

FISCAL SPONSORSHIP AGREEMENT

The Community Foundation of Western Massachusetts (CFWM) does not act as a fiscal sponsor on behalf of individuals or projects. However, CFWM may consider requests from charitable programs that have a 501(c)(3) organization serving as a fiscal sponsor that meets CFWM's eligibility requirements. The charitable organization's fiscal sponsor has complete discretion and control over the funds granted to support the sponsored program or project. By completing and signing this form, the fiscal sponsor agrees to:

- Carefully monitor the sponsored group's progress in successfully completing the funded program and providing all required reports to the CFWM
- Assure that the board of directors (or equivalent) has agreed to be the fiscal sponsor for the applicant
- Review the sponsored organization's proposal prior to its submission to the CFWM
- Retain records documenting how grant funds were used

All CFWM advised fund grant recommendations and competitive grant applications are subject to completing this Agreement. Additional documentation may be required for CFWM competitive grant programs. Complete documentation of the existing fiscal sponsor relationship with the non 501(c)(3) organization must be submitted up to 10 business days prior to the deadline for any competitive grant program. Please complete the bottom portion of this Agreement and provide the three following documents to CFWM so we may make a determination of eligibility for the 501(c)(3) organization to sponsor a grant application:

- A fully signed copy of a contract, Memorandum of Understanding or a grant agreement between the fiscal sponsor and the sponsored organization documenting the relationship and the charitable nature of the undertaking.
- A copy of the minutes of the meeting where the fiscal sponsor's Board of Directors approved this contract or a copy of the Board resolution allowing the 501(c)(3) organization to act as the fiscal sponsor for the non 501(c)(3) entity or a copy of the Board resolution allowing the executive director to enter into a fiscal sponsorship relationship.
- Current audited or reviewed financial statements. Compiled financial statements will not be accepted.

The parties listed below agree to this partnership for the period of ___/___/___ - ___/___/___.

501(c)(3) Fiscal Sponsor Organization Name: _____

Fiscal Sponsor EIN #: _____

Fiscal Sponsor Address: _____

Fiscal Sponsor Phone #: _____

Signature of Head of Fiscal Sponsor

Name & Title of Fiscal Sponsor Representative

Email Address of Head of Fiscal Sponsor

Date

Name of Sponsored Organization: _____

Sponsored Org. Address: _____

Sponsored Org. Phone #: _____

Name & Title of Sponsored Organization Representative

Email Address of Sponsored Organization Representative

Please email this completed form and attachments to grants@communityfoundation.org or mail to the Community Foundation of Western Massachusetts at PO Box 15769, Springfield, MA 01115.