

**Proposal Application**

**Attachment A Cover Sheet**

Legal name of the organization (or individual) submitting this application: <a href="#">The Salvation Army, A California Corporation</a>	
Legal Status of applicant (e.g., non-profit corporation, government entity): <a href="#">Non-Profit Corporation</a>	
Address of Organization: <a href="#">1002 N Main Ave, Tucson, AZ 85705</a>	
Name and Title of contact person for this application: <a href="#">Bill Davidson, Outreach manager</a>	
Telephone number: <a href="#">520-448-5512</a>	Fax number: <a href="#">520-881-7546</a>
E-mail address: <a href="mailto:Bill.davidson@usw.salvationarmy.org">Bill.davidson@usw.salvationarmy.org</a>	
Indicate the amount of FEMA EFSP Phase 37 funds you are requesting for each service category. Phase 37 funding will be limited to the following categories. Total your requests at the bottom. <b>ROUND REQUESTS TO THE NEAREST DOLLAR; REQUEST ONLY WHOLE DOLLAR AMOUNTS.</b>	
Served Meals/Mass Feeding	<a href="#">\$20,000</a>
Other Food	<a href="#">\$</a>
Mass Shelter	<a href="#">\$50,000</a>
Other Shelter	<a href="#">\$20,000</a>
Rent/Mortgage Assistance*	<a href="#">\$</a>
Utility Assistance*	<a href="#">\$</a>
<b>Total Requested</b>	<b><a href="#">\$90,000</a></b>
* PLEASE NOTE: ALL LOCAL PROVIDERS FOR EMERGENCY RENT/MORTGAGE AND UTILITY ASSISTANCE MUST UTILIZE PIMA COUNTY'S EMERGENCY SERVICES NETWORK (ESN) TO ENSURE NO DUPLICATION OF ASSISTANCE OCCURS.	
To the best of my knowledge and belief, all of the information in this application is true and correct. The document has been authorized by the governing body of the applicant and the applicant will comply with the attached assurances if funding is awarded.	
Typed name of Authorized Signature: <a href="#">Bill Davidson</a>	
Authorized Signature: 	Date signed: <a href="#">June 5, 2020</a>

## Attachment B Application Form

### I. FEMA EFSP FUNDING HISTORY

<b>Phase 37 Request</b>	<b>\$ 90,000</b>
Phase 36 Received	\$ 43,766
Phase 35 Received	\$ 47,832

Note: FEMA funds are intended to be used to supplement or expand existing programs and services.

Describe how the organization intends to use these funds. Will the money requested in this proposal be used to support a service or program that was supported by FEMA funds in the past? If yes, describe below how services have been or will be expanded or supplemented.

The Salvation Army Hospitality House continues to provide meals and mass feeding throughout the year and during the winter season when the Winter Shelter Program is in effect – November through March. During this seasonal program, Operation Deep Freeze and the Project Hospitality Program are in effect. Operation Deep Freeze offers additional services when the temperatures are 35 degrees or below. Individuals who would not seek shelter otherwise have come to seek services during these nights. Project Hospitality offers an extended stay during this seasonal program which is in effect from November through February. Individuals may stay up to 90 days and are case managed during their stay.

During Operation Deep Freeze nights, we can assist up to 70 individuals per night – 60 men and 10 women. Families are also assisted as needed during this time.

Project hospitality can assist 30 individuals throughout the season – 10 men and 10 women. We also assist 4 families under this program during the season.

FEMA funding provides hotel vouchers for the increasing number of families experiences homelessness. There are times that the needs of these families cannot be met by shelters, this is due to the family size, the age of the male children, disabilities and/or families that present for services who may have pets. Providing these services to families in need are vital and critical especially during the cold months of the year. Families are sleeping in their vehicles, at the parks and in other areas that are not intended for human habitation. The Salvation Army prioritizes the use of these funds for those we identify as most vulnerable and provides a dedicated case manager to ensure they are quickly transitioned into a stable housing program. This ensures they stay in school and have a nutritious, well-balanced meal daily. Case management helps individuals maximize their opportunities for stability and self-sufficiency. We have 2 Case Mangers who provide case management 7 days a week, nightly outreach at 5:30 p.m., offering resource information and case management appointments to all individuals in the shelter.

We are 1 of 8 organizations listed as an Access Point in providing assistance with VI-SPDATS to individuals and families.

