User Guide

2017 Giving in Numbers Survey

Congratulations! Those accessing this User Guide are on their way to being part of ithe ndusty-leading research on corporate societal engagement. Thank you in advance for your work. CECP is here to help.

User Guide Contents:

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2. [Tips](#Tips)
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5. **Steps:**

**Prepare**

The first step is compiling and accessing company’s responses. For many, this involves running reports through their software. Helpful tools from CECP:

1. Your company’s submission from last year
2. The survey worksheet (page 4)
3. Valuation Guide (available <http://cecp.co/cgs/Resources/surveyguide.pdf>).

Reach out to colleagues early if any need to provide you information for your submission. Feel free to copy/paste questions from this document in your emails.

**Review**

* Plan your timeline so you can submit for any reviews or sign-offs required in order to submit before 3/31/17.
* Double-check your math. The amount reported in II.A (Total Giving) must match the breakdowns provided in II.C – program area and III.A – international giving. The amount of giving to international recipients in III.A must match the breakdowns provided in III.B- international giving by country, III.C- international giving by region, and III.D- international program area breakdown.

**Login**

* Click the “LOGIN” button, top right on <http://cecp.co>
  + Username: your email address
  + Password: emailed to you by your CECP main point of contact
* The website has a password reset function you can use.
* Under the header “Giving in Numbers Data Collection” you will see a blue button that says “Take the Survey.” Click there to begin!

**Enter**

Submit your company’s information through the customized link for your company.

* Your answers will save as you proceed through the survey
* Submitted data will be saved if you quit and return to your company’s custom link later.
* You can use the “previous question” buttons to update questions you have completed.
* You cannot use the “back” button on your browser.
* If the survey doesn’t allow you to proceed, read the red error message. If you do not see where the error applies, scroll down.
* Use no punctuation when entering numbers. No commas, no decimals, no dollar signs.

**Submit**

* VI.D is the final question in the survey. Once you click “next question” it will take you to the submission screen.
* Once you click “next question” in VI.D you will also not be able to go back to previous questions.
* Click “Submit Survey”
* The following screen will provide a PDF for your digital records to download your full survey response.

1. **Tips:**

**Adjust your view.** Use the Ctrl + or Ctrl – function on your computer to increase or decrease the size of your survey view. This will show more or less question text on your screen and customize the survey experience to your preferences.

**Saving.** Some people prepare to “Prepare” offline while others prefer to dive into the online system. If you begin to enter information in the online system, your responses will be saved when you return to the survey link later. You must enter the information online sequentially, but you may enter and return as many times as you like until you submit. The survey closes on **Friday, March 31, 2017**.

**“Notes” Fields.** Your remarks in the “Notes” fields on each question are reference points for your own company’s employees. They are not used in CECP’s analysis or online benchmarking system. CECP recommends using the space to record information that may be useful to those who will be answering the survey in the future: e.g., remarks explaining calculations, identifying data sources, etc. They will be recorded in the PDF version of your company’s survey.

**Timing.** If you need internal approval, CECP recommends you complete preparation phase by March 10, 2017. Adjust this date as you see fit based on what you know about the individuals approving your company’s survey submission.

1. **Rules:**

**Definitions.** CECP’s Valuation Guide

**Number Formatting.** When entering data, type the entire number with all zeros and without commas, decimals, or dollar signs. You may round numbers, but you must enter all appropriate zeros to indicate thousands, millions, and billions. No punctuation should be entered in the numeric fields.

**Estimating.** While we do not advocate entering data in which you have low confidence, we do encourage you to provide reasonable approximations of figures whenever possible, to help ensure your company’s giving is recorded in its entirety. We advise you to rely on your judgment, bearing in mind this rule of thumb: do not report any figures that you would not present in an internal meeting to senior management.

If you come across a question for which you have neither data nor a reasonable estimate, you may simply bypass it, leaving all fields in the question blank. There are few exceptions where a question may be mandatory. If applicable, the survey will indicate which questions are mandatory.

