
Nonprofit Arts Organizations
Survey Instrument

Ohio Arts Council's State of the Arts Report Nonprofit Arts Organization Survey Instrument

Personnel Information

Please indicate the number of people employed. Individuals with multiple responsibilities should be counted by their primary responsibility.

	Number of PAID Full Time Staff	Number of PAID Part Time Staff	Average weekly part time hours per person	Number of Volunteers	Average weekly volunteer hours per person
Creative - Artistic directors, conductors, curators, composers, choreographers, designers, video artists, dancers, filmmakers, creative writers, visual artists, musicians, etc.					
Administrative - Executive & supervisory staff, program directors, managing directors and financial officers					
Development - Fundraising personnel					
Publicity - Marketing personnel					
Support - Clerical, maintenance, security, box office personnel and other support personnel such as ushers, parking lot attendants.					
Education - Program directors, teachers, instructors, etc.					

Starting Salaries

Please circle the number that corresponds to the **Full-Time** Annual Starting Salary

	\$0	\$1- \$15,000	\$15,001 - \$25,000	\$25,001- \$35,000	\$35,001- \$45,000	\$45,001- \$65,000	\$65,001- \$85,000	\$85,001+
Executive Director	1	2	3	4	5	6	7	8
Artistic Director	1	2	3	4	5	6	7	8
Fiscal Officer	1	2	3	4	5	6	7	8
Development Director	1	2	3	4	5	6	7	8
Marketing Staff	1	2	3	4	5	6	7	8
Support/Clerical Staff	1	2	3	4	5	6	7	8
Education Staff	1	2	3	4	5	6	7	8

Please circle the number that corresponds to the **Part-Time** Annual Starting Salary

	\$0	\$1- \$15,000	\$15,001- \$25,000	\$25,001- \$35,000	\$35,001- \$45,000	\$45,001- \$65,000	\$65,001+	Average Weekly Hours
Executive Director	1	2	3	4	5	6	7	_____
Artistic Director	1	2	3	4	5	6	7	_____
Fiscal Officer	1	2	3	4	5	6	7	_____
Development Director	1	2	3	4	5	6	7	_____
Marketing Staff	1	2	3	4	5	6	7	_____
Support/Clerical Staff	1	2	3	4	5	6	7	_____
Education Staff	1	2	3	4	5	6	7	_____

Board Information

How many individuals are on your board? _____

Please indicate the number of individuals on your board from each of the following professions / areas:

- Accounting and Finance _____
- Architecture, Engineering, Planning _____
- Business _____
- Community and Social Service _____
- Education, Training and Library _____
- Government (state and local) _____
- Health Care Practitioner _____
- Individual Artist _____
- Legal _____
- Management _____
- Philanthropic Enterprises _____
- Other (please specify) _____

How involved is your board in each of the following functions? (Please circle the number that corresponds to the most appropriate choice)

	<i>Not Involved</i>	<i>Somewhat Involved</i>	<i>Very Involved</i>	<i>Don't Know/ No Opinion</i>	<i>Not Applicable</i>
Artistic Programming	1	2	3	DK	NA
Board & Staff	1	2	3	DK	NA
Development	1	2	3	DK	NA
Building and Grounds	1	2	3	DK	NA
Educational Programming	1	2	3	DK	NA
Facilities	1	2	3	DK	NA
Finances	1	2	3	DK	NA
Fundraising	1	2	3	DK	NA
Legal	1	2	3	DK	NA
Long-term Planning	1	2	3	DK	NA
Public Relations	1	2	3	DK	NA
Technology and Communications	1	2	3	DK	NA
Other	1	2	3	DK	NA
_____	1	2	3	DK	NA
Other	1	2	3	DK	NA
_____	1	2	3	DK	NA

Planning

How often does your organization engage in formal planning practices in the following areas? (Please circle the number that corresponds to the most appropriate choice)

	<i>Never</i>	<i>Less than one time per year</i>	<i>One time per year</i>	<i>More than one time per year</i>
Administrative	1	2	3	4
Artistic	1	2	3	4
Programming	1	2	3	4
Audience	1	2	3	4
Development	1	2	3	4
Facilities	1	2	3	4
Fundraising	1	2	3	4
Marketing	1	2	3	4
Technology	1	2	3	4
Other	1	2	3	4
_____	1	2	3	4
Other	1	2	3	4
_____	1	2	3	4

Overall, how involved is each of the following in the formal planning process? (Please circle the number that corresponds to the most appropriate choice)

	<i>Not involved</i>	<i>Somewhat involved</i>	<i>Very involved</i>	<i>Don't know/ No opinion</i>	<i>Not Applicable</i>
Board	1	2	3	DK	NA
Management	1	2	3	DK	NA
All other staff	1	2	3	DK	NA
Public/members of your community	1	2	3	DK	NA
Non-staff Performer/Individual Artists	1	2	3	DK	NA
Other	1	2	3	DK	NA
_____	1	2	3	DK	NA

Budget

What is the last day of your fiscal year? (e.g., 6/30) _____/_____

What was your total operating income and expenses for the following fiscal years?
(Please do not include restricted funds)

<i>Fiscal Year</i>	<i>Total Operating Income</i>	<i>Total Operating Expenses</i>
1997	\$ _____	\$ _____
1998	\$ _____	\$ _____
1999	\$ _____	\$ _____

For your most recently completed fiscal year, please list income figures for the following:

Earned Income	\$ _____
In-State Foundation Support	\$ _____
Out of State Foundation Support	\$ _____
In-State Corporate/Business	\$ _____
Out of State Corporate/Business	\$ _____
Local Government	\$ _____
City Government	\$ _____
State Government	\$ _____
Federal Government	\$ _____
Individual Contributions	\$ _____
International Sources	\$ _____
Other _____	\$ _____

Please indicate what you spend on the following areas:

Staff, administrative (w/ fringe benefits)	\$ _____	Production/Exhibition Expenses	\$ _____
Staff, artistic (w/fringe benefits)	\$ _____	Space Rental/Occupancy Costs	\$ _____
Contracted administrative services	\$ _____	Remaining Operating Expenses	\$ _____
Contracted artistic services	\$ _____	Technology Expenses	\$ _____
Marketing/Publicity	\$ _____	Other _____	\$ _____

Please list the sources that provide you with **in-kind** support, and the type of service(s) provided. (In-kind = goods or services that are donated and not paid for by the organization. For example, volunteer time by a professional, office space, facilities, equipment rental, etc. Please do not include financial contributions)

<i>Specific Source</i>	<i>Goods/Service(s) provided</i>

What percentage of your operating income is provided by public sources _____%?

Partnerships/Collaborations

Does your organization currently house or act as a fiscal agent for other arts and cultural organizations? yes no

If your organization currently houses or acts as a fiscal agent for other arts and cultural organizations, please list

The arts and cultural organizations for whom you house or act as a fiscal agent:

Please check and describe partnerships and/or collaborations below.
Please mark NA for Not Applicable.

<i>Types of Organizations</i>	<i>Do you have a partnership?</i>	<i>Nature of Partnership/Collaboration Specific Activity</i>
Associations	Yes - No - NA	
Colleges/universities	Yes - No - NA	
Corporations / For-Profit organizations	Yes - No - NA	
Foundations	Yes - No - NA	
Corporations	Yes - No - NA	
Governmental agencies	Yes - No - NA	
Other nonprofit arts organizations	Yes - No - NA	
Other nonprofit organizations (e.g. community-based organizations)	Yes - No - NA	
Public and private schools (K-12)	Yes - No - NA	
Other _____	Yes - No - NA	

Do you feel you compete for consumers' leisure dollars with other **arts** organizations? If so, please indicate the types of organizations:

Do you feel you compete for consumers' leisure dollars with **non-arts** organizations? If so, please indicate the types of organizations:

Please describe the demographic make-up of your audience?

What groups are not attending your events or taking part in the services you offer?

What factors contribute to their underrepresentation?

What, if anything, are you doing to reach this underrepresented audience (for example, targeted advertising in a newspaper)?

Does your audience patronize other arts organizations? Please list the types of organizations:

What are the major non-arts activities in which your audience engages?

Is your facility accessible to people in wheelchairs?	yes	no
Are your restrooms accessible to people in wheelchairs?	yes	no
Is your stage or performing space accessible to people in wheelchairs?	yes	no
Do you offer sign language interpretation, audio description or large print materials?	yes	no
Do you publicize your accessibility?	yes	no

Other Thoughts

If you were to assign a letter grade to the state of arts and culture in Ohio, what would it be? (please circle appropriate response)

A B C D F

Why would you assign this grade?

Please use the space below for any additional comments:
