

# 2026/27 TOT Grant Program WORKSHOP



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# PRESENTATION OUTLINE

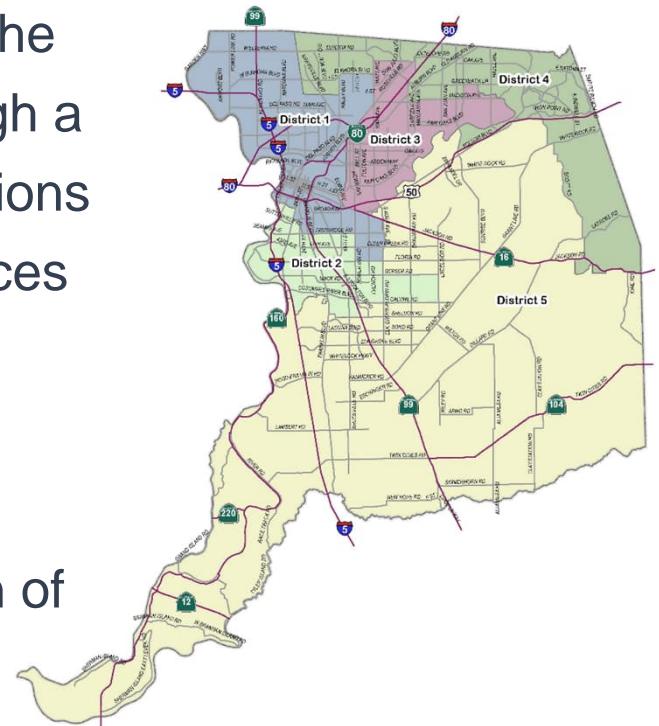
- TOT Grant Program Overview
- Timeline
- Insurance Requirements
- Application Guidelines & Eligibility
- Online Application – [TOT Grant Portal \(Foundant\)](#)
- Application Review
- Application Guide
- What Happens Next?
- Q&A



# TOT GRANT PROGRAM OVERVIEW

In 2017, the County Board of Supervisors established the TOT Grant Program to provide financial support, through a competitive application process, to non-profit organizations that carry out community-based programs and/or services in Sacramento County.

During the recommended budget hearing on June 10, 2025, the Board of Supervisors approved the allocation of \$1M to fund another year of the program.



# TIMELINE

## **Open Application Period : January 5, 2026 – February 6, 2026**

- Application and supplemental material must be submitted by 5 p.m. on Friday, February 6, 2026.
- Online Applications Only: Applications are only accepted electronically through the Portal.
- Grant Application Review Period: February 2026 - May 2026
- Grantee Award Approval and Notifications: June 2026



# INSURANCE REQUIREMENTS

## Agreement with County contains insurance requirements

- Insurance provides coverage for claims if they arise from the organization's activities.
- Protects both your organization and the County from financial loss.

## Standard Requirements

- General Liability
- Auto Liability (Commercial or Personal)
- Workers' Compensation/Employer's Liability

## Evidence of Insurance

- Certificate of Insurance
- Policy Endorsements (Additional Insured, Waiver of Subrogation, Primary and Noncontributory)

Recommend discussing with your insurance agent/broker in advance

# APPLICATION GUIDELINES & ELIGIBILITY

## Policy Guidelines

- Requests Amounts are:
  - Minimum funding request of \$5,000
  - Maximum funding request of \$35,000
- Grant Period: 11 Months
  - July 1, 2026, to May 31, 2027
- Awarded grant funds are distributed on a reimbursement basis.
- Can request an advance payment of up to \$10,000.

## Applicant Eligibility

To be eligible for funding, an applicant must:

- Be a non-profit organization which has completed one fiscal year.
- *Note: Use of a fiscal sponsor is allowed. Fiscal sponsors must have similar organizational goals as the applicant's organization and meet the same application eligibility requirements.*
- Have a physical presence and provide services in Sacramento County.

# APROVED PROJECTS

## We Fund Projects:

- A project may consist of one or more specific events or activities.
- A project may be a part of an applicant's regular season or activities.
- Organizations may apply for any or all phases of a project, from its planning through its implementation.
- A project does not have to be new or large.



# UNAPPROVED PROJECTS

## We Do Not Fund:

- Direct grants to individuals, sub-granting or re-granting, vouchers or co-payments.
- Pass through or regrant funding to a government entity
- Awards to individuals or organizations honoring or recognizing achievement.
- For-profit enterprises or activities.
- Capital campaigns, cash reserves or endowments.
- Fundraising events, programs, or social activities such as receptions, parties, galas.
- Debt reduction.
- Costs incurred before the beginning or after the completion of the official term of the funding agreement.
- City, county, state or federal government institutions.

