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Department of the Treasury Internal Rovenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047 Open to Public Inspection

A F	or the	2030 calendar year, or tax year beginning	an	d ending				
B c	heck if pplicable	C Name of organization THE NATIONAL CAMPAIGN T	O PREVENT		D Employer identific	cation number		
	Addres:							
\vdash	Name change	Doing Business As			52-1	974611		
	initial return	Number and street (or P.O. box if mail is not delive	ered to street address)	Room/suite	E Telephone number			
	Termin-	1776 MASSACHUSETTS AVEN		200	(202			
	Amendo				G Gross receipts \$ 31,740,258.			
	Applica		H(a) Is this a group re					
	pending				for affiliates?	Yes X No		
		SAME AS C ABOVE			H(b) Are all affiliates inc			
1.1	ax-exe		(insert no.) 4947(a)(1) or 527	7	list. (see instructions)		
		WWW.THENATIONALCAMPAIGN			H(c) Group exemption	•		
			ociation Other	L Year		State of legal domicile. DC		
		Summary		····	<u> </u>			
		Briefly describe the organization's mission or most s	ignificant activities: IMP	ROVE TI	HE WELL-BEIN	G OF		
Activities & Governance		CHILDREN, YOUTH/FAMILIES B	Y REDUCING TE	EN AND	UNPLANNED P	REGNANCIES.		
na L	_	Check this box I if the organization discont						
Ve		lumber of voting members of the governing body (F	•		3	26		
Ğ		Number of independent voting members of the gove	•	o)	4	26		
φ 9		otal number of individuals employed in calendar ye	• • •	,	5	42		
ij		otal number of volunteers (estimate if necessary)	, , ,		6	0		
cţi		otal unrelated business revenue from Part VIII, colu	ımn (C), line 12		7a	0.		
⋖	1	Net unrelated business taxable income from Form 9			7b	0.		
					Prior Year	Current Year		
ø.	8 (Contributions and grants (Part VIII, line 1h)		13,117,910.	12,104,400.			
Revenue		Program service revenue (Part VIII, III e 29) CEI		0.	0.			
eve	10 I	nvestment income (Part VIII, column (A), lines 3, 4,	492,298.	1,781,506.				
Œ	11 (كر المرابع (Part VIII, column با بالمرابع), انبود 5, 6d, 8c, إ	9c, 10c, and 1e)		347,566.	180,635.		
	12	otal revenue - add lines 8 through 11 (must equal F	art VIII, column (A), line 12)	13,957,774.	14,066,541.		
		Grants and similar amounts paid (Part IX, column (A)			1,279,708.	556,114.		
		Bénefits paid to or for members (Paft)X, ເວົ້າພຸກັກ (A),			0.	0.		
S	15 3	Salaries, other compensation, employee benefits (Pa	art IX,-column (A), lines 5-10	0)	3,191,735.	3,559,331.		
Expenses	16a F	Professional fundraising fees (Part IX, column (A), lin		L	0.	0.		
xpe	b 7	Total fundraising expenses (Part IX, column (D), line	25) ▶ <u>129</u> ,	<u> 255. </u>				
·W	17 (Other expenses (Part IX, column (A), lines 11a-11d,	11f-24f)		5,190,341.	4,588,616.		
	18 7	Total expenses. Add lines 13-17 (must equal Part IX	, column (A), line 25)	L	9,661,784.	8,704,061.		
	19 F	Revenue less expenses Subtract line 18 from line 1	2		4,295,990.	5,362,480.		
Net Assets or Fund Balances				В	eginning of Current Year	End of Year		
set	20	Total assets (Part X, line 16)			27,751,594.	32,419,042.		
d B	21	Total liabilities (Part X, line 26)		_	2,093,480.	1,216,439.		
		Net assets or fund balances. Subtract line 21 from li	ne 20		25,658,114.	31,202,603.		
	art II	Signature Block				. In a color and balant it is		
		ties of perjury, I declare that I have examined this return, in				y knowledge and beller, it is		
true	, correct	and complete, Declaration of preparer (other than officer	is based on all information of	wnich prepare	er has any knowledge.	,		
		Signature of Officer				<u>' </u>		
Sig	- 1	,	יא מנונס בים		Duto :			
Her	e	SARAH S. BROWN, CEO/TRE	ASUKEK					
		<u> </u>			Date Check	II PTIN		
Dair	.	• • • •	Preparer's signature		Cl	-		
Paid		FRANK H. SMITH Firm's name RAFFA, PC	K n	i				
		Firm's name RAFFA, PC Firm's address 1899 L STREET NW,	000 autus	· · · · · ·	Firm's EIN			
Jac	Jiiiy	WASHINGTON, DC 20			Phone no. 2	02-822-5000		
140	, the !!				T HOHE HO. 2	X Yes No		
	01 02-22	S discuss this return with the preparer shown above		ctions	 .	Form 990 (2010)		
0320	U 1 UZ-22	Lip ioi rapelwork neudolion Act Nolice	,, voo wo separate mstrut			. 5,,,, = 5 (2010)		



Form 990 (2010)

