



NEXUS
FUNDING PROGRAM
CLARKE COUNTY DEVELOPMENT CORPORATION

HORIZON GRANT

Substantive funding focused on visionary, future-forward projects that expand community development and economic opportunity.



SPARK

FLASHPOINT

COMMUNITY

The NEXUS Funding Program is offered through the Clarke County Development Corporation to local qualifying nonprofit organizations. The purpose of these funding programs is to help support community and economic development across Clarke County, Iowa.





HORIZON GRANT PROGRAM GUIDE

Thank you for your application of the CCDC Horizon Grant. Below you'll find specifications and details about the application process as well as an itemized list of materials you'll be expected to provide in your application.

CCDC Horizon Grants are substantive funding that is focused on visionary, future-forward projects that expand community development and economic opportunity. The budget base for CCDC Horizon Grants is \$99,999 and above. Grant requests less than \$99,999 are processed through the CCDC Spark Grant application. If you have any questions, please reach out to the CCDC office at 641-342-2944 or email info@clarkecountyiowa.com.

How to Apply

Clarke County Development Corporation (CCDC) provides a standardized grant application form. All applicants will receive this form along with these guidelines.

- You must use the official CCDC application form.
 - Any additional documents or supporting materials should be attached at the end of your completed application. Please **do not** insert them within individual answers.
 - If the application form is reproduced, the layout and format must remain unchanged. Applications that do not follow this format will be returned and not considered.
 - If needed, an editable Microsoft Word version of the application can be emailed to you upon request.
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Application Process

Nonprofit organizations can expect the following steps during the application process:

- Applications and guidelines will be provided to all interested applicants.
- Completed applications must be received by the end of the last business day of each month.
- Applications cannot be submitted by email or fax.
- The CCDC Grant Committee will review submissions and receive comments from the CCDC Board of Directors.
- Applicants will receive a written response regarding their request.
- Organizations receiving grant awards must sign and return a Grant Award Agreement within 10 business days of receipt.

- A resolution or written consent from the organization's governing body must be included with the application.
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Eligibility – Who May Apply

The Horizon Grant Program is open to organizations with a valid IRS Section 501(c)(3) or equivalent nonprofit tax-exempt status.

Important Notes:

- Your 501(c)(3) status is not the same as your Federal ID Number or state sales tax exemption number.
 - Some entities, such as individual schools or churches, may not hold independent tax-exempt status but may be exempt through their affiliation with a government body or municipality.
 - Only one application per tax-exempt organization will be accepted per grant cycle.
 - For joint applications involving multiple tax-exempt organizations, each party is considered a recipient and is subject to all requirements of the grant.
 - Unless otherwise defined, all applicants must provide a \$1 match for every \$1 in grant funds requested.
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Funding Limitations

Horizon Grants **will not** fund the following:

1. Travel or seminars.
2. Recurring or on-going expenses, except "start-up costs."
3. Political causes, candidates, and lobbying efforts.
4. Individuals, including scholarships and personal benefits.
5. Debt incurred or purchases made prior to grant award notification.
6. Projects already "in progress."
7. Use for the personal benefit of an organization's members.
8. Support discriminatory activities.
9. Support private, for-profit businesses.
10. Proposals to salvage programs.
11. Being the primary source of operating budget support.
12. No pass-through of grants funds will be allowed.

NOTICE: Due to a finite funding budget, the CCDC requests that grant applicants evaluate their requests for funding to determine the most impactful projects and/or programming for CCDC applications.

No independent entity may apply for more than 25% of the average CCDC Grant Funding Budget in a single year. The average Grant Funding Budget is a rolling figure based on the past three years of CCDC distributed awards.

Should a grant request exceed the allowed 25% of the annual grant funding budget limit, the applicant is encouraged to review their application to either find additional funding for the match or determine if the project or program can be split to other funding options and/or future requests.

CCDC collaborative programs are not included in the above calculations.

Application Submission Instructions

1. Submit the original completed application to:
Clarke County Development Corporation
P.O. Box 426
Osceola, Iowa 50213
 2. Include a copy of your IRS tax-exempt status determination letter (unless you are a government entity).
 3. Matching Funds Requirement:
All applicants must document that they have secured matching funds **of at least 1:1** of the total amount requested. These funds may come from multiple sources. Applicants must show financial capability to complete the project and demonstrate sustainable long-term operations.
 4. If your project involves property that is not owned or operated by your organization, you must provide written authorization from the property owner or operator.
 5. All eligible applications will be reviewed individually.
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Award Timeline & Procedures

- Last day of the month preceding monthly CCDC Board meeting: Application deadline.
 - 2nd Wednesday of the month: Board reviews application; a representative must attend to answer questions.
 - Following Month's Board Meeting: Grant Committee votes on the application.
 - Following Friday after grant committee vote: Notification of funding decision and corresponding documents sent to applicant.
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Grant Awards and Funding Distribution

- Award recipients must sign and return a Grant Award Agreement within 10 business days of receiving their award notification letter.
- Once the signed agreement is received, grants less than \$100,000, 50% of the grant funds – or a scheduled distribution based on the board's decision and available funding – will be disbursed. For grants more than \$100,000, CCDC board and staff will work with the applicant to schedule distribution. In most cases, this will not exceed 6-months. Distribution schedules will be based on amount awarded, the project schedule, as well as on available and projected grant funding availability.
- The remaining funds will be provided upon verification of project completion and submission of final expenses.