1. **Survey Worksheet**

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# COMPANY INFORMATION

## I.A. Company Information

Company Name: [Type here]

Parent Company Name (if Different): [Type here]

Did your company undergo a merger, acquisition, or divestiture that is considered significant by your industry standards during the 12 months of this survey?

* Yes. Select one: Merger, Acquisition, OR Divestiture
* No

Company Headquarters City, State/Province/Region, Country: [Type here]

Contact Person Name (they will receive confirmation of this survey completion): [Type here]

Contact Email (this is where the final email confirmation will be sent): [Type here]

Contact Title: [Type here]

Contact Department: [Type here]

Department to Which You Report: [Type here]

Company Classification (select one): Service OR Manufacturing

Business Type (select one): Business-to-Business, Business-to-Consumer, Hybrid, Other

End date for 12 months of data you submitted in the survey [Type here]

## I.B. Revenue & Pre-Tax Profit

Provide your company’s REVENUE & PRE-TAX PROFIT for the most recently completed fiscal year in $USD.

Revenue (FY2016): [Type here] Pre-Tax Profit (FY2016): [Type here]

## I.C. Company’s Employee Count

Provide your company’s EMPLOYEE COUNT at the end of the most recent fiscal year. If not available, please leave it blank.

Employee Count (FY2016): Domestic (Corporate Headquarters Country) and International (Outside Corporate Headquarters Country): [Type here]

# CONTRIBUTIONS

## II.A. Total Contributions

Provide the value of your company’s TOTAL CONTRIBUTIONS in $USD. First, please provide the breakdown of Total Cash Giving:

Direct Cash (FY2016): [Type here]

Foundation Cash (FY2016): [Type here]

Total Cash Giving: [Type here]

Second, please provide Total Non-Cash Giving (FY2016): [Type here]

If available, please provide the breakdown Total (must equal above) Non-Cash Giving:

Product Donations: [Type here]

Pro Bono Service: [Type here]

Other: [Type here]

Breakdown not available: [Type here]

If you made **additional**contributions but will not be able to break them down in subsequent sections, indicate the total value of these additional contributions here (**$USD**). [Type here]

## II.B. Changes in Total Giving

Changes in TOTAL GIVING: Comparing your company's 2015 giving to its 2016 giving, why did certain types of giving increase or decrease? This insight greatly enhances CECP's analysis, so please take a moment to be as specific as you can. Response: [Type here]

Estimate by what percentage you expect your total company contributions to change from 2016 to 2017.

|  |  |
| --- | --- |
| **Predictions for change from 2016 to 2017:** | **Select one range** (at right) |
| **Total Giving** |  |
| **Direct Cash** |  |
| **Foundation Cash** |  |
| **Non-Cash** |  |

* Increase or Decrease by 25%+
* Increase or Decrease 11 to 25%
* Increase or Decrease 2 to 10%
* No Change Expected
* Not able to estimate at this time

## II.C. Totals by Program Type

Please break down total contributions by PROGRAM TYPE.  

|  |  |  |
| --- | --- | --- |
|  | **Cash ($USD)** | **Non-Cash ($USD)** |
| Civic & Public Affairs |  |  |
| Community & Economic Development |  |  |
| Culture & Arts |  |  |
| Education: Higher Education |  |  |
| Education: K-12 |  |  |
| Environment |  |  |
| Health & Social Services |  |  |
| Disaster Relief |  |  |
| Other |  |  |
| **Total** (Must equal II.A) |  |  |

## II.D. Priority Focus Areas

**List up to four philanthropic FOCUS AREAS at your company in order of priority (i.e., highest priority first).  Please also share the *primary success* metric for each focus area.**

|  |  |  |
| --- | --- | --- |
| Focus Areas (4) | Program Type (select one for each) | Primary Success Metric (write one for each) |
| [Type here] | * Civic & Public Affairs * Community & EconomicDevelopment * Culture & Arts * Education: Higher Education * Education: K-12 * Environment * Health & Social Services * Disaster Relief * Other | [Type here] |