TEEN AND UNPLANNED PREGNANCY

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission. TO IMPROVE THE LIVES AND FUTURE PROSPECTS OF CHILDREN AND FAMILIES
	AND, IN PARTICULAR, TO HELP ENSURE THAT CHILDREN ARE BORN INTO STABLE,
	TWO-PARENT FAMILIES WHO ARE COMMITTED TO AND READY FOR THE DEMANDING
	TASK OF RAISING THE NEXT GENERATION. OUR SPECIFIC STRATEGY IS TO
2	Did the organization undertake any significant program services during the year which were not listed on
-	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
·	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	2 (22 202
	MEDIA - THIS DEPARTMENT HAS DEVELOPED PARTNERSHIPS WITH OVER 100 MAJOR
	MEDIA LEADERS AND WITH EVERY MAJOR TELEVISION BROADCAST AND CABLE
	NETWORK MOST POPULAR WITH TEENS, THEIR PARENTS, AND WITH YOUNG ADULTS
	AS WELL. OVER THE YEARS, THE CAMPAIGN MESSAGES HAVE APPEARED IN
	TELEVISION PROGRAMS, MAGAZINES AND WEBSITES SEEN BY MILLIONS OF PEOPLE.
	THE MEDIA PROGRAM ALSO INCLUDES ALL FORMS OF DIGITAL AND NEW
	MEDIA-INCLUDING WEBSITES, SOCIAL NETWORKING SITES, MOBILE TECHNOLOGIES,
	AND GAMES-TO POSITIVELY CHANGE TEENS AND YOUNG ADULTS' SEXUAL
	ATTITUDES, KNOWLEDGE, AND BEHAVIOR. THE DIGITAL MEDIA PROGRAM ALSO
	WORKS CLOSELY WITH THE NATIONAL CAMPAIGN'S ENTERTAINMENT MEDIA PROGRAM
	TO GET MESSAGES TO OUR TARGET AUDIENCES THROUGH ENTERTAINMENT MEDIA
	PARTNERS' DIGITAL OUTLETS.
4b	(Code:) (Expenses \$ 1,408,250 · including grants of \$ 498,087 ·) (Revenue \$)
	THE NATIONAL CAMPAIGN FUND - THROUGH THIS FUND, THE CAMPAIGN ENGAGES
	OUTSIDE ORGANIZATIONS, CONSULTANTS, RESEARCHERS, MEDIA EXPERTS AND
	OTHERS KNOWLEDGEABLE IN THE FIELDS OF TEEN AND UNPLANNED PREGNANCY
	PREVENTION, CONSISTENT WITH THE CAMPAIGN'S MISSION. THIS FUND IS
	SUPPORTED BY MAJOR GRANTS FROM THE HEWLETT FOUNDATION WHICH ARE
	DESIGNATED, IN LARGE PART, FOR GENERAL OPERATING SUPPORT.
4c	(Code:) (Expenses \$ 742,105 • including grants of \$ 0 •) (Revenue \$ 35,675 •)
40	COMMUNICATIONS AND PUBLICATIONS - THE COMMUNICATIONS PROGRAM AIMS TO
	KEEP THE ISSUE OF TEEN AND UNPLANNED PREGNANCY IN THE PUBLIC'S MIND, TO
	COMMUNICATE NATIONAL CAMPAIGN MESSAGES AND IDEAS TO THE GENERAL PUBLIC,
	AND TO PRODUCE AND DISTRIBUTE NATIONAL CAMPAIGN PUBLICATIONS AND
	MATERIALS. THE PROGRAM WORKS IN THREE AREAS: PRESS RELATIONS,
	PUBLICATIONS AND THE WEB.
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ 2,784,565. including grants of \$ 58,027.) (Revenue \$)
<u>4e</u>	Total program service expenses ► 7,568,202.
	Form 990 (2010)

52-1974611

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Form 990 (2010)

THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY

Pai	TIV Checklist of Required Schedules			
	,		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	N/	A
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	,		
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	L	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	L	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			,.
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	, !		ł

Form **990** (2010)

operate one or more hospitals must attach audited financial statements (see instructions)

Ра	TIV Checklist of Required Schedules (continued)			
	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			l
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			i
	Schedule J	23	Х	i
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		ľ	i
	Schedule K. If "No", go to line 25	24a		х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
		240		\vdash
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040	i	
	any tax-exempt bonds?	24c	 	\vdash
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		_
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			v
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's pnor Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b	<u> </u>	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):	·	1	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			l
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30]	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
-	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
٠.	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	<u> </u>		-
a	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			l
25				1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	20		x
	If "Yes," complete Schedule R, Part V, line 2	36	 	┢
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			- v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		_v	1
	Note. All Form 990 filers are required to complete Schedule O	38	990 /	
		E &	4411	· • • • • • • • • • • • • • • • • • • •

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	t Content of Contains a response to any question in this Fait V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	\neg		-110
b	Enter the number of Forms W-2G included in line 1a. Enter 0- if not applicable 1b 0		.	l
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 42			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			ĺ
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5b</u>		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	<u> </u>		x
	any contributions that were not tax deductible?	6a_		<u> </u>
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	OD		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		х
_	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
·	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	L	<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			l
а	Did the organization make any taxable distributions under section 4966? N/A		<u> </u>	
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b	 	
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities N/A 10a 10b	İ		
b				
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			ŀ
a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	724		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			1
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the		i	
-	organization is licensed to issue qualified health plans		1	
С	Enter the amount of reserves on hand			<u></u>
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		C 4	000	(2010)

Form 990 (2010)

TEEN AND UNPLANNED PREGNANCY

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 26 1a Enter the number of voting members of the governing body at the end of the tax year 26 1b b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors or trustees, or key employees to a management company or other person? $\overline{\mathbf{x}}$ 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the 7a governing body? Х 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a a The governing body? X 8b b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a 10a Does the organization have local chapters, branches, or affiliates? **b** If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with those of the organization? X 11a 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give use Х 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х 12c in Schedule O how this is done X 13 Does the organization have a written whistleblower policy? X 14 14 Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a a The organization's CEO, Executive Director, or top management official X 15b b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X 16a taxable entity during the year? b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's 16b exempt status with respect to such arrangements? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization. 20 ROBERT DODD - 202-478-8500 1776 MASSACHUSETTS AVE., NW, #200, WASHINGTON, DC 20036-1916

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Form 990 (2010)

Form 990 (2010)

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter 0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors, institutional trustees; officers, key employees; highest compensated employees, and former such persons.