- If the full amount awarded is not used, the unused funds will be retained by CCDC for future applicants.
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Reporting Requirements

- Grantees must submit performance reports detailing project progress.
- Reports may be required quarterly, semi-annually, after the contract ends, or as a final report, depending on the project.
- A record of receipts and documentation on how the grant was applied must be included with the final report.
- Failure to submit required reports may result in ineligibility for future grants.
- CCDC may conduct field visits to monitor progress.

Project Timeline

- All grants must be used within 12 months of the award date.
 - Grants may expire automatically after 12 months.
 - Extensions may be requested in writing at least 30 days before the end of the contract period.
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Public Acknowledgment of Grant Awards

Recipients are required to publicly acknowledge the support of CCDC.

Examples include:

- Presenting a plaque to CCDC and its representatives
 - Installing a plaque or sign at the project site
 - Issuing a press release or news announcement
 - Mentioning CCDC's support in brochures, signage, or marketing materials
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THE CLARKE COUNTY DEVELOPMENT CORPORATION RETAINS THE RIGHT TO AMEND THIS APPLICATION OR CHANGE THE PROCESS IN WHICH APPLICATIONS AND/OR GRANTS ARE ADMINISTERED AT ANY TIME, FOR ANY REASON.

CCDC is an independent nonprofit corporation affiliated with, and holding the gaming license of Lakeside Hotel-Casino.



FOR CCDC OFFICE USE ONLY:

Date received: _____

Grant #: _____

Amt. Awarded: \$ _____

CCDC HORIZON GRANT APPLICATION FORM

Section 1: Organization Information

- **Organization Name:** _____
- **Mailing Address:** _____
- **Phone:** _____ **Email:** _____
- **Website** (if applicable): _____
- **Executive Director/Primary Contact:**
 - Name: _____
 - Title: _____
 - Phone: _____
 - Email: _____
- **Federal EIN Number:** _____
- **IRS Tax-Exempt Status (check one):**
 - ☐ 501(c)(3)
 - ☐ Government Entity
 - ☐ Other (explain): _____

Section 2: Project Overview

- a) **Project Title:** _____
- b) **Brief Project Description of your Project/Program:**
 - _____
 - _____
 - _____
 - _____
 - _____

(While a section focused on more detail about your request follows, a one-page addendum may be attached.)

c) **Type of project/program: (check one)**

☐ New ☐ Expansion of existing

d) **Total Project Cost:** \$ _____

e) **Grant Amount Requested:** \$ _____

f) **Have matching funds been secured?**

☐ Yes ☐ No ☐ Partial – explain: _____

g) **Amount of Matching Funds Secured:** \$ _____

h) **Project Start Date:** _____ **Projected Completion Date:** _____

i) **Have you ever received funding from CCDC?** ☐ Yes ☐ No

If “Yes” please provide date of previous award & amount received. _____

j) **Have you ever had funding denied by CCDC?** ☐ Yes ☐ No

If “Yes” please provide date of previous request. _____

Section 3: Detailed Project Information

Please attach a narrative (1–2 pages) that expand on the following:

a) **Statement of Need:**

Describe the problem your project addresses and why it matters to the community.

b) **Goals and Objectives:**

What will this grant help you accomplish? List measurable outcomes.

c) **Targeted population, including approximate number directly impacted by this request:**

d) **Implementation Plan:**

Outline key steps, timeline, and who will carry out the work.

e) **Detailed Project Budget:**

Include a detailed breakdown of expenses and sources of matching funds.

	Total Needed for This Project	Funds Now Available	Source Of Available Funds	Pending Funds	Source of Pending Funds	Requested CCDC Funds
Personnel						
Organization						
Consulting						
Labor						
Equipment (itemize)						
Supplies (itemize)						
Capital Funds						
Endowment Fund						
Real Estate						
Other (itemize)						
Totals						
% Of Total						

f) **Sustainability:**

Explain how the project will be maintained after the grant ends.

g) **Partnerships (if any):**

List any collaborating organizations, including shared roles and responsibilities.

h) **Creativity / Uniqueness:**

The CCDC looks for innovation, creativity and the unique aspect of each grant considered.

How does your project/program show these qualities?

Section 4: Required Documents (Check All Included):

- ☐ Project narrative *(if not provided in detail above)*
- ☐ Proof of 501(c)(3) status (IRS Determination Letter)
- ☐ Detailed project budget *(if not provided in enough detail above)*
- ☐ Letter(s) of support or authorization *(2 to 3 required)*
- ☐ Documentation of matching funds
- ☐ Governing board resolution or written consent *(board minutes or equal documentation)*
- ☐ At least 2 Bids for the production / project *(as applicable)*. Please indicate which bid is preferred with an explanation as to why, especially if it is not the low bid. If 2 bids are not available, please explain why in an attached document. CCDC encourages seeking available local bids for projects receiving NEXUS Funding program consideration.
- ☐ Original Application *(required)*
- ☐ Additional supporting materials or documents *(optional)*

Section 5: Certification

I certify I am authorized by my organization to apply for this grant. _____ (checkmark to confirm)

I certify that the information provided in this application is true and correct to the best of my knowledge. I understand that incomplete applications or those not following the guidelines may be disqualified from consideration.

Authorized Signature: _____

Name (Printed): _____

Title: _____ **Date:** _____

DEADLINES and DELIVERY INSTRUCTIONS:

The original application must be received in the CCDC office **by 4:30 PM on the last business day of the month** prior to the next regularly scheduled CCDC board meeting to be considered by the grant committee.

Please send to: Clarke County Development Corporation, P.O. Box 426, Osceola, IA 50213
or hand-deliver to: Clarke County Development Corporation, 115 E Washington St., Osceola, IA 50213