



Fiscal Sponsorship Agreement

This form is required for grants from the La Crosse Area Community Foundation to an applicant group with a fiscal sponsor if the organization does not already have an agreement in place. This form must be submitted with your online application. If you are having trouble uploading the form, please contact Keli Frigo, Impact Specialist, at keli@lacrosseareafoundation.org.

This Fiscal Sponsorship Agreement defines the requirements, roles, and responsibilities of both the Sponsored Applicant Group (herein after referred to as "Applicant Group") and the Fiscal Sponsor Organization named below.

Name of Applicant Group

Legal Name of Fiscal Sponsor Organization

Mailing Address of Fiscal Sponsor Organization

EIN of Fiscal Sponsor Organization

This Agreement shall be in effect from: _____ through _____
Beginning Date *Ending Date*

Note: This agreement must cover the grant period, which is a year from the deadline of this grant program. Example – August 1, 2026 through July 31, 2027 for the 8/06/26 summer deadline.

REQUIREMENTS

Fiscal Sponsor must be one of the following types of eligible organizations:

- Organization must be a public charity, exempt from federal income taxes under section 501(c)(3) of the Internal Revenue Code, or governmental bodies, including schools and municipalities

Applicant Group must meet the following conditions:

- Organized to carry out a specific charitable project or program
- Clearly articulated mission statement or project goal with a not-for-profit purpose that serves the public
- Established advisory board or oversight committee (unrelated) demonstrating broad community support.

ROLES

Fiscal Sponsor receives and disburses funds for the project in a timely manner and maintains prudent and accurate records of all transactions as required by the State of Wisconsin and the Internal Revenue Service. Any and all disbursements to the Applicant Group are at the discretion of the Fiscal Sponsor.

Applicant Group requests funds or reimbursement of funds from the Fiscal Sponsor in a timely manner in order to conduct the activities described in the Group's proposal to the La Crosse Community Foundation. In addition, the Applicant Group maintains prudent and accurate records of all activities as required by the State of Wisconsin and the Internal Revenue Service.

AGREEMENT

The Applicant Group and Fiscal Sponsor representatives should **initial each box below** to indicate that they have reviewed and come to an agreement regarding each of the following items:

Applicant Group	Fiscal Sponsor	Items to be Agreed Upon
		• Proposed budget including specific line items
		• General timeline for use of funds
		• Fiscal Sponsor's policies for disbursement of funds (including time needed to respond to check requisitions)
		• Administrative fees: Total amount or percentage Applicant Group is to pay to: Fiscal Sponsor (if any): _____ Terms of payment (if any): _____

This form must be signed by the Board Chair/President or another governing human of both groups entering into this Fiscal Sponsorship Agreement. If you are unable to submit physical signatures, simply type the information below, upload the form to our online application, and have the fiscal sponsor send an email verifying this agreement before the deadline to Keli Frigo at keli@lacrosseareafoundation.org

Note: Applications will not be reviewed unless verification is received.

Signature of Applicant Group Signer

Date

Printed Name and Title

Signature of Fiscal Sponsor Signer

Date

Printed Name and Title