

# Glass Half Full Old Dominick Charitable Fund Grant

With the establishment of the Glass Half Full Old Dominick Charitable Fund, Old Dominick Distillery seeks to create a permanent charitable arm, the mission of which is to accrue and distribute resources including funds, in-kind donations, and direct service to local partners in the interest of serving the greater Memphis community. Every year, the board of this fund, comprised of employee volunteers, will fundraise in order to partner with a local organization working to positively impact our community. This yearlong partnership will include a monetary gift from our donor-advised fund as well as in-kind service and employee volunteerism.

## The Grant Application Process

- Each year, GHF will open up the application window at 8:00am on May 1 and continue to accept applications on a rolling basis through 5:00pm on August 1.
- Once the submission window closes, the GHF board will choose a partner for the following year. The chosen partner will be notified of their selection by Sept 1.

## Eligibility

- For 2023, Glass Half Full intends to partner with an organization that has an environmental focus.
- An applicant must be based and working in the greater Memphis area.
- An applicant must be certified as tax exempt under Section 501(c)3 of the U.S. Internal Revenue Code.
- An applicant must submit all required materials electronically to be considered.

## A Complete Application Includes:

- The required information as listed in Part I (page 2)
- A narrative that addresses questions listed in Part II (pages 2-3)
- The required attachments as listed in Part III (page 3)

## Partnership Final Report

A requirement of partnership is the submission of a final report, which will detail how and where the gifts were distributed over the course of the year.

## Contact Information

NAME	Old Dominick Distillery
E-MAIL	GHF@olddominick.com
PHONE	901-260-1250

# Grant Worksheet

## Part I. Cover Sheet

**Please provide the requested information in the space below:**

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

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person & Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Does your organization have a 501(c)3 status from the IRS? Yes \_\_\_\_\_ No \_\_\_\_\_

## Part II. Organization Overview

**Please provide information that addresses the following areas:**

1. A brief history of your organization.
2. An overview of your organization's operational budget.
3. Overview of demographics and geographic location of your area of service.
4. A list of current board members and officers.

## Grant Worksheet

5. A description of the fund-raising strategy that your organization has developed, including status of fund-raising efforts to date.

### Part III. Needs and Goals

**Please provide the following:**

1. An overview of what you hope to achieve with a monetary gift from GHFCF.
2. An outline of your in-kind needs, including a ranking of your top three most needed services.
3. Any information regarding additional volunteer opportunities (time/service) for our team, either individual, small, or large group.
4. In your own words, an assessment of how impactful a yearlong partnership would be for your organization.