

# LEGISLATIVE TRACKING FORM

Filing for Council Meeting Date: 03/03/26

Resolution  Ordinance

Contact/Prepared By: \_\_\_\_\_

Date Prepared: \_\_\_\_\_

Title (Caption): A resolution accepting an in-kind grant from the Nashville Public Library Foundation to the Metropolitan Government of Nashville and Davidson County, acting by and through the Nashville Public Library, to provide funding for library program enhancements and improvements.

Submitted to Planning Commission?  N/A  Yes-Date: \_\_\_\_\_ Proposal No: \_\_\_\_\_

Proposing Department: \_\_\_\_\_ Requested By: \_\_\_\_\_

Affected Department(s): \_\_\_\_\_ Affected Council District(s): \_\_\_\_\_

**Legislative Category (check one):**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Bonds                | <input type="checkbox"/> Contract Approval           | <input type="checkbox"/> Intergovernmental Agreement   |
| <input type="checkbox"/> Budget - Pay Plan    | <input type="checkbox"/> Donation                    | <input type="checkbox"/> Lease                         |
| <input type="checkbox"/> Budget - 4%          | <input type="checkbox"/> Easement Abandonment        | <input type="checkbox"/> Maps                          |
| <input type="checkbox"/> Capital Improvements | <input type="checkbox"/> Easement Accept/Acquisition | <input type="checkbox"/> Master List A&E               |
| <input type="checkbox"/> Capital Outlay Notes | <input type="checkbox"/> Grant                       | <input type="checkbox"/> Settlement of Claims/Lawsuits |
| <input type="checkbox"/> Code Amendment       | <input type="checkbox"/> Grant Application           | <input type="checkbox"/> Street/Highway Improvements   |
| <input type="checkbox"/> Condemnation         | <input type="checkbox"/> Improvement Acc.            | <input type="checkbox"/> Other: _____                  |

|  |  |
|--|--|
| <b>FINANCE</b> Amount +/-: \$ _____<br><b>Funding Source:</b> Capital Improvement Budget<br>Capital Outlay Notes<br>Departmental/Agency Budget<br>Funds to Metro<br>General Obligation Bonds<br>Grant<br>Increased Revenue Sources | <b>Match: \$</b> _____<br>Judgments and Losses<br>Local Government Investment Project<br>Revenue Bonds<br>Self-Insured Liability<br>Solid Waste Reserve<br>Unappropriated Fund Balance<br>4% Fund<br>Other: _____<br>Date to Finance Director's Office: _____<br><b>APPROVED BY</b><br><b>FINANCE DIRECTOR'S OFFICE:</b> _____ |
| Approved by OMB: _____<br>Approved by Finance/Accounts: _____<br>Approved by Div Grants Coordination: _____  |  |

|                                    |                    |
|------------------------------------|--------------------|
| <b>ADMINISTRATION</b>              |                    |
| Council District Member Sponsors:  | _____              |
| Council Committee Chair Sponsors:  | _____              |
| <b>Approved by Administration:</b> | <b>Date:</b> _____ |

|   |  |
|---|--|
| <b>DEPARTMENT OF LAW</b>  |  |
| Date to Dept. of Law: _____   | Approved by Department of Law: _____                               |
| <b>Settlement Resolution/Memorandum Approved by:</b> _____  |  |
| Date to Council: _____  | For Council Meeting: _____ <input type="checkbox"/> E-mailed Clerk |
| <input type="checkbox"/> All Dept. Signatures <input type="checkbox"/> Copies <input type="checkbox"/> Backing <input type="checkbox"/> Legislative Summary <input type="checkbox"/> Settlement Memo <input type="checkbox"/> Clerk Letter <input type="checkbox"/> Ready to File |  |

Resolution No. \_\_\_\_\_

A resolution accepting an in-kind grant from the Nashville Public Library Foundation to the Metropolitan Government of Nashville and Davidson County, acting by and through the Nashville Public Library, to provide funding for library program enhancements and improvements.

WHEREAS, the Nashville Public Library Foundation has awarded an in-kind grant in an amount not to exceed \$3,500,000 with no cash match required to the Metropolitan Government, acting by and through the Nashville Public Library, to provide funding for library program enhancements and improvements; and,

WHEREAS, it is to the benefit of the citizens of The Metropolitan Government of Nashville and Davidson County that this in-kind grant be accepted.

