ORGANIZATIONAL ASSESSMENT©							
<b>RESOURCE DEVELOPMENT QUESTIONNAIRE</b>							
<ul> <li>To be completed separately by each of the following:</li> <li>Executive</li> <li>Development or Fiscal Officer</li> <li>Board Treasurer or Fundraising Committee Chair</li> </ul>							
. Does the organization have a fund development plan in place?							
Yes No							
If yes, who created the plan (board, executive, staff, consultant, other)?							
Who is responsible for its implementation?							
Has it been updated within the past year?							
Yes No							
2. Does the organization have a diversified funding base so it is not overly dependent on one source or type of income?							
Yes No							
Please list what percentage of the organization's income in the current fiscal year is derived from each of the following:							
Individuals % (special events, direct mail, membership, major donors, etc.)							
Foundations%							
Government grants, contracts or fees%							
Corporations or small businesses%							
Fees for service%							
Related earned income%							
Unrelated earned income%							

3. Does the organization have a contingency plan so that, if a particular source of funds is withdrawn or severely cut back, this would not imperil the organization's existence?

Yes \_\_\_\_\_ No \_\_\_\_\_

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## **RESOURCE DEVELOPMENT QUESTIONNAIRE (continued)**

	Please explain:					
4. Is fur	ndraising for the organiz	zation a joint effort of	board and staff?			
		Yes		No		
	How many paid staff w	vork on fundraising fu	ıll time?		Part time?	
	Does the board have an	n active fundraising co	ommittee?			
		Yes		No		
5.	Have staff and/or board	d members participate	ed in training durin	g the past ye	ar to increase their sk	ills in fundraising?
		Yes		No		
6. Does	the organization have s	ufficient income to m	eet expenses?			
		Yes		No		
	If the organization has	experienced a deficit	in any of the past	five years, pl	ease describe.	
7. Does	the organization have a	balance between unre	estricted and restric	cted income?		
		Yes		No		
	Please indicate the orga	anization's projected	income for the cur	rent fiscal ye	ar and the past three y	vears:
	Rest <u>Inco</u>	ricted ome	Unrestricted Income		otal acome	Expense
Current	Year:					
Last Yea	ar:					
2 Years	Ago:					
3 Years	Ago:					

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## **RESOURCE DEVELOPMENT QUESTIONNAIRE (continued)**

8. Has the organization been able to maintain its staff and programs?

es the organization take advar	ntage of any of the following t	pes of resources:	
In-kind donations	Yes	No	
Interns	Yes	No	
Volunteers	Yes	No	
Pro-bono services	Yes	No	
Facilities or other resource	s shared with other organization	ns	
	Yes	No	
Group purchasing	Yes	No	
Barter	Yes	No	
For each "yes," please des	cribe		

Yes \_\_\_\_\_ No \_\_\_\_\_ Please explain: \_\_\_\_\_

(A "no" answer to any of the above questions indicates the item should be given attention.)

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