

*\$25,000*

## Organization / Agency Information

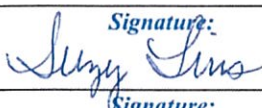

<b>Organization/Agency Name:</b> Women's Transitional Living Center, Inc.		
<b>Physical Address:</b> 201 E. Amerige Avenue		<b>City/State/Zip</b> Fullerton, CA 92832
<b>Mailing Address:</b> PO Box 916		<b>City/State/Zip</b> Fullerton, CA 92831
<b>CEO or Director:</b> Gigi Tsontos		<b>Title:</b> Executive Director
<b>Phone:</b> 714.992.1939 ext. 106	<b>Fax:</b>	<b>Email:</b> gtsontos@wtlc.org
<b>Contact Person:</b> Gigi Tsontos		<b>Title:</b> Executive Director
<b>Phone:</b> 714.992.1939 ext. 106	<b>Fax:</b>	<b>Email:</b> gtsontos@wtlc.org
<b>Web Site Address:</b> www.wtlc.org		<b>Tax ID:</b> 51-0201813

## Program / Grant Information

**Interest Area:** ☐ Animal Protection ☐ Education ☐ Environment ☐ Health ☒ Human Dignity

<b>Program/Project Name:</b> Clinical Mobile Advocacy Program			<b>Amount of Grant Requested:</b> \$25,000
<b>Total Organization Budget:</b> 1,814,065	<b>Per 990, Percentage of Program Service Expenses (Column B/ Column A x 100):</b> 86%	<b>Per 990, Percentage of Management &amp; General Expenses Only (Column C / Column A x 100):</b> 14%	<b>Per 990, Percentage of Management &amp; General Expenses and Fundraising (Column C+D / Column A x 100):</b> 14%
<b>Purpose of Grant Request (one sentence):</b> To decrease barriers, intervene and prevent violence by expanding clinical supportive services to non-residential survivors through delivery in their own home or community.			
<b>Program Start Date (Month and Year):</b> August 2017		<b>Program End Date (Month and Year):</b> July 2018	
<b>Gimbel Grants Received: List Year(s) and Award Amount(s)</b> N/A, First Time Applicant			

## Signatures

<b>Board President / Chair: (Print name and Title)</b> Suzy Lins, Chair	<b>Signature:</b> 	<b>Date:</b> 6/14/2017
<b>Executive Director/President: (Print name and Title)</b> Gigi Tsontos, Executive Director	<b>Signature:</b> 	<b>Date:</b> 6/14/2017

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<b>Board President / Chair: (Print name and Title)</b> <i>Suzy Lins, Chair</i>	<b>Signature:</b>	<b>Date:</b> <i>6/14/2017</i>
<b>Executive Director/President: (Print name and Title)</b> <i>Gigi Tsontos, Executive Director</i>	<b>Signature:</b> 	<b>Date:</b> <i>6/14/2017</i>

# **2017 S.L. Gimbel Foundation Fund APPLICATION**

## **Narrative**

### **I. Organization Background**

*A) What are the history, mission and/or purpose of your organization? How long has the organization been providing programs and services to the community?*

The Women's Transitional Living Center (WTLC) was the dream of several members of the Orange County Chapter of the National Organization for Women who were tired of seeing "women and children spending nights in cars in parking lots." WTLC opened its doors in 1976, and over the past 41 years gradually grew from an emergency shelter to multiservice organization dedicating to ending the cycle of violence through multiple levels of housing, supportive services and prevention. WTLC is the oldest domestic violence shelter in Orange County and the third oldest in the nation. With a vision of ending the cycle of violence and exploitation, our mission is to help individuals and families escape the depths of domestic violence and exploitation.

*B) What are some of your past organizational accomplishments (last three years)?*

In FY 2014-15, WTLC was able to secure funding to complete a needs assessment that incorporated a vision for becoming trauma informed and engaging the community in a new means. This allowed us to reformulate our board roles, engage in agency re-visioning and ensure secured funds for the following years.

In FY 2015-16, WTLC trained all staff, rewrote all policies and programs to transition to a trauma-informed care module of service delivery; secured funding to expand access for persons with disabilities through facility upgrades and training; and celebrated our 40<sup>th</sup> anniversary through a series of community educational programs and fundraisers.

In FY 2016-17, WTLC secured funding to further develop our legal services and create a legal department; became Board of Immigration Appeals accredited; secured funding to expand human trafficking program and create department; transitioned programs to add the survivor driven module; and launched our mobile advocacy program.

*C) What are your key programs and activities? Describe the communities you serve. Include populations, geographic locations served, and relevant statistics.*

The voices of survivors guide the development of our programs and services, therefore all of WTLC's programs are rooted in a trauma-informed, survivor driven model. Survivor-driven means the survivor's priorities create the safety and healing plan, and can include family members as well as the person who abused them. Trauma informed speaks to understanding the effects of trauma on a person from a physical, emotional, and psychological framework.

WTLC provides services under three key areas: housing, supportive services and prevention.

- Housing is provided through a bridge module which offers a range of shelter options to meet the priorities of the survivor. Immediate shelter to longer term housing is available to ensure survivors can focus on their recovery without the stress of housing instability.
- Supportive Services are available to residential and non-residential survivors, mobile or survivors can come to WTLC's The Center. Supportive services include the provision of basic needs, career development, a variety of educational, process, and empowerment groups, counseling and therapeutic services, move-in and rental assistance, legal advocacy, wherein WTLC's BIA-certified staff provides free legal advocacy and support on issues such as divorce, immigration, legal separation, child support, custody, visitation, and restraining orders; resource and referral assistance, wherein WTLC's vast networks and numerous collaborative relationships throughout the county allow advocates to warm transfer survivors to identified resources, creating a seamless transition and reducing re-traumatization.
- Prevention and intervention is provided to survivors and the community through educational and empowerment workshops. For the survivor we work toward reducing harm and increasing safety, simultaneously teaching communities how to reduce and prevent violence through peace. The goal is to

address violence from both ends of the spectrum and decrease their distance until there is no more distance between them.

WTLC welcomes all survivors who are looking for help to create safer and healthier lives. Located in northern Orange County (OC), 75% of survivors are residents of OC and 25% of survivors come from surrounding counties or out of state. Although no one is immune from being impacted by violence, those looking for services tend to have limited incomes and support systems. In 2015-16, 100% of all of those served through WTLC's housing program and 70% of all victims served through our services were below the poverty line; 1984 survivors were supported; 1640 Adults, 316 Children; and 28 Seniors. Survivors, who represent different cultures, are coming out of the prison system, have limited English, are disabled, older, struggle with addictions or mental health, identify as LGBTQ and are immigrants are more vulnerable to violence and exploitation. WTLC works with these populations to provide support and guidance as they recover from their trauma.

