.</p>
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	400
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	The program addresses an unmet need for guidance, wellness, and education programming among Goleta's underserved youth. The program supports the City's goals of community vitality/enhanced recreational opportunities and revitalizing Old Town.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

The Club is ADA accessible; we do our best to meet the needs of a member with any challenge. UBGC engages in a conversation to determine if there is a reasonable accommodation that can be provided that will not cause UBGC undue hardship.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Club staff is our primary program cost. The Club simply could not exist without our professional Club staff. Your grant will be used towards the program staffing expense.

The "other" expenses include insurance (\$17,952) and consultants and contracts (\$13,934).

The "other" line item in the income budget (\$281,644) is funds raised by our central administrative office. The "fees" income includes rentals of our facilities.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

Without funds, fewer students will have access to the Club. Program income does not cover expenses, so fundraising is necessary to ensure affordability. Other supporters include Southern California Edison, Deckers, and Costco.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

Yes

If yes, please describe the cost(s), including the amount, purpose, and any waivers, sliding-scale options, or reductions offered. Provide a copy of the fee schedule in the document section, if available.

There is a \$40 annual fee for after school and Saturday programming (while our annual cost per youth is approximately \$2,000). Summer programming is \$75 per week. Scholarships are provided to families who cannot afford the fees.

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

The mission of the United Boys & Girls Clubs of Santa Barbara County (UBGC) is to enable all young people, especially those who need us most, to reach their full potential as productive, caring and responsible citizens.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.	Our Clubs address the need for educational, emotional, and mental health support for youth in Goleta. Located at 5701 Hollister Ave, our Club provides Power Hour (daily homework assistance), healthy snacks and dinners every day, teen programming to prepare youth for college/careers, and Triple Play (daily physical activity programming).
Is a nonprofit sponsor being used to sponsor the program?	No
Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.	Our Clubs have been operating in Santa Barbara County for 85 years and are integrally connected to the communities we serve, especially for youth facing socio economic barriers to success. Our Clubs are uniquely equipped to offer these programs because of our history of success, dedicated staff, and nationally recognized program standards of the Boys & Girls Clubs of America. We have a strong team that manages several federal and state grant programs annually.
Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?	No
Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?	No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Cheyenne Brooks, Cox Communications, 805.972.2545, Cheyenne.brooks@cox.com; Michelle Apodaca, Deckers, 805.967.7611 x 1159, mapodaca@deckers.com

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[2025_UBGC_PL.pdf](#)

[2026_Budget_UBGC_of_SB.pdf](#)

[UBGC_IRS_501_c_3_status_letter.pdf](#)

[UBGC_2024_Form_990_Public_Disclosure_Signed.pdf](#)

[UBGC_Board_of_Directors_2025.pdf](#)

Optional Miscellaneous Documents

[UBGC_Fee_Schedule_2026.pdf](#)

Organization Contact Taylor
Swan

Title Chief Development Officer

Email Address tswan@unitedbg.org

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	\$ -
Federal	\$ -
State	\$ -
County	\$ -
Municipal (Other Cities)	\$ -
School District	\$ -
Foundations/Trusts	\$ 59,800.00
Donations/Fundraising	\$ 76,820.00
Fees	\$ 38,970.00
Other Sources/Revenues (Note 3)	\$ 281,644.00
Total Revenue	\$ 467,234.00

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 274,710.00	\$ 10,000.00
Fringe Benefits & Payroll Taxes	\$ 41,302.00	
Occupancy (Rent and Utilities)	\$ 78,111.00	
Equipment	\$ -	
Supplies and Materials	\$ 25,884.00	
Direct Client Support / Participant Assistance	\$ -	
Marketing & Outreach (Printing, Advertising)	\$ 2,256.00	
Travel, Mileage & Training (Program-Related)	\$ 13,085.00	
Other Expenditures (Note 1)	\$ 31,886.00	
Total Expenditures	\$ 467,234.00	\$ 10,000.00

