

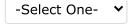
Eligibility Assessment To be eligible to apply, your organization must fit in one of the following categories. Please choose which best describes your organization. - 501(c)3 and in good standing with the IRS; - Public school, college/university, governmental unit, or religious entity; or - Pending application with the IRS for 501(c)3 status. -Select One-



County Office Location

The 2025 Community Progress Fund is open to organizations in NC's 78 rural counties, as classified by the NC Rural Center. (See the map here.)

Please choose the county that your organization's primary office is located in.



Next



COMMUNITY PROGRESS FUND

The Community Progress Fund is designed to provide an infusion of short-term funding at a pivotal moment and is intended to build on existing momentum to help move an issue, an idea or an organization forward. The range for Progress Fund grant awards is \$20,000-\$30,000 per year for one to two years.

The 2025 Community Progress Fund is open only to organizations in NC's 78 rural counties. Through our various grantmaking strategies, ZSR aims to serve the entire state of North Carolina. At the same time, we know that some parts of North Carolina have more access to resources than others, and these disparities are especially prevalent between urban and rural communities. In 2025, ZSR's Community Progress Fund will fund organizations in NC's 78 rural counties, as defined by the NC Rural Center.

We support home-grown solutions driven and led by local community members. Local communities know best what their residents need to thrive, so we prioritize projects that are community-driven, community-led and community-centered. We strongly encourage applications from organizations led by and primarily serving people of color.

We help organizations build on existing momentum to achieve impact. Because grants are short-term (one or two years), we support

organizations and projects that have existing momentum to move an idea, issue, organization or project forward. These efforts have great potential to achieve impact and make progress within a community.

Criteria are broad and grant partners are diverse. We want to be responsive to communities' diverse needs, so criteria for this grant program are intentionally broad. We support a range of organizations, from food banks to family shelters, daycares to theaters, and beyond. We have funded executive director transition planning, program expansion, and even building repairs for anchor organizations to ensure they can continue serving their communities.

Learn more about the Community Progress Fund on our website.

I have read the above information.





The deadline for the online Community Progress Fund Application is January 30, 2025 at 12:00 pm (noon).

I agree to the submission deadline.



Next



IMPORTANT INFORMATION BEFORE SUBMITTING YOUR APPLICATION

- Once you have submitted your application, you will receive an email confirmation from bethp@zsr.org or mail@grantapplication.com.
 - a. When your online account is created for your organization, make sure that the email address is a valid email address without spam blockers or bulk mail filters. All application communications will be emailed to the email address that was used when the online account was created.
 - b. If your organization has an existing ZSR account and the original email address has changed or if you are unsure about the email address used, contact the Foundation at the number provided below.
 - c. If you do not receive an email confirmation of submission, check your spam or junk mail. If the email is not there, please check to ensure you clicked the "Submit" button. Log back into your account and look in the pending applications. If the application has not been submitted, open and resubmit it.
 - d. Add bethp@zsr.org or mail@grantapplication.com to your email contacts.
- Save your work frequently by clicking the Save and Finish Later button. Please note that saving your form will trigger an

automated email reminder that will include the steps to access the saved form. You may need to close your internet browser before logging back into your account. If you don't close, you may be directed to begin a new form.

- Please do not use the back button on your browser; click the tabs across the top of the form to return to a particular section.
- Upon reviewing your application, if red errors display, please correct the information, then click on the "Update" button. When all errors are resolved you can submit. All questions and required information must be completed and uploaded.

 If you would like to provide any additional information other than

If you would like to provide any additional information other than what is required in the form, please contact the Foundation.

- Please do not use bullet points, tabs, or other symbols or special characters (e.g., #, (), ", >, <, *). Our online system does not recognize them. Also, bold and underlined text formatting options will not be displayed within your answers.
- Anywhere the blue info-bubble is available; there is help text.
- <u>Do not submit any information to documents@zsr.org</u> (unless directed by Foundation staff).
- IMPORTANT: For uploading documents as attachments within the application The preferred format for documents is PDF. Please save your documents as PDFs before uploading.

If you have questions while working on this form, please visit our website at www.zsr.org. If you cannot find the answer to your questions, call us at (336) 725-7541 ext.109.