### II. ORGANIZATION ELIGIBILITY CRITERIA

#### 1. Identify the status of the agency. (Select one)

- Government Agency (public entity)
- Private Nonprofit (501(c)(3) or 501(c)(4)  
If your agency has not previously received FEMA funds, **attach** the Federal tax exempt letter to your submission.

#### 2. Is the agency considered in good standing by the Arizona Corporation Commission?

Y	N
X	

**3. A. Accounting System:** Describe the accounting system used by the organization to track grant-funded expenditures and revenues.

The organization has an established accounting system and conducts an annual audit.

**B. Audit:** Does the organization conduct an independent annual audit? (Check one)

**Yes.** Indicate below the CPA firm that conducted the organization's most recent financial audit and the time period covered by the audit.

- If the agency has not received FEMA funding in the last 5 years, **attach** a copy of the organization's most recent audit to your submission.

Deloitte and Touche LLP, October 1, 2018 - September 2019

**No.** The organization does not conduct an independent annual audit.

- Please **attach** FY2019-20 internal agency budget and year-to-date financial statements to your submission.

**4. Federal Employer Identification Number (FEIN)**

94-1156347

**5. How does your facility assure accessibility for people with physical disabilities?**

Facility meets requirements of ADA and audits continuously.

**III. ORGANIZATION TARGET POPULATION**

Please indicate the three primary target client populations served by your agency in the list below. Type "1," "2," and "3" to identify the top three client populations. If your agency targets no specific population, please select the "NT" code.

	People with substance use disorder		Native Americans		Unaccompanied minors
	Domestic violence victims		People with AIDS/HIV		Veterans
	Elderly		Racial/Ethnic Minorities		NT (no target population)
1	Families with children	2	Single men		Other targeted populations (specify below):
	Mentally disabled	3	Single women		

#### IV. NARRATIVE

Please answer the following questions. Limit answers to the space provided.

1. Give a brief explanation of your organization's ability to coordinate service delivery with other human service providers. Specifically identify the networks, coalitions and collaborative arrangements that your agency maintains.

The Salvation Army's Hospitality House has operated a mass shelter for 55 years in Tucson, AZ., providing homeless people with shelter, meals, case management, transitional housing, support services, and other general assistance. The Hospitality House is the intake shelter facility for Project Hospitality and Operation Dee Freeze, The Winter shelter program is in effect from 11,15 to 3,31. The Hospitality House accepts referrals from all other Tucson shelter programs, hospitals, correctional release programs, law enforcement agencies, and behavioral health providers. Salvation Army participates in the Tucson Pima Collaboration to End Homelessness, the Pima County Emergency Services Network, local faith-based partners and the VA to participate in annual community events such as Tucson Homeless Connect and Veterans Stand Down.

2. Describe any changes in the magnitude of the current need and/or funding sources experienced during the past year or expected in the next 12 months (for example, number of requests or types of clients).

The Salvation Army relies heavily on private donations to operate its emergency shelter programs and there has been a significant decline in donations. Hospitality House continues to see an increase in individuals and families needing shelter. The need remains high for hotel vouchers for homeless families with children, many of whom are homeless for the first time, or who are doubled up living with friends or family which causes them to be ineligible for transitional housing programs. Many families are turned away when all other shelters are full. The mass shelter costs increased to accommodate the 32 shelter beds now used for Project Hospitality clients and the additional 70 individuals accommodated during Operation Deep Freeze. Previously, these clients were sheltered and fed at local congregations. During our season program for the months of November 15<sup>th</sup> – March 31<sup>st</sup>, the number of bed nights for stand alone Deep Freeze clients were 1,185 bed nights, meals totaled 2,370. We did not spend any funds for motel vouchers during this time.

3. Give a brief explanation of how your service(s) will be addressing a gap in existing services available to the community.

The Hospitality House serves as the one permanent shelter available to the homeless men, women and children after hours and is used by hospitals, Victim Witness, Pima County Attorney's Office, police and paramedics to find housing for people found on the streets or released from hospitals in the middle of the night.

These walk in/after-hours clients increase significantly during the winter shelter season as medical providers and agencies face pressure to find safe alternatives for homeless individuals and families. Some have special needs that are best served by offering them a few days in a hotel. An example would be victims of domestic violence who need immediate safe housing following an incident and are referred to us for lack of shelter beds in the community. The Hospitality House also addresses a gap in emergency shelter for veterans – men and women, and at times families.