(A)	(B)	ŀ		_ (C				(D)	(E)	(F)
Name and Title	Average hours per	(ct	Position (check all that apply)				lv۱	Reportable compensation	Reportable compensation	Estimated amount of
	week (describe hours for related organizations in Schedule O)	rustee or director	Institutional trustee			Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
THE HONORABLE THOMAS H. KEAN										•
CHAIRMAN	1.00	Х		X				0.	0.	0
ISABEL V. SAWHILL, PHD								_	_	_
PRESIDENT	1.00	X		Х				0.	0.	0
ROBERT BLUM, MD, MPH, PHD										_
DIRECTOR	1.00	X						0.	0.	0
THOMAS S. CHAPPELL								\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	"	
DIRECTOR	1.00	X						0.	0.	0
LINDA CHAVEZ										
DIRECTOR	1.00	X						0.	0.	0
VANESSA CULLINS, MD, PHD										_
DIRECTOR	1.00	X						0.	0.	0
SUSANNE DANIELS										
DIRECTOR	1.00	Х						0.	0.	0
AMANDA DEAVER										
DIRECTOR	1.00	X						0.	0.	0
MARIA ECHAVESTE										
DIRECTOR	1.00	X						0.	0.	0
DAISY EXPOSITO-ULLA										
DIRECTOR	1.00	X	ŀ					0.	0.	0
WILLIAM GALSTON, PHD										
DIRECTOR	1.00	X	1					0.	0.	0
RON HASKINS, PHD										
DIRECTOR	1.00	Х						0.	0.	0
NANCY L. JOHNSON										
DIRECTOR	1.00	X						0.	0.	0
JUDITH E. JONES							Г			
DIRECTOR	1.00	Х						0.	0.	0
JODY GREENSTONE MILLER		\sqcap				ĺ				
DIRECTOR	1.00	X	1					0.	0.	0
REVEREND MICHAEL D. PLACE, STD						Γ				
DIRECTOR	1.00	X			L		L	0.	0.	0
SARA ROSENBAUM, MD				T .						
DIRECTOR	1.00	X			1		1	0.	0.	0
032007 12-21-10										Form 990 (2010

Section B. Independent Contractors

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1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A)	(B)	(C)
Name and business address	Description of services	Compensation
CARBON FIVE, 171 SECOND STREET, 4TH FLOOR,	SOFTWARE	
SAN FRANCISCO, CA 94105	DESIGN/CONSULTING	961,733.
IDEO INC.	DIGITAL MEDIA/	· - ·
100 FOREST AVENUE, PALO ALTO, CA 94301	WEBSITE CONSULTING	424,716.
SBS STUDIOS, 13901 SUTTON PARK DRIVE, S,	VIDEO/MEDIA CON./WEB	
JACKSONVILLE, FL 32224	DESIGN	185,37 <u>5</u> .
CHILD TRENDS INC., 4301 CONNECTICUT	SOCIAL SURVEY/	
AVENUE, NW, #350, WASHINGTON, DC 20008	RESEARCH PROJECTS	149,905.
THE GLOVER PARK GROUP, 1025 F ST., NW, 9TH	STRATEGIC MEDIA	
FLOOR, WASHINGTON, DC 20004	RELATIONS	120,260.
2 Total number of independent contractors (including but not limited to those list	ed above) who received more than	
\$100,000 in compensation from the organization		

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2010)

Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)				(C)				(D)	(E)	(F)
Name and title	Average	١	Position check all that apply)					Reportable	Reportable	Estimated
•	hours	(cl	neck	allt	hat	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week					ptoye		the organization	organizations (W-2/1099-MISC)	compensation from the
		direc.				E G		(W-2/1099-MISC)	(***271033*****100)	organization
		, 83	stee			nsate		(and related
		trus	ıal trı		oyee	E O				organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
		르	Ē	₹	Ş.	를	For			
KIMBERLYDAWN WISDOM, MD	1 00	v						0.	0.	0
DIRECTOR	1.00	X	-			<u> </u>		0.	0.	0.
JUDY WOODRUFF	1 00							ا م	0	0
DIRECTOR	1.00	X	ļ				_	0.	0.	0.
SARAH S. BROWN	40 00			. l				254 421	0	22 200
CEO AND TREASURER SUSAN LEFKOWITZ	40.00	_		X			_	254,431.	0.	23,399.
SUSAN LEFROWITZ CHIEF OPERATING OFFICER	40.00			x				183,238.	0.	12,444.
GRACE WEBSTER	40.00	⊢	\vdash	\Box				103,230.	0.	12,444.
CORPORATE SECRETARY	40.00			x				43,993.	0.	8,346.
WILLIAM ALBERT	20.00	-	-		_		_	43,333		0,3100
CHIEF PROGRAM OFFICER	40.00				х			176,760.	0.	23,888.
LARRY SWIADER					-	\vdash			•	, ,
SENIOR DIRECTOR OF DIGITAL MEDIA	40.00				х			189,565.	0.	12,572.
ROBERT DODD										
CHIEF FINANCIAL OFFICER	40.00	ļ			х			162,685.	0.	14,864.
ANDREA KANE					-			,		
SENIOR DIR. OF POLICY & PARTNERSHIPS	40.00	l			Х			156,257.	0.	14,671.
JENNIFER SIMON										
DIR. PLANNING & SPECIAL INITIATIVES	22.00					Х		135,820.	0.	0.
KELLEEN KAYE										
SENIOR DIRECTOR OF RESEARCH	40.00					X		134,045.	0.	21,218.
AMY KRAMER									_	
DIR. ENTMNT. MEDIA/AUDIENCE STRATEGY	40.00			Щ		Х		123,988.	0.	8,772.
PAULA PARKER-SAWYERS	40.00							116 560	•	16 010
DIRECTOR OF PARTNERSHIPS	40.00	_	_	\vdash	<u> </u>	Х		116,763.	0.	16,210.
				Н						
		_								
	1									
		\vdash		\vdash	\vdash					
		-		\vdash		-				
										i
			I^-			\vdash	\Box			
	Ī	ı	ı	1	l	I	l	1	İ	
					<u> </u>	<u> </u>	<u> </u>			

THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY

Pa	art VIII	Statement of Rever	nue					
	•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts st	1 a	Federated campaigns	1a	5,198.				
ra E S	ь	Membership dues	1b					
ΨĚ	c	Fundraising events	1c					
ar a	d		1d	_				
J.S.	ء ا	Government grants (contribut		516,241.				}
io Sii	f	All other contributions, gifts, gran	· -					
ž ž		similar amounts not included abor		1582961.				
<u> </u>	_			900,000.				
Contributions, gifts, grants and other similar amounts	9	Noncash contributions included in lines Total. Add lines 1a-1f		300,000 .	12104400.			•
<u> </u>	, ,,,	Total. Add lines 1a-11		Business Code	12104400.			
4				Business Code				1
ڲؚ	2 a							
e Š	b						 	
e a	С						*	
₽. Re e	d							
Program Service Revenue	e							
ш.	'	All other program service reve	enue					
		Total. Add lines 2a-2f						
	3	Investment income (including	dividends, intere	est, and	1,573,839.			1573839.
		other similar amounts)			1,3/3,639.			13/3037.
	4	Income from investment of ta	x-exempt bond p	roceeds			_	
	5	Royalties		<u> </u>				<u> </u>
			(ı) Real	(II) Personal				
	6 a	Gross Rents						
	Ь	Less: rental expenses						
	С	Rental income or (loss)		L				ļ
	d	Net rental income or (loss)		<u> </u>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	17837162					
	Ь	Less. cost or other basis	17620405			Ì		
	ł	and sales expenses	17629495					
	C	, ,	207,667.		207 667			207 667
	d	Net gain or (loss)		<u> </u>	207,667.	-		207,667.
ne ne	8 a	Gross income from fundraisin	_			1		
en Ve		including \$						
Other Reven		contributions reported on line	1c). See					
ē		Part IV, line 18	а					
5	1	Less. direct expenses	. b	Ļ				
		• •	-	_				
	9 a	Gross income from gaming ac	ctivities. See					
		Part IV, line 19	а					
		Less: direct expenses	b	L				
		` '	-	_				
	10 a	Gross sales of inventory, less		70 007				
	١.	and allowances	a .					
	1	Less: cost of goods sold	b	44,222.	35 675	35,675.		
	-	Net income or (loss) from sale		<u> </u>	35,675.	33,073.		
		Miscellaneous Revenu	ie	Business Code 900099	144,960.			144,960.
	11 a	OTHER		300033	144,500.			144,500.
	Ь					-		
	°	All other revenue	 		 			
	"	Total. Add lines 11a-11d		<u> </u>	144,960.	-		
	12	Total revenue. See instructions.			14066541.	35,675.	0.	1926466.
0320	009 1-10							Form 990 (2010)

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Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) (A) (B) Do not include amounts reported on lines 6b, Total expenses Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and 556,114. 556,114 organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the LLS, See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 48,931. 1,277,113. 840,971. 387,211. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 26,044. 1,379,193. 1,161,438. 191,711. Other salaries and wages Pension plan contributions (include section 401(k) 13,275 88,386. 73,368. 1,743. and section 403(b) employer contributions) 626,252. 471,934. 139,294. 15,024. Other employee benefits 188,387. 5,094. 141,700. 41,593. 10 Payroll taxes 11 Fees for services (non-employees). a Management 593. 593 **b** Legal 59,492. 1,000. 58,492. c Accounting 65,770. 65,770. Lobbying e Professional fundraising services. See Part IV, line 17 71,920 71,920. Investment management fees 763,603. 1,763,603 g 48,032. 46,496. 1,536. 12 Advertising and promotion 28,257. 83,811. 1,475.113,543. 13 Office expenses 2,845. 681,518. 659,994. 18,679. Information technology 14 Royalties 15 543,840. 369,625. 157,768 16,447. 16 Occupancy 130,719. 499. 134,836. 3,618 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 227,536. 217,282. 4.416. 5,838. Conferences, conventions, and meetings 19 3,944. 2,652. 1,175.117. 20 Interest 21 Payments to affiliates 477,521. 435,388. 38,074. 4,059. Depreciation, depletion, and amortization 22 20,010. 29.970. 9,960. 23 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) 255,794. 255,794 CONTRACTORS PRINTING/PUBLICATIONS 110,704. 101,993. 7,572. 1,139. INDIRECT COST RECOVERY 178,590. <178,590. 0. c d All other expenses 8,704,061. 7,568,202. 1,006,604. 129,255. Total functional expenses. Add lines 1 through 24f Joint costs. Check here If following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising

032010 12-21-10

solicitation

Pa	rt X	Balance Sheet			1371011 Tage 77
	•		(A)		(B)
	٠		Beginning of year		End of year
	- 1	Cash - non-interest-bearing	500.	1	500.
	2	Savings and temporary cash investments	1,414,063.	2	1,440,279.
	3	Pledges and grants receivable, net	501,090.	3	696,389.
	4	Accounts receivable, net	11,111.	4	4,209.
	5	Receivables from current and former officers, directors, trustees, key			
]	employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section	-		
	•	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instructions)		6	
ts	7	Notes and loans receivable, net		7	
Assets	l	Inventories for sale or use	54,727.	8	19,636.
⋖	8		90,393.	9	109,378.
		Prepaid expenses and deferred charges	30,030		200,0.0.
	iva	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 2,752,805.			
		Less. accumulated depreciation 10b 1,137,653.	1,098,021.	10c	1.615.152.
	b		24,435,569.	11	1,615,152. 28,494,515.
	11	Investments - publicly traded securities	103,886.	12	20,121,020
	12	Investments - other securities. See Part IV, line 11	100,000	13	
	13	Investments - program-related. See Part IV, line 11		14	<u> </u>
	14	Intangible assets	42,234.	15	38,984.
	15	Other assets. See Part IV, line 11	27,751,594.	16	32,419,042.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,806,574.	17	928,819.
	17	Accounts payable and accrued expenses	2700070.20	18	220,025
	18	Grants payable		19	
	19	Deferred revenue		20	
	20	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	21 22	Payables to current and former officers, directors, trustees, key employees,		- -	
Ξ	22	highest compensated employees, and disqualified persons. Complete Part II		ļ	
Lia		of Schedule L	•	22	
	22	Secured mortgages and notes payable to unrelated third parties		23	
	23 24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	286,906.	25	287,620.
	26	Total liabilities. Add lines 17 through 25	2,093,480.	26	1,216,439.
	20	Organizations that follow SFAS 117, check here X and complete			
Ø		lines 27 through 29, and lines 33 and 34.			
ဥ	27	Unrestricted net assets	20,459,630.	27	28,118,659.
<u>aa</u>	28	Temporarily restricted net assets	5,198,484.	28	3,083,944.
ĕ	29	Permanently restricted net assets	.,,	29	
Ĕ	-3	Organizations that do not follow SFAS 117, check here	-		
Net Assets or Fund Balances	1	complete lines 30 through 34.			
ts o	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
t A	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ž	33	Total net assets or fund balances	25,658,114.	33	31,202,603.
	34	Total liabilities and net assets/fund balances	27,751,594.	34	32,419,042.
	J*	Total nationales and het assets/fully balances			

Form **990** (2010)

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Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					X
1	Fotal revenue (must equal Part VIII, column (A), line 12)	1				41.
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,	70	4,0	61.
3	Revenue less expenses. Subtract line 2 from line 1	3	5 ,	36	2,4	80.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	25,	65	8,1	14.
5	Other changes in net assets or fund balances (explain in Schedule O)	5		18	2,0	09.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	31,	20	2,6	03.
Pa	rt XIII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.				i
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
b	Were the organization's financial statements audited by an independent accountant?		[2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	., [
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c_	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule (o. [
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a		i		
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Au	ıdıt			
	Act and OMB Circular A-133?		L	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired au	dit	I		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	X	<u> </u>
			ı	Form	990 ((2010)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

2010

2010Open to Public

Inspection

Name of the organization

THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY

Employer identification number 52-1974611

Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). \mathbf{X} An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4), An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h b Type II c Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (iii) Type of (vi) Is the (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of organization organizátion in col. in col. (i) listed in your organization in col. organization support (i) organized in the U.S.? (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes Nο Yes No Yes Nο

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

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52-1974611 Page 2 Schedule A (Form 990 or 990 EZ) 2010 TEEN AND UNPLANNED PREGNANCY Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	ction A. Public Support			•			
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants ")	20175125.	1546895.	3433606.	13117910.	12104400.	50377936.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	20175125.	1546895.	3433606.	13117910.	12104400.	50377936.
5	The portion of total contributions						
	by each person (other than a		:				
	governmental unit or publicly						
	supported organization) included		"				
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						41356177.
6	Public support. Subtract line 5 from line 4						9021759.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨		(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	20175125.	1546895.	3433606.	13117910.	12104400.	50377936.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	97,948.	358,308.	266,632.	544,209.	1573839.	2840936.
9	Net income from unrelated business				,		
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)	13,145.	27,031.	44,143.	94,079.		
11	Total support. Add lines 7 through 10						53542230.
12	Gross receipts from related activities	, etc. (see instruction	ons)			12	556,302.
13	First five years. If the Form 990 is fo	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor						▶ □
Sec	ction C. Computation of Publ	```				<u> </u>	
14	Public support percentage for 2010 (• • • • • • • • • • • • • • • • • • • •	•	olumn (f))		14	16.85 %
15	3					15	20.64 %
16a	33 1/3% support test - 2010.If the o	_		•	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies						▶∟
þ	33 1/3% support test - 2009.If the o				line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual		• • •				▶□
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check th	nis box and stop h	iere. Explain in Pa	rt IV how the orgar	
	meets the "facts-and-circumstances"	_	•		•		$\triangleright X$
b	10% -facts-and-circumstances tes	_					
	more, and if the organization meets to				-		•
	organization meets the "facts-and-circ		-	•	• • •		▶⊨
18	Private foundation. If the organization	on did not check a	box on line 13, 16a	a, 16b, 17a, or 17t	o, check this box a	and see instruction	s ►L
					Sche	edule A (Form 990	or 990-EZ) 2010

Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2006 (b) 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2006 (b) 2007 (c) 2008(d) 2009 (e) 2010 (f) Total 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 % 15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2009 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f) % 18 Investment income percentage from 2009 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and

Schedule A (Form 990 or 990-EZ) 2010

line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

PART II, SECTION C, LINE 17A, FACTS AND CIRCUMSTANCES TEST:

I. BACKGROUND

THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY ("NCPTUP") IS A NONPROFIT ORGANIZATION INCORPORATED IN WASHINGTON, DC IN 1996. NCPTUP'S MISSION IS TO IMPROVE THE LIVES AND FUTURE PROSPECTS OF CHILDREN AND FAMILIES AND, IN PARTICULAR, TO HELP ENSURE THAT CHILDREN ARE BORN INTO STABLE, TWO-PARENT FAMILIES WHO ARE COMMITTED TO AND READY FOR THE DEMANDING TASK OF RAISING THE NEXT GENERATION. OUR SPECIFIC STRATEGY IS TO PREVENT TEEN PREGNANCY AND UNPLANNED PREGNANCY, ESPECIALLY AMONG SINGLE YOUNG ADULTS. WE SUPPORT A COMBINATION OF RESPONSIBLE VALUES AND BEHAVIOR BY BOTH MEN AND WOMEN AND RESPONSIBLE POLICIES IN BOTH THE PUBLIC AND PRIVATE SECTORS. IF WE ARE SUCCESSFUL, CHILD AND FAMILY WELL-BEING WILL IMPROVE. THERE WILL BE LESS POVERTY, MORE OPPORTUNITIES FOR YOUNG MEN AND WOMEN TO COMPLETE THEIR EDUCATION OR ACHIEVE OTHER LIFE GOALS, FEWER ABORTIONS, AND A STRONGER NATION. NCPTUP CURRENTLY HAS NINE PROGRAMS: NATIONAL CAMPAIGN FUND, MEDIA (ENTERTAINMENT AND DIGITAL), RESEARCH, COMMUNICATIONS & PUBLICATIONS, PARTNERSHIPS & SPECIAL INITIATIVES, PUBLIC POLICY, LEADERSHIP & PLANNING, STATE & LOCAL AFFAIRS, & LATINO INITIATIVE.

II. ANALYSIS

NCPTUP QUALIFIES AS A "PUBLICLY SUPPORTED" ORGANIZATION DESCRIBED UNDER

SECTION 170(B)(1)(A)(VI) AND THEREFORE AS AN ORGANIZATION DESCRIBED IN

SECTION 509(A)(1) BECAUSE IT SATISFIES THE "FACTS AND CIRCUMSTANCES TEST"

SET FORTH IN SECTION 1.170A-9(E)(3) OF THE TREASURY REGULATIONS.

A. THRESHOLD REQUIREMENTS

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12 Also complete this part for any additional information. (See instructions).

NCPTUP IS ELIGIBLE FOR A DETERMINATION OF PUBLIC SUPPORT UNDER THE FACTS

AND CIRCUMSTANCES TEST BECAUSE IT MEETS THE TWO THRESHOLD REQUIREMENTS FOR

CONSIDERATION. FIRST, THE PORTION OF NCPTUP'S SUPPORT THAT QUALIFIES AS

ELIGIBLE PUBLIC SUPPORT IS APPROXIMATELY 16.85%, WHICH EXCEEDS THE 10%

THRESHOLD REQUIRED UNDER TREASURY REGULATION SECTION 1.170A-9(E)(3)(I).

SECOND, NCPTUP'S OPERATIONS ENSURE THAT IT WILL CONTINUE TO ATTRACT NEW

AND ADDITIONAL PUBLIC SUPPORT, AS REQUIRED BY TREASURY REGULATION SECTION

1.170A-9(E)(3)(II). NCPTUP HAS AN ACTIVE FUNDRAISING PROGRAM TARGETING

GOVERNMENT AGENCIES, INDIVIDUALS, PRIVATE FOUNDATIONS, AND FOR-PROFIT

CORPORATIONS THAT SHARE ITS MISSION, THEREBY SATISFYING THE OTHER

THRESHOLD REQUIREMENT FOR QUALIFYING AS PUBLICLY SUPPORTED UNDER THE FACTS

AND CIRCUMSTANCES TEST.

B. OTHER RELEVANT FACTORS

IN DETERMINING WHETHER NCPTUP MEETS THE "FACTS AND CIRCUMSTANCES TEST,"

THE TREASURY REGULATIONS ALSO PROVIDE A LIST OF FACTORS THAT SERVE AS

INDICIA OF WHETHER AN ORGANIZATION QUALIFIES AS "PUBLICLY SUPPORTED." THE

HIGHER THE PERCENTAGE OF SUPPORT ABOVE THE 10% REQUIREMENT, THE LOWER THE

ORGANIZATION'S BURDEN IN ESTABLISHING IT'S PUBLICLY SUPPORTED NATURE WITH

OTHER FACTORS. THESE ADDITIONAL FACTORS, DISCUSSED BELOW, PROVIDE FURTHER

EVIDENCE THAT NCPTUP SATISFIES THE FACTS AND CIRCUMSTANCES TEST. BECAUSE

NCPTUP'S PERCENTAGE OF SUPPORT IS 16.85%, NCPTUP HAS A LESSER BURDEN IN

PROVING ITS PUBLICLY SUPPORTED NATURE THROUGH THESE FACTORS.

1. SOURCES OF SUPPORT

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information. (See instructions).

NCPTUP RECEIVES ITS PUBLIC SUPPORT FROM A WIDE VARIETY OF CONTRIBUTORS AND DOES NOT DEPEND ON A SINGLE FAMILY FOR CONTRIBUTIONS, TWO FACTS THAT PROVIDE FURTHER SUPPORT FOR NCPTUP'S QUALIFICATION AS A "PUBLICLY SUPPORTED" ENTITY. THESE DONORS INCLUDE NUMEROUS TAX-EXEMPT ENTITIES, A FOR-PROFIT CORPORATION, AND INDIVIDUALS. NCPTUP PLANS TO CONTINUE REACHING OUT TO NEW DONORS IN THE COMING YEARS AS IT HAS SINCE ITS INCEPTION, AND DURING 2010 THE ORGANIZATION WAS ADDED TO A GSA SCHEDULE IN ORDER TO CONTINUE TO DIVERSIFY OUR FUNDING MIX AND TO BE AVAILABLE TO PROVIDE OUR SUBJECT MATTER EXPERTISE TO FEDERAL GOVERNMENT AGENCIES WHO NEED IT. ALSO IN 2010, THE CAMPAIGN SOLICITED FUNDS FROM THE OVER 475,000 VISITORS TO OUR MAIN WEBSITE, WWW.THENATIONALCAMPAIGN.ORG, AND 43 PEOPLE DONATED TO US DIRECTLY THROUGH THE SITE.