## **II. Project Information:**

### **A) Statement of Need**

#### *1. Specify the community need you want to address and are seeking funds for.*

The 2015 California Domestic Violence Counts Census found 44% of survivors requested non-residential services such as counseling, legal advocacy, and children's support groups. In OC, there are 3 other domestic violence (DV) service providers and their supportive services for survivors are tied with residency in a shelter program or require the survivors to receive services at a resource center. Non-residential survivors' barriers to accessing services at DV resource centers are transportation, childcare and time. These barriers are compounded when a survivor also has limited mobility, cultural stigma around DV services, are disabled, older, deaf and/or blind, struggle with mental health and addictions. Increasing access to non-residential survivors so they are able to receive the support they and their family needs requires an innovative response.

### **B) Project Description**

#### *1. Describe your project. How does your project meet the community need? What is unique and innovative about this project?*

WTLC is the only DV service provider in OC that currently offers a mobile advocacy program. Mobile Advocacy goes to where the survivor is, meeting them in their home or their neighborhood where they feel safe. It provides holistic support incorporating whoever the survivor identifies in their plan for recovery, which means it can include the abuser. All of WTLC's supportive services are mobile and Advocates are able to bring along additional support dependent on the survivor's request. This method of serving survivors not only diminishes barriers, but recognizes the versatility of survivors' needs and allows for incorporation of their surrounding community and networks to support the prevention of future violence.

This project would support one of WTLC's mobile clinical program advocates. The clinical program provides an array of individual or group counseling and therapy for adults and children. Utilizing creative methods, art and play therapy are combined with traditional methods to support the survivor and children. Creating a safe place for the survivor and their children to process their trauma, expressing it in a way that reduces traumatization is essential in the clinical services WTLC provides. The emotional and psychological impacts of experiencing and being exposed to violence are long lasting. WTLC's clinical advocates equip survivors with tools and coping mechanisms to integrate into their daily life, empowering the survivor to continue their healing independently.

### **C) Project Goal, Objectives, Activities and Expected Outcomes**

**GOAL:** To intervene and prevent violence in survivors lives and communities by increasing access to underserved non-residential survivors through the delivery of clinical support in their own home or community.



**Objective1: Provide in-home clinical sessions to 100 survivors and their families who contact us within 1 week and have 95 survivors indicate a reduction in harm and increase in safety.**

Activities 1: By **September** 2017 and on, trained advocates (staff and volunteers) will offer non-residential services on the 24/7 crisis hotline; **30** survivors will be enrolled into the clinical program; survivors will be assigned an advocate and delivery of services will begin **within 1 week of initial contact**; and pre and ongoing evaluation tools for survivors to assess level of safety and harm will be administered.

Activities 2: By **January 2018**, **55** survivors will actively be receiving clinical support undergoing evaluations to assess goals of the programs and ensure it is meeting the needs of the survivor; and 47 of survivors will indicate a reduction in harm and an increase in safety in their lives.

Activities 3: By **April** 2018, 75 survivors will actively be receiving clinical support and undergoing evaluations to assess goals of the programs and ensure it is meeting the needs of the survivor; **57** survivors will indicate a reduction in harm and an increase in safety in their lives.

Activities 4: By **June** 2018, 90 survivors will actively be receiving clinical support and undergoing evaluations to assess goals of the programs and ensure it is meeting the needs of the survivor; and **77** survivors will indicate a reduction in harm and an increase in safety in their lives.

Expected Outcomes:

**We expect to provide over 100 survivors with mobile clinical support with over 95 survivors indicating a reduction of harm and increase in safety in their lives from August 2017-July 2018.**

Evaluation:

**Using Apricot data base client management and tracking system, generate reports on the number of survivors served, their families and safety assessment. Track our role in providing mobile clinical support to 100 survivors and their families. Track our role in increasing safety and reducing harm for 95 survivors and their families. Account for additional successes or lower numbers of survivors in the program and survivors reporting increase in safety and reduction of harm.**

#### D) Timeline

Provide a timeline for implementing the project. State the start date and ending date of the project, include timeframes for specific activities, as appropriate.

**August 2017:** The clinical mobile advocacy program will be fully staffed and operational. All clinical staff will be trained to deliver services in the field and an initial assessment of services analyzed.

**September 2017:** **30** survivors and their families are supported

**October 2017 and quarterly through grant:** Evaluations and assessments are analyzed, and adjustments are made to address weaknesses, partnerships are continually established for any identified gaps

**January 2018:** **55** survivors and their families are supported.

**April 2018:** 75 survivors and their families are supported. WTLC's annual fundraiser to support activities is hosted.

**July 2018:** 100 survivors and their families are supported.

**Ongoing:** WTLC's Clinical Mobile Advocacy Program is operating; non-residential survivors are continually being supported beyond the grant performance period and solicitation of financial support from foundations, government grants and donors.

#### E) Target Population

*Who will this grant serve? How many people will be impacted? Provide a breakdown: Number of Children, Youth, Adults, Seniors, Animals.*

This grant will serve non-residential survivors with clinical support as follows: 92% of survivors will represent underserved populations; 100 people will be impacted; 20 children ages 0-12; 15 youth ages 13-17; 50 adults ages 18-54; and 15 seniors ages 55+.

F) Projects in the Community

*How does this project relate to other existing projects in the community? Who else in the community is providing this service or has a similar project? Who are your community partners (if any)? How are you utilizing volunteers?*

WTLC is currently the only DV provider in OC that has a mobile advocacy program. All other DV providers deliver non-residential services through their resource centers. In order to delivery quality services, WTLC depends on numerous partners however for the clinical program WTLC is able to provide the full spectrum of services with its current staff. If a survivor needs more intensified clinical support, admission into a facility is done in partnership with St. Jude Medical Center. Volunteers for this specific project are utilized to support the 24/7 bilingual hotline which is the access point for all WTLC services, as board members who oversee WTLC's strategic plan and development, and by serving on the fundraising committee to increase funding for program sustainability.

G) Use of Grant Funds

*How will you use the grant funds?*

Funding will be used to continue the support of Advocate personnel who deliver the direct clinical services for survivors and their children.

### **III. Project Future**

A) Sustainability

*Explain how you will support this project after the grant performance period. Include plans for fundraising or increasing financial support designated for the project.*

Since the summer of 2016, WTLC has begun to prepare for its expansion of services into a clinical mobile advocacy program. WTLC has sought out additional funding through research and applications to foundations and government entities, conversations with and developing new donors (individuals and businesses) and launching a new annual fundraiser. These sources will continue to be cultivated to ensure the sustainability of this program.