Homeless veterans are often transition by travel, have substance abuse issues, mental illness, or disabilities that cause disruption in their VA services. Tucson Salvation Army offers a dedicated case manager to this population and works directly with the VA to assist them with accessing their benefits and moving into permanent, transitional, or supportive housing. Veterans also receive assistance with accessing needed community resources such as job skills training, job placement programs and medical services. We hold 4 beds for the exclusive use of veterans at all times in the shelter. 3 male beds – 1 female bed.

4. Explain any anticipated funding cuts. Identify the funding source anticipated to be reduced and describe any alternative funding sources sought by the organization to make up for these cutbacks.

The Salvation Army continues to experience a significant decrease in the private donations utilized to operate the Hospitality House shelter. To accommodate this deficit, grant applications were submitted to the city, county, and private foundations. We have received a \$15,000 grant from Pima County Outside Agency for hotel vouchers. This helps to fund and support our ongoing need for assisting families in need. The outcome of private foundation applications is pending. The local advisory board has been active in fundraising efforts and utilizes their community contacts to request donations.

5. Define the geographical area to be served with requested FEMA funds.

FEMA funds are used to serve anyone in Pima County.

6. Briefly describe the target population for each service for which you are requesting FEMA EFSP funds.

The target population for served meals is for all populations served at our facility. This includes single men, women with children and families. The target population for Project Hospitality and Operation Deep Freeze is chronically homeless men and women. Both programs also provide services to families. The target population for Other Shelter (hotel vouchers) is families with dependent children, the elderly, and individuals with special needs. All clients in all programs are provided with referrals and connections to local employment assistance services, VA services and other supportive housing services.

7. Please discuss how your program collaborates with other homeless assistance providers, including those organizations which are part of the Tucson Pima Collaboration to End Homelessness.

The Salvation Army is a voting member of TPCH and partners with other agencies including Pima county, shelters, hospitals, churches, veteran support groups, local landlords, behavioral health providers, and local utility companies to increase the efficiency of our emergency assistance to prevent homelessness. The TSA Advisory Board has hosted a variety of events to solicit donations, community involvement and volunteerism from agencies and private individuals who are compassionate to those experiencing homelessness in the community. TSA is represented at the TPCH General Council, Emergency Solutions Services Committee, Coordinated Entry, Governance and Planning, HMIS, Continuum of Service, Continuum of Care, Medical Respite Task Force, Pima County Homeless Coalition, and the Homeless Work Program. We provide emergency services to all law enforcement – TPD, U of A, and Pima County Sheriff's Department.

V. BUDGET AND FINANCIAL/SERVICE INFORMATION

**Unit of Service/Request**

Complete the appropriate table for each category in which funding is requested.

Shelter Category					
	Column A	Column B	Column C	Column D	Column E
Shelter Category	FEMA Funds Requested	Per Diem	FEMA-Funded Total Nights	FEMA-Funded Number of Rural Clients	FEMA-Funded Number of Clients Served
Mass Shelter - <i>Direct Cost</i>		Not applicable			
Mass Shelter - <i>Per Diem</i>	\$ 50,000	\$12.50	4000	100	320
Other Shelter	\$ 20,000	Not applicable	2240	40	160

**GUIDANCE: Shelter Category**

- Column A State the amount of FEMA funds you are requesting.
- Column B In past years the local board has selected a \$12.50/night per diem rate. ***This amount may change when the award is finalized.***
- Column C Indicate the total number of nights for mass shelter (Columns A ÷ B = C).
- Column D State the number of rural clients to be served with FEMA EFSP request.
- Column E Indicate the total number of clients to be served (include rural clients reported in Column D) with FEMA request.

Food (Served Meals/Mass Feeding) Category					
	A	B	C	D	E
Food Category	FEMA Funds Requested	Meal Per Diem	FEMA-Funded Total Meals	FEMA-Funded Number of Rural Clients	FEMA-Funded Number of Clients Served
Served Meals - <i>Direct Cost</i>	\$				
Served Meals - <i>Per Diem</i>	\$20,000	\$2.00 per meal	10,000	100	4000

**GUIDANCE: Food Category**

- Column A: Indicate the amount of FEMA funds you are requesting.
- Column B In past years the local board has selected a \$2.00/meal per diem rate. ***This amount may change when the award is finalized***
- Column C State the total number of meals served with FEMA funds (Columns A ÷ B = C).
- Column D Indicate the number of rural clients to be served with FEMA request.
- Column E State the total number of clients to be served (include rural clients reported in Column D) with FEMA request.

