HILDE B FOUNDATION

FISCAL SPONSORSHIP AGREEMENT

1. Purpose

This Fiscal Sponsorship Agreement ("Agreement") is made between the Hilde B Foundation ("Sponsor") and
the Sponsored Project ("Project") to enable the Project to receive tax-deductible donations and operate under
the Sponsor's nonprofit status.
Initials:
2. Relationship
The Sponsor agrees to serve as the fiscal sponsor of the Project, which shall operate as a program under the
Sponsor's direction and control. The Project agrees to abide by all applicable nonprofit laws and Sponsor's
policies.
Initials:
3. Use of Funds
All funds received by the Sponsor on behalf of the Project shall be used exclusively for charitable purposes
consistent with the Sponsor's mission. The Sponsor retains ultimate discretion and control over the use of all
funds.
Initials:
4. Financial Management
The Sponsor shall maintain separate accounting for the Project's funds, provide donation receipts, and
oversee proper financial reporting. Reasonable administrative fees may be deducted for fiscal sponsorship
services.

5. Reporting Obligations

Initials: _____

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The Project agrees to provide timely reports and documentation to the Sponsor, including program updates
and records of expenses and activities funded by donations.
Initials:
6. Duration and Termination
This Agreement is effective upon signing and continues until terminated by either party with 30 days' written
notice. Upon termination, any remaining funds must be used in accordance with the Project's original
charitable purpose or returned to the Sponsor.
Initials:
7. Liability
The Sponsor is not liable for actions of the Project outside the scope of approved activities. The Project
agrees to indemnify the Sponsor against claims resulting from unauthorized conduct.
Initials:
8. Governing Law
This Agreement is governed by the laws of the State of California.
Initials:
SIGNATURES
Sponsored Project Name:
Project Representative (Print Name):
Signature: Date:
Title/Role:

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Hilde B Foundation Representative (Print Name & Title):		
Signature:	Date:	

Full Name:	
Signature:	
Date:	_