NOW, THEREFORE, BE IT RESOLVED BY THE COUNCIL OF THE METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY:

Section 1. That the in-kind grant by and between the Nashville Public Library Foundation, in an amount not to exceed \$3,500,000.00, and the Metropolitan Government of Nashville and Davidson County, acting by and through the Nashville Public Library, to provide funding for program enhancements and improvements, a copy of which in-kind grant is attached hereto and incorporated herein, is hereby approved.

Section 2. That this in-kind grant be appropriated to the Nashville Public Library based on the revenues estimated to be received.

Section 3. That this resolution shall take effect from and after its adoption, the welfare of The Metropolitan Government of Nashville and Davidson County requiring it.

RECOMMENDED BY:

DocuSigned by:

*Terr Luke*

\_\_\_\_\_  
TERR LUKE, Director  
Nashville Public Library

INTRODUCED BY:

\_\_\_\_\_  
\_\_\_\_\_

APPROVED AS TO AVAILABILITY OF FUNDS:

Signed by:

*Jenneen Reed/mjr*

\_\_\_\_\_  
Jenneen Reed, Director  
Department of Finance

Member(s) of Council

APPROVED AS TO FORM AND LEGALITY:

DocuSigned by:

*Macy Amos*

\_\_\_\_\_  
Macy Amos, Assistant Metropolitan Attorney

**GRANT LETTER**

**Nashville Public Library In-Kind Program Enhancement and Improvements Grant**

Section 1. Grant. The Nashville Public Library Foundation, a nonprofit corporation exempt from federal income tax under Section 501©(3) intends to make an in-kind gift to the Metropolitan Government of Nashville and Davidson County, acting by and through the Metropolitan Library Board, (for Nashville Public Library), a municipal corporation, exempt from federal income tax, an amount not to exceed of Three million, Five Hundred Thousand Dollars (\$3,500,00) in the manner, and subject to the terms, as hereinafter provided.

Section 2. Grant Term. This grant shall be effective for the period commencing on July 1, 2025, and ending June 30, 2026. The Foundation shall have no obligation for services rendered by Nashville Public Library which are not performed within the specified period.

Section 3. Payment of Grant. The Foundation intends to fund the Grant for the benefit of the Charity's Program Enhancements and Improvements as outlined in **Exhibit A – Budget Document**. However, no money will be sent to Nashville Public Library for this grant. There is no required match by Nashville Public Library associated with this grant.

Section 4. Purpose of Grant. The Charity agrees to use the Grant solely for the enhancement and improvement of the Charity's services to the residents of Davidson County as outline in **Exhibit A – Budget Document**.

Section 5. Prohibited Activities. The Charity agrees that no portion of the Grant shall be used for activities that are prohibited to organizations exempt from federal income tax, including, without limitation, attempting to influence legislation, lobbying, or participation or intervention in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office.

Section 6. Confirmation of Good Standing with State Government. The Charity confirms that it is in good standing with appropriate governmental agencies located within the state of the Charity's organization and any state in which the Charity is, or intends to, conduct its activities. If requested by the Foundation, the Charity shall provide written evidence of its good standing. The Charity agrees that it shall immediately notify the Foundation of any change in the Charity's good standing, including the initiation of any proceeding, investigation, audit, or inquiry, of which the Charity is a party.

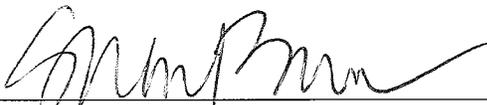
Section 7. No Detrimental Reliance: Failure to Comply. The Charity agrees that the Grant does not constitute an enforceable gift for which the Charity has paid consideration or upon which the Charity shall rely to its detriment. Further, the Charity agrees that the Foundation has no legal obligation to pay the Grant to the Charity, and that the Foundation may, for any reason, suspend or cease payments of the Grant to the Charity, as may be determined by the Foundation.