Title	Client Service Center: Unity Delivers and Job Smart	02/06/2026
	by Sylvie Rich in FY 2026 Goleta City Grant	id. 53102585
	sylvie@unityshoppe.org	

Original Submission	02/26/2026
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Score	n/a	
	Part 1: Program Information	

Program Name	Client Service Center: Unity Delivers and Job Smart
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Amount Requested	10000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	Unity Shoppe seeks funding to support its Client Service Center, including the Free Grocery Store, Unity Delivers, and Job Smart, serving Goleta residents. Programs operate Mon.–Fri., 10am–5pm, providing free groceries, essentials, clothing, and job readiness support to families, seniors, youth, and individuals with disabilities referred by 400+ agencies. Homebound clients receive grocery delivery. Services are monitored through staff oversight, client tracking systems, and partner referrals.
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	6830
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	It addresses critical needs in Goleta by providing food, essentials, and job readiness support to families, seniors, and individuals facing food insecurity, while advancing their Strategic Plan for equity, stability, and community well-being.
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Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Unity Shoppe ensures accessibility with wheelchair access, designated parking, interpreters, large-print materials, clear instructions, and staff support, continually evaluating programs to remove barriers and serve individuals with diverse needs.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Goleta City Grant funds (\$10,000): Client Service Center, Unity Delivers, and JobSmart, serving Goleta residents. Funds cover staff coordination (\$4,000), groceries/essentials (\$4,000), and job readiness supplies (\$2,000). While total program costs are higher, this grant directly supports Goleta residents and is a targeted contribution to maximize local impact. Goleta represents 14% of the people Unity Shoppe served, serving a total of 48,783 people, of whom 6,830 of them where from Goleta.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

These funds are vital to serve Goleta residents with groceries, essentials, and job readiness. This partial funding will supplement what the organization receives from donations, grants, businesses, community organizations, and existing resources.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Unity Shoppe is a Santa Barbara based nonprofit organization dedicated to providing free essential services to residents impacted by temporary conditions of poverty, natural disaster, or health crisis. We provide residents with groceries, clothing, and other essentials, as well as job training- the things that help reinforce human dignity and encourage self-sufficiency and independence.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

Unity Shoppe serves Goleta residents through its Santa Barbara Client Service Center, Job Smart employment training program, and Unity Delivers home grocery delivery to seniors and homebound residents. In partnership with the Foodbank, local grocery stores farms and Unity Shoppe financing, they ensure access to fresh food and essentials. Working with over 400 referral agencies across Santa Barbara County, Unity Shoppe connects Goleta families to dignified services and pathways to stability.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

Unity Shoppe has over 100 years of experience serving Santa Barbara County, managing multi-million dollar programs with strong financial controls, audited records, and ERP/CRM/AG systems. Experienced staff oversee the programs. The organization has successfully managed numerous grants, ensuring funds are allocated efficiently and programs achieve measurable impact for Goleta residents. Unity Shoppe relies on a strong donor base and a successful annual telethon, providing predictable revenue.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Tina Ballue, Domestic Violence, tinab@domesticviolence.org 805-530-340-2684 Michele Schneider, South Coast Chamber of Commerce, Michele@SBSCChamber.com, 805-570-7068

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[4b._Tax_Exemption_Approval_Letter_IRS_501c3_2.pdf](#)

[Unity_Shoppe_Inc._Statement_of_Financial_Position_.pdf](#)

[25.26_BOARD_MEMBER_ROSTER__1.docx](#)

[Unity_Shoppe_June_2024_Form_990_Public_Disclosure_Copy.pdf](#)

[January_2026_revised_budget_1.pdf](#)

Optional Miscellaneous Documents

[Impact_Report_2024-25_SMALL_SIZE_1.jpg](#)

