Small Miracles Fund
Application Guidelines
(Established December 2010, updated May 2016)

The Small Miracles Fund accepts funding requests during the month of March of each year. Submission deadlines are March 31st. Applicants are notified with a response to their application no later than six weeks following the submission deadline.

Funding Priorities: The priority of the fund will be to accomplish small miracles in the lives of young people.

Who is Eligible? To be eligible for funding, an organization or program must:
1. Provide services to children and/or families in Delaware or Clayton County.
2. Be operated and organized in compliance with applicable laws prohibiting discrimination.
3. Be a 501(c)3 tax-exempt, not-for-profit agency or affiliated with such an agency such as school, city, or county government.
   Organizations which do not have a 501(c)3 status may find a qualifying agency to sponsor them. A Fiscal Sponsorship Form must then be attached to the application.

What We Look For: We welcome applications for projects that match the fund’s priorities, match other funders’ dollars, involve volunteers and represent community partnerships. In addition to the primary focus, these factors are considered:
- Present innovative, creative, and practical proposals to accomplish small miracles for young people
- Present clear work plans which show the ability to achieve the project’s goal
- Focus on cooperation, create efficiencies and reduce duplication of services
- Demonstrate quality, vision, effectiveness, collaboration and good management
- Provide a plan for on-going funding and sustainability beyond the funding period
- Demonstrate collaboration

What We Do Not Fund: In general, grants are not made for the following:
- Programs or events outside of the named region
- Ongoing project support and operating support
- Annual and capital campaigns
- Budget deficit
- Endowments
- Individuals
- Recurring funds
- Religious purposes (this does not exclude grants to religious organizations for non-religious purposes)
- Mass solicitations, international or national (non-local) organizations
- School clubs or activities, athletic teams, sports events or booster teams
- Advertising in event programs, yearbooks, etc.
- Individual requests for personal assistance or sponsorship
- Political, labor, religious, fraternal, or service organizations
- Organizations that discriminate on the basis of sex, race, sexual orientation, creed, national origin or religion
- Major events sponsored by other businesses
Small Miracles Fund Application
(Applications must be submitted by March 31 of each year.)

Organization/Agency Requesting Fund: ____________________________ Date: _________________________

___ Government Agency    ____ 501(c)3 Tax Exempt Charity    ___ Other    Fed Tax ID #: ______________________
If a 501 (c) 3, please attach copy of IRS Determination Letter
If your nonprofit organization is not a 501 (c) 3, please partner with a Fiscal Sponsor, complete the Fiscal Sponsor Form, and attach it to the application.

Contact Person, Phone/Email: _________________________________________________________________________

Organization Address (Street, City/State/Zip): __________________________________________________________

Project Name: ______________________________________________________________________________________

Amount Requested: $___________  Time frame for Project: __________

Project Description: Generally describe the project in 3-5 sentences. List the goals and describe expected outcomes. List any other agencies involved in this project.

Target Population: No. of youth to be served: ________  Age Group: ________  No. of Adults served: ________
List geographic area to be served: __________________________________________________________________________

Financial Information: How will the funds you are requesting specifically be used?

Describe how this project will be sustained once this grant is expended.

Please answer the above questions in narrative form on this application, and then attach a detailed Project Budget with cost breakdowns and any in-kind contributions from other funders and partners.

Required Signatures certifying the accuracy of the attached information.

__________________________________________________________   __________________________   __________________________
Agency Chief Executive Officer Signature  Date  Print Name

*This application form and attachments must be mailed or emailed to: FFDC Small Miracles Representative, Nancy Preussner, nancy.preussner5@gmail.com, PO Box 37, Delhi, IA 52223, by March 31st of each year requesting funding. Grants will be awarded by the Small Miracles Committee in April and/or May.
Non-501(c)3 Fiscal Sponsorship Agreement

*** Fiscal Sponsor’s IRS 501(c)3 Tax Exempt Determination Letter or the comparable proof of charitable exception (i.e. a determination document from a City, County, or School confirming their status as a government entity) must be attached to this agreement.***

Purpose of Grant: _____________________________________________________________________

Applicant: __________________________________________________________________________

Name of Organization applying for grant

Sponsor: ______________________ ______________________________________________________

501(c)3 Non Profit or Government Body (School, City, County) as Legal Applicant/Fiscal Sponsor

The ______________________________________________________________(Legal Applicant/Fiscal Sponsor, hereafter referred to as The Sponsor) has agreed to serve as a fiscal program/project sponsor for the ______________________________________________________________ (Organization conducting the program/project, hereafter referred to as the Applicant) as outlined in the attached application and supporting materials. The Board of Directors of The Sponsor has passed a resolution adopting the applicant as a program or project consistent with its purpose and mission. The Applicant’s financial activities will be accounted for as a program/project of the The Sponsor for IRS auditing and financial reporting purposes.

Since the Applicant is not a recognized 501(c)3 tax-exempt entity, The Sponsor must exercise full control over the Applicant’s financial administration, management and disbursement of funds. The Sponsor has delegated ______________________________________________________________ (name of person/s) whose phone number is ______________________________________________________________ as responsible for fulfilling of these accounting and reporting functions subject to the ultimate authority of the Board of Directors of The Sponsor. The Sponsor is responsible for ensuring completion of timely reports and submission of necessary financial statements to the Foundation for the Future of Delaware County, an affiliate of the Community Foundation of Greater Dubuque. Failure to insure timely reporting on behalf of the Applicant will also result in a loss of good standing.

This agreement will be in effect from the date of the grant award to support the above-named program/project until the grant funds are expended and the final report has been submitted and accepted.

We agree to the terms stated above in this agreement:

________________________________________  ______________________________________
Signature of Applicant Board Chair/Executive Director, Co.Supervisor,  Signature of Sponsor
Mayor, or Superintendent

________________________________________  ______________________________________
Printed Name  Printed Name

________________________________________  ______________________________________
Date  Date