<b>Other Food Category</b>	
FEMA funds requested: NA	\$
Indicate the number of rural clients to be served with FEMA request.	
Please use the space below to document how your request will be used. Give specifics (e.g., FEMA funds will buy approximately "X" number of food boxes to help "X" number of clients at "X" approximate cost per box).	

<b>Financial Assistance Category</b>				
*Note: All local providers for emergency rent/mortgage and utility assistance must utilize Pima County's Emergency Services Network (ESN) to ensure no duplication of assistance occurs.				
	A	B	C	D
Financial Assistance Category	FEMA Funds Requested	Number of Households Served	Average Bill	Number of Rural Households Served
Rent/Mortgage	\$NA		\$	
Utility	\$NA		\$	

- GUIDANCE: Financial Assistance Category**
- Column A: Indicate the amount of FEMA funds you are requesting.
  - Column B: Indicate how many households (including rural households) are projected to be served with FEMA EFSP funds.
  - Column C: State the amount of the average bill expected to be paid (Columns A ÷ B = C).
  - Column D: Indicate how many rural households are projected to be served with this FEMA request.

**Program/Service Revenue & Expenditures**

Complete tables A and B for each category in which FEMA EFSP funds are requested. Please reproduce this page if you are requesting funding in more than one service category.

<b>A. Program/Service Revenue</b>	
Provide budgeted revenues for this program year for each service for which FEMA EFSP Phase 37 funds are requested. At the bottom of the table, indicate the percent of the total program revenues that will be met with FEMA assistance.	
<b>Service Category: Mass Shelter</b>	
Funding Sources	Amount
Federal Funds	\$
State Funds	\$
City of Tucson Funds	\$
Pima County Funds	\$15,000.00
Arizona Health Care Cost Containment System	\$
Pima Council on Aging	\$
Title XX	\$
United Way	\$
Program Revenues/Client Fees	\$1800.00
Foundation Grants	\$
Fundraising/Donations	\$684,698.00
Other/In-Kind	\$14,421.00
FEMA EFSP Request	\$50,000.00
<b>Total Service Funding</b>	<b>\$765,911.00</b>
What percentage of your Program budget is the FEMA funding request?  <i>Example: Motel Voucher Program:</i> <i>\$8,000 FEMA FUNDING REQUEST</i> <i><u>\$2,000 PRIVATE FUNDS</u></i> <i>\$10,000 = 80% of Program Budget</i>	<b>6.6%</b>
What percentage of your overall Agency Budget is the FEMA funding request?  <i>Example:</i> <i>\$250,000 AGENCY BUDGET</i> <i><u>\$8,000 FEMA FUNDING REQUEST</u></i> <i>= 3% of Overall Agency Budget</i>	<b>.08%</b>

<b>B. Program/Service Expenditures</b>	
Indicate budgeted expenditures for this program year for each service for which FEMA EFSP Phase 37 funds are requested. TOTAL AGENCY BUDGETS ARE NOT ACCEPTABLE.	
<b>Service Category: Mass Shelter</b>	
<b>Line Item Budget Categories</b>	<b>Total Service Budget</b>
Personnel/Employee Related Expenses	\$561,855.00
Professional/Outside Services	\$9963.00
Facilities/Occupancy	\$121,255.00
Travel	\$5461.00
Other (Specify): Assistance to Individuals	\$9112.00
Other (Specify): Supplies	\$28,830.00
Other (Specify): Operating Expense	\$29,443.00
<b>Total Service Expenditures</b>	<b>\$765,919.00</b>

<b>B. Program/Service Expenditures</b>	
Indicate budgeted expenditures for this program year for each service for which FEMA EFSP Phase 37 funds are requested. TOTAL AGENCY BUDGETS ARE NOT ACCEPTABLE.	
<b>Service Category: Served Meals</b>	
<b>Line Item Budget Categories</b>	<b>Total Service Budget</b>
Personnel/Employee Related Expenses	\$151736.00
Professional/Outside Services	\$720.00
Facilities/Occupancy	\$
Travel	\$
Other (Specify): Assistance to Individuals	\$135,600.00
Other (Specify): Supplies	\$82000.00
Other (Specify): Operating Expense	\$3455.00
<b>Total Service Expenditures</b>	<b>\$373,511.00</b>