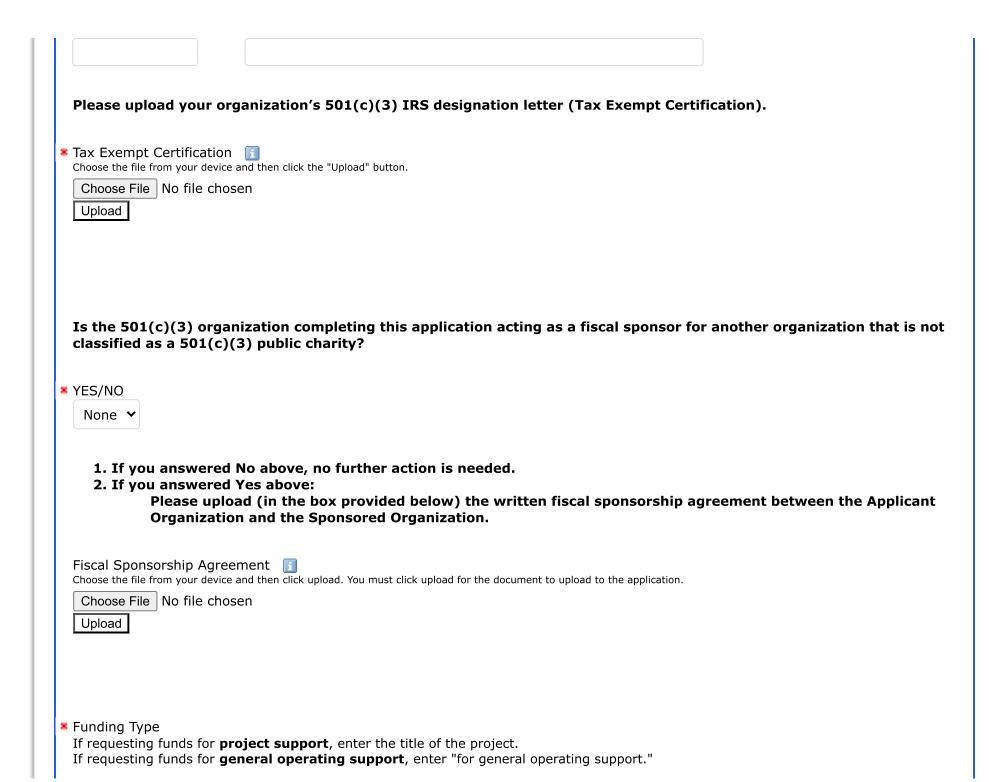
I have read and understand the above information.





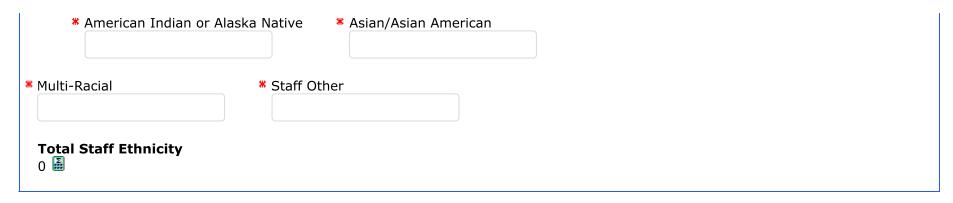


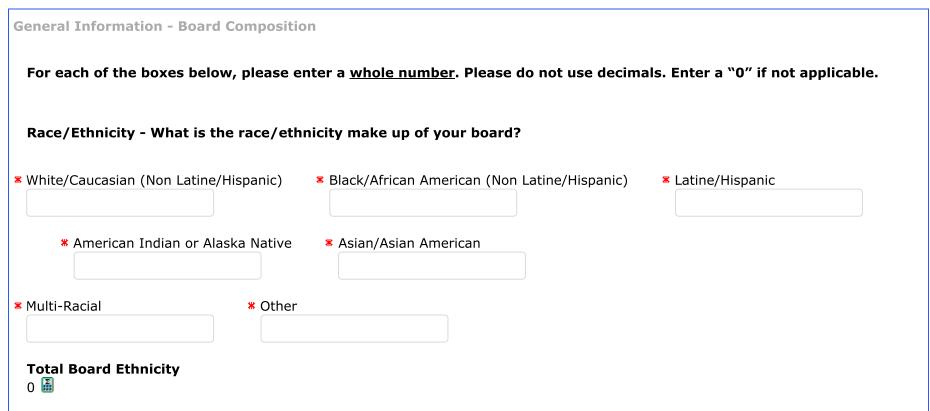
| | | Financial Information | | |
|--|--|--|-----------------|---------------------------------------|
| | | General In | formation | |
| Required before final subm | viceion | | | Printer Friendly Version E-mail Dra |
| Required before final Subm | IISSION | | | |
| General - Organizati | onal Information | | | |
| Name of Organization | - | | | |
| Name of Organization Exactly as it appears on you | ur federal tax-exemption co | ertification under Section 501(c)(3) o | f the IRS Code. | |
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| | | | | |
| Federal Tax ID Numb Format: 99-9999999 | | ed on IRS Letter | | |
| | - Select (| One - ✓ | | |
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| Organization's Office | Mailing Address | | | |
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| Word count 0 of 25 | | |
| General Information - Organization's Primary | Contact | |
| Provide information for the chief executive of the secutive of the chief executive of the center of the school.) | <u>university</u> , please provide | executive director). the following as the Organization Primary Contact: s. (Please <u>do not list</u> the CFO, President, or Chancellor |
| First Name | Middle Name | |
| Last Name | Suffix | |
| Title 🔢 | | |
| Preferred Phone Secondary Phone Format: 999-999-9999 | E-mail | |
| * Ethnicity Gender - Select One - Select One - | • | |