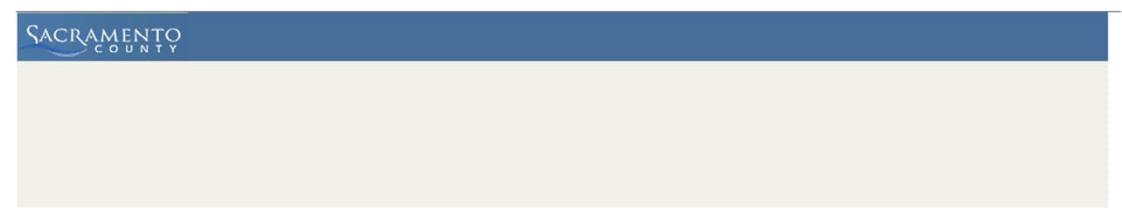


# ONLINE APPLICATION - Logging-in

The 2025-26 TOT Grant Program application is web-based and requires an account to access the application. Detailed instructions can be found on our [Webpage](#).

## 1. Log In

- a) New Users: “Create New Account” to complete the Registration Process.
- b) Existing Users: Enter your credentials and log in. A “Forgot your Password” link is available.
- c) Not sure if your organization is registered, please contact [SacCountyTOTAdmin@saccounty.gov](mailto:SacCountyTOTAdmin@saccounty.gov)



The screenshot shows the Sacramento County online grant portal's logon page. At the top, the Sacramento County logo is visible. The main area is titled "Logon Page". It contains fields for "Email Address\*" and "Password\*", both marked with a red asterisk indicating they are required. Below these fields are two buttons: "Log On" (in blue) and "Create New Account" (in grey). A "Forgot your Password?" link is also present. To the right of the logon form, a grey sidebar provides instructions for new and existing users. It says: "Welcome to the Sacramento County's online grant portal. New Users: Please click on "Create New Account" to complete the registration process and create your logon credentials. Existing Users: Please enter your credentials and log in. If you forgot your password, please use the "Forgot your Password" link to the left to reset your password. Not Sure? If you think that you or someone at your organization has already registered in the system, do not create a new account. Please contact our Grant Administrator, Tina Koepke, at [koepke@saccounty.net](mailto:koepke@saccounty.net) to receive your username." The entire sidebar is enclosed in a light grey box.

WE ONLY ACCEPT APPLICATIONS THROUGH THIS WEB-BASED PROGRAM



# ONLINE APPLICATION - Application

## 2. Apply Online.

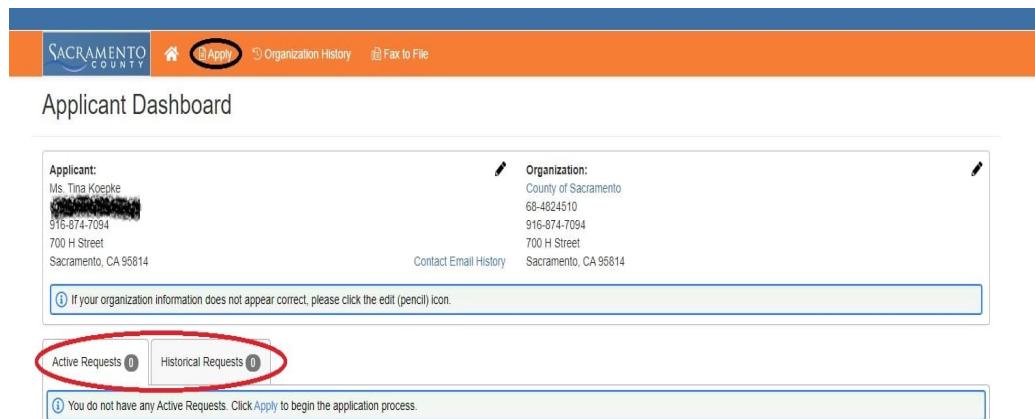
- Upon accessing the system for the first time, you will land on the Apply Page. This page displays current open opportunities that you can apply for, relevant deadlines and/or other related information.

## 3. Complete Application Form.

- In the form, contact and organization information automatically populates. An application can be saved or submitted. No changes can be made to a submitted form.

## 4. Applicant Dashboard.

- Your dashboard is where you can edit your saved application, review your submitted application and check on the status or follow-ups for your application.



The screenshot shows the Sacramento County Applicant Dashboard. At the top, there is a navigation bar with links for Home, Apply (which is highlighted with a red circle), Organization History, and Fax to File. Below the navigation bar, the page title is "Applicant Dashboard". The dashboard displays two main sections: "Applicant" and "Organization". The "Applicant" section shows information for Ms. Tina Koepke, including her phone number (916-874-7094), address (700 H Street, Sacramento, CA 95814), and a note that organization information is correct. The "Organization" section shows information for County of Sacramento, including its phone number (68-4824510), address (700 H Street, Sacramento, CA 95814), and a note about contact email history. At the bottom, there are two buttons: "Active Requests" (which is highlighted with a red circle) and "Historical Requests". A note below these buttons states, "You do not have any Active Requests. Click Apply to begin the application process." The "Apply" button is also highlighted with a red circle.

# ONLINE APPLICATION - Navigation

## 5. Application.

- a) Clicking “Apply” from the Applicant Dashboard brings you the application. The Applicant and Organization information, the Due Date, a Collaborate feature and access to the Question list will be displayed.

## 6. Collaborate.

- a) This feature allows an applicant to invite collaborators to view, edit and/or apply on the organization’s behalf.

## 7. Save and Submit.

- a) Your application will be saved automatically on a frequent basis, however, there is a “Save” button at the end of the application along with a “Submit” button once the application is completed.

The screenshot displays the Sacramento County Online Application interface across three main pages: Application, Collaborate, and Confirmation.

- Application Page:** Shows the "Application" tab selected. It displays the "Process: 2020 Transient Occupancy Tax (TOT) Grant Program". The "Collaborate" button in the top right corner is circled in red. The "Question List" button in the bottom right corner is also circled in red.
- Collaborate Page:** A modal window titled "Collaborate". It includes fields for "Email Address" (with a red box and arrow pointing to it) and "Permissions" (with radio buttons for "Can view", "Can edit" (selected), and "Can submit"). A "Message" field is present with a red arrow pointing to it. A "Invite" button is at the bottom right, with a green circle and a red arrow pointing to it.
- Confirmation Page:** A modal window titled "Confirmation". It contains a "Confirmation" section with a "I Agree" checkbox, a "Signature" section with a "Type your name" field, and a "Save Application" and "Submit Application" button at the bottom. The "Save Application" button is circled in red.

# APPLICATION GUIDE

1. Organization Information & Narrative
2. Project Information
3. Project Narrative
4. Budget
5. Additional Documentation



# ORGANIZATION NARRATIVE – Data

In this Section, we'll ask you to confirm some basic information for the organization, such as:

- Organization Name
- Physical Location
- Provide a Payee Data Record Form
- Information about the Fiscal Sponsor (as applicable)

General Notes for the Application:

- Character counts include Spaces.
- The application does Auto Save.
- Please pay careful attention to page counts.
- Questions? Please ask us.

**County of Sacramento**  
**PAYEE DATA RECORD**  
(Required in lieu of IRS W-9 when remitting funds to the County of Sacramento)

**INSTRUCTIONS:** Complete all information contained on this form. Fill in, date, and return to the Department requesting this information. Please return of this fully completed form 30 days when processing payments. Information provided in this form will be used by the Department of Finance to prepare Information Returns (Form 1099), statement California nonresident withholding and funds remitted to the County of Sacramento by the Payee. Payment will be subject to a 10% nonresident withholding and state income tax backup withholding of 35%, without a valid FEIN/SSN. See next page for more information and Privacy Statement.