Organization Contact Angela
Miller-Bevan

Title Executive Director/CEO

Email Address Angela@untiyshoppe.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 652,947.00	\$ 4,000.00
Fringe Benefits & Payroll Taxes	\$ 163,237.00	
Occupancy (Rent and Utilities)		
Equipment		
Supplies and Materials	\$ 152,000.00	\$ 6,000.00
Direct Client Support / Participant Assistance		
Marketing & Outreach (Printing, Advertising)	\$ 1,500.00	
Travel, Mileage & Training (Program-Related)		
Other Expenditures (Note 1)		
Total Expenditures	\$ 969,684.00	\$ 10,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$ 484,842.00
Donations/Fundraising	\$ 484,842.00
Fees	
Other Sources/Revenues (Note 3)	
Total Revenue	\$ 969,684.00

Title	SYV Fruit & Vegetable Rescue (Veggie Rescue)	02/05/2026
	by Rhyn Hammargren in FY 2026 Goleta City Grant	id. 53096914
	rhyn@veggierescue.org	

Original Submission 02/05/2026

Score	n/a
	Part 1: Program Information
Program Name	SYV Fruit & Vegetable Rescue (Veggie Rescue)
Amount Requested	7000
Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	We seek operating support for 2026 to expand food rescue and delivery capacity for residents of Goleta. In 2025, Veggie Rescue completed 133 deliveries in Goleta, supplying 70,821 pounds of food to eight nonprofit partners. This funding will help address disparities in food access by strengthening the local food safety net through increasing the volume, frequency, and consistency of rescued food delivered to nonprofit organizations serving food-insecure individuals and families.
Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	4075
Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.	In our county 1 in 4 people are food insecure. Funding cuts have reduced the food program supply by 25%, causing an increased reliance on nonprofits. We address this gap by partnering with eight organizations that serve Goleta's residents.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

Veggie Rescue does not provide services directly to individual clients, as our programs focus on food recovery and distribution through partner organizations. As a result, program participation is not limited.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

My program or activity does not take place on school grounds.

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

Direct Client Support covers fuel (\$29,950), registration (\$2,200), vehicle repairs and maintenance (\$25,000), and vehicle insurance (\$7,800) to ensure safe food pickup and delivery. Other expenses include telephone (\$2,000), liability insurance (\$3,600), and workers' compensation (\$6,000), which are essential for communication and risk management. Other revenue (\$5,000) comes from advertising on Veggie Rescue's truck.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

City of Goleta funding is vital to Veggie Rescue’s operations, with grants supporting about 51% of the 2026 budget. If partially funded, we will seek additional grants, expand donor campaigns and events, and seek added community and business support.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization’s mission statement?

Veggie Rescue’s mission is to combat hunger and reduce food waste by rescuing surplus food and donating it to nonprofits serving food-insecure individuals. By keeping good food out of landfills, we strengthen community nutrition, improve quality of life, and protect environmental health. Our refrigerated trucks function as mobile distribution hubs, creating a quick and direct and efficient link between fields, grocery shelves, and organizations feeding neighbors in need.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

There are 8 non profits who are recipients of donated food from Veggie Rescue in Goleta, including Good Shepherd Lutheran Church, Santa Barbara Wildlife Care Network, Santa Barbara Food Bank’s South County Sharehouse, FosterBox, Friendship Manor, Good Samaritan Homeless Shelter (Hedges House of Hope), Salvation Army, and LEAP (formerly IVYP). Our food donor partners in Goleta include Mike’s (Ebb’s) Organic Farm, John Givens Farm, and Blue Dog Farm.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

Veggie Rescue has served the community since 2010, expanding impact annually to address food insecurity. In 2025, grants supported 49% of our budget, reflecting strong funder confidence. All grant funds are managed responsibly, reported on time, and aligned with approved goals. Experienced staff maintain strong financial controls and oversee grant writing, management, and reporting, ensuring funds are used as proposed and programs are delivered successfully.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

1) Janessa VanVechten janessak@gmail.com 805-679-3223 2) Minerva Ringland minerva.ringland@refed.org 716-380-7222

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[Veggie_Rescue-IRS_Determination_Letter.pdf](#)

