



Our Mission:

We are committed to enriching the quality of life in the Clark Area.

GRANTMAKING GUIDELINES

The Clark Area Community Foundation (CACF) will strive to support a broad spectrum of projects intended to improve and enhance the Clark County Area. Determination of recommendation for approval will be based upon need, creativity in addressing community concerns, community volunteer support, and accountability. The CACF will use this as a guideline to determine the eligibility of your proposed project for funding.

1. **QUALIFICATION:** Purpose of the project should fulfill a community need and preferably involve tangible, measurable, items or projects.
2. **VOLUNTEERISM:** Projects which involve significant and continuous community volunteerism support will be favorably considered.
3. **DISCRIMINATION:** Applications offering services exclusively to one gender, age group, religion or race will be closely scrutinized for discriminatory practices. Funding will be based on the needs of the individual being served.
4. **INNOVATION:** The Clark Area Community Foundation goal is to fund a mix of ongoing, well-established project, as well as innovative projects designed to address existing community needs in innovative ways.
5. **FUND DISTRIBUTION:** Grant making decisions will be made by the Clark Area Community Foundation Board, which usually meets the first Wednesday of each Month. Funds will be distributed to Projects that meet the needs of Clark County area.
6. **PARTNERSHIP:** The Foundation should not be the sole funding source of any Project and may make awards contingent on proof of other funding sources: however, the funding of a total project is at the discretion of the Foundation. Grants may also be made in the form of a challenge, to be met dollar-for-dollar by other sources. The Foundation prefers to be the last funder. Grants expire one year from the date awarded; if that should happen, the Foundation welcomes the project to reapply.
7. **PROJECT LONGEVITY:** Some projects seeking funding may be ongoing, while others begin and end in the same calendar year. Projects for multi-year funding are encouraged, but amounts will be determined by fund availability each year.
8. **CHALLENGE OR MATCHING GRANTS.** The Clark Area Community Foundation encourages matching funds from all grant applicants. When the Board perceives the need for more local involvement and support of a given project; it may issue challenge grants in any proportion. Funding may be contingent upon acquisition of the required matching money. There may be times when the

Clark Area Community Foundation perceives a need in the community is not being met. The Board then may issue a challenge grant or request a proposal to address that need.

- 9. GRANT REVIEW PROCESS.** Grant applications will be considered and prioritized according to these guidelines at the Foundation's regularly scheduled board meetings. Those applications which do not fit the mission of the Foundation, or clearly do not qualify will be eliminated by the board. We may consider applications during the interim on an emergency basis. Applicants may be asked to present their request to the Board.
- 10. COMMUNICATIONS WITH APPLICATIONS.** All applicants will be informed in writing or personally, as to the approval or disapproval of their application.
- 11. TRIPS:** The Foundation does not fund trips, camps, entertainment, membership expenses and/or Ongoing operational costs of organizations.
- 12. PUBLIC/PRIVATE:** The Foundation will concentrate on funding public non-profit organizations, but not to the exclusion of organizations that meet these grant guidelines.

Please mail the completed application, along with any supporting material to:

Clark Area Community Foundation
700 N Smith
Clark, South Dakota 57225

If the Board of CACF grants funds toward your project, you will be required to provide a follow-up summary on how these funds were used, or are being used to support your project. If you are granted funds, the CACF is given permission to use the name of your organization and the amount of the grant in any publicity that the Foundation sees fit.

If you have any questions about this form, please feel free to contact any board members:

Greg Furness
Diane Varilek
David Warkenthien
Chad Fjelland
Susan Fjelland
Nicole Nelson
Tom LaBrie
Gayle Wookey



Application Form

Applicant Information: **Date of Application:** _____

Name of Organization/Applicant: _____

Address: _____ **City/State:** _____

Contact Person: _____ **Phone Number:** _____

Is your organization 501(c)3 entity? _____ **If yes, provide non-profit #** _____
(The Board can help you with this process)

What is the amount of grant monies requested from CACF? \$ _____

What is the total project cost? \$ _____

Start date: _____ **Completion date:** _____

Briefly describe your non-profit organization or organization:

Project Description (Attach separate page if necessary):
The Need for the project and the number of people impacted.