Section 8. Enforceability of Terms of Gift. If the Foundation pays a portion or all the Grant to the Charity, the Foundation reserves the right to enforce the terms and conditions of the Grant as provided in this instrument, including requiring the Charity to use the Grant solely for the purposes described in Section 4. The Charity agrees that the Foundation's right to enforce the terms and conditions of the Grant includes the right to demand the refund of any portion of the Grant actually paid to the Charity by the Foundation, upon which demand, the Charity shall have ten (10) business days to comply.

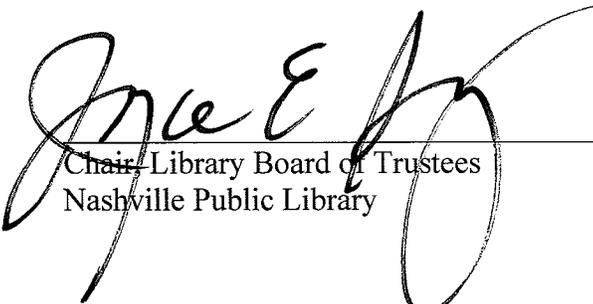
Section 9. No Joint Venture. The parties agree that the Foundation and the Charity are not partners or joint venturers with respect to each other, and nothing contained herein shall be construed to make the Foundation and the Charity partners or joint venturers or to impose upon either party any liabilities as such.

Section 10. Indirect Cost. No indirect cost allowable. All funds are to be program direct.

Acknowledged and agreed to this 18 day of Dec, 2025.

  
\_\_\_\_\_  
Nashville Public Library Foundation

12/18/25  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Chair, Library Board of Trustees  
Nashville Public Library

12/23/25  
\_\_\_\_\_  
Date

**SIGNATURE PAGE  
FOR  
Nashville Public Library In-Kind Program Enhancement and Improvements Grant**

IN WITNESS WHEREOF, the parties have by their duly authorized representatives set their signatures.

**METROPOLITAN GOVERNMENT OF  
NASHVILLE AND DAVIDSON COUNTY**

*[Handwritten Signature]*  
Department Director

12/19/2025  
Date

**APPROVED AS TO AVAILABILITY  
OF FUNDS:**

Signed by:  
*Jenneen Reed/mjr*  
62377A2A8742469  
Director  
Department of Finance

2/2/2026  
Date

**APPROVED AS TO RISK AND INSURANCE:**

DocuSigned by:  
*Balaqun Cobb*  
69804BF12FD744C  
Director of Risk Management Services

2/3/2026  
Date

**APPROVED AS TO FORM AND  
LEGALITY:**

DocuSigned by:  
*Macy Amos*  
122C5A9A9E944DA  
Metropolitan Attorney

2/2/2026  
Date

**FILED:**

\_\_\_\_\_  
Metropolitan Clerk

\_\_\_\_\_  
Date

**Exhibit A**

**Approved for FY26 Metro In-Kind Enhancement and Improvements Grant**

| <b>PROGRAMMING</b>   | <b>Amount</b>    |
|--|------------------|
| Early Literacy, Wishing Chair/Puppet Truck, Studio, NAZA, Limitless Libraries, Votes for Women, and other programming. | 3,370,000        |
| <b>ADMIN &amp; OPERATIONS</b>  |                  |
| Marketing & Communications, Strategic Planning, Staff Development, Training and Travel                                 | 130,000          |
|  | <b>3,500,000</b> |

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## GRANT SUMMARY SHEET

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**Grant Name:** NPLF In-Kind Program Enhancements and Improvements  
Grant FY26

**Department:** Public Library

**Grantor:** Nashville Public Library Foundation

**Pass-Through Grantor  
(If applicable):**

**Total Award this Action:** \$3,500,000.00

**Cash Match Amount:** \$0.00

**Department Contact:** Susan Drye  
615-880-2614 / 615-418-0091

**Status:** Continuation

**Program Description:**

NPLF provides funding for certain program positions for Limitless Libraries, Bringing Books to Life, Studio NPL, Education & Literacy, and Wishing Chair Productions. Additionally, NPLF provides enhancement funding for children and adult programming, material collections, and enhanced or improvement funding for children, teens, and adult services.

**Plan for continuation of services upon grant expiration:**

NPL does not expect to fund this initiative with local funding. The result of the grant will be ongoing support for several programs and service improvements that require no further funding.



