

2008 AAMC Development Survey

Contact Information

Important: To ensure that your data is saved, please click the "Save and Continue" button at bottom of page before navigating away from the page.

Institution: .

Survey Completed By:

First Name:

Middle Initial:

Last Name:

Title:

Address 1:

Address 2:

City:

State: Zip:

Telephone Number: ext

Facsimile Number:

E-mail Address of Respondent:

If not the person completing the survey, please provide contact information for the institution's chief development officer/vice president.

check if same as above

First name:

Middle Initial:

Last Name:

Title:

Address 1:

Address 2:

City:

State: Zip:

Telephone Number: ext

Facsimile Number:

E-mail address:

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Institutional Description

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Institution: .

Teaching Hospital Name(s): Please use the pull-down list to select your teaching hospital name (as listed in the AAMC membership database):

Select Your Teaching Hospital Name

Public Private

Other affiliated hospitals represented in the survey data (please list):

? Hospital(s)'s Total Endowment Size: \$ (as of date: )

? 2007-2008 Actual Total Institutional Expenses: \$

Organization of Teaching Hospital (Check one on each line)

Part of university, but separate from medical school: Yes No N/A

Organizational unit of the medical school: Yes No N/A

For-profit institution separate from the University: Yes No N/A

Not-for-profit institution separate from University: Yes No N/A

Government institution separate from University: Yes No N/A

Other (Please specify)

To whom does the CEO of the Teaching Hospital directly report? (check all that apply):

- Hospital Board of Directors
- University Board of Trustees
- Government Agency
- For-profit Company
- University President
- Medical/Health Science Center President, Chancellor, Vice President, or Vice Chancellor
- Other (Please specify)

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Total Private Support

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Institution: .

Please report only data for gifts actually received for medical schools and/or teaching hospitals during the period July 2007 through June 2008. **Do not include pledge or bequest commitments, funds received from governmental sources, or funds received through a contract unless specified within a particular question.** If some period other than July-June is represented in your data, please specify:

? A. Current Operations

Type	
Unrestricted	\$ <input type="text"/>
Restricted	\$ <input type="text"/>
Subtotal	\$ <input type="text"/>

? B. Endowment

Type	
Unrestricted	\$ <input type="text"/>
Restricted	\$ <input type="text"/>
Subtotal	\$ <input type="text"/>

? C. Capital Purposes

Capital Gifts	\$ <input type="text"/>
Subtotal	\$ <input type="text"/>

? D. Realized Bequests

Type	
For Current Operations	\$ <input type="text"/>
For Endowment Purposes	\$ <input type="text"/>
For Capital Purposes	\$ <input type="text"/>
Subtotal	\$ <input type="text"/>

E. Total (Sections A, B, C, and D) \$

? F. Private Support by Donor Type/Category

Source

	Dollars	No. of Donors
1. Individuals		
? Medical School Alumni	\$ <input type="text"/>	<input type="text"/>
? Other Institutional Alumni <i>(please specify type)</i> <input type="text"/>	\$ <input type="text"/>	<input type="text"/>
Full-Time and Part-Time Medical Faculty and Staff	\$ <input type="text"/>	<input type="text"/>
All Other Individuals	\$ <input type="text"/>	<input type="text"/>
2. Institutions/Organizations		
Corporations	\$ <input type="text"/>	<input type="text"/>
? Personal/Family Foundations	\$ <input type="text"/>	<input type="text"/>
? Other Private Foundations	\$ <input type="text"/>	<input type="text"/>
? Other Institutions/Organizations	\$ <input type="text"/>	<input type="text"/>
? Special Events (do not include amounts previously included above)	\$ <input type="text"/>	<input type="text"/>
G. Total (Total dollars for Section F must equal E (sum of section A, B, C and D above))	\$ <input type="text"/>	<input type="text"/>

? H. Deferred Gifts		
Dollar Face Value	\$ <input type="text"/>	
Dollar Present Value	\$ <input type="text"/>	

I. Corporate and Foundation Giving for Research (if known, gifts designated for **Research Purposes** received in 2007-2008 from Corporations and Foundations reported in section F2 - non-contractual, non-sponsored research grants):

Total dollar amount of gifts for research from corporations:	\$ <input type="text"/>
Total dollar amount of gifts for research from personal/family foundations:	\$ <input type="text"/>
Total dollar amount of gifts for research from other private foundations:	\$ <input type="text"/>

J. Extraordinary Gift Description

Please include the number of gifts and total dollars of cash received for each of the following ranges.

Gift Level	Total Number of Gifts (#)	Total Dollars (\$)
\$50,000,000+	<input type="text"/>	\$ <input type="text"/>
\$25,000,000 - \$49,999,999	<input type="text"/>	\$ <input type="text"/>
\$10,000,000 - \$24,999,999	<input type="text"/>	\$ <input type="text"/>
\$5,000,000 - \$9,999,999	<input type="text"/>	\$ <input type="text"/>
\$1,000,000 - \$4,999,999	<input type="text"/>	\$ <input type="text"/>
Total	<input type="text"/>	\$ <input type="text"/>

If there were no gifts of \$1,000,000 or greater, please provide the dollar amount of the largest gift received by your institution in 2007-2008: \$

? New Pledged Gifts/Commitments - 2007-2008:

N.

