

# Z. Smith Reynolds

## FOUNDATION

147 South Cherry Street, Suite 200 ♦ Winston-Salem, North Carolina 27101-5287

### GRANT APPLICATION General Operating Support Request

#### I. GENERAL INFORMATION:

##### A. Contact Information

Name of Organization:  
(Exactly As It Appears On Your Federal Tax-Exemption Certification Under Section 501(C)(3) Of The IRS Code)

AKA:

Mailing Address:

County:

Website:

Telephone:

Fax:

Chief Executive Officer (CEO):

Title:

CEO Office Phone:

CEO E-mail:

Date of Incorporation:

State of Incorporation:

Federal ID#:

Fiscal Year:

***Contact person to whom all communication regarding this application should be directed:***

Name:

Title:

Mailing address (if different from above):

Telephone:

Fax:

Fax: (919) 829-7299

Primary Contact Cell:

Primary Contact E-Mail:

Z. SMITH REYNOLDS FOUNDATION, INC.

Is your organization's primary location out of state?

List the physical address of your organization's primary NC office:

List your organization status:

Is your organization a supporting organization?

If so, what type?

## **B. Application Information**

Which of the following best describes the focus of your proposal?

Is your organization a Governmental entity?

Project title (if for general operating support, so state):

Period for which funds are being requested:

Duration of Grant Request (number of months):

**Amount being requested:** \$

Total Amount of Budget Expenses: \$

Region of State in which your organization is located:

Geographic area in which work will take place:

Has your organization previously received a grant(s) from this foundation? Yes

If yes, have all the reporting requirements been met for the grant(s)? Yes

**Note: All reporting requirements must be met prior to submitting an application.**

## **C. Governing Board and Staff**

**Number of staff members: Total 7**

(Part-Time \_\_\_\_; Full-Time \_\_\_\_)

(If Governmental Unit or College/University, list only staff related to the project)

Please indicate the **number**:

Male:

Female:

White/Caucasia:

Non-White/Non-Caucasian:

**Total number of members on Governing Board: 19**

Please indicate the **number**:

Male:

Female:

White/Caucasian:

Non-White/Non-Caucasian:

Please indicate the **percentage**:

Males on Board:

Females on Board:

White/Caucasian on Board:

Non-White/Caucasian on Board:

Please list the county or counties in which your organization will work:

What is the demographic composition of the geographic area in which the work for which you seek funds will be performed?

African-American

Hispanic Latino

Native American

White/Caucasian

Other

If the racial and/or gender make up of your organization's Board is not representative of the demographics in the area served, please explain if and how the organization plans to address this circumstance. (You may use up to 150 words)

**D.** The Foundation actively seeks to promote access, equity, and inclusiveness and to discourage discrimination based on race, ethnicity, gender, age, sexual orientation, socio-economic status, and other

factors that deny the essential humanity of all people. Please list some specific examples of how you have demonstrated this value in the past three years. (You may use up to 150 words)

**E. Proposal description:** Please summarize the work for which you seek funds. (You may use up to 150 words)

## **II. ORGANIZATIONAL INFORMATION:**

Mission:

Please state your organization's mission. (You may use up to 150 words)

Please describe the core programs that support your mission. (You may use up to 100 words)

**Prior Achievements:** Please list your organization's top three results achieved in the past three years and explain how they have helped to advance your mission. (You may use up to 225 words)

**Lessons learned:** What are the most significant lesson(s) learned from your work in the past three years and what are you doing differently as a result of your learning(s) that enables you to achieve greater results? (You may use up to 180 words)

## **III. GRANT PROPOSAL RESULTS:**

**Need:** What particular community or public need will your program(s) address during the period of the grant request? (You may use up to 100 words)

**Target population:** What population, community, organization, or institution will be affected by your work? (You may use up to 100)

Anticipated results / **grant period results**: Please describe how and the degree to which the population, community, organization, or institution you seek to affect will be different or better at the end of the period for which funds are requested? (You may use up to 180)

Anticipated results / **long-term impact**: Please list three results your organization plans to achieve in the next three to five years and explain how they will advance your mission. (You may use up to 180 words)

Value-added: How will a grant from the Z. Smith Reynolds Foundation help you to achieve the anticipated results listed above? (You may use up to 180 words)

Benchmarks: How will you know half-way through the grant period (or once each year for multi-year grants) if you are making progress towards achieving your anticipated results? (You may use up to 180 words)

Barriers to success: Assuming you receive the financial resources needed for your work, what are the external obstacles that might prevent you from achieving your anticipated results and what are your plans to address them? (You may use up to 180 words)

## **V. ORGANIZATIONAL DEVELOPMENT AND CONTEXT**

Organization context and role: Please name other organizations in North Carolina that work in your field.  
(You may use up to 100 words)

Organization context and role: What is the role your organization plays relative to the roles played by other organizations working within your field? (You may use up to 100 words)

Challenges: please list the significant internal challenges facing your organization, staff and/or board and what your plan is to address them. (You may use up to 180 words)

Priorities: how will the priorities of the organization change if a grant awarded is for an amount less than requested? (You may use up to 180 words)

Does your organization have Skype videoconferencing capacity? \*Skype, a free videoconferencing tool, requires a high speed internet connection and a web camera; full system requirements are available at: <http://www.skype.com/download/skype>.

## **VI. ADDITIONAL INFORMATION:**

Is there anything else you would like the Foundation to know about your organization or program(s)?  
(You may use up to 300 words)

**VII. FINANCIAL INFORMATION**

1. List the total actual operating income and expenses of your organization for the last three completed fiscal years as shown on IRS Form 990. If the 990 is not yet available for the most recently completed fiscal year, list the un-audited final income and expenditures and indicate that numbers are un-audited. Governmental units do not need to supply this information.

<b>Year Of Filing</b>			
<b>Income</b>	\$	\$	\$
<b>Expenses</b>	\$	\$	\$
<b>Difference In Income And Expenses</b>	\$	\$	\$

2. If your organization has ended any of the past three fiscal years with a deficit, or a significant surplus, please explain. (You may use up to 150 words)

3. Please list your five largest sources of income in the past two years. Total these two years for each source. Include any government contracts as well as grants and contributions.

Source (Name: Person, Foundation, Agency)	Amount	Purpose
INCOME SOURCE 1	\$	INCOME SOURCE 1 PURPOSE
INCOME SOURCE 2	\$	INCOME SOURCE 2 PURPOSE
INCOME SOURCE 3	\$	INCOME SOURCE 3 PURPOSE
INCOME SOURCE 4	\$	INCOME SOURCE 4 PURPOSE
INCOME SOURCE 5	\$	INCOME SOURCE 5 PURPOSE

4. Does the organization currently have an operating reserve?

If so, what is its amount?

How many months of operating support does that amount represent?

5. Does the organization have an endowment that supports annual operations in any amount?

If so, what is the current balance of the endowment?

Please note any restrictions that apply to these funds?

**B. Program Financial Information**

Please indicate which items in your organization's budget would be supported by Z. Smith Reynolds funds if a grant were awarded. (You may use up to 60 words)

**Potential Funding:**

What funds from other sources (whether other foundations, other donors or internal sources) have been received or are under consideration for the organization? Please use the chart below. (Attach an additional sheet as needed.)

Amount	Source	ENTER ONE: Committed Highly Likely Somewhat Likely	Date Decision is Expected
--------	--------	---	------------------------------

\$	POTENTIAL FUNDING SOURCE 1		
\$	POTENTIAL FUNDING SOURCE 2		
\$	POTENTIAL FUNDING SOURCE 3		
\$	POTENTIAL FUNDING SOURCE 4		

**C. SUSTAINABILITY**

1. Upon completion of this grant, if awarded, do you intend to return to Z. Smith Reynolds Foundation for continued funding?

If yes, for approximately how many years?

2. How do you plan to sustain your project at the end of the grant period, if a grant is awarded? In addition to ways to attract new contributions, include in your answer any future funders, alternative sources of earned income and any ways you might reduce costs.

