

**KETCHIKAN GATEWAY BOROUGH**

**FY2027 COMMUNITY GRANTS PROGRAM**

**FISCAL SPONSOR SUPPLEMENTAL APPLICATION**

*Required only for organizations applying as a Fiscal Sponsor. Submit this supplemental application together with the Sponsored Project's standard Community Grants Application.*

**SECTION A – FISCAL SPONSOR ORGANIZATIONAL INFORMATION**

<b>Legal Name of Fiscal Sponsor:</b>	
<b>Mailing Address:</b>	
<b>Physical Address:</b>	
<b>Primary Contact Person &amp; Title:</b>	
<b>Phone:</b>	
<b>Email:</b>	
<b>Federal EIN:</b>	
<b>State Entity Number:</b>	

**Nonprofit & Good Standing**

**IRS 501(c)(3) in good standing:**  Yes  No (If No, Not eligible to serve as Fiscal Sponsor)

**Alaska DCCED Good Standing:**  Yes  No (If No, Not eligible to serve as Fiscal Sponsor)

**ATTACH:**

- IRS 501(c)(3) determination letter
- Alaska DCCED certificate of good standing
- Current list of governing board members

**SECTION B – SPONSORSHIP CAPACITY & ADMINISTRATIVE SYSTEMS**

*Describe established processes. Sponsorship involves stewardship of public funds; provide concise but complete responses.*

**Brief description of past sponsorship activities (scale, types of programs):**

**2. Financial Management Systems**

Describe restricted sub-accounts, expenditure approvals, recordkeeping systems, and timekeeping/payroll if applicable:

**3. Insurance & Risk Management**

List policies relevant to Sponsored Projects (liability, workers' comp, D&O, etc.):

**SECTION C – REQUIRED FISCAL SPONSORSHIP AGREEMENT**

Attach a fully executed Fiscal Sponsorship Agreement for the Sponsored Project. Summarize key elements below:

**1. Scope of Services Provided (check all that apply)**

- Financial management  Reporting  Legal oversight  Contracting/procurement
- HR/payroll  Other: \_\_\_\_\_

**Brief description of services to be provided:**

**2. Administrative Fee**

**Administrative Fee Percentage (max 10%):**

**Fee justification (reflects actual admin cost):**

**SECTION D – MULTIPLE APPLICATIONS**

**1. Sponsored Projects This Cycle**

Project Title	Amount Requested	Duplicate Scope?
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No

**SECTION E – FISCAL SPONSOR STATEMENT OF CAPABILITY**

*Provide a concise narrative addressing capability, compliance approach, and risk mitigation.*

**SECTION F – ACKNOWLEDGEMENTS & SIGNATURE**

The Fiscal Sponsor acknowledges:

- All Borough grant funds will be received and administered by the Fiscal Sponsor.
- All reporting will be submitted by the Fiscal Sponsor on behalf of the Sponsored Project.
- The Sponsored Project aligns with all Community Grants Program guidelines and meets funding criteria.
- Failure to comply may result in suspension, termination, or repayment of funds.

**Authorized Officer/Employee – Printed  
Name:**

**Title:**

**Signature:**

**Date:**
