

XYZ FOUNDATION
DISCRETIONARY GRANT FORM

Amount of Grant: \$ _____ (\$15,000 annual maximum as of 7/1/23)

Payable to: _____

Name of Organization/Grantee

CEO / Executive Director: _____

Address: _____

Street City State Zip

Purpose:

_____ Unrestricted use

_____ Designated for _____

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I hereby request that this award be made by the XYZ Family Foundation as a discretionary grant in accordance with the approved policy and guidelines. I certify by my signature below that the grant does not fulfill any personal pledge and that I, nor my family members, will receive any personal benefits in connection with the grant.

Date _____ Trustee/Board Member _____

Signature

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For office use:

Eligible Charity? _____ (See attached IRS 501c3 designation letter)

Initials

Grant does not exceed maximum annual amount allowed: _____

Initials

Approved by: _____

XXXXXXX, Board President