<b>PAYEE DATA RECORD</b>	
<input type="checkbox"/> Check the boxes that apply to Sacramento County's payments to you	
<b>TYPE</b>	<input type="checkbox"/> Goods <input type="checkbox"/> Services <input type="checkbox"/> Medical Services <input type="checkbox"/> Legal Services <input type="checkbox"/> Rents/Lease <input type="checkbox"/> Other _____
<b>NAME</b> (as shown on your Income Tax return)	
<b>TRADE NAME OR DBA</b> (if different from line 1)	
<b>MAILING ADDRESS</b> (Number and Street or P.O. Box Number), <b>CITY, STATE AND ZIP CODE</b>	
<b>PAYOUT REMITTANCE ADDRESS</b> (Number and Street or P.O. Box Number, City, State and Zip Code)	
<b>ePAYABLE CONTACT INFORMATION</b> (Name, Phone Number and Email Address)	
<b>FEDERAL TAX CLASSIFICATION &amp; EXEMPTIONS</b> <input type="checkbox"/> INDIVIDUAL OR SOLE PROPRIETOR (SSN) <input type="checkbox"/> PARTNERSHIP (FEIN) <input type="checkbox"/> ESTATE OR TRUST (FEIN) <input type="checkbox"/> CORPORATION (FEIN); (MARK ONLY ONE TYPE) <input type="checkbox"/> C CORPORATION (FEIN) <input type="checkbox"/> S CORPORATION (FEIN) <input type="checkbox"/> LIMITED LIABILITY COMPANY: ENTER THE TAX CLASSIFICATION (C-Corporation, S-S Corporation, P-Partnership) <input type="checkbox"/> GOVERNMENT ENTITIES - Federal, State, and Local (including School District) <input type="checkbox"/> EXEMPT (nonprofit) - page code if any <small>Exemption from FATCA reporting (see instructions on next page)</small>	
<b>TIN NUMBER</b>	Enter your TIN in the appropriate box. If you are an individual or sole proprietor you must enter your SSN. Single proprietors, LLCs, and limited entities must enter the TIN of the owner identified on the Name line.
<b>SOCIAL SECURITY NUMBER</b>	<b>EMPLOYER IDENTIFICATION NUMBER</b>
<b>RESIDENCY STATUS</b> <input type="checkbox"/> California Resident - Qualified with Secretary of State to do business in California or maintains a permanent place of business in California. <small>(See Nonresident withholding on next page)</small> <input type="checkbox"/> California Nonresident - Subject to State income tax if I reside in California <input type="checkbox"/> California Nonresident - To qualify for exemption, check one of the following: <input type="checkbox"/> No services provided in California. <input type="checkbox"/> A completed Franchise Tax Board Form 500. - (must be attached) <input type="checkbox"/> A waiver of State withholding from Franchise Tax Board. - (must be attached)	
<b>CALIFORNIA SALES TAX PERMIT NUMBER</b> <small>(Required only for California nonresident entities that charge California sales tax)</small>	
<b>CERTIFYING SIGNATURE</b> <small>Under penalty of perjury, I certify that:</small> 1. The number above on this form is my correct taxpayer identification number, and 2. I am subject to California State income tax if I reside in California, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding, or (c) I have not been notified by the IRS that I am no longer subject to backup withholding, and 3. I am not subject to California State Franchise Tax Board (FTB) if (a) I am not a resident of California, and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. <small>If facts change upon which this form are based, I will promptly notify the County of Sacramento.</small>	
<b>AUTHORIZED PAYEE REPRESENTATIVE'S NAME &amp; TITLE (type or print)</b>	<b>E-MAIL ADDRESS</b>
<b>SIGNATURE OF U.S. PERSON</b>	<b>DATE</b> <b>TELEPHONE NUMBER</b>



# ORGANIZATION NARRATIVE – Categories

## 1. Organization Category

Select the category that best describes the ***mission*** of the organization:

- a. Arts and Culture
- b. Community Development and Services
- c. Economic or Workforce Development
- d. Health & Human Services

## 2. Organization Description – 1500 Character Limit

Provide a brief description of your organization, its mission, and primary programs and services.

# ORGANIZATION NARRATIVE – Cont.

## **3. Accomplishments and Challenges – 1000 Character Limit**

- Summarize your organization's accomplishments and challenges over the past year.
- Describe short- and long-term challenges. Additionally, describe any future plans for the organization.

## **4. Organization Administration – 1000 Character Limit**

- Explain how your organization's administration and board is structured. Include staff, number of board members, officers, board committees and their responsibilities.

# ORGANIZATION NARRATIVE – Staff

## **5. Number of Full Time Staff**

- Please enter the number of paid full-time employees of the organization.

## **5a. Number of Part Time Staff**

- Please enter the number of paid part-time employees of the organization.

## **5b. Number of Volunteers**

- Please enter the number of volunteers for the organization. This number should also include the Board of Directors/Members if they are not compensated by the organization.

## **6. Number of Years in Operation**

- How long has the organization been operating in Sacramento County as a true non-profit entity registered with the Secretary of State?

# ORGANIZATION NARRATIVE – Budget

## **7. Total Organization Budget**

- The total organization budget is the same as your final adopted fiscal year budget. This is the last completed budget, not budget for the current year. This will be supported by the upload in item #8.

## **7a. Fiscal Year End Date**

- Provide the Fiscal Year End Date for the organization.

## **8. Final Adopted Fiscal Year Budget – 2-page limit, must be in PDF format**

- Please provide your last completed Fiscal Year budget.
- A Budget Summary may be provided if the completed Fiscal Year budget exceeds 2 pages.
- A space has been provided for any clarifications to the budget document submitted. (If the organization has a deficit or surplus of funds, please explain why)

# APPLICATION – Project Information

## **9. Project Title – 75 Character Limit**

Please provide a descriptive title for the application project/program.

## **10. Project Summary – 300 Character Limit**

Provide a brief overview of how the grant funds would be used. This description will be used to introduce your proposal to the Board of Supervisors. If funded, it will be used to describe your approved grant.

## **11. Total Grant Amount Requested**

Minimum request level is \$5,000 and may not exceed \$35,000.

- Organizations should apply for no more than 20% of their last FY Budget or \$5,000 (minimum request) whichever is larger.

## **12. Project Location (Supervisorial District)**

Please indicate where the project will take place

## **13. Communities Served by Project**

Select All that Apply

# APPLICATION – Project Narrative

## **14. Project Description – 2000 Character Limit**

Provide a detailed description of the proposed project. Emphasize how this project will serve the Sacramento Community through innovation, education, training, tourism or the underserved.

## **15. Project Timeline – Activities & Outcomes – 1000 Character Limit**

Describe the timeline for implementation of your project over a 11 month period. The timeline should list key dates/months that correspond to the description of the activities to take place on those dates/months and expected outcomes.

The timeline should reflect what will be in the project Scope of Services, should your organization be awarded a TOT Grant.

## **16. Description, Impact, and Demographics of the Community – 1000 Character Limit**

Please describe the demographics (age, ethnicity, income, education level if available) and characteristics of the community where your project will take place.



# APPLICATION – Project Narrative Cont.

## **17. Relationship and Experience – 750 Character Limit**

Describe your organization's relationship to and experience working with this community.

What demonstrated successes have you had with this or other projects/programs within this community?

## **18. Evaluation and Measurements – 750 Character Limit**

How will your organization measure the success of the project? Explain the specific quantitative methods that will be used for evaluating and measuring the project's success. For example, number of participants or people served, pre and post surveys, social media platforms metrics, statistics etc. If this project has been produced in the past, include the outcomes.

# APPLICATION – Location and Lease

## **19. Location Improvements**

Do you plan to make changes to your physical location to facilitate the success of your project? \**If yes, a letter of support is required from the property owner, and a long-term lease is recommended.*

## **20. Long Term Lease - Upload**

If you answered “yes” to question #19, please upload the letter from your property owner and a copy of the long-term lease.

# APPLICATION – Budget

## **21. Total Project Budget – 20 Character Limit**

Provide the total budget for the proposed project or program. (This includes your requested funding and any other funding needed.)

## **22. Minimum Amount for Project to Take Place**

Minimum amount from the TOT Grant funding required for the proposed project to be started or completed. (Between \$5,000 - \$35,000)

## **23. Percent of Overall Project Budget – 4 Character Limit**

Please provide the percentage of your request in relation to your overall project budget.

## **24. Percent of Organization Budget – 4 Character Limit**

Please provide the percentage of your project budget in relation to your overall organization budget.

# APPLICATION – Budget Form

## 25. Project Budget Form

Please download this budget form for submission, no other budget form will be accepted. Complete and upload to application.

2025-26 TOT GRANT PROGRAM PROJECT BUDGET FORM			
Organization Name:			
Project Name:			
PROJECT EXPENSES	COLUMN A Amount of Project Expense from source other than TOT Grant	COLUMN B Amount Requested from TOT Grant	COLUMN A+B = Grand Total
<b>Personnel: List project Personnel Expenses. Be specific and identify if employee is full time, half-time or a consultant. Please include the</b>			
Title:	\$ -	\$ -	\$ -
Title:	\$ -	\$ -	\$ -
Title:	\$ -	\$ -	\$ -
<b>Operating/Production Expenses. Be specific</b>			
<b>Facilities (rent or overhead expenses)</b>	\$ -	\$ -	\$ -
<b>Equipment (rental or purchase)</b>	\$ -	\$ -	\$ -
<b>Supplies</b>	\$ -	\$ -	\$ -
<b>Printing</b>	\$ -	\$ -	\$ -
<b>Advertising, promotion</b>	\$ -	\$ -	\$ -
<b>Meeting/Travel</b>	\$ -	\$ -	\$ -
<b>Other (specify):</b>	\$ -	\$ -	\$ -
<b>TOTAL PROJECT EXPENSES</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