[2024_990.pdf](#)

[SYV_PL_2025.pdf](#)

[Board_of_Directors_Veggie_Rescue_2026.xlsx_-_Sheet2_1.pdf](#)

[Veggie_Rescue_2026_Budget_City_of_Goleta.xlsx_-_Sheet1.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Eryn
Shugart

Title Executive Director

Email Address eryn@veggierescue.org

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 367,069.00	\$ -
Fringe Benefits & Payroll Taxes	\$ 28,871.00	\$ -
Occupancy (Rent and Utilities)	\$ 11,450.00	\$ -
Equipment	\$ -	\$ -
Supplies and Materials	\$ 25,081.00	\$ -
Direct Client Support / Participant Assistance	\$ 64,950.00	\$ 7,000.00
Marketing & Outreach (Printing, Advertising)	\$ 43,750.00	\$ -
Travel, Mileage & Training (Program-Related)	\$ 2,800.00	\$ -
Other Expenditures (Note 1)	\$ 11,600.00	\$ -
Total Expenditures	\$ 555,571.00	\$ 7,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 7,000.00
City of Goleta (Other) (Note 2)	\$ -
Federal	\$ -
State	\$ -
County	\$ -
Municipal (Other Cities)	\$ 14,000.00
School District	\$ -
Foundations/Trusts	\$ 281,561.00
Donations/Fundraising	\$ 270,250.00
Fees	\$ -
Other Sources/Revenues (Note 3)	\$ 5,000.00
Total Revenue	\$ 577,811.00

Title	<h1 style="margin: 0;">VNA Health Subsidized Charity Care and Community Programs for Goleta Seniors</h1> <p style="margin: 0;">by Kimberly Ferrarin in FY 2026 Goleta City Grant kimberly.ferrarin@vna.health</p>	<p>02/06/2026</p> <p>id. 53106631</p>
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Original Submission	02/06/2026
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Score	n/a
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Part 1: Program Information

Program Name	VNA Health Subsidized Charity Care and Community Programs for Goleta Seniors
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Amount Requested	10000
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Please select the category of funding being requested.	Human Services, Educational, Food/Nutrition, Senior, the Arts (music, dance, theater, art), Youth Services and Miscellaneous Programs.
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Describe the proposed program for which you are asking for funding. Please share how it will operate (days, hours, eligibility, etc.), how it will be monitored, and the people you intend to serve (target population).	<p>In Santa Barbara County, aging happens behind closed doors—where memory fades, caregivers are exhausted, and illness reshapes daily life. VNA Health seeks \$10,000 to sustain subsidized charity care, including home health, hospice, and palliative services for Goleta seniors. As Alzheimer’s and chronic illness rise, VNA Health—the county’s only licensed provider of this kind—steps in when insurance and resources end, delivering dignity, comfort, and care to neighbors who need it most.</p>
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Please provide the approximate number (numerical response only) of Goleta residents your program will serve (or benefit).	1102
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Does the program satisfy an unmet or under-met need in the community or a Goleta Strategic Plan goal? Describe.

Yes, VNA meets a critical, under-met need by helping seniors age, heal, & die with dignity as care demand outpaces resources. As senior populations grow, we provide a vital safety net—delivering subsidized care & support when no other options exist.

Does the program (including the facility where the program or service is held) have any physical, communication, or programmatic barriers that may limit individuals with disabilities from participating in the program? Please describe the measures taken to ensure inclusive access, including any accommodations.

No. VNA Health is committed to ensuring that all individuals can fully access our services and participate in our programs. In most cases, VNA is attending to patients in their own home. Equity, inclusion, and dignity are foundational to our care.

If your program takes place on school grounds, have you received permission and approval from the appropriate school?

No

Part 2: Budget This section requests a clear breakdown of the program's total proposed budget. Applicants should clearly identify which costs will be covered by Goleta City Grant funds and describe any other funding sources supporting the program. For this section, include only the budget for the proposed program, not the organization's full operating budget. Required attachments, including financial statements and the organization's budget, should reflect the full organizational budget.