## II.E. Strategic Program Evaluation (Part 1)

Share the following details about one STRATEGIC PHILANTHROPIC PROGRAM in which you measure the outcomes and/or impacts of your grant(s). Please select the program taking up the most time, money, and management resources at your company. Please provide the**program name with brief description**. [Type here]

Total Cash & Non-Cash Contributed by Your Company to this Program ($): [Type here]

Program Type (Select one)

Civic & Public Affairs, Community & Economic Development, Culture & Arts, Education: Higher, Education: K-12, Environment, Health & Social Services, Disaster Relief, Other

Target Beneficiary Group (demographic description): [Type here]

Impact metrics: [Type here]

If available, pleaes share the website URL for this program: [Type here]

# INTERNATIONAL

## III.A. Centralization and Domestic/International Breakdown

Please indicate whether your company contributed at least one grant to **international end-recipients** in the survey year.

* Yes
* No

Estimate the CENTRALIZATION VS. DECENTRALIZATION of decisions made with respect to your company’s international giving:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Check one box at right for each area below | All Headquarters | Majority Headquarters | Shared | Majority Regional/Local | All Regional/Local |
| Contribution Budgeting Process |  |  |  |  |  |
| Setting Funding Priorities |  |  |  |  |  |
| Reporting on Data |  |  |  |  |  |
| Approval Process of Grantees/ Recipients |  |  |  |  |  |

Please break down total giving ($USD) by DOMESTIC and INTERNATIONAL end-recipients.  The total must be equal to Total Contributions reported in question II.A.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Direct Cash | Foundation Cash | Non-Cash |
| Domestic End-Recipients |  |  |  |
| International End-Recipients |  |  |  |
| **Total** (Must equal II.A) |  |  |  |

Estimate the percentage of your company’s giving to international-end recipients that goes through PHILANTHROPIC INTERMEDIARIES: [Type here]%

## III.B. Regional Breakdown

Indicate if your company has more geographic detail about beneficiaries in countries or regions. Based on your response you will be asked for a regional or country breakdown of your company’s total contributions.

|  |  |
| --- | --- |
| Our company also tracks this data at a **country** level (e.g. Thailand)   * Yes * No | Our company also tracks this data at a **regional** level (e.g.Asia)   * Yes * No |

REGIONAL LEVEL: Break down total giving by region of where the beneficiaries of the contribution are located (in $USD).

|  |  |
| --- | --- |
|  | $USD |
| Asia & the Pacific | [Type here] |
| Europe | [Type here] |
| Latin America & the Caribbean | [Type here] |
| Middle East & Africa | [Type here] |
| North America | [Type here] |
| Breakdown Not Available | [Type here] |

## III.C. Country Breakdown

COUNTRY LEVEL: Breakdown total giving by country of where the beneficiaries of the contribution are located (in $USD).

|  |  |
| --- | --- |
|  | $USD |
| Afghanistan |  |
| Albania |  |
| Algeria |  |
| Andorra |  |
| Etc. *Full list of countries available online* |  |
| Breakdown Not Available |  |

## III.D. Program Type Breakdown

**Break down total international contributions by PROGRAM TYPE. Total Giving (Cash & Non-Cash Giving) to International End-Recipients:**

|  |  |
| --- | --- |
|  | $USD |
| Civic & Public Affairs | [Type here] |
| Community & Economic Development | [Type here] |
| Culture & Arts | [Type here] |
| Education: Higher Education | [Type here] |
| Education: K-12 | [Type here] |
| Environment | [Type here] |
| Health & Social Services | [Type here] |
| Disaster Relief | [Type here] |
| Other | [Type here] |
| **Total** (must equal total to international end-recipients in III.A) |  |

# EMPLOYEE ENGAGEMENT

## IV.A. Matching Gifts

**Did your company offer at least one employee MATCHING-GIFT PROGRAM?**

* Yes
* No

Break down the total value ($USD) of your MATCHING GIFTS to employee giving.

***DO NOT INCLUDE funds given by employees.***

|  |  |  |  |
| --- | --- | --- | --- |
|  | Direct Cash ($USD) | Foundation Cash ($USD) | Total ($USD) |
| Workplace Giving Campaigns | [Type here] | [Type here] | [Type here] |
| Year-Round Policy | [Type here] | [Type here] | [Type here] |
| Dollars for Doers | [Type here] | [Type here] | [Type here] |
| Disaster Relief | [Type here] | [Type here] | [Type here] |
| Other | [Type here] | [Type here] | [Type here] |

If you have any value for "other" in the question above, please provide more details: [Type here]

Match Ratio & Program Caps

\* Caps refers to the minimum and maximum matched gifts per employee per year. Match Ratio for Dollars for Doers is the grant amount per hours of service.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Program Caps | Match Ratios | Program Details |
| Workplace Giving Campaigns | [Type here] | [Type here] | [Type here] |
| Year-Round Policy | [Type here] | [Type here] | [Type here] |
| Dollars for Doers | [Type here] | [Type here] | [Type here] |
| Disaster Relief | [Type here] | [Type here] | [Type here] |
| Other | [Type here] | [Type here] | [Type here] |

Identify which Individual Sub-Groups were Eligible for each Matching-Gift Program

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Employee Type: | Domestic Full-Time | Domestic Part-time | Retirees | Int’l Employees | Board Members |
| Workplace Giving Campaigns |  |  |  |  |  |
| Year-Round Policy |  |  |  |  |  |
| Dollars for Doers |  |  |  |  |  |
| Disaster Relief |  |  |  |  |  |
| Other |  |  |  |  |  |

Matching Gift Program Type and Employee Participation Rate (%)

|  |  |
| --- | --- |
|  | Employee Participation Rate (%) |
| Workplace Giving Campaigns | [Type here] |
| Year-Round Policy | [Type here] |
| Dollars for Doers | [Type here] |
| Disaster Relief | [Type here] |
| Other | [Type here] |
| Consolidated (if breakdown is not available) | [Type here] |

Some matching programs are limited to specific organizations while others are open to all applicable organizations. Does your company limit which organizations are eligible for a match in your company’s domestic market? Please select the answer that best describes your company’s approach to employee choice in matching gifts

* No: We do not limit which nonprofit organizations are eligible to receive a matching gift in the geographic area the company serves
* Yes: We limit matches to a select number of nonprofit organizations
* Yes: We limit matches to a select number of cause areas (e.g., Education or Arts)
* Yes: We limit matches solely to educational institutions

Please indicate any matching gift programs you plan on making changes to in the next 2 years, or have closed down in the past 2 years: [Type here]

## IV.B. Philanthropic Leverage

PHILANTHROPIC LEVERAGE: Money Raised from Others by Your Company.

Matching Gifts from Non-Employees:

Raised From Non-Employees ($USD):

|  |  |
| --- | --- |
| Number of Fundraising Campaigns During the 12-Month Period | [Type here] |
| Total Number of Campaign Days (across all campaigns) | [Type here] |
| Total Markting/Admin.Dollars Spent | [Type here] |
| Total Dollar Amount Generated for Non-Profits | [Type here] |
| Total Number of Non-Profit Partners Supported | [Type here] |

Raised from Employees: Total Dollar Amount Generated for Non-Profits ($USD)

|  |  |
| --- | --- |
| Total Dollar Amount Generated for Non-Profits From Employee Payroll Deductions | [Type here] |
| Total Dollar Amount Generated for Non-Profits From Other Employee Contributions | [Type here] |
| Total Number of Non-Profit Partners Supported | [Type here] |

Are these employee donations matched by the company?

* Yes
* No
* Not Sure

## IV.C. Employee-Volunteer Programs

Identify which EMPLOYEE-VOLUNTEER PROGRAMS are offered by your company.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Are these offered by your company? | | *Extra column* |
|  | Domestic Employees | International Employees | *Please use it to mark your ranking for IV.D* |
| Paid Release Time | Y or N | Y or N |  |
| Flexible Scheduling | Y or N | Y or N |  |
| Dollars for Doers | Y or N | Y or N |  |
| Employee-Volunteer Recognition Awards | Y or N | Y or N |  |
| Retiree Volunteering | Y or N | Y or N |  |
| Family Volunteering | Y or N | Y or N |  |
| Team Grants | Y or N | Y or N |  |
| Incentive Bonuses | Y or N | Y or N |  |
| Company-Wide Day of Service | Y or N | Y or N |  |
| Volunteer Sabbatical | Y or N | Y or N |  |
| Board Leadership Programs | Y or N | Y or N |  |
| Pro Bono Service | Y or N | Y or N |  |
| Other | Y or N | Y or N |  |

## IV.D. Sucessful Volunteer Programs

For **domestic** employees, which of the programs for which you marked “Y” in IV.C do you consider to be the most successful?**Mark your top 3.**

For **international** employees, which of the programs for which you marked “Y” in IV.C do you consider to be the most successful?**Mark your top 3.**

Please indicate any employee-volunteer programs you plan on making changes to in the next 2 years, or have closed down in the past 2 years. [Type here]

Does your company measure the business value of employee participation in corporate volunteer programs (e.g., improved retention)?

* Yes. Please describe the specific metrics you use to measure the value: [Type here]
* No

## IV.E. Volunteer Percentage Parcipation

Estimate the PERCENTAGE of your company’s employees who VOLUNTEERED at least one hour over the course of the year (%). [Type here]%

Does this percentage include employees that volutneered:

* On-company time
* Off-company time
* We don’t track on- or off- company time
* Not Sure

Please share one activity, tactic, or initiative that was SUCCESSFUL in improving volunteer participation: [Type here]

Please share one activity, tactic, or initiative that was NOT AS SUCCESSFUL in improving volunteer participation: [Type here]

## IV.F. Employee Engagement & Volunteer Hours

Provide your company’s total EMPLOYEE ENGAGEMENT HOURS.

You reported the following information about your company's pro bono service value in 2016 in Question II.A.: Pro Bono Service: \_\_\_; Total Non-Cash Giving: \_\_\_

Provide the number of on-company-time pro bono hours (Reminder: You can include the value of pro bono as ‘non-cash’ in question II.A. Refer to our Pro Bono Valuation Guide for details on how to convert the hours into a dollar value): [Type here]

**On-Company-Time Volunteerism**

Does your company have an “On-Company-Time” / “Paid Release Time” volunteering policy or program?

* Yes
* No

If “Yes”, please answer the following two questions:

Total # of volunteer hours performed on-company-time: [Type here]

If you can calculate the estimated cost ot company of on-company-time hours, please share your method and total cost: [Type here]

**Outside-Company-Time Volunteerism.**

Does your company have an “Outside-Company-Time” program or policy?

* Yes
* No

If “Yes”, what is the total # of volunteer hours performed outside-company-time: [Type here] hours

If you are unable to distinguish between on-company-time and outside-company-time hours, please share total consolidated hours here. [Type here]

# ADMINISTRATION

## V.A. Foundations and Trusts

Does your company have a foundation or trust? (If you have more than 1 foundation or trust, please specify how many in the “Notes” field below.)

* Yes
* No

If yes, what type of foundation does your company have? Select one: Predominately Pass-Through, Hybrid, Operating, Other

If yes, what was the total dollar amount of all corporate funds transferred to the foundation or trust during the 12 months of this survey? Please report in US Dollars. [Type here]

Notes (Please respond with the total number, if more than 1 foundation or trust): [Type here]

## V.B. Contribution FTEs

Size of the Department: Number of full-time equivalent (FTE) staff members in your Corporate Foundation(s), Community Affairs operations and "All Other Groups." (Please use a decimal if the team includes part-time responsibilities of some staff members.)

|  |  |  |
| --- | --- | --- |
|  | Number of FTEs: Domestic (Corporate Headquarters Country) | Number of FTEs: International (Outside Corporate Headquarters Country) |
| Corporate Foundation | [Type here] | [Type here] |
| Corporate Community Affairs | [Type here] | [Type here] |
| All Other Groups | [Type here] | [Type here] |
| Breakdown Not Available | [Type here] | [Type here] |
| **Total** | [Type here] | [Type here] |

## V.C. Grants Made (excluding matching gifts)

Provide the total number of GRANTS MADE (excluding matching gifts).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Domestic | International | Breakdown Not Available | Total |
| # of Grants | [Type here] | [Type here] | [Type here] |  |
| # of Recipient Organizations | [Type here] | [Type here] | [Type here] |  |

## V.D. Management & Program Costs

What are your company’s total MANAGEMENT & PROGRAM COSTS ($).

|  |  |
| --- | --- |
|  | TOP-LINE MGMT & PROGRAM COSTS |
| Foundation |  |
| Corporate Community Affairs |  |
| Volunteerism |  |
| All Other Groups |  |
| Breakdown Not Available |  |
| **Total** |  |

Briefly, what data or information does your company review/consider to determine its annual corporate giving budget? [Type here]

## V.E. Use of Software

Does your company use specialized software for Grants Management?

* Yes. Vendor Name [Type here]
* No

Types:

* Hosted Online System
* Installed System
* System Integrated with Back Office Services
* Custom-Built System

Does your company use specialized software for Employee Engagement?

* Yes. Vendor Name [Type here]
* No

# EVALUATION

## VI.A. Current Measurement Practices

**Describe your company’s CURRENT MEASUREMENT PRACTICES.** Which levels of the Logic Model does your company currently measure? Please select all applicable levels even if only for one grant:

Inputs, Activities, Outputs, Outcomes, Impacts

Which of the following best describes the scope of your company’s measurement of societal outcomes and/or impacts of your grants? Our company measures societal outcomes and/or impacts for:

* All grants, regardless of grant size
* Only grants larger than a specific threshold (please share the threshold [Type here])
* Only grants made to a specific cause area (or cause areas) [Type here]
* Only grants made to a specific cause area (or cause areas) that exceed a specific threshold: [Type here]
* Only grants made for a strategic philanthropic program (or programs)
* We do not measure
* Other (please describe) [Type here]

How would you describe your company’s level of experience with measuring the societal outcomes and/or impacts of your grants?

* Slightly Experienced: Have measured societal outcomes and/or impacts for 2 years or less
* Moderately Experienced: Have measured societal outcomes and/or impacts 3-4 years
* Very Experienced: Have measured societal outcomes and/or impacts for 5 or more years

## VI.B. Types of Support for Evaluation

**Describe your company’s SUPPORT TO GRANTEES with respect to measuring outcomes and/or impacts:**  What type of support do you provide your grantees to measure outcomes and/or impacts?  Select all that apply.

* Cash Support
* In-Kind and/or Volunteer Support (e.g., product or expertise)
* N/A: None of the above.
* Other (please specify): [Type here]

## VI.C. Strategic Program Evaluation (Part 2)

Earlier in question II.E., you noted your signature philanthropic program is:\_\_\_

You also indicated the impact metrics for this program are:\_\_

In addition to the impact metrics you shared above for your strategic philanthropic program, what are some other metrics commonly used across multiple (or all ) grantees? Please share up to 3 examples of metric(s) (e.g., # of students enrolled in, or # of students that graduated from a program): [Type here]

For this same signature program, which resource(s) did you use to measure the societal outcomes and/or impacts of your grant(s)? [Select all that apply:]

* Internal Resource: Developed Entirely In-House [Type here]
* Internal Resource: Developed In-House, Informed by External Tool(s) or Model(s) [Type here]
* External Resource: Grantee [Type here]
* External Resource: Consulting Firm [Type here]
* External Resource: Research Institution [Type here]
* External Resource: University [Type here]
* External Resource: Public Agency (e.g. metrics tracked by government agencies) [Type here]
* Other (please specify): [Type here]

Estimate the percentage of total giving to this same strategic philanthropic program that was dedicated to evaluation aimed at measuring societal outcomes and/or impacts: [Type here]%.

## VI.D. Use of Evaluation Data

This is our final survey question! Please describe what type of data you gather from grantees? Feel free to paste the URL to the grant report forms here. [Type here]

Thank you for your commitment and participation in our Giving in Numbers Survey! For any additional questions, please contact info@cecp.co.