# APPLICATION – Budget Revenues

## Project Revenue

SOURCES OF PROJECT REVENUE:	COLUMN A Secured Funding	COLUMN B Pending Funding	COLUMN A + B = Grand Total
Sacramento County-TOT Grant funding request. This amount should be the amount you are requesting for the described project and be placed in the "Pending Funding" column	\$ -	\$ -	\$ -
Foundations (please list the names of the Foundations and amounts individually - add lines as needed)	\$ -	\$ -	\$ -
Business and Corporate contributions (please list the names of the Corporations/businesses and amounts individually - add lines as needed)	\$ -	\$ -	\$ -
Individual contributions	\$ -	\$ -	\$ -
Government Grants (please list the names of the Granting organizations - add lines as needed)	\$ -	\$ -	\$ -
Other (specify source of funding - add lines as needed)	\$ -	\$ -	\$ -
Events or Ticket Sales	\$ -	\$ -	\$ -
Publications & Products	\$ -	\$ -	\$ -
Membership Income	\$ -	\$ -	\$ -
In-kind Support (please list the type of in-kind support and corresponding value of that contribution)	\$ -	\$ -	\$ -
<b>TOTAL PROJECT REVENUE</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

# APPLICATION – Budget Summary

## Project Budget Form - Summary

<b>TOTAL PROJECT EXPENSE</b>	\$	-
<b>TOTAL SECURED FUNDING</b>	\$	-
<b>TOTAL PROJECT EXPENSE LESS SECURED FUNDING</b>	\$	-

**\*\* It is expected that you may be seeking more funding than the project expense.**

*Clarifications (details about supplies needed, foundation contributions and amounts, etc.)*

## Project Budget Clarifications (optional) – 300 Character limit

Any budget clarifications or additional details may be included on the budget form itself such as:

- details about supplies needed
- foundation contributions and amounts
- Mention of a quote for equipment

# APPLICATION – Additional Documentation

## Organizational Support Samples

Please upload documentation to directly support your application. Documentation should speak to the specific need, expertise and impact the organization will have on the community to be served.

- 3 files (Word or PDF format)
- File size limits: 2 MB each
- No more than 5 pages
- Samples can include:
  - Letters of Support or Testimonials from past participants, members of your organization and/or the community are highly recommended.
  - Newspaper, magazine articles, annual reports, or other publications featuring stories about your organization.
  - Brochures, postcards, programs, newsletters or other promotional materials.

# APPLICATION REVIEW

**Applications will be reviewed based on the following:**

**1. Quality and Capacity of the Organization**

- The organization has significant accomplishments.
- Clear budgetary/financial information.
- Confidence in the organizations ability to carry out the project.
- Supplemental material enhances the application.

**2. Strength of Proposed Project**

- Project is clear and concise.
- Resources needed for the project completion are identified.
- Project relates to the organizations mission or the community it serves.
- Project can be completed within the proposed timeline.
- Intended outcomes and methods for evaluating and measuring success are fully articulated.

# APPLICATION REVIEW Cont.

**Applications will be reviewed based on the following:**

## **3. Project Impact and Sustainability**

- A detailed description of the community to be served is clearly outlined.
- Organization's mission and programs are connected to the community the project will serve.
- Compelling explanation of the community need and significant impact from the project.
- Supplemental material clearly demonstrates the organization and the community it serves.

# WHAT HAPPENS TO YOUR APPLICATION?

Applications are evaluated according to the “Review Criteria”.

**STEP 1:** County staff review applications to ensure they meet minimum qualifications. Incomplete applications will not be considered.

**STEP 2:** Applications are reviewed and evaluated based on the established criteria and recommended awardees will be selected.

**STEP 3:** Recommendations are approved at the Board of Supervisors meeting and final decision on all grant awards.

Applicants are notified of funding decisions.

# Questions

APPLY ONLINE



Deadline to apply: Friday, February 6, 2026 (5pm)  
Awards Anticipated Announcement: June 2026

Details: <https://bdm.saccounty.gov/TOTGrantProgram>  
Questions: Email - [SacCountyTOTAdmin@saccounty.gov](mailto:SacCountyTOTAdmin@saccounty.gov)