Budget Narrative

VNA provides over \$2.1M annually in charitable funds & spans all service lines. It does not have a stand-alone budget. All organizational resources contribute to & support this program, with costs embedded throughout the overall operating budget. Since about 10% of our senior patients live in Goleta, this proposal reflects 10% of the full organizational budget.

#1 Direct patient care, insurance, & professional services.

#3 Patient services, rent income, investments & endowment funds.

Proposed Expenditures

[Expenditures.xlsx](#)

Proposed Revenue

[Revenue.xlsx](#)

Are the requested funds necessary or vital in carrying out the program? Please specify how you will make up for any partial funding received from the City of Goleta, including other potential funding sources that can be pursued to ensure successful program delivery.

In 1908 VNA Health was founded with its charitable mission but has always needed the generous support of the community. Other support will be sought from individuals, foundations, corporations & fundraising to ensure the needs of patients are met.

Is your organization currently receiving, recently applied for, or is expecting to receive other funding, support, or in-kind contributions from the City of Goleta?

No

Is there a cost to participate in the program?

No

Part 3: Organization Information This information helps the City confirm that applicants are fiscally responsible and capable of managing grant funds and carrying out the proposed program.

What is your organization's mission statement?

Our mission is simple yet profound: to care for our community with compassion and integrity, ensuring every person lives with health and dignity, even in life's most difficult moments. Our dedicated staff strive to accomplish this every day, with every person, through our values of compassion, integrity, teamwork and excellence.

Describe how your organization serves Goleta residents, including service delivery locations, partnerships, or outreach activities within Santa Barbara County.

VNA Health serves Goleta residents by providing Home Health, Palliative, & Hospice Care directly in patients' homes. For hospice patients unable to remain safe at home, VNA's Serenity House offers inpatient hospice care. VNA also operates a free Loan Closet of durable medical equipment located in Santa Barbara. As the senior population grows & poverty & complex conditions like Alzheimer's increase, VNA Health is a critical community resource helping seniors maintain health, dignity, & stability.

Is a nonprofit sponsor being used to sponsor the program?

No

Describe your organization's capacity to successfully manage grant funds and deliver the proposed program, including relevant experience, staffing, financial controls, and prior grant performance.

VNA Health, successfully serving Santa Barbara County since 1908, has extensive experience managing grant funds and delivering complex health and community-based care. Licensed clinical staff, strong leadership and centralized administrative teams oversee programs, with robust financial controls, audited statements, and budget monitoring. Our proven track record demonstrates timely reporting, responsible fund management, and successful delivery of high-quality services to vulnerable populations.

Within the past three (3) years, has your organization been required to return funds, repay disallowed costs, or address audit or monitoring findings resulting in financial obligations under any grant or contract?

No

Within the past three (3) years, has your organization been subject to an IRS or State tax levy, or has its nonprofit tax-exempt status been revoked, suspended, or threatened with revocation?

No

Please list two (2) professional references who we may contact regarding the proposed program, service or activity. Include the reference's name, organization (as appropriate), and a phone number and email address where the reference can be reached.

Vince Caballero, Village Properties, (805) 560-1647, vgcabal59@gmail.com, and Christie Glanville, owner of Montecito Tutoring, Philanthropist, christieglanville@gmail.com, (805) 216-1747

All applicants must disclose any actual, potential, or perceived conflicts of interest at the time of application. Is there an actual, potential, or perceived conflict of interest to disclose?

No

Part 4: Organizational Documents & Submission

Required Document Checklist Below are the required documents that are to be included in the application. Please upload each document into the Required Documents File Upload box.