## ATTACHMENTS

### Organization Financial Information

Please submit the following attachments detailed below using the uploading instructions that follow:

#### 1) Financial information:

Attach the following documents. Save each item as a separate document (of one page in length, if possible).

- a) Prior fiscal year's Income Statement (also known as "Statement of Activities").
- b) Balance Sheet (also known as "Statement of Financial Position") as of the last day of the prior fiscal year.
- c) Most recent audited financial statement, if one has been prepared. (This item may be submitted by mail up to 5 days after the application deadline.) If your organization has received any Management Letters or audit exceptions prepared by the auditor, please upload a copy of the opinion letter(s) as well as the responses.
- d) North Carolina budget for prior fiscal year showing a comparison of budget-to-actual income and expenses.
- e) Approved North Carolina budget for current fiscal year, including year-to-date actuals for revenue and expenses. (If the organization is less than three months into its fiscal year at the application deadline, year-to-date actuals may be omitted.)
- f) Projected North Carolina budget, including revenue and expenses, for the coming fiscal year. For multi-year requests, please include projected budgets for each year in which funds are requested.
- g) IF PROJECT SUPPORT REQUEST: A project budget for the duration of the requested grant showing projected income and expenses (with expected use of ZSR funds for each line item shown in a separate column).

Note: If you are applying on behalf of a college/university or governmental entity, please provide information relevant to your department, program, or appropriate governmental sub-unit in whatever form it now exists.

#### 2) Board List:

Please provide name, city, state and occupation of each of your board members. Also provide a brief explanation of how members are selected.

#### 3) Tax-exempt Status:

The Foundation must receive a copy of the petitioning organization's federal tax-exempt certification

under Section 501(c)(3) of the Internal Revenue Code that includes a determination as to the organization's status as a publicly-supported organization. Governmental units need not submit these documents. Please be aware that the Foundation will not make pass-through grants from one organization to another.

4) Prior Grantee Reporting Document(s):

If you received a past grant from ZSR, you may retrieve from our website ([www.zsr.org](http://www.zsr.org)) the reporting form(s) specific to your organization's grant status. Upon completion, upload these documents with this application. Be sure to submit all necessary reporting forms for prior grants to ensure that your current request is processed and unhindered by missing requirements. Please note that a new application will be accepted but may be withdrawn from consideration unless all past evaluation requirements are satisfied. The different types of reporting tools are outlined below.

a) Final Report Form -- All prior grantees are required to complete and submit this comprehensive evaluation no later than 15 months from the date of payment on a one year grant or from date of last payment on a multi-year grant.

b) Progress Report -- If your organization is a current grantee and plans to apply for additional funds, the Foundation must receive an evaluation report on any prior grant for which you have not yet submitted a final report. This document should describe the ongoing, Foundation-supported initiative(s) for which you sought funding. In addition, a progress report is due 12 months from the date of the first year payment on a multi-year grant.

**Instructions to upload attachments with the grant application:**

To do so, complete the following steps:

1) With your mouse, click on the drop-down menu found below, and then highlight and click on the appropriate "Title" that correctly describes the single document you plan to attach.

2) Click the "Browse" button with your mouse.

3) Find and select the "File name" of the document saved on your computer that you wish to attach by double-clicking on the intended selection. NOTE: Please save your documents with your organization name and title such as "Operating Budget."

4) Click the "Upload" button with your mouse.

5) Repeat steps 1-4 as needed to ensure that all necessary forms are correctly labeled and successfully attached.

6) Upon completion of your online application and after attaching supplemental documents, electronically send your proposal to the Foundation by clicking on the "Submit" button with your mouse one-time only.

**Note:** If you are unable to attach any required documents to your online application, these additional components must be e-mailed to documents@zsr.org or mailed to the Foundation and postmarked by the application deadline. DO NOT FAX ANY ATTACHMENTS UNLESS PERMISSION IS GRANTED BY APPROPRIATE FOUNDATION STAFF. If you have questions, please contact a Foundation representative.

**Upload:** The maximum size for all attachments combined is 24 MB. Please note that files with certain extensions (such as ".exe", ".com", ".vbs", or ".bat") cannot be uploaded.