



GRANT APPLICATION

Quarterly Application Package

Please complete all sections of the application to ensure accuracy and intent.

Dear Applicant,

The Miller Area Foundation was formed in 1994 through a generous initial contribution of \$125,000 by Jim and Nini Hart. Grants are offered on a quarterly basis to bring the funding source and project timelines closer together. The award periods are in March, June, September, and December. Generally, applicants must be classified as non-profit, non-government organizations. An organization is eligible only once during a calendar year.

The funds offered by the Miller Area Foundation represent the earnings from a larger investment held in trust by the S.D. Community Foundation. The larger our investments, the more the Miller Area Community Foundation can give back to the community for projects.

Each grant recipient is expected to provide the foundation with a report of how the funds made their program or project a success. This expectation allows the foundation board the opportunity to determine if the foundation's mission is being met or if changes need to be made in the award process.

Please read the following application carefully and complete all sections.

Thank you for applying,

Miller Area Foundation Board Members

Dawn Joy, Dan Coss, Rob Mullaney, Nini Hart, Clayton Werdel, Jaime Russell, Betty Jo Welch & Tiffany Pape Hofer

The mission of the Miller Area Foundation is to receive and administer charitable gifts creating a permanent endowment to assist a wide range of programs to qualified non-profit organizations, institutions or agencies to promote the social and economical well-being of the people of Miller and the surrounding communities.



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to ensure accuracy and intent.

SECTION 2:

GENERAL INFORMATION:

Date of Application: _____ EIN # (if applicable): _____

Name of Organization: _____

Mailing Address: _____

Physical Address: _____

Phone #: _____ Fax #: _____

Website: _____

Contact Name: _____

Contact Phone #: _____ Email address: _____

Organizations Mission: _____

PROJECT INFORMATION:

Project Summary: _____

Amount Requested: _____

Total Project Amount: _____



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Section 3:

(Fill out if your organization received a grant in the past from Miller Area Foundation)

Applicant Organization: _____

Grant Year: _____ **Grant Award Amount:** _____

Number of people served by grant funds: _____

Project Begin Date: _____ **Project End Date:** _____

Funding partners or volunteers: _____

Summary of project:

Do you have any suggestions for the Miller Area Community Foundation to consider?



GRANT ACCEPTANCE POLICY: All grants made are subject to the terms herein.

Grant Applicant (organization or group): _____

1. **Public Recognition:** The Foundation appreciates the grantee's efforts to publicize the grant and the fund within the Miller Area Foundation that awarded the grant.
2. **Expenditure of Grant Funds:** The funds awarded may be spent only in accordance with the goals and objectives stated and budgeted in the Grant Application you submitted, as approved by the Foundation. The funded project and its budget may not be changed expect with prior written approval of the Foundation.
 - a. Expenses may not be charged against the grant before or after the date of the grant period without prior written approval of the Foundation.
 - b. 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, the ownership of the equipment or property reverts to the Foundation unless ownership is transferred to another nonprofit organization.
3. **Disbursements to Grantee:**
 - a. Grant funds will be disbursed to the grantee upon receipt of signed contract.
 - b. The grantee is responsible for grant funds received and for maintaining adequate supporting records. Separate accounting records must be maintained for these grant funds.
4. **Reversion of Grant Funds:** The grantee will return to the Foundation any funds not spent by the close of the grant period.
5. **Review of Grant Activity:** The grantee will furnish the Foundation with a closing grant evaluation and statement of expenditures.
 - a. Also, the Foundation would appreciate photos and copies of articles published about the grant activity.
6. **Limit of Commitment:** Unless otherwise stipulated in this contract, the Foundation has no obligation to provide other or additional support to the grantee.

Grant Applicant (person responsible): _____

Signature: _____

Date: _____

**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 _____		