



Name of Nonprofit Organization _____

Welcome to the 2026 Community Foundation of Rutherford County Discretionary Grants Application Process. Please read and follow the instructions and 5-step process listed below.

STEP 1: GivingMatters.com

Do you have an up-to-date GivingMatters.com profile? Yes/No _____. If No, please **STOP!** To be considered for funding, all applicants, except government entities, must have a current, complete profile on GivingMatters.com.

If yes, please go to <https://givingmatters.com>. In the top right corner, under Tools, use the "Nonprofit Directory" to search for your organization. Click your organization's profile card. Copy and paste the profile URL here: _____

STEP 2: Download and Save this Application First

Please download and save this PDF to your computer before completing the application. Completing the form in a web browser may prevent your information from saving properly. Save the file using the following naming format: **Organization Name – Discretionary Grant Application**

STEP 3: Terms of Agreement Application & Discretionary Grant Terms of Agreement

Acceptance Terms Of Agreement By submitting this application, you affirm, if selected for funding, your organization agrees to the following conditions:

Use of Funds Grant funds must be used solely for the purposes outlined in this application. Any modifications must receive prior written approval from Community Foundation of Rutherford County (CFRC). Funds may not be used for lobbying, electioneering, or activities violating any laws or regulations.

Grant Payment & Compliance If selected, payment will be issued directly to your organization upon award approval. CFRC reserves the right to withhold or request the return of funds if they are misused, compliance is not met, or if other conditions necessitate it. The grantee certifies compliance with all applicable laws, including the US Patriot Act.

Integrated Final Reporting Instead of submitting a separate final report, your organization's next grant application will include a required section for reporting on grant impact, outcomes, and financial expenditures. This ensures funding history is directly integrated into the review process for future funding. 1) If your organization chooses not to apply for funding next year, a brief final report may be required. 2) CFRC may request additional updates as needed.

Release And Indemnity Grantee agrees, to the fullest extent permitted by law, to defend, indemnify, and hold harmless CFRC, its officers, directors, employees, and agents, from and against any and all claims, liabilities, losses, and expenses (including reasonable attorney's fees) directly, indirectly, wholly, or partially arising from or in connection with any act or omission of grantee, its employees, or agents, in applying for or accepting this grant, in expending or applying the grant funds or in carrying out any grant purpose(s) supported by this grant, except to the extent such claims, liabilities, losses, and expenses arise solely from any act or omission of CFRC, its officers, directors, employees, or agents.

Nondiscrimination Policy The grantee will not discriminate based on race, gender, religion, national origin, disability, or other protected statuses in programs funded by CFRC.

Public Recognition & Transparency To provide the utmost transparency, Grantee understands CFRC may use the data from grant reporting to create a compilation of all grantee reports in part and/or post an actual copy of the report(s) to CFRC's website(s) for view by the public. The information provided on your work and the outcomes measured will keep the public informed about the goals accomplished with the funds awarded from CFRC. Grantees are encouraged to acknowledge CFRC support in promotional materials and social media platforms.

Grant Cancellation & Unused Funds If the grant purpose changes or is no longer feasible, the grantee must notify CFRC. Any unused funds over \$100 must be returned.

Certification & Agreement By submitting this application, you certify: 1) Your organization is a 501(c)(3) nonprofit public charity or entity of government and remains in good standing. You understand and accept these grant terms. 2) You are authorized to submit this application on behalf of your organization.

Signature

By signing below, I confirm I have read and agree with the *Terms of Agreement Application & Discretionary Grant Terms of Agreement* as outlined in Step 3 above. I confirm I have been authorized by my organization to proceed with Step 4 of completing this Discretionary Grant application.

Signature: _____ Printed Name: _____

Title: _____ Date: _____

Organization Information

- Organization Name: _____
- Tax ID Number (EIN): _____
- Mailing Address: _____
- City, State, Zip Code: _____
- Website (if applicable): _____
- Executive Director Name: _____
- Exec. Dir. Email Address: _____
- Contact Name: _____
- Contact Title: _____
- Contact Primary Phone Number: _____
- Contact Email Address: _____



Project Information

- Project Name: _____
- Amount Requested (\$7,500 max.): \$ _____
- Total Project Budget: \$ _____
- Project Start Date: _____ Project End Date: _____
- What specific community need does this project address? _____
- What are the intended outcomes and impact of this project? _____
- How will the success of this project be measured? _____
- Brief Project Summary (Provide a clear and thorough explanation of your proposal. Explain how you determined this need):

- What past experience does your organization have in implementing similar projects?

Funding & Budget

- Do you have an Endowment? Yes/No _____ If yes, what is your current balance? \$ _____
- Will you receive funding or allocations from a parent organization for this project?
Yes/No _____ If yes, please list source(s): _____
- Will you receive any funding from any federal, state, or local government sources?
Yes/No _____ If yes, please list source(s): _____
- List other funding sources and amounts secured for this project (if any):

- How will the grant funds be used? *(Provide a brief budget breakdown)*

- If partial funding is received, how will your organization proceed?

Organization Capacity

- Briefly describe your organization’s mission and history:

Additional Information

- List your Board of Directors, including officer titles and board positions.

Signature

By signing below, I confirm the information provided in this application is accurate and complete to the best of my knowledge.

Signature: _____ Printed Name: _____

Title: _____ Date: _____

STEP 5 – Review and Submit Your Application

Confirm all sections are accurate and complete prior to submission. Save the file as: **Organization Name – Discretionary Grant Application**

Please save and submit this completed application via email to: info@cfrutherford.org

This section is for Community Foundation of Rutherford County Use Only.

<p>CFRC Review Process:</p> <p>Date Reviewed: _____</p>	<p>GivingMatters: The profile of the nonprofit applying has been verified as up to date.</p> <p>Date Reviewed: _____ By (Board Member): _____</p>
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Notes/Comments: