API Nonprofit COVID-19 Needs Assessment

During the COVID-19 health crisis, APCF has been in regular communication with the philanthropic sector as well as our API-serving nonprofit partners, including our Network of 56 nonprofits. We have heard anecdotally from you how this crisis has impacted your organizations as well as your clients, and how you are adapting your operations and programs.

As the only API-focused community fund, APCF developed a brief needs assessment survey to better capture the operational and funding needs of our sector. This assessment will inform our APCF collective advocacy to local policy makers and funders on the operational and funding needs of our API nonprofits and the communities you serve.

Please submit by Wednesday, April 15. PLEASE COMPLETE ONE SURVEY PER ORGANIZATION.

Organization Name: *						
How did you hear about this survey? (check all that apply) * We are an APCF 2020 Network Agency We are an APCF Grantee APCF Social Media APCF Email Attended APCF's Capacity Building Workshops Attended APCF's Meet the Funders events Email from Colleague						
Contact Information						
Name * First Last		Position *				
Contact Email *		Best Number to Reach You *				
Staff Size (Prior to COVID-19) (if none, please put 0)						
Full-Time *	Part-Time *	Volunteers *				
Organization Current Operations (Since Stay at Home Executive Order) (if none, please put 0)						
# Full-Time Working from Home *		# Full-Time Working On-Site *				
# Part-Time Working from Home *	*	# Part-Time Working On-Site *				

# Volunteers Working from Home *			# Volunteers Working On-Site *					
Has	s your organization had to lay off or furlough staff d	ue t	o the pandemic? *					
	Yes							
	No No							
Wh	Vhat challenges is your organization experiencing from working on-site? (check all that apply) *							
	No challenges							
	Lack of protective gear/equipment (e.g. masks, gloves)							
	Lack of hand sanitizers, soap, sanitizing wipes, cleaning supplies, etc.							
	Creating safety barriers to maintain physical distance with clients							
	Other (please describe)							
Wh	at challenges is your organization experiencing in w	orki	ng from home? (check all that apply) *					
	Not working from home							
	No challenges							
	Not enough equipment (e.g., work laptops, staff have to use own computers)							
	Lack cloud-based/online drive to access work documents							
	Lack of internet connection at staff's homes							
	Lack of virtual communication tools/skills							
	Other (please describe)							
Has	s your organization experienced an increase in servic	ces	due to COVID-19? *					
	Yes							
	No							
Wh	at changes has your organization made in your prog	ram	s or services due to COVID-19? (check all that apply) *					
	No changes							
	Postpone/cancel events, classes, outreach, service clinics, etc.							
	Transition in-person appointments to phone calls, emails, and virtual meetings							
	Ramp up social media posts							
	Field inquiries and other rapid responses related to COVID-19							
	Translate COVID-19 information and materials							
	Unable to fulfill current contracts or grants due to change in services							
	Other (please describe)							
Wh	at is your Annual Budget? *							
	Less than \$25,000	\bigcirc	\$25,000 - \$99,000					
	\$100,000 - \$249,999		\$250,000 - \$499,999					

\$50	500,000 - \$999,999	llion - \$4,999,999				
<pre>\$5+</pre>	5+ million					
How has your organization's operating budget been impacted by COVID-19? (check all that apply) *						
■ No impact on budget						
Lack	ck of Operating Cash – had to lay off/furlough staff					
Lack	Lack of Operating Cash – can't pay rent and/or operating expenses					
Pote	otential Revenue Shortfall due to postponing/canceling fund	draising events				
Cuth	utbacks/Delays in funding from previously promised/comm	nitted sponsors or supporters				
Othe	ther (please describe)					
How has	nas your organization received help during this crisis? (chec	k all that apply) *				
■ We l	e have not received help					
Fund	ınding from Nonprofit Partners					
☐ In-k	-kind support from Nonprofit Partners					
Fund	ınding from Federal/State/County/City Government Agenci	es				
☐ In-k	-kind support from Federal/State/County/City Government	t Agencies				
Fund	ınding from Foundations					
☐ In-k	-kind support from Foundations					
Fund	ınding from Corporate Partners					
☐ In-k	-kind support from Corporate Partners					
Othe	ther (please describe)					
	Is APCF's COVID-19 Resource Directory page helpful?					
Yes	s://www.apcf.org/covid19-resources)					
O No						
0						
Are the	nere any specific funding information/resources you would l	ike to know more about?				
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How has COVID-19 impacted the communities you serve?

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What is the economic impact of COVID-19 on your organization's current operations?	
What is the economic impact of COVID-10 on your organization's sustainability?	
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