PRIMARY CONTACT FOR THIS REQUEST: Please provide the following information for the person to whom all communication regarding this application should be directed. **If you are submitting on behalf of a college or university, as the request's primary contact, please provide the person who is most knowledgeable about the application. (Please do not list the Development Officer.) Middle Name First Name Suffix Last Name Title Preferred Phone Secondary Phone E-mail Format: 999-999-9999 Format: 999-999-9999 **General Information - Staff Composition** For each of the boxes below, please enter a whole number. Please do not use decimals. Enter a "0" if not applicable. * Part time staff ***** Full time staff **Total Full and Part Time Staff** 0.00 Race/Ethnicity White/Caucasian (Non Latine/Hispanic) * Black/African American (Non Latine/Hispanic) ***** Latine/Hispanic





General Information - Mission Statement and Brief Description

* What is the mission statement of your organization?

| Word count 0 of 450 | 1 |
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| * Please provide a brief description of the project. | |
| Please provide a brief description of the project. | |
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Log Out General Information Key Questions Financial Information Review My Application **Key Questions** Printer Friendly Version | E-mail Draft Required before final submission **Key Questions *** Statement of Need: What community issue are you addressing, or do you plan to address? In your explanation, please be sure to include information about the following: • The location or geographic scope of the work • A description of the need for the proposed work • Why it is the right time for this investment, including the existing momentum for the work outlined in the proposal Word count 0 of 450 * Scope of Work: What are the goals and corresponding timeline for the proposed work during the grant period, beginning in Summer 2025? How would ZSR funds be used? Word count 0 of 450 ***** Geography Served:

1 ZSR would like to know more about the geographic community that would be served by the Progress Fund grant. Please select the counties where the proposed work will take place, which may or may not be where the organization is headquartered.

| □All 100 Counties □ ALAMANCE □ ALEXANDER □ ALLEGHANY □ ANSON □ ASHE □ AVERY □ BEAUFORT □ BERTIE |
|--|
| □ BLADEN □ BRUNSWICK □ BUNCOMBE □ BURKE □ CABARRUS □ CALDWELL □ CAMDEN □ CARTERET |
| □CASWELL □CATAWBA □CHATHAM □CHEROKEE □CHOWAN □CLAY □CLEVELAND □COLUMBUS □CRAVEN |
| □CUMBERLAND □CURRITUCK □DARE □DAVIDSON □DAVIE □DUPLIN □DURHAM □EDGECOMBE □FORSYTH |
| ☐ FRANKLIN ☐ GASTON ☐ GATES ☐ GRAHAM ☐ GRANVILLE ☐ GREENE ☐ GUILFORD ☐ HALIFAX ☐ HARNETT |
| □HAYWOOD □HENDERSON □HERTFORD □HOKE □HYDE □IREDELL □JACKSON □JOHNSTON □JONES |
| □LEE □LENOIR □LINCOLN □MACON □MADISON □MARTIN □MCDOWELL □MECKLENBURG □MITCHELL |
| □MONTGOMERY □MOORE □NASH □NEW HANOVER □NORTHAMPTON □ONSLOW □ORANGE □OUT OF STATE |
| □ PAMLICO □ PASQUOTANK □ PENDER □ PERQUIMANS □ PERSON □ PITT □ POLK □ RANDOLPH □ RICHMOND |
| ROBESON ROCKINGHAM ROWAN RUTHERFORD SAMPSON SCOTLAND STANLY STATEWIDE |
| STOKES SURRY SWAIN TRANSYLVANIA TYRRELL UNION VANCE WAKE WARREN |
| □WASHINGTON □WATAUGA □WAYNE □WILKES □WILSON □YADKIN □YANCEY □Out of State |
| |
| * Demographic Information: |
| ZSR would like to know more about the racial/ethnic composition of the people who would be served by the Community Progress Fund grant. |
| |
| Are the people who would be served by the grant primarily people of color? |
| - Select One - 🕶 |
| |
| If you answered "yes" above, is there a primary racial/ethnic constituency that would be served? If so, please indicate the primary racial/ethnic constituency by selecting the appropriate box below. If the grant does not focus on a specific racial/ethnic constituency, but rather multiple |
| racial/ethnic constituencies, please select "people of color." (choose one) |
| <none></none> |
| THORIC? |
| (Optional): If you would like to provide further information, please do so in the box below. |
| (Optional). If you would like to provide further information, pieuse do so in the box below. |
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General Information Key Questions Financial Information Review My Application **Financial Information** Printer Friendly Version | E-mail Draft Required before final submission **Financial - Prior Actual Expenses** Prior Year Expenses Amount Please choose the range of your organization's total actual expenses for the prior fiscal year? - Select One -**Financial - Amount Requested** In the boxes below, please indicate how much funding you are requesting from ZSR. If this is a multi-year request, please state the amount requested for each year. The amount in each year should be between \$20,000-\$30,000. If you are not requesting money in Year 2, enter "0" in the box. A box cannot be left blank. For each of the boxes below, please enter a whole number. Please do not use decimals. ***** Grant Period - Select One -* Request - Year 1 * Request - Year 2 ***** Total Requested * Budget - Proposed Year One Budget 🔢 Choose the file from your device and then click the "Upload" button.