Please provide the number and dollar amount of unpaid and enforceable pledged gifts-commitments secured in 2007-2008:


of pledges

\$

O. Campaign Information:

Was your institution in a fundraising campaign in 2007-2008? Yes No

If yes, please enter the following information:

Official start date (beginning of silent phase) 

Scheduled end date 

Total campaign goal for Teaching Hospital \$

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AAMC Survey Clearance Number: 2009-005

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Development Staff by Function

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Institution: .

Note: Figures reported can be less than 1.0 full time equivalent (FTE). ?

A. Positions in Teaching Hospital Development Program Budget Function

Professional Positions:	Number of (FTE) Positions
Chief Advancement/Development Officer, Development VP, Assoc./Asst. VP, Director of Development	<input type="text"/>
Development Officers of Depts., Institutes, or Other Units	<input type="text"/>
Director, Alumni Relations	<input type="text"/>
Major Gift Officers	<input type="text"/>
Planned Giving Officers	<input type="text"/>
Corporate and Foundation Giving Officers	<input type="text"/>
Annual Giving Officers	<input type="text"/>
Other (please specify): <input type="text"/>	<input type="text"/>
? Subtotal Fundraising Professionals	<input type="text"/>
Research and Prospect Mgmt	<input type="text"/>
Stewardship and Donor Relations	<input type="text"/>
Special Event Officers	<input type="text"/>
Development Writers	<input type="text"/>
Computer Services	<input type="text"/>
Administrative/Financial Services	<input type="text"/>
Other (Please specify): <input type="text"/>	<input type="text"/>
? Subtotal Other Professionals	<input type="text"/>
Subtotal All Professionals	<input type="text"/>

Support Positions:

Admin. Assts./Secretaries	<input type="text"/>
Processing, Records, Reporting	<input type="text"/>
Computer Services	<input type="text"/>
Other Admin./Clerical (Please specify): <input type="text"/>	<input type="text"/>
? Subtotal Support Staff	<input type="text"/>
Total Staff Positions in Development Program Budget	<input type="text"/>

? B. Positions involved with Teaching Hospital Development Program but Not in Teaching Hospital Development Program Budget

Function	
Fundraising Professionals	<input type="text"/>
Other Professionals	<input type="text"/>

Support Staff

Total Staff Positions involved with Teaching Hospital Development Program but Not in Teaching Hospital Development Program Budget

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Compensation of Key Development Staff

Institution: .

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Responses to questions in this section will only be reported in the aggregate. Institution-specific information will not be available for reporting. **Please provide the median total salary where multiple positions fall under a category.** Use 2007-2008 compensation information for this section.

Compensation	Salary ?	Other ?	(please describe Other)	Total
Chief Advt./Dev. Officer or VP for Dev.	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	\$ <input type="text"/>
Assoc. or Asst. VP/Director of Development	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	\$ <input type="text"/>
Dept., Institute, or Unit Dev. Officer	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	\$ <input type="text"/>
Director of Major Gifts	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	\$ <input type="text"/>
Major Gifts Officer(s)	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	\$ <input type="text"/>
Director of Annual Giving	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	\$ <input type="text"/>
Director of Planned Giving	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	\$ <input type="text"/>
Director of Corp. and Fdn. Giving	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	\$ <input type="text"/>
Director/Manager of Dev. Op. or Advancement Services	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	\$ <input type="text"/>
Special Events Officer(s)	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	\$ <input type="text"/>
Director, Alumni Relations	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>	\$ <input type="text"/>

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Fundraising/Development Costs

Institution: .

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Costs	2006-2007	2007-2008
? A. Development Personnel	\$ <input type="text"/>	\$ <input type="text"/>
? B. Development Program Costs	\$ <input type="text"/>	\$ <input type="text"/>
C. Is the entire cost of fundraising at your Teaching Hospital reflected in the figures above? <input type="radio"/> Yes <input type="radio"/> No		
If no, what programs or personnel are not reflected? Please include an estimated cost for these items:		
Major/Principal Gift Program/Staff	\$ <input type="text"/>	\$ <input type="text"/>
Planned Gift Program/Staff	\$ <input type="text"/>	\$ <input type="text"/>
Annual Fund Program/Staff	\$ <input type="text"/>	\$ <input type="text"/>
Stewardship/Donor Relations	\$ <input type="text"/>	\$ <input type="text"/>
Prospect Research	\$ <input type="text"/>	\$ <input type="text"/>
Gift Processing/Records	\$ <input type="text"/>	\$ <input type="text"/>
Information Systems/Reports	\$ <input type="text"/>	\$ <input type="text"/>
Fundraising Publications	\$ <input type="text"/>	\$ <input type="text"/>
Alumni Relations	\$ <input type="text"/>	\$ <input type="text"/>
Special Costs Associated with a Capital Campaign	\$ <input type="text"/>	\$ <input type="text"/>
Other: <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
? Total Development Costs Covered by Other Budget Resources	\$ <input type="text"/>	\$ <input type="text"/>
? D. Total Program Fundraising/Development Costs (sum of A, B and C above)	\$ <input type="text"/>	\$ <input type="text"/>

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