### **IV. Governance, Executive Leadership and Key Personnel/Staff Qualifications**

A) Governance

*Describe your board of directors and the role it plays in the organization. What committees exist within your board of directors? How does the board of directors make decisions?*

WTLC's board of directors (BOD) is responsible for mapping a 5 year strategic plan of the organization, monitoring progress and serving as a fiduciary arm of the organization. The BOD is amasssed of a finance committee and a governance committee and comprised of equal parts men and woman with survivor representation. Through counsel from the executive director and utilizing Robert's Rules of Order, decisions are made democratically.

B) Management

*Describe the qualifications of key personnel/staff responsible for the project.*

Gigi Tsontos, LCSW, MPA, Executive Director: Gigi has worked in nonprofits and social services for over 20 years. She is a licensed clinical social worker with a second master's in public administration. Gigi is responsible for overseeing all aspects of the project, ensuring contract compliance, and resource viability.

Mark Lee, MBA, Director of Operations: Mark has over 11 years of direct service and management experience in the nonprofit sector. Mark holds a Master of Business Administration with a Graduate Certificate in Nonprofit Management from North Park University. As Director of Operations, Mark oversees WTLC's housing and support services program.

Lisa Eaton, LSCW, CADC, Client Services Manager: Lisa has over 8 years of diverse experience treating young children, adolescents, adults, and families. Her areas of specialty include: depression, anxiety, ADHD, and bipolar disorder; adolescent and adult substance abuse issues; parent training and child behavior issues; family conflict and divorce; and treating complex trauma in children and adults, including PTSD. Lisa holds a Bachelor of Science degree in Psychology and Social Behavior from the



University of California, Irvine and a Masters of Social Work degree from Aurora University in Illinois. Lisa oversees the counseling and therapy program and provides supervision to the clinical advocate team.

Debra Valladares, J.D. Director of Legal Services: Debra has over 15 years of experience in the legal field ranging from civil litigation to legal program development. Debra received her J.D. from Southwestern Law School and a B.A. in Sociology from Cal Poly Pomona. Debra oversees the WTLC Legal Advocacy Services Program and provides supervision to the legal advocate team.

### **2017 S.L. Gimbel Foundation APPLICATION**

#### **V. Project Budget and Narrative**

A) **Budget Table:** Provide a detailed line-item budget for your **entire** project by completing the table below. Requested line items should be limited to Ten (10) line items. The less the better.

**A breakdown of specific line item requests and attendant costs should include:**

- 1) Line item requests for materials, supplies, equipment and others:
  - a. Identify and list the type of materials, supplies, equipment, etc.
  - b. Specify the unit cost, number of units, and total cost**
  - c. Use a formula/equation as applicable. (i.e. 40 books @ \$100 each = \$4000)
- 2) Line item requests for staff compensation, benefits: **Do not use FTE percentages.**
  - a. Identify the position; for each position request, **specify the hourly rate and the number of hours** (i.e. \$20/hr x 20 hours/week x 20 weeks = \$8,000)
  - b. For benefits, provide the formula and calculation (i.e. \$8,000 x 25% = \$2,000)
- 3) Line items on Salaries/Personnel included in budget (contribution or in-kind) but NOT requested from the Gimbel Foundation must be broken down per number 2) above: Provide rate of pay per hour and number of hours.

Clinical Mobile Advocacy Budget

<b>Line Item Request</b>	<b>Line Item Explanation</b>	<b>Support From Your Agency</b>	<b>Support From Other Funders</b>	<b>Requested Amount From Gimbel/TCF</b>	<b>Line Item Total of Project</b>
<b>Personnel:</b> Clinical Advocate	\$24.04/hr x 40 hrs week x 52 weeks=\$50,000 x 4 staff	\$25,000	\$150,000	\$25,000	\$200,000
<b>Personnel:</b> Clinical Supervisor /Licensed	\$33.65/hr x 40 hrs week x 52 weeks=\$70,000	0	\$70,000	0	\$70,000
<b>Personnel:</b> Licensed Clinical Advocate	\$26.44/hr x 40 hrs a week x 52 weeks=\$55,000	0	\$55,000	0	\$55,000
<b>Personnel:</b> Benefits	\$325,000 x .18%=\$58,500	\$58,500	0	0	\$58,500
Transport: Mileage for staff	0.53c x 500 miles a month x 12 months	\$3,180	0	0	\$3,180
<b>Training:</b> Staff Development	\$500 per staff x 6 staff= \$3,000	\$3,000	0	0	\$3,000

Office supplies	\$2000 annual	0	\$2,000	0	0
Dues & Subscriptions	\$500 annual	0	\$500	0	0
10% diminish	10% of cost for overhead and expenses	0	0	0	0
<b>TOTALS:</b>		\$89,680	\$277,500	\$25,000	\$392,180

**B) Narrative:** The budget narrative is the justification of “how” and/or “why” a line item helps to meet the project deliverables. Provide a description for each line item request as necessary. Explain how the line item relates to the project. If you are requesting funds to pay for staff, list the specific duties of each position. See attached SAMPLE Project Budget and Budget Narrative

**1. Personnel: Clinical Advocate**

**Meets with survivors and their families in-home or in their community weekly or as needed, utilizes art and play therapy to process trauma, creates a recovery plan and monitors milestones, enters data and session notes.**

**\$24.04/hr x 40 hrs week x 52 weeks=\$50,000 x 4 staff**

**2. Personnel: Clinical Supervisor/ Licensed**

**Supervises all clinical advocates, provides development and training to clinical advocates, oversees caseloads and assignments, and monitors data collection and reporting.**

**\$33.65/hr x 40 hrs week x 52 weeks= \$70,000**

**3. Personnel: Licensed Clinical Advocate**

**Meets with survivors and their families in-home or in their community weekly or as needed to treat mental, behavioral or emotional problems or disorder, creates a recovery plan and monitors milestones, enters data and session notes.**

**\$26.44/hr x 40 hrs a week x 52 weeks= \$55,000**

**4. Personnel: Benefits**

**Medical, worker’s compensation, paid time off and holiday pay for 6 clinical staff.**

**\$325,000 x .18% =\$58,500**

**5. Transport: Mileage for Staff**

**6 staff commuting roundtrip to survivor’s homes, appointments and trainings at 0.53c x 500 miles a month x 12 months= \$3,180**

**6. Training: Staff Development**

**Continuing education training to maintain licensures and educational training to refine skills and best practices in delivering clinical services to survivors for 6 staff at \$500 per staff = \$3,000**

**Office Supplies: Paper, pens, binders, case file folders, notebooks, etc. for 6 staff to support over 210 survivors facilitating over 2200 sessions for an annual total of \$2000**