<b>A. Program/Service Revenue</b>	
Provide budgeted revenues for this program year for each service for which FEMA EFSP Phase 37 funds are requested. At the bottom of the table, indicate the percent of the total program revenues that will be met with FEMA assistance.	
<b>Service Category: Served Meals</b>	
Funding Sources	Amount
Federal Funds	\$
State Funds	\$
City of Tucson Funds	\$
Pima County Funds	\$
Arizona Health Care Cost Containment System	\$
Pima Council on Aging	\$
Title XX	\$
United Way	\$
Program Revenues/Client Fees	\$
Foundation Grants	\$
Fundraising/Donations	\$217,911.00
Other/In-Kind	\$135,600.00
FEMA EFSP Request	\$20,000.00
<b>Total Service Funding</b>	<b>\$373511.00</b>
What percentage of your Program budget is the FEMA funding request?  <i>Example: Motel Voucher Program:</i> <b>\$8,000 FEMA FUNDING REQUEST</b> <u>\$2,000 PRIVATE FUNDS</u> <b>\$10,000 = 80% of Program Budget</b>	<b>5.4%</b>
What percentage of your overall Agency Budget is the FEMA funding request?  <i>Example:</i> <b>\$250,000 AGENCY BUDGET</b> <u>\$8,000 FEMA FUNDING REQUEST</u> <b>= 3% of Overall Agency Budget</b>	<b>.03%</b>

<b>A. Program/Service Revenue</b>	
<p>Provide budgeted revenues for this program year for each service for which FEMA EFSP Phase 37 funds are requested. At the bottom of the table, indicate the percent of the total program revenues that will be met with FEMA assistance.</p>	
<b>Service Category: Other Shelter</b>	
Funding Sources	Amount
Federal Funds	\$
State Funds	\$
City of Tucson Funds	\$
Pima County Funds	\$
Arizona Health Care Cost Containment System	\$
Pima Council on Aging	\$
Title XX	\$
United Way	\$
Program Revenues/Client Fees	\$71,220.00
Foundation Grants	\$
Fundraising/Donations	\$
Other/In-Kind	\$
FEMA EFSP Request	\$20,000
<b>Total Service Funding</b>	<b>\$91,220.00</b>
<p>What percentage of your Program budget is the FEMA funding request?</p> <p><i>Example: Motel Voucher Program:</i>  <b>\$8,000 FEMA FUNDING REQUEST</b>  <u>\$2,000 PRIVATE FUNDS</u>  <b>\$10,000 = 80% of Program Budget</b></p>	<b>21.9%</b>
<p>What percentage of your overall Agency Budget is the FEMA funding request?</p> <p><i>Example:</i>  <b>\$250,000 AGENCY BUDGET</b>  <u>\$8,000 FEMA FUNDING REQUEST</u>  <b>= 3% of Overall Agency Budget</b></p>	<b>.03%</b>

<b>B. Program/Service Expenditures</b>	
Indicate budgeted expenditures for this program year for each service for which FEMA EFSP Phase 37 funds are requested. TOTAL AGENCY BUDGETS ARE NOT ACCEPTABLE.	
<b>Service Category: Other Shelter</b>	
Line Item Budget Categories	Total Service Budget
Personnel/Employee Related Expenses	\$41,700.00
Professional/Outside Services	\$180.00
Facilities/Occupancy	\$
Travel	\$
Other (Specify): Assistance to Individuals	\$47,000.00
Other (Specify): Supplies	\$
Other (Specify): Operating Expense	\$2340.00
<b>Total Service Expenditures</b>	<b>\$91,220.00</b>



Department of the Treasury  
Internal Revenue Service  
P.O. Box 2508  
Cincinnati OH 45201

In reply refer to: 0248225078  
Jan. 17, 2020 LTR 4168C 0  
94-1156347 000000 00  
00012781  
BODC: TE

THE SALVATION ARMY  
TERRITORIAL HEADQUARTERS  
% TERRY O HUGHES  
30840 HAWTHORNE BLVD  
RCH PALOS VRD CA 90275-5301



008164

Employer ID number: 94-1156347  
Form 990 required: NO

Dear Taxpayer:

We're responding to your request dated Jan. 09, 2020, about your tax-exempt status.

We issued you a determination letter in June 2011, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(03).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(i).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after the end of your annual accounting period:

- Form 990, Return of Organization Exempt From Income Tax
- Form 990EZ, Short Form Return of Organization Exempt From Income Tax
- Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990-EZ
- Form 990-PF, Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

According to IRC Section 6033(j), if you don't file a required annual information return or notice for 3 consecutive years, we'll revoke your tax-exempt status on the due date of the 3rd required return or notice.

You can get IRS forms or publications you need from our website at [www.irs.gov/forms-pubs](http://www.irs.gov/forms-pubs) or by calling 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500 between 8 a.m. and 5 p.m.,