Proof of Nonprofit or Government Status (IRS determination letter) checked

List of Board Members checked

Most Recent Year-End Balance Sheet or Profit/Loss Statement checked

Most Recent Year-End Form 990 checked

Most Recent checked
Organization Budget,
Reviewed and
Approved by Board
of Directors

Required Documents File Upload

[IRS_Exemption_Letter-_VNA_Health_Fnd_-_4.2.24.pdf](#)

[IRS_Exemption_Letter_-_VNA_Health_-_4.2.24.pdf](#)

[VNA_Board_of_Directors.pdf](#)

[VNA_HEALTH_2024_990_Tax>Returns.pdf](#)

[12-25_Combined_Financial_Statements.pdf](#)

[2026_Combined_Budget_.pdf](#)

Optional
Miscellaneous
Documents

Organization Contact Kimberly
Ferrarin

Title Grants Development Manager

Email Address kimberly.ferrarin@vna.health

Expense Category	Column A: Full Program Expenses	Column B: Goleta City Grant Funds
Personnel (Salaries & Wages)	\$ 2,096,986.00	
Fringe Benefits & Payroll Taxes	\$ 567,929.00	
Occupancy (Rent and Utilities)	\$ 69,350.00	
Equipment	\$ 90,580.00	
Supplies and Materials	\$ 9,284.00	
Direct Client Support / Participant Assistance	\$ 213,378.00	\$ 10,000.00
Marketing & Outreach (Printing, Advertising)	\$ 740.00	
Travel, Mileage & Training (Program-Related)	\$ 49,962.00	
Other Expenditures (Note 1)	\$ 574,347.00	
Total Expenditures	\$ 3,672,556.00	\$ 10,000.00

Revenue Category	Full Program Revenue
Goleta City Grant Funds	\$ 10,000.00
City of Goleta (Other) (Note 2)	
Federal	
State	
County	
Municipal (Other Cities)	
School District	
Foundations/Trusts	\$ 87,000.00
Donations/Fundraising	\$ 59,700.00
Fees	
Other Sources/Revenues (Note 3)	\$ 3,364,537.00
Total Revenue	\$ 3,521,237.00