Names of any agencies or organizations collaborating with you on this project and summarize their role in the project:

Provide a narrative of project budget information, including details of any matching funds or grants. The narrative must also indicate how the Clark Area Community Foundation funds will be spent and over what period of time: **Please include in this area:**

- 1. If you have other money commitments' coming in for this project, and if so, from who?**
- 2. if you have sent out other grants applications and heard back**

Name of responsible person(s) for this project

I have read, understand, and attest that all the information herein is true and complete to the best of my knowledge. I attest that I have the approval of the above-named non-profit organization, and that this organization serves the Clark Area Community.

Signature and Title

Date:

**Mail To: Clark Area Community Foundation
700 N Smith
Clark, South Dakota 57225**



FORM

Expenditure Responsibility Guidelines & Grant Acceptance Agreement

Any grant made to a nonverified organization from a Community Savings Account fund at the South Dakota Community Foundation (SDCF) will be subject to the terms herein this Grant Acceptance Agreement.

Grantee Name: _____


Description of project: _____

Expenditure Responsibility Guidelines

1. **Expenditure of Grant Funds:** The funds awarded may be spent only in accordance with the goals and objectives stated in the grant application and as approved by the SDCF. The grantee agrees to repay to SDCF any portion of the grant not used for the originally stated purpose of the grant. The grantee agrees not to use any portion of grant funds for political or lobbying activity.
2. **Ownership of Grant-funded Property:** Equipment or property purchased with grant funds shall be the property of the grantee organization unless the organization should go out of existence. In that case, ownership of the equipment or property shall revert to the SDCF unless ownership is transferred to another nonprofit organization.
3. **Maintenance of Supporting Records:** The grantee is responsible for maintaining adequate supporting records, including a record of all receipts and expenditures relating to the grant.
4. **Separate Account Maintenance:** The grantee is responsible for maintaining separate accounting records for grant funds received from the SDCF. Grant funds shall not be commingled with other noncharitable funds.
5. **Extension or Reversion of Grant Funds:** The grantee will return to the SDCF any funds not spent by the close of the grant period, except in the case of prior written approval from the SDCF for an extension of the grant period for substantive causes.
6. **Review of Grant Activity:** The Grantee will furnish the SDCF with a closing grant evaluation and a detailed statement of expenditures.
7. **Limit of Commitment:** Unless otherwise stipulated in this agreement, the SDCF has no obligation to provide other or additional support to the grantee.
8. **Evaluation and Reporting:** A final evaluation and statement of expenditures must be submitted to the SDCF within 60 DAYS of the date of project completion. Failure to provide timely reporting will result in the grantee being ineligible for future grants unless and until the final evaluation and statement of expenditures is submitted.

Signature – By signing this agreement, grantee promises to abide by the above guidelines.

Authorized Representative Name (print):	Signature:	Date:
Position/Title:	Grantee Organization:	
Office Use: Date received: _____ Approved Y/N _____ Charitable Purpose: _____		

	FORM
	Expenditure Responsibility Final Evaluation & Expenditure Report

CSA Name: _____

Grantee Name: _____

Return to South Dakota Community Foundation, PO Box 296, Pierre, SD 57501

Grant Objectives
Were the goals described in the original grant application accomplished?
<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, why not?

Grant Outcomes
Were there any unexpected outcomes?
<input type="checkbox"/> Yes <input type="checkbox"/> No
If so, what were they?

Please provide **itemized details** of how grant funds were spent or attach invoices and/or receipts. Attach additional pages if more space is needed.

Original Grant Amount		\$
Itemized Grant Expenses		
Total Grant Dollars Spent		\$
Amount due back to SDCF (unspent grant funds)		\$

Call SDCF at 1-800-888-1842 if you have questions about this form.