THE SHOULD ALSO BE NOTED IN THE ANALYSIS OF SUPPORT THAT OVER THE PAST 4

YEARS NCPTUP HAS RECEIVED SIGNIFICANT DONATIONS FROM A SINGLE FOUNDATION

DONOR THAT IS ONE OF THE WORLD'S LEADING PHILANTHROPIC ORGANIZATIONS AND

WHOSE STATED MISSION IS TO "SOLVE SOCIAL AND ENVIRONMENTAL PROBLEMS."

THESE LARGE DONATIONS FROM ONE DONOR ARE A SIGNIFICANT FACTOR IN THE DROP

IN PERCENTAGE OF NCPTUP PUBLIC SUPPORT OVER THIS PERIOD. TO ILLUSTRATE, IF

THE SIGNIFICANT DONATION WAS EXCLUDED FROM THE PUBLIC SUPPORT TEST, THE

PERCENTAGE FOR 2009 AND 2010 WOULD BE 66.14% AND 55.92%, RESPECTIVELY.

SINCE THIS DONATION DID NOT MEET THE QUALIFICATION OF AN UNUSUAL GRANT,

THE PERCENTAGE FOR 2009 AND 2010 DECREASED TO 20.64% AND 16.85%,

RESPECTIVELY. HOWEVER NCPTUP BELIEVES THAT AS THESE DONATIONS COME FROM AN ORGANIZATION THAT IS AN ACKNOWLEDGED WORLD LEADER IN SOLVING SOCIAL

PROBLEMS, THIS IS FURTHER SUPPORT AND INDICATION OF OUR QUALIFICATION AS A
"PUBLICLY SUPPORTED" ENTITY.

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information. (See instructions).

2. REPRESENTATIVE GOVERNING BODY

THE REPRESENTATIVE NATURE OF AN ORGANIZATION'S GOVERNING BODY IS ALSO A FACTOR IN DETERMINING WHETHER IT OUALIFIES UNDER THE "FACTS AND IN CONSIDERING WHETHER A BOARD IS REPRESENTATIVE, CIRCUMSTANCES TEST." SUCH FACTORS AS THE MEMBERS' EXPERTISE IN THE RELEVANT FIELD, THEIR HISTORY OF LEADERSHIP IN THE COMMUNITY AND THEIR TRADITION OF PUBLIC SERVICE ARE RELEVANT. NCPTUP'S BOARD OF DIRECTORS INCLUDES A VARIETY OF INDIVIDUALS WITH EXCEPTIONAL BACKGROUNDS, EXPERIENCE AND EDUCATION. THE BOARD INCLUDES REPRESENTATION FROM UNIVERSITIES, COMMUNITIES, AND NONPROFIT LEADERS IN THE UNITED STATES, ALL WITH AN INTEREST IN IMPROVING THE LIVES AND FUTURE PROSPECTS OF CHILDREN AND FAMILIES; ACCORDINGLY, IT "REPRESENTS A BROAD CROSS-SECTION OF THE VIEWS AND INTERESTS OF THE THE FOLLOWING INDIVIDUALS CURRENTLY SERVE ON COMMUNITIES NCPTUP SERVES." NCPTUP'S BOARD OF DIRECTORS:

THE HONORABLE THOMAS H. KEAN - CHAIRMAN, THE ROBERT WOOD JOHNSON FOUNDATION

ISABEL V. SAWHILL, PHD - SENIOR FELLOW, ECONOMIC STUDIES, THE BROOKINGS
INSTITUTION

ROBERT BLUM, MD, MPH, PHD - PROFESSOR AND CHAIR, JOHN HOPKINS UNIVERSITY

THOMAS S. CHAPPELL - SENIOR MANAGER, GOODMAN & COMPANY, LLP

LINDA CHAVEZ - CHAIRMAN, CENTER FOR EQUAL OPPORTUNITY

VANESSA CULLINS, MD, PHD - VICE PRESIDENT FOR MEDICAL AFFAIRS, PLANNED PARENTHOOD FEDERATION OF AMERICA, INC.

SUSANNE DANIELS - MEDIA CONSULTANT

AMANDA DEAVER - PARTNER, PRISM PUBLIC AFFAIRS

MARIA ECHAVESTE - SENIOR FELLOW, CENTER FOR AMERICAN PROGRESS

032024 12-21-10

Schedule A (Form 990 or 990-EZ) 2010

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information (See instructions)

DAISY EXPOSITO-ULLA - CHAIRMAN AND CEO, D'EXPOSITO & PARTNERS

WILLIAM GALSTON, PHD - SENIOR FELLOW, GOVERNANCE STUDIES, THE BROOKINGS

INSTITUTION

RON HASKINS, PHD - SENIOR FELLOW, ECONOMIC STUDIES, THE BROOKINGS

INSTITUTION

NANCY L. JOHNSON - SENIOR PUBLIC POLICY ADVISOR, BAKER, DONELSON, BEARMAN,

CALDWELL & BERKOWITZ, PC

JUDITH E. JONES - CLINICAL PROFESSOR, COLUMBIA UNIVERSITY

JODY GREENSTONE MILLER - PRESIDENT AND CEO, THE BUSINESS TALENT GROUP

REV. MICHAEL D. PLACE, STD - SENIOR VICE PRESIDENT, RESURRECTION HEALTH

CARE

SARA ROSENBAUM - HIRSH PROFESSOR AND CHAIR, DEPARTMENT OF HEALTH POLICY,

THE GEORGE WASHINGTON UNIVERSITY MEDICAL CENTER

BRUCE ROSENBLUM - PRESIDENT, WARNER BROS. TELEVISION GROUP

DIANE ROWLAND, SCD - EXECUTIVE DIRECTOR, KAISER COMMISSION ON MEDICAID AND

THE UNINSURED (LEFT AS OF 11/12/2010)