**7. Dues and Subscriptions: \$500 Annual fees for unlimited trainings through California Partnership to End Domestic Violence**

**8. 10% Diminish: Costs for overhead and expenses, clinical program’s portion**



**VI. Sources of Funding:** Please list your current sources of funding and amounts.

*Secured/Awarded*

<b>Name of Funder: Foundation, Corporation, Government</b>	<b>Amount</b>
California Governor's Office of Emergency Services, Victim Legal Assistance Program (24 months): Government	\$400,000
California Governor's Office of Emergency Services, Human Trafficking Victim Assistance Program (24 months): Government	\$1,000,000
County of Orange, Shelter, Counseling and Legal: Government	\$100,000
Emergency Solutions Grant, City of Anaheim: Government	\$20,000
Emergency Solutions Grant, City of Santa Ana: Government	\$14,000
Amigos de los Ninos: Foundation	\$5,000
Crean: Foundation	\$5,000
George Hoag Family: Foundation	\$25,000
Howard and Shirley Jones: Foundation	\$5,000
In-N-Out: Foundation	\$2,500
Kaiser Permanente Southern California: Foundation	\$50,000
Marisla Fund: Foundation	\$40,000
Margaret E. Oser Fund: Foundation	\$20,000
OC Bar Association Charitable Fund: Foundation	\$5,000
OC United Way Women's Philanthropy Fund: Foundation	\$5,000
OL Halsell: Foundation	\$35,000
Pacific Life: Foundation	\$10,000
Sidney Stern Memorial Trust: Foundation	\$5,000
Sisters of St. Joseph Foundation	\$10,000
Soroptomist of Fullerton: Foundation	\$1,000
Wells Fargo: Foundation	\$5,000
Western Digital: Foundation	\$7,500

*Pending*

<b>Name of Funder: Foundation, Corporation, Government</b>	<b>Amount</b>	<b>Decision Date</b>
Department of Justice, Office on Violence Against Women (OVW), Legal Assistance for Victims: Government	\$550,000	10/1/2017
Department of Justice, OVW, Transitional Housing Assistance Grants for Victims of Sexual Assault, Domestic Violence, Dating Violence, and Stalking: Government	\$350,000	9/30/2017
California Governor's Office of Emergency Services, Increased Access to Services Programs: Government	\$125,000	April 2017
Satterberg: Foundation	\$500,000	
Anaheim Community: Foundation	\$1,000	May 2017
Decorative Arts Society: Foundation	\$5,000	April 2017
Fluor: Foundation	\$10,000	May 2017
Fullerton Rotary Main: Foundation	\$1,500	July 2017
Georgia Pacific: Foundation	\$30,000	May-June 2017
Healthcare Foundation for OC: Foundation	\$25,000	June 2017

Kenneth T. and Elieen L. Norris: Foundation	\$20,000	May 2017
Rotary International: Foundation	\$50,000	June 2017
Dr. Scholl: Foundation	\$25,000	June 2017
Sidney Stern Memorial Trust: Foundation	\$10,000	April 2017
Sisters of St. Joseph Health Care: Foundation	\$25,000	May 2017
Mark S. Taper: Foundation	\$50,000	October 2017
Wells Fargo: Foundation	\$20,000	May 2017
Zonta Club: Foundation	\$20,000	May 2017

**Diversity of Funding Sources:** A financially healthy organization should have a diverse mix of funding sources. Complete those categories that apply to your organization using figures from your most recent fiscal year.

Funding Source	Amount	% of Total Revenue	Funding Source	Amount	% of Total Revenue
Contributions	\$120,000	8%	Program Fees	\$47,000	2%
Fundraising/Special Events	\$60,000	4%	Interest Income	\$5000	>1%
Corp/Foundation Grants	\$200,000	13%	Other: In-kind	\$200,000	13%
Government Grants	\$600,000	39%	Other: various	\$300,000	20%

**Notes:**

## **2017 S.L. Gimbel Foundation APPLICATION**

### **VII. Financial Analysis**

**Agency Name:** Women's Transitional Living Center, Inc.

**Most Current Fiscal Year (Dates):** From July 1, 2016 To: June 30, 2017

This section presents an overview of an applicant organization's financial health and will be reviewed along with the grant proposal. Provide all the information requested on your **entire organization**. Include any notes that may explain any extraordinary circumstances. Information should be taken from your most recent 990 and audit. **Double check your figures!**

#### **Form 990, Part IX: Statement of Functional Expenses**

**1) Transfer the totals for each of the columns, Line 25- Total functional expenses (page 10)**

(A) Total Expenses	(B) Program service expenses	(C) Management & general expenses	(D) Fundraising expenses
\$1,544,860	\$1,328,189	\$216,671	\$0

**2) Calculate the percentages of Columns B, C, and D, over A (per totals above)**

- Program services (B) – A general rule is that at least 75% of total expenses should be used to support programs
- Management & general administration (C) – A general rule is that no more than 15% of total expenses should be used for management & general expenses
- Fundraising (D) – A general rule is that no more than 10% of total expenses should be used for fundraising

(A) Total Expenses	(B) Program service expenses	(C) Management & general expenses	(D) Fundraising expenses
	Columns B / A x 100	Columns C / A x 100	Columns D / A x 100
Must equal 100%	86%	14%	0%

**3) Calculate the difference between your CURRENT year budget for management & general expenses and your previous management & general expenses per your 990 (Column C)**

Percentage of Organization's <u>Current</u> Total Budget used for Administration	Column C, Management & general expenses per 990 above	Differential
12.5 %	14%	( 1.5 ) %

If the differential is above (+) or below (-) **10%**, provide an explanation:



## **2017 S.L. Gimbel Foundation APPLICATION**

**Quick Ratio:** Measures the level of liquidity and measures only current assets that can be quickly turned to cash. A generally standard Quick Ratio equals 1 or more.

