

## Organization Evaluation Tool

**NAME OF ORGANIZATION:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**Instructions:** Answer the following questions to the best of your ability.

### Legalities

1. Is the organization classified as a 501(c) 3 nonprofit organization?     Yes     No     Not Sure
2. Does the organization employ/use a competent bookkeeper to maintain accounts receivable and payable and payroll?     Yes     No     Not Sure
3. Is the financial management system adequate and are there adequate checks and balances in place?     Yes     No     Not Sure
4. Does the organization have a CPA on the Board of Directors or one available to the finance staff or executive director for questions?     Yes     No     Not Sure
5. Does the organization have an attorney on the Board of Directors or one available to the executive director for questions?     Yes     No     Not Sure

### Board Governance

1. On a scale of 1 – 10, 1 being low and 10 being high, to what extent does the Board of Directors guide the organization in fulfilling its vision and mission? \_\_\_\_\_
2. What percent of Board members attended the last Board meeting? \_\_\_\_\_     Not Sure
3. On a scale of 1 – 10, 1 being low and 10 being high, to what extent does the Board of Directors take responsibility for securing funding for the organization? \_\_\_\_\_
4. On a scale of 1 – 10, 1 being low and 10 being high, how supportive is the Board of Directors of the Executive Director? \_\_\_\_\_
5. On a scale of 1 – 10, 1 being low and 10 being high, how would you rate the organization with regard to orienting existing and new Board members about expectations, roles and responsibilities? \_\_\_\_\_
6. Do 100% of your Board members contribute financially to the organization annually?     Yes     No     Not Sure

### Image Management

1. Have you defined your community, i.e. the geographic bounds of your organization?     Yes     No     Not Sure
2. How many times did your organization appear in the news media in the last 6 months? \_\_\_\_\_     Not Sure
3. Do you have a relationship with local news media?     Yes     No     Not Sure
4. Does your organization have a brand and does it appear consistently on printed materials and social media?     Yes     No     Not Sure
5. Does your organization have a website and Facebook page?     Yes     No     Not Sure
6. Does the organization belong to the Chamber of Commerce or other networking association?     Yes     No     Not Sure

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### Resource Development

1. Are you struggling to meet ongoing expenses?  Yes  No  Not Sure
2. What percentage of the organization's financial support comes from individuals, organizations and businesses within the community you serve? \_\_\_\_
3. On a scale of 1 – 10, 1 being low and 10 being high, how effectively does the organization engage volunteers in the work of the organization? \_\_\_\_
4. On a scale of 1 – 10, 1 being low and 10 being high, how effectively does the organization engage businesses to support the work of the organization through in-kind contributions? \_\_\_\_
5. Do you conduct an annual giving campaign?  Yes  No  Not Sure
6. How many fundraisers does the organization hold per year?
7. Does the organization employ a Director of Development or other staff person who is dedicated to relationship-building with community stakeholders?  Yes  No  Not Sure
8. Does the organization have a resource plan/fundraising plan/funding strategy and is it being implemented?  
 Yes  No  Not Sure If yes, on a scale of 1 – 10, 1 being low and 10 being high, how would you rate the plan and its effectiveness

### Strategic Planning

1. Does your organization operate in accordance with its mission statement?  Yes  No  Not Sure
2. Does the organization have a strategic plan?  Yes  No  Not Sure  
If yes, on a scale of 1 – 10, how would you rate the plan and its effectiveness? \_\_\_\_
3. On a scale of 1 – 10, how important is long-range planning to your organization? \_\_\_\_
4. On a scale of 1 – 10, how would you rate your Board's ability to develop a strategic plan? \_\_\_\_
5. Does your organization have regular staff meetings (or meetings to discuss day-to-day operations)?  
 Yes  No
6. How many Board and/or staff retreats does your organization have per year? \_\_\_\_

### Program Impact

1. Do you have data that shows the impact of each of your programs last year?  
 Yes  No  Not Sure
2. Are there written policies and procedures for program operations?  Yes  No  Not Sure
3. Do you engage in a planning process prior to the implementation of a new program?  
 Yes  No  Not Sure
4. On a scale of 1 – 10, 1 being low and 10 being high, how involved is your Board in the development of new programs? \_\_\_\_
5. Do you regularly assess the impact of programs and services on the community? Yes No Not Sure