# Grant Tracking Form Instructions

## Metropolitan Government – Department of Finance

The Grant Tracking Form should be filled out for both **Grant Applications** and **Grant Award Contracts**, with the cooperation of both department fiscal and programmatic personnel and approved by the Head of the issuing Department.

See below for instructions for submission of form once completed.

Indicate at the top of the Grant Tracking Form whether the current submission is “Pre-Application”, “Application”, “Award Acceptance”, or “Amendment”.

### **PART ONE**

**Department Name and Dept #** – Select your department’s name from the drop down list. Your Department’s 2-digit fiscal number will automatically appear in the next section.

**Contact** – The name of the department’s primary contact person for the grant proposal.

**Phone/Fax** – The phone and fax number of primary contact.

**Grant name** – The name of the grant or grant program.

**Grantor** – Select the agency or organization that will be administering the grant and providing the grantor’s share of funding from the drop down list. If you don’t see the name in the drop-down list, please enter the name in the field that says “Other Grantors”. Enter other grantors information here”.

**Grant Period** – The starting and ending dates of the proposed grant program.

**(For Applications Only) Anticipated Application Date** – The date you plan to submit an application to the grantor.

**(For Applications Only) Application Deadline** – The grantor’s due date.

**Funding Type** – Identify the source (Federal, State, Corporate, etc.) of the grant funding from the drop down list.

**Pass-Thru** - If this is a pass-thru grant (see "Funding Type", above), select the name of the agency it will pass through.

**Award Type** – Select from the drop down list the funding process (ie, competitive, formula, or other) by which the grants are made.

**Status** – Identify from the drop down list whether the grant is new, a continuation, extension, or amendment of an existing grant that is already in your budget.

**Metro Category** – Identify from the drop down list whether this grant is targeted to an existing program provided within the budget or will it create a new service.

**CFDA #** - Catalog of Federal Domestic Assistance number for the grant program (if Federal).

**Multi-department Grant Application** – Check this box if there are Metro co-applicants that will share the award and meet the requirements. Indicate who the co-applicants are in the box provided. Co-applicants will need to fill out a separate form.

**Total Award** – For Applications, enter the early estimated amount of the funding request to the Grantor. For Contract enter the total amount of the award. **For amendments changing the award amount, enter amount of change only**

**Metro Cash Match** – The amount of required cash match **to be provided by Metro** based on the estimated funding request.

**Metro In-Kind Match** – The amount of required Metro in-kind match based on the estimated funding request.

**Is Council Approval Required?** – Check if Council Approval is required for the purpose for which you are initially completing the form (whether grant application or grant award acceptance).

**Applic. Submitted Electronically?** - Check this if the application for this grant is submitted electronically rather than by mail.

**Project Description** - Provide a brief description of the grant, goals, its purpose, and any unusual requirements. Type a brief description of the programs and services your department will provide with these grant funds along with an objective statement for what will change because of the proposed project. Also note any special provisions, departmental priorities, audit recommendations, and unusual requirements related to the grant

**Plan for Continuation** – Upon the expiration of the grant, describe the department's plan for continuation or the cessation of the service. If the plan includes continuation of service, all costs associated with the service need to be identified to assess the impact on the budget.

**How is Match Determined** – If the match is a fixed dollar amount, put the amount in the first field. If it is a percentage of total expenditures, put the percentage in the second field. If it is a percentage with a fixed maximum, put the maximum dollar amount in the first field and the percentage in the second. Percentages should be expressed as a percentage of the total project cost, not a percentage of the grantor's share. Other means of determining match should be described in the space provided.

**For this Metro fiscal year, how much of the required local cash match - "Is already in your budget?"** – If the grant is an extension, continuation, or replacement of an existing grant, you should already have local matching money in your budget (although possibly not all you will need). If it is a new grant, you may have matching funds already in your budget or you may not. In the first field, type the amount of local match already in your budget; in the field, "Is not budgeted?", type the amount of local match not budgeted. Enter the proposed source of match in the field so labeled. Enter the Fund and Business Unit for the match source in the fields indicated. **Match Amounts and Sources for succeeding years of multi-year contracts must be indicated in the Budget in Part Two, below.**

**Number of FTEs** – The number of annual full-time equivalent positions to be funded by the grant. One FTE is usually equivalent to one full-time position working 2080 hours per year. For example, a position working 1040 hours per year is equivalent to an FTE of 0.5. Calculate this FTE on an annual basis; do not adjust for position Effective From and Through dates.