<b>Cash</b>	<b>+ Accounts Receivables</b>	<b>/Current Liabilities</b>	<b>= Quick Ratio</b>
\$924,275	\$185,229	334,347	3.32

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**Excess or Deficit for the Year:**

<b>Excess or (Deficit) Most recent fiscal year end</b>	<b>Excess or (Deficit) Prior fiscal year end</b>
\$275,900	\$269,204

**Notes:**

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**VIII. Application submission check list:**

<b><u>Submit FOUR (4) Copies: 1 ORIGINAL (WITH ORIGINAL SIGNATURES) and 3 copies, collated and stapled together of the following:</u></b>	<b><u>Submit ONE (1) Copy:</u></b>
Completed Grant Application Form (cover sheet, narrative), budget page and budget narrative (see sample) and sources of funding, financial analysis page	A copy of your current 501(c)(3) letter from the IRS
Your current operating budget and the previous year's actual expenses (see sample Budget Comparison)	A copy of your most recent year-end financial statements (audited if available; double-sided)
Part IX only of the 990 form, Statement of Functional Expenses (one page). If you completed a 990-EZ, fill out the attached Part IX, Functional Expenses of the 990 form using figures from your 990-EZ	A copy of your most recent 990 ( double-sided)
For past grantees, a copy of your most recent final report.	A list of your Board members and their affiliations

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX. ☐ ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	819,276.	742,104.	77,172.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	118,917.	107,788.	11,129.	
10 Payroll taxes	77,977.	70,575.	7,402.	
11 Fees for services (non-employees):				
a Management				
b Legal	625.		625.	
c Accounting	39,212.		39,212.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion				
13 Office expenses	10,264.	4,119.	6,145.	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	8,479.		8,479.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	75,256.	70,669.	4,587.	
23 Insurance	34,156.	27,626.	6,530.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>OTHER PROGRAM EXPENSES</u>	159,193.	159,174.	19.	
b <u>TELEPHONE &amp; UTILITIES</u>	67,307.	63,171.	4,136.	
c <u>REPAIRS &amp; MAINTENANCE</u>	57,553.	48,621.	8,932.	
d <u>MISCELLANEOUS EXPENSE</u>	26,466.	15,289.	11,177.	
e All other expenses	50,179.	19,053.	31,126.	
25 Total functional expenses. Add lines 1 through 24e.	1,544,860.	1,328,189.	216,671.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				





**Women's Transitional Living Center, Inc.**  
**Profit & Loss Prev Year Comparison**  
July 1, 2016 through June 14, 2017

	<u>Jul 1, '15 - Jun 14, 16</u>
<b>Ordinary Income/Expense</b>	
<b>Income</b>	
4000 · GRANTS/GOVERNMENT	
4010 · GRANTS/FEDERAL/RESTRICTED	
4010-C5 · CACFP	105,158.03
4010-H4 · HUD 2nd Step	52,772.08
4010-H5 · HUD 90 days	38,849.69
Total 4010 · GRANTS/FEDERAL/RESTRICTED	<u>196,779.80</u>
4030 · GRANTS/STATE/RESTRICTED	
4070 · GRANTS/LOCAL/RESTRICTED	
Total 4000 · GRANTS/GOVERNMENT	638,866.32
4100 · GRANTS/FOUNDATIONS	
4150 · GRANTS/FOUNDATION/UNRESTRICTED	
Total 4150 · GRANTS/FOUNDATION/UNRESTRICTED	<u>331,118.09</u>
Total 4100 · GRANTS/FOUNDATIONS	369,618.09
4250 · GRANTS/CORPORATE/UNRESTRICTED	
Total 4250 · GRANTS/CORPORATE/UNRESTRICTED	15,000.00
4300 · PROGRAM REVENUE/BILLING	
Total 4300 · PROGRAM REVENUE/BILLING	446,072.83
4400 · SALES	
Total 4400 · SALES	15,422.10
4500 · FUND RAISING/UNRESTRICTED	
Total 4500-D1 · Annual Fundraising Event	88,533.00
Total 4500 · FUND RAISING/UNRESTRICTED	121,970.73
4700 · DONATIONS	
Total 4700 · DONATIONS	108,460.04
4740 · IN-KIND DONATIONS	
Total 4740 · IN-KIND DONATIONS	<u>117,230.87</u>
<b>Total Income</b>	<u>1,832,640.98</u>
<b>Gross Profit</b>	1,832,640.98
<b>Expense</b>	
6000 · OPERATING EXPENSE	
6100a · EMPLOYEE EXPENSE	
6100 · EMPLOYEE COMPENSATION & TAXES	
6101 · Salaries & Wages	
Total 6101 · Salaries & Wages	820,677.45
6102 · FICA & Medicare Expense	64,836.19
Total 6100 · EMPLOYEE COMPENSATION & TAXES	938,069.35
6104-E2 · EMPLOYEE INSURANCE EXPENSE	
Total 6100a · EMPLOYEE EXPENSE	1,016,214.98
6130 · PROF COUNSELING/CLINICAL FEES	
Total 6130 · PROF COUNSELING/CLINICAL FEES	56,104.90
6160-A1 · AUTOMOTIVE EXPENSE	
Total 6160-A1 · AUTOMOTIVE EXPENSE	12,217.46

**Women's Transitional Living Center, Inc.**  
**Profit & Loss Prev Year Comparison**  
July 1, 2016 through June 14, 2017

	<u>Jul 1, '15 - Jun 14, 16</u>
6185 · Activities/Program	2,858.67
6190 · Supplies/Program	85,027.28
6195 · Safety Net/Fullerton Inn	4,611.20
6200 · Staff Develop/Con't Education	5,885.42
6201 · Outside Services	
6201-O1 · Outside Labor	0.00
6201-V1 · IN KIND - Volunteer Services	0.00
Total 6201 · Outside Services	<u>0.00</u>
6360-B1 · BUILDING EXPENSE	
6430 · Utilities	
Total 6360-B1 · BUILDING EXPENSE	97,711.79
6000 · OPERATING EXPENSE - Other	0.00
Total 6000 · OPERATING EXPENSE	<u>1,315,990.45</u>
7000 · ADMINISTRATION EXPENSE	
7001 · Outsource Management Services	
Total 7001 · Outsource Management Services	39,247.66
7005 · Professional Services	
Total 7005 · Professional Services	21,530.69
Total 7000 · ADMINISTRATION EXPENSE	258,091.39
7150 · Fundraising	
7150-A1 · Annual Fundraising Event	
Total 7150 · Fundraising	<u>37,355.34</u>
Total Expense	<u>1,611,437.18</u>
Net Ordinary Income	221,203.80
Other Income/Expense	
Total Other Income	<u>3,880.17</u>
Net Other Income	3,880.17
Net Income	<u><u>225,083.97</u></u>



**Women's Transitional Living Center, Inc.**  
**Profit & Loss Prev Year Comparison**  
July 1, 2016 through June 14, 2017

	<u>Jul 1, '16 - Jun 14, 17</u>	<u>\$ Change</u>
Ordinary Income/Expense		
Income		
4000 · GRANTS/GOVERNMENT		
4010 · GRANTS/FEDERAL/RESTRICTED		
4010-C5 · CACFP	70,025.24	-35,132.79
4010-H4 · HUD 2nd Step	48,929.52	-3,842.56
4010-H5 · HUD 90 days	25,902.43	-12,947.26
Total 4010 · GRANTS/FEDERAL/RESTRICTED	144,857.19	-51,922.61
4030 · GRANTS/STATE/RESTRICTED		
4070 · GRANTS/LOCAL/RESTRICTED		
Total 4000 · GRANTS/GOVERNMENT	784,296.62	145,430.30
4100 · GRANTS/FOUNDATIONS		
4150 · GRANTS/FOUNDATION/UNRESTRICTED		
Total 4150 · GRANTS/FOUNDATION/UNRESTRICTED	550,452.10	219,334.01
Total 4100 · GRANTS/FOUNDATIONS	581,452.10	211,834.01
4250 · GRANTS/CORPORATE/UNRESTRICTED		
Total 4250 · GRANTS/CORPORATE/UNRESTRICTED	15,000.00	0.00
4300 · PROGRAM REVENUE/BILLING		
Total 4300 · PROGRAM REVENUE/BILLING	359,088.43	-86,984.40
4400 · SALES		
Total 4400 · SALES	18,017.85	2,595.75
4500 · FUND RAISING/UNRESTRICTED		
Total 4500-D1 · Annual Fundraising Event	53,305.00	-35,228.00
Total 4500 · FUND RAISING/UNRESTRICTED	84,493.35	-37,477.38
4700 · DONATIONS		
Total 4700 · DONATIONS	111,276.76	2,816.72
4740 · IN-KIND DONATIONS		
Total 4740 · IN-KIND DONATIONS	186,663.88	69,433.01
Total Income	2,140,288.99	307,648.01
Gross Profit	2,140,288.99	307,648.01
Expense		
6000 · OPERATING EXPENSE		
6100a · EMPLOYEE EXPENSE		
6100 · EMPLOYEE COMPENSATION & TAXES		
6101 · Salaries & Wages		
Total 6101 · Salaries & Wages	1,016,714.02	196,036.57
6102 · FICA & Medicare Expense	80,464.91	15,628.72
Total 6100 · EMPLOYEE COMPENSATION & TAXES	1,173,035.36	234,966.01
6104-E2 · EMPLOYEE INSURANCE EXPENSE		
Total 6100a · EMPLOYEE EXPENSE	1,266,930.86	250,715.88
6130 · PROF COUNSELING/CLINICAL FEES		
Total 6130 · PROF COUNSELING/CLINICAL FEES	116,093.20	59,988.30
6160-A1 · AUTOMOTIVE EXPENSE		
Total 6160-A1 · AUTOMOTIVE EXPENSE	13,097.83	880.37

**Women's Transitional Living Center, Inc.**  
**Profit & Loss Prev Year Comparison**  
July 1, 2016 through June 14, 2017

	<u>Jul 1, '16 - Jun 14, 17</u>	<u>\$ Change</u>
6185 · Activities/Program	1,610.00	-1,248.67
6190 · Supplies/Program	70,003.29	-15,023.99
6195 · Safety Net/Fullerton Inn	4,300.00	-311.20
6200 · Staff Develop/Con't Education	11,966.52	6,081.10
6201 · Outside Services		
6201-O1 · Outside Labor	0.00	0.00
6201-V1 · IN KIND - Volunteer Services	2,889.18	2,889.18
Total 6201 · Outside Services	<u>2,889.18</u>	<u>2,889.18</u>
6360-B1 · BUILDING EXPENSE		
6430 · Utilities		
Total 6360-B1 · BUILDING EXPENSE	84,515.69	-13,196.10
6000 · OPERATING EXPENSE - Other	16.85	16.85
Total 6000 · OPERATING EXPENSE	<u>1,604,179.89</u>	<u>288,189.44</u>
7000 · ADMINISTRATION EXPENSE		
7001 · Outsource Management Services		
Total 7001 · Outsource Management Services	11,018.68	-28,228.98
7005 · Professional Services		
Total 7005 · Professional Services	12,025.39	-9,505.30
Total 7000 · ADMINISTRATION EXPENSE	<u>225,035.73</u>	<u>-33,055.66</u>
7150 · Fundraising		
7150-A1 · Annual Fundraising Event		
Total 7150 · Fundraising	<u>17,748.84</u>	<u>-19,606.50</u>
Total Expense	<u>1,846,964.46</u>	<u>235,527.28</u>
Net Ordinary Income	293,324.53	72,120.73
Other Income/Expense		
Total Other Income	<u>3,459.54</u>	<u>-420.63</u>
Net Other Income	<u>3,459.54</u>	<u>-420.63</u>
Net Income	<u><u>296,784.07</u></u>	<u><u>71,700.10</u></u>

**Women's Transitional Living Center, Inc.**  
**Profit & Loss Prev Year Comparison**  
July 1, 2016 through June 14, 2017

	<u>% Change</u>
Ordinary Income/Expense	
Income	
4000 · GRANTS/GOVERNMENT	
4010 · GRANTS/FEDERAL/RESTRICTED	
4010-C5 · CACFP	-33.41%
4010-H4 · HUD 2nd Step	-7.28%
4010-H5 · HUD 90 days	-33.33%
Total 4010 · GRANTS/FEDERAL/RESTRICTED	-26.39%
4030 · GRANTS/STATE/RESTRICTED	
4070 · GRANTS/LOCAL/RESTRICTED	
Total 4000 · GRANTS/GOVERNMENT	22.76%
4100 · GRANTS/FOUNDATIONS	
4150 · GRANTS/FOUNDATION/UNRESTRICTED	
Total 4150 · GRANTS/FOUNDATION/UNRESTRICTED	66.24%
Total 4100 · GRANTS/FOUNDATIONS	57.31%
4250 · GRANTS/CORPORATE/UNRESTRICTED	
Total 4250 · GRANTS/CORPORATE/UNRESTRICTED	0.0%
4300 · PROGRAM REVENUE/BILLING	
Total 4300 · PROGRAM REVENUE/BILLING	-19.5%
4400 · SALES	
Total 4400 · SALES	16.83%
4500 · FUND RAISING/UNRESTRICTED	
Total 4500-D1 · Annual Fundraising Event	-39.79%
Total 4500 · FUND RAISING/UNRESTRICTED	-30.73%
4700 · DONATIONS	
Total 4700 · DONATIONS	2.6%
4740 · IN-KIND DONATIONS	
Total 4740 · IN-KIND DONATIONS	59.23%
Total Income	16.79%
Gross Profit	16.79%
Expense	
6000 · OPERATING EXPENSE	
6100a · EMPLOYEE EXPENSE	
6100 · EMPLOYEE COMPENSATION & TAXES	
6101 · Salaries & Wages	
Total 6101 · Salaries & Wages	23.89%
6102 · FICA & Medicare Expense	24.11%
Total 6100 · EMPLOYEE COMPENSATION & TAXES	25.05%
6104-E2 · EMPLOYEE INSURANCE EXPENSE	
Total 6100a · EMPLOYEE EXPENSE	24.67%
6130 · PROF COUNSELING/CLINICAL FEES	
Total 6130 · PROF COUNSELING/CLINICAL FEES	106.92%
6160-A1 · AUTOMOTIVE EXPENSE	
Total 6160-A1 · AUTOMOTIVE EXPENSE	7.21%

**Women's Transitional Living Center, Inc.**  
**Profit & Loss Prev Year Comparison**  
July 1, 2016 through June 14, 2017

	<u>% Change</u>
6185 · Activities/Program	-43.68%
6190 · Supplies/Program	-17.67%
6195 · Safety Net/Fullerton Inn	-6.75%
6200 · Staff Develop/Con't Education	103.33%
6201 · Outside Services	
6201-O1 · Outside Labor	0.0%
6201-V1 · IN KIND - Volunteer Services	100.0%
Total 6201 · Outside Services	100.0%
6360-B1 · BUILDING EXPENSE	
6430 · Utilities	
Total 6360-B1 · BUILDING EXPENSE	-13.51%
6000 · OPERATING EXPENSE - Other	100.0%
Total 6000 · OPERATING EXPENSE	21.9%
7000 · ADMINISTRATION EXPENSE	
7001 · Outsource Management Services	
Total 7001 · Outsource Management Services	-71.93%
7005 · Professional Services	
Total 7005 · Professional Services	-44.15%
Total 7000 · ADMINISTRATION EXPENSE	-12.81%
7150 · Fundraising	
7150-A1 · Annual Fundraising Event	
Total 7150 · Fundraising	-52.49%
Total Expense	14.62%
Net Ordinary Income	32.6%
Other Income/Expense	
Total Other Income	-10.84%
Net Other Income	-10.84%
Net Income	31.86%



Strengthening Inland Southern California through Philanthropy

BOARD OF DIRECTORS

Sean Varner  
Chair of the Board

J. Sergio Bohon  
Vice Chair of the Board

Pat Spafford, CPA  
Chief Financial Officer

Dr. Paulette Brown-Hinds  
Secretary of the Board

Rabbi Hillel Cohn

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Meredyth "Charlie" Meredith

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Kathleen Sawa

Philip Savage IV  
Immediate Past Board Chair

Dr. Henry Shannon

Tamara Sipos

Beverly Stephenson

Randall Tagami

Diane Valenzuela

Paula Myles  
Interim President and CEO

July 21, 2017

*S. L. Gimbel Foundation Fund*

Ms. Gigi Tsontos  
Executive Director  
Women's Transitional Living Center  
P.O. Box 916  
Fullerton, CA 92831

Dear Ms. Tsontos:

Congratulations! A grant has been approved for **Women's Transitional Living Center** in the amount of **\$25,000.00** from the S.L. Gimbel Foundation. The **performance period for this grant is August 1, 2017 to July 31, 2018**. Additional funding beyond the performance period is not guaranteed. It is highly recommended that alternative funding sources be sought accordingly. The grant is to support the following as specified in your proposal:

*Expand support services to non-residential domestic violence survivors*

This grant is subject to the terms outlined in the enclosed Grant Agreement. After you have reviewed the terms and conditions of the Grant Agreement, **please sign and date the agreement and return with original signature to The Community Foundation by Friday, August 25, 2017**. Be sure copy the signed agreement for your records. Funds will be released upon receipt of the signed Grant Agreement.

A condition of this grant is that you agree to submit the Grant Evaluation Form which includes a narrative report and fiscal report. **The Grant Evaluation is due by August 15, 2018** and a copy will be available online.

We wish you great success and look forward to working with you during the grant performance period. If you have any questions, please feel free to contact me at 951-241-7777.

Sincerely,

Celia Cudiamat  
Executive Vice President of Programs

23477 Women's Transitional Living Center

20170384 GIMB







Strengthening Inland Southern California through Philanthropy

3700 Sixth Street, Suite 200

Riverside, CA 92501

P: 951-684-4194

F: 951-684-1911

[www.thecommunityfoundation.net](http://www.thecommunityfoundation.net)

**S. L. Gimbel Foundation Fund  
Grant Agreement**

**Organization:** Women's Transitional Living Center  
**Grant Amount:** \$25,000.00 **Grant Number:** 20170384  
**Grant Period:** August 1, 2017 to July 31, 2018 (*Evaluation Due: August 15, 2018*)  
**Purpose:** Expand support services to non-residential domestic violence survivors

**1. Use of Grant Funds**

Grant funds must be expended within the grant period, for the purpose and objectives described in your grant proposal. Grant funds may not be expended for any other purpose without prior written approval by The Community Foundation. If there are significant difficulties in making use of the funds as specified in your proposal, or if the grant funds cannot be spent within the grant period, notify us in writing promptly.

Formal requests for extensions or variances must be submitted to the Foundation's Board of Directors for approval a minimum of 60 days before the end of the grant period.

Requests for variances or extensions are reviewed on a case-by-case basis and approved by the Board of Directors. If a request is denied, unused funds must be immediately refunded to the Foundation.

Grant funds will not be expended for any political or lobbying activity or for any purpose other than one specified in section 170(c)(2)(b) of the Code.

**2. Payment of Grant Funds**

The grant funds will be paid in full by the Foundation upon receipt of the signed Grant Agreement. Challenge grant funds will be paid in full upon receipt of the signed Grant Agreement and upon receipt of documentation providing evidence that condition(s) of the challenge grant has/have been met.

**3. Certification and Maintenance of Exempt Organization Status**

This grant is specifically conditioned upon Grantee's status as an eligible grantee of The Community Foundation. The Foundation has obtained a copy of the Grantee's IRS determination letter. Grantee confirms that it has not had any change in its legal or tax-exempt status, and shall notify the Foundation immediately of any such change.

**4. Final Report and Records**

The Grantee will submit the Grant Evaluation report per the deadline set forth in the award letter. This report includes a narrative on outcomes based on goals and objectives set forth in the grant proposal and an expenditure report documenting use of grant funds. If equipment was purchased, copies of receipts need to be included.

**5. Grantee's Financial Responsibilities**

Grantee will keep records of receipts and expenditures of grant funds and other supporting documentation related to the grant at least four (4) years after completion of the grant and will make such records of receipts, expenditures and supporting documentation available to the Foundation upon request, for the purpose of conducting financial audits, making verifications, and investigations as deemed necessary concerning the grant.

## 6. Publicity

The Community Foundation appreciates publicity for the grant in all relevant published materials, such as brochures, newsletters and annual reports. The credit line of "Made possible in part by a grant from **"The Community Foundation, Strengthening Inland Southern California through Philanthropy"** is suggested. The Grantee will allow the Foundation to review and approve the content of any proposed publicity concerning the grant prior to its release, upon request. When your donors are listed in printed materials, include the Foundation in the appropriate contribution size category. Sending a brief press release to your local paper is appreciated. Please email Charee Gillens, our Marketing & Communications Officer, at [cgillens@thecommunityfoundation.net](mailto:cgillens@thecommunityfoundation.net) with copies of any printed or publicity materials that highlight the grant. When publishing our name, please note the "The" at the beginning of our name is a legal part of our name. It should always be used and capitalized. Attaching a logo is also appreciated. Our logo can be downloaded on our website at [www.thecommunityfoundation.net](http://www.thecommunityfoundation.net).

Grantee agrees to allow the Foundation to include information about this grant in the Foundation's periodic public report, newsletter, news releases, social media postings, and on the Foundation's website. This includes the amount and purpose of the grant, any photographs you have provided, your logo or trademark, and other information and materials about your organization and its activities.

## 7. Indemnification

In the event that a claim of any kind is asserted against the Grantee or the Foundation related to or arising from the project funded by the Grant and a proceeding is brought against the Foundation by reason of such claim, the Grantee, upon written notice from the Foundation, shall, at the Grantee's expense, resist or defend such action or proceeding, at no cost to the Foundation, by counsel approved by the Foundation in writing.

Grantee hereby agrees, to the fullest extent permitted by law, to defend, indemnify, and hold harmless the Foundation, its offices, directors, employees, and agents, from and against any and all claims, liabilities, losses, and expenses (including reasonable attorneys' fees) directly, indirectly, wholly, or partially arising from or in connection with any act or omission by Grantee, its employees, or agents in applying for or accepting the Grant, in expending or applying the Grant funds or in carrying out any project or program supported by the Grant, except to the extent that such claims, liabilities, losses, and expenses arise from or in connection with any bad faith act or omission by the Foundation, its officers, directors, employees, or agent.

## 8. Termination

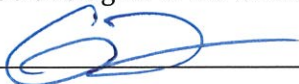
The Community Foundation may terminate this agreement, modify or withhold payments under this grant award, require a total or partial refund of any grant funds, or all at any time, if, in the Community Foundation's judgment: a) The Community Foundation is not satisfied with the quality of the Grantee's progress toward achieving the project goals and objectives; b) the Grantee dissolves or fails to operate; c) the Grantee fails to comply with the terms and conditions of this agreement; d) the Grantee fails to comply with the requirements of any law or regulation applicable to you, the Foundation, or this grant.

## 9. Limitation of Support

This Agreement contains the entire agreement between the parties with respect to the Grant and supersedes any previous oral or written understandings or agreements.

I have read and agree to the terms and conditions of the Grant Agreement.

Signature



Printed Name

Gigi Tsontos

Date

July 27 2017

Title

CEO

AV  
8/7/17

Organization: Women's Transitional Living Center

Grant Number: 20170384





Strengthening Inland Southern California through Philanthropy

BOARD OF DIRECTORS August 9, 2017

*S. L. Gimbel Foundation Fund*

Sean Varner  
*Chair of the Board*

J. Sergio Bohon  
*Vice Chair of the Board*

Pat Spafford, CPA  
*Chief Financial Officer*

Dr. Paulette Brown-Hinds  
*Secretary of the Board*

Rabbi Hillel Cohn

Paul Granillo

Stanley Grube

Dr. Fred Jandt

Andrew Jaramillo

Nefertiti Long

Kirtland Mahlum

Brian McDonald

Meredith "Charlie" Meredith

Susan Ovitt

Teresa Rhyne

Kathleen Sava

Philip Savage IV  
*Immediate Past Board Chair*

Dr. Henry Shannon

Tamara Sipos

Beverly Stephenson

Randall Tagami

Diane Valenzuela

Paula Myles  
*Interim President and CEO*

Ms. Gigi Tsontos  
Executive Director  
Women's Transitional Living Center  
P.O. Box 916  
Fullerton, CA 92831

Dear Ms. Tsontos:

The Community Foundation is pleased to enclose a grant check for \$25,000.00 from the S. L. Gimbel Foundation, a component fund at The Community Foundation. By cashing the grant check, you are agreeing to the conditions stated under the *Terms of Grant* which you have signed and returned. **The completed Grant Evaluation form is due by August 15, 2018** and will be available online on The Community Foundations website under Grants/Forms. Please note that any grant variances or extensions must be requested in writing and in advance. Any remaining grant funds must be returned to The Community Foundation at the end of the grant period.

We greatly appreciate any help you can give us in publicizing the grant. Please use the following credit in any grant announcements or materials funded by the grant: *"Women's Transitional Living Center is supported by a grant from The S. L. Gimbel Foundation."* You may send us copies of articles printed in local papers, stories in your agency newsletter, annual report, press releases, and other publications for our files.

Please feel free to contact me at 951-241-7777 should you have any questions.

Sincerely,

Celia Cudiamat  
Executive Vice President of Programs

20170384

42715

GIMB2



**The Community Foundation**  
Strengthening Inland Southern California through Philanthropy  
3700 SIXTH STREET, SUITE 200  
RIVERSIDE, CA 92501  
951-241-7777 / FAX 951-684-1911

**CITIZENS BUSINESS BANK**  
A Financial Services Company  
3695 Main Street, Riverside, CA 92501  
90-3414/1222

Check Fraud  
Protection for Business

42715

PAY \* Twenty-Five Thousand and no/100 \*

TO THE  
ORDER OF

DATE

08/08/2017

AMOUNT

\$ \*\*\*\*25,000.00

Women's Transitional Living Center  
P.O. Box 916  
Fullerton, CA 92831

*Paula L. Brown-Kinder*  
AUTHORIZED SIGNATURE

⑈042715⑈ ⑆122234149⑆ 244124437⑈

The Community Foundation

42715

23477 Women's Transitional Living Center

08/08/2017 042715

20170384	07/20/2017	Expand support services to non-residential domestic	25,000.00
GIMB	S.L. Gimbel Foundation Advised Fund		25,000.00

CHECK TOTAL: \$ \*\*\*\*25,000.00

The Community Foundation

42715

23477 Women's Transitional Living Center

08/08/2017 042715

20170384	07/20/2017	Expand support services to non-residential domestic	25,000.00
GIMB	S.L. Gimbel Foundation Advised Fund		25,000.00

CHECK TOTAL: \$ \*\*\*\*25,000.00