Attachment III

Goleta City Grants Summary Spreadsheet

HUMAN SERVICES APPLICATIONS

	Name of Organization	Project/Program	Category	FY 25-26 Grant Award	FY 26-27 Grant Request	FY 26-27 City Grant Recommendation	Reyes-Martin	Kasdin	Average
1	A to Z Cooking School	After School Culinary Education	Food/Nutrition	\$ 1,000.00	\$ 10,000.00		\$ -	\$ -	\$ -
2	AHA	Social Emotional Learning for Goleta Youth	Miscellaneous	\$ 1,500.00	\$ 10,000.00		\$ -	\$ -	\$ -
3	Boxtales	Youth Theater Public Series	The Arts	\$ 3,000.00	\$ 10,000.00		\$ -	\$ -	\$ -
4	Breast Cancer Resource Center	Lay Patient Navigation and Support Services	Miscellaneous	DNA	\$ 10,000.00		\$ -	\$ -	\$ -
5	Cafecito Connect	Community Nutrition Chats	Food/Nutrition	DNA	\$ 8,000.00		\$ -	\$ -	\$ -
6	Center for Successful Aging	General Operating Support	Senior Program	\$ 5,500.00	\$ 10,000.00		\$ -	\$ -	\$ -
7	Channel Islands Young Men Christian Association	After School Enrichment Program	Youth Program	\$ 4,000.00	\$ 10,000.00		\$ -	\$ -	\$ -
8	Children's Creative Project	Summer Dance Education Program	The Arts	\$ 3,000.00	\$ 10,000.00		\$ -	\$ -	\$ -
9	Clay Studios	Clay Ball for All Affordable Community Days	The Arts	DNA	\$ 10,000.00		\$ -	\$ -	\$ -
10	CommUnify	Seniors Safe at Home	Senior Program	DNA	\$ 10,000.00		\$ -	\$ -	\$ -
11	Creative Network	Hip-Hop and Street Dance Program	The Arts	\$ 1,000.00	\$ 10,000.00		\$ -	\$ -	\$ -
12	Dos Pueblos	After Prom	The Arts	\$ 2,500.00	\$ 2,500.00		\$ -	\$ -	\$ -
13	E3 Learning	High Impact Tutoring Program	Educational	DNA	\$ 7,000.00		\$ -	\$ -	\$ -
14	Easy Lift	Dial-A-Ride Paratransit Services	Senior Program	\$ 7,950.00	\$ 10,000.00		\$ -	\$ -	\$ -
15	Elk's Lodge	Math Fact Fluency Initiative	Educational	\$ 2,500.00	\$ 10,000.00		\$ -	\$ -	\$ -
16	Family Service Agency	Long-Term Care Ombudsman	Senior Program	\$ 6,500.00	\$ 10,000.00		\$ -	\$ -	\$ -
17	Food Bank	Feeding Nutritional Security for the City of Goleta	Food/Nutrition	\$ 3,300.00	\$ 4,000.00		\$ -	\$ -	\$ -
18	Food From the Heart	General Operating Support	Food/Nutrition	\$ 8,000.00	\$ 10,000.00		\$ -	\$ -	\$ -
19	Freedom For Youth	Peer to Peer Mentoring Groups	Youth Program	DNA	\$ 10,000.00		\$ -	\$ -	\$ -
20	Future Leaders of America	Future Leaders of America	Youth Program	\$ 2,500.00	\$ 10,000.00		\$ -	\$ -	\$ -
21	Gateway Educational Services	Educational Support for Latinx Students in Goleta	Educational	\$ 4,000.00	\$ 10,000.00		\$ -	\$ -	\$ -
22	Goleta Shimmy Mob	Community Dance and Domestic Violence Awareness Program	The Arts	DNA	\$ 2,695.00		\$ -	\$ -	\$ -
23	Goleta Union School District	Arts Education	The Arts	DNA	\$ 9,000.00		\$ -	\$ -	\$ -
24	Grace Fisher Foundation	Disability Awareness Field Trips	Educational	\$ 2,500.00	\$ 7,920.00		\$ -	\$ -	\$ -
25	Historias de Goleta	Latina/o Oral Historiography & Community Theater	The Arts	DNA	\$ 10,000.00		\$ -	\$ -	\$ -
26	Hospice of Santa Barbara	Support for Goleta Patients with a Life-Threatening Illness	Miscellaneous	\$ 6,000.00	\$ 10,000.00		\$ -	\$ -	\$ -
27	La Patera PTA	La Patera PTA	Educational	\$ 500.00	\$ 4,800.00		\$ -	\$ -	\$ -
28	LEAP	Integrated Support Services for Low-Income Goleta Families	Miscellaneous	\$ 6,500.00	\$ 10,000.00		\$ -	\$ -	\$ -
29	Lights Up	Lights Up! Theatre Company Season 9	The Arts	DNA	\$ 10,000.00		\$ -	\$ -	\$ -