VICTORIA P. SANT - PRESIDENT, THE SUMMIT FOUNDATION

SARA SEIMS, PHD - DIRECTOR, POPULATION PROGRAM, THE WILLIAM AND FLORA

HEWLETT FOUNDATION

MATTHEW STAGNER, PHD, EXECUTIVE DIRECTOR, CHAPIN HALL AT THE UNIVERSITY OF

CHICAGO

MARY C. TYDINGS - MANAGING DIRECTOR, RUSSELL REYNOLDS ASSOCIATES

ROLAND C. WARREN - PRESIDENT, NATIONAL FATHERHOOD INITIATIVES (LEFT AS OF

11/12/2010)

STEPHEN A. WEISWASSER - PARTNER, COVINGTON & BURLING

GAIL R. WILENSKY, PHD, - SENIOR FELLOW, PROJECT HOPE

KIMBERLYDAWN WISDOM, MD - SURGEON GENERAL, STATE OF MICHIGAN, AND VICE

PRESIDENT, COMMUNITY HEALTH, EDUCATION & WELLNESS

032024 12-21-10

Schedule A (Form 990 or 990-EZ) 2010

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information. (See instructions).

JUDY WOODRUFF -SENIOR CORRESPONDENT, PBS NEWS HOUR

3. PUBLIC PARTICIPATION IN PROGRAMS

UNDER SECTION 1.170A-9(E)(3)(VI)(C)(1) OF THE TREASURY REGULATIONS, ONE FACTOR INDICATING THAT AN ORGANIZATION QUALIFIES AS "PUBLICLY SUPPORTED"

UNDER THE FACTS AND CIRCUMSTANCES TEST IS THAT "MEMBERS OF THE PUBLIC

HAVING SPECIALIZED KNOWLEDGE OR EXPERTISE, PUBLIC OFFICIALS, OR CIVIC OR

COMMUNITY LEADERS" PARTICIPATE IN, OR SPONSOR, THE ORGANIZATION'S

PROGRAMS. AS DISCUSSED ABOVE, ALL OF NCPTUP'S DIRECTORS ARE EXPERTS AND

LEADERS IN THEIR RESPECTIVE FIELDS, AND WE ALSO HAVE EXPERT ADVISORY

GROUPS WHO ADD ADDITIONAL EXPERTISE TO OUR RESEARCH, EDUCATION AND OTHER

PROGRAMS. IN ADDITION, NCPTUP REGULARLY PROVIDES ACCESS TO IMPORTANT

RESEARCH STUDIES IN ITS FIELD TO THE GENERAL PUBLIC VIA MULTIPLE WEBSITES,

WHICH IS ANOTHER FACTOR THAT MAY BE CONSIDERED IN THE EVALUATION OF PUBLIC SUPPORT.

IN SUMMARY, NCPTUP HAS THE CHARACTERISTICS OF A "PUBLICLY SUPPORTED"

ORGANIZATION, BASED ON THE FACTS AND CIRCUMSTANCES TEST DESCRIBED IN

SECTION 1.170A-9(E)(3) OF THE TREASURY REGULATIONS. SPECIFICALLY, A SMALL

NUMBER OF DONORS DO NOT CONTROL NCPTUP; RATHER NCPTUP IS A GROWING

INSTITUTION THAT BEARS MANY OF THE INDICIA OF A "PUBLICLY SUPPORTED"

ORGANIZATION, INCLUDING PUBLIC SUPPORT FROM A WIDE CROSS-SECTION OF

DONORS, WITH A REPRESENTATIVE GOVERNING BODY. MOREOVER, NCPTUP IS

CONTINUING TO SEEK NEW SOURCES OF SUPPORT FROM THE GENERAL PUBLIC AS WELL

AS OTHER ORGANIZATIONS. ACCORDINGLY, NCPTUP QUALIFIES AS A "PUBLICLY

SUPPORTED" ORGANIZATION DESCRIBED IN SECTION 170(B)(1)(A)(VI).

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

A C-	-t FO1/-\/4\ /5\	· (6) a-aa-i-at	ione: Complete Dort III	, , , , , , , , , , , , , , , , , , , ,	,,	ony tany atten	
			ions: Complete Part III. IONAL CAMPAIGN T	O PREVENT		Employer identification nu	umber
	-		D UNPLANNED PREG			52-1974611	
Part	I-A Complete	if the org	anization is exempt und	er section 501(c)	or is a section 52		
2 P	<u> </u>		ation's direct and indirect politic		ın Part IV.	▶ \$	
Part	I-B Complete	if the org	anization is exempt und	er section 501(c)	(3).		
			incurred by the organization und		<u> </u>	▶ \$	
		-	incurred by organization manage		5	▶ \$	
		•	n 4955 tax, did it file Form 4720			Yes	No
	as a correction made		1 4000 tax, did it iiio 1 0iiii 11 20	ior and your.		Yes	□ No
	"Yes," describe in Pa						
Part	I-C Complete	if the org	anization is exempt und	er section 501(c)	, except section :	501(c)(3).	
1 E	nter the amount direc	ctly expended	by the filing organization for se	ction 527 exempt fund	ction activities	▶ \$	
			zation's funds contributed to ot				
ex	xempt function activity	ties				▶ \$	
3 To	otal exempt function	expenditures	. Add lines 1 and 2. Enter here a	nd on Form 1120-POL	- ,		
lır	ne 17b					> \$	
4 D	id the filing organizat	ion file Form	1120-POL for this year?			Yes	No
			nployer identification number (El				on
C	ontributions received	that were pre	tion listed, enter the amount pai omptly and directly delivered to a additional space is needed, prov	a separate political orç	ganization, such as a se		ra
	(a) Name		(b) Address	(c) EIN	(d) Amount paid fr filing organization funds If none, ente	n's contributions receive	ed and ectly arate tion.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA

Schedule C (Form 990 or 990-EZ) 2010

032041 02-02-11

	THE NATION	AL CAMPAIGN	TO PREVENT		
Schedule C (Form 990 or 990