**Number of Positions** – The number of *new* positions to be funded by this grant, whether full- or part-time.

**Indirect Costs.** Enter your departmental indirect cost rate. Please contact Cost Accounting Division in the OMB (862-6483) if you need technical assistance in developing a cost allocation plan and an indirect cost rate. "Indirect Cost of Grant" is the total indirect cost over the entire grant period and is usually derived by multiplying the departmental indirect cost rate by the grant program cost. If you check the box indicating that indirect costs are allowable, please specify the rate allowed and the total amount of indirect cost requested from the grantor in your grant budget. If indirect costs are allowable but limited to a certain percentage of direct cost, please attach documentation regarding the limit. If indirect costs are not allowable, attach documentation from the grantor indicating that.

**Draw Downs or Reimbursements** – Please indicate whether draw downs (prior to actual expenditures by Metro) are applicable.

**Metro or Community Based Partners** – Identify all partners in the proposed grant project.

## **PART TWO**

*For Award Acceptance: Complete Part Two at the same time as you complete Part One.*

*For Applications: Upon the completion of the grant application narrative and budget, please complete Part Two for award from the Department of Finance. The information you provide will be a cover sheet for tracking approvals.*

**Grant budget** – For each year of the grant please identify (to the best of your knowledge) corresponding to Metro fiscal year: the amount of money to come from federal grantors, state grantors, and any other grantors; the amount and source of Metro cash match; amount of Metro in-kind match; and the total grant amount for each year. In the "Metro Fiscal Year" column, delete the underscore following "FY" prior to entering the FY in question. In the next column, estimate the total Indirect Cost of Grant (by year). This will **usually** (though not always) be the department's indirect cost rate times the total program cost. In the final column, "Ind. Cost Neg. from Grantor", enter the **actual** amount of indirect cost (by year) you will recover from the grantor. Be sure to enter zeros if you cannot recover any ind. cost from the grantor. **Please contact Cost Accounting Division in the OMB (862-6483) for technical assistance in identifying indirect costs, including the "LOCAP" cost accounting services rate.** On the bottom row, total each of the columns.

For grant amendments where the total has increased or decreased, use the new grant totals in the budget section (in the "Award" fields at the top and bottom of the form, use only the amount of the increase or decrease).

## **SUBMISSION**

### **For Pre-Application:**

When this form is complete:

In Excel, choose File, Send to, Mail Recipient (As attachment) and email to:

dennise.meyers@nashville.gov

Or click on the button indicated.

### **For Application:**

When this form is complete:

(1) Print out one copy to use as a cover sheet for the rest of the grant packet, which should be sent/delivered to Dennise Meyers, DGC, 5th Floor, 222 Third Ave., N.

(2) Email a copy to Dennise Meyers following the instructions above

**For Award Acceptance or Amendment:**

**For grants for which the form has already been completed during the application phase:** Using the form previously submitted:

- (1) Using the form previously submitted, update any fields where the information may have changed (e.g., award amount). Be sure to include "Date Awarded", "Award Amount", and "Contract #".
- (2) Print out one copy to use as a cover sheet for the rest of the grant packet, which should be sent/delivered to Dennise Meyers, DGC, 5th Floor, 222 Third Ave., N.
- (3) In Excel, choose File, Send to, Mail Recipient (As attachment) and email to: [dennise.meyers@nashville.gov](mailto:dennise.meyers@nashville.gov), or click on the button indicated.

**For grants where no previous form has been submitted:**

- (1) Be sure to complete all applicable fields, including "Date Awarded", "Award Amount" & "Contract #"
- (2) Print out one copy to use as a cover sheet for the rest of the grant packet, which should be sent/delivered to Dennise Meyers, DGC, 5th Floor, 222 Third Ave., N.
- (3) In Excel, choose File, Send to, Mail Recipient (As attachment) and email to: [dennise.meyers@nashville.gov](mailto:dennise.meyers@nashville.gov), or click on the button indicated.