30	Mental Wellness Center	Ongoing Teacher and Principal Requests for Additional Classrooms Served	Educational	\$ 3,500.00	\$ 7,000.00		\$ -	\$ -	\$ -
31	Mosaic Therapy Collective	Mosaic Therapy Collective Equity Fund	Educational	\$ 4,000.00	\$ 6,000.00		\$ -	\$ -	\$ -
32	Mothers Helpers	Mother's Helpers Everyday Essentials Program	Educational	\$ -	\$ 10,000.00		\$ -	\$ -	\$ -
33	Moxi	Goleta School STEAM Programs	Educational	DNA	\$ 10,000.00		\$ -	\$ -	\$ -
34	Nomad Tango	Nomad Tango 5th Season	The Arts	\$ 750.00	\$ 3,000.00		\$ -	\$ -	\$ -
35	Octobot Robotics	Octobots Robotics	Educational	\$ 2,500.00	\$ 10,000.00		\$ -	\$ -	\$ -
36	Organic Soup Kitchen	Basic Needs: Nutrition and Food Security	Food/Nutrition	\$ 4,700.00	\$ 10,000.00		\$ -	\$ -	\$ -
37	Parkinsons Association of Santa Barbara	Support Staff for Parkinsons Exercise Program	Miscellaneous	DNA	\$ 4,000.00		\$ -	\$ -	\$ -
38	Postpartum Education for Parents	Postpartum Education for Parents	Miscellaneous	\$ 3,000.00	\$ 7,500.00		\$ -	\$ -	\$ -
39	Safety Town	Safety Town of Santa Barbara County	Youth Program	\$ 3,500.00	\$ 7,500.00		\$ -	\$ -	\$ -
40	Santa Barbara Channelkeeper	2026-27 Channelkeeper "What the Channel Means to Me" Student Art Show	The Arts	\$ 1,500.00	\$ 1,500.00		\$ -	\$ -	\$ -
41	Santa Barbara County Education Office	Job Readiness Training & Internship Program for High School Youth	Youth Program	\$ 2,500.00	\$ 5,000.00		\$ -	\$ -	\$ -
42	Santa Barbara Dance Institute	2026 Goleta Summer Dance Camp and Early Childhood Inclusion Classes	The Arts	\$ 3,500.00	\$ 10,000.00		\$ -	\$ -	\$ -
43	Santa Barbara Education Foundation	Innovate DP	Educational	\$ -	\$ 7,000.00		\$ -	\$ -	\$ -
44	Santa Barbara Museum of Art	Education for All with the Santa Barbara Museum of Art	The Arts	DNA	\$ 10,000.00		\$ -	\$ -	\$ -
45	Santa Barbara Scholarship Foundation	Scholarships	Youth Program	DNA	\$ 10,000.00		\$ -	\$ -	\$ -
46	Santa Barbara Seventh Day Adventist Church	Nedley Depression and Anxiety Community Recovery Program	Miscellaneous	DNA	\$ 7,500.00		\$ -	\$ -	\$ -
47	Santa Barbara Strings	Early Strings Training Program (ESTP)	The Arts	\$ 3,000.00	\$ 6,000.00		\$ -	\$ -	\$ -
48	Santa Barbara Symphony	Music Education Programs for Goleta Youth (MEPs)	The Arts	\$ 5,700.00	\$ 10,000.00		\$ -	\$ -	\$ -
49	Sarah House	Home and Hospice Care for Low-Income Individuals	Miscellaneous	DNA	\$ 10,000.00		\$ -	\$ -	\$ -
50	SEE International	SEE Vision Care (SVC) Goleta Program	Miscellaneous	\$ -	\$ 5,000.00		\$ -	\$ -	\$ -
51	Standing Together to End Sexual Assault	Crisis Intervention Program	Miscellaneous	\$ 1,500.00	\$ 3,000.00		\$ -	\$ -	\$ -
52	Storyteller	Early Childhood Education Program	Educational	DNA	\$ 5,000.00		\$ -	\$ -	\$ -
53	The Quiet Between	Community Film Education & Cultural Arts Program	The Arts	DNA	\$ 10,000.00		\$ -	\$ -	\$ -
54	United Boys and Girls Club	Goleta Club	Youth Program	\$ 8,000.00	\$ 10,000.00		\$ -	\$ -	\$ -

55	Unity Shoppe	Client Service Center: Unity Delivers and Job Smart	Educational	\$ -	\$ 10,000.00		\$ -	\$ -	\$ -
56	Veggie Resuce	SYV Fruit and Veggie Rescue	Food/Nutrition	\$ 3,700.00	\$ 7,000.00		\$ -	\$ -	\$ -
57	VNA Health	Subsidized Charity Care and Community Programs for Goleta Seniors	Senior Program	\$ 1,500.00	\$ 10,000.00		\$ -	\$ -	\$ -
		Amount Requested			\$ 467,915.00	\$	-	\$	-
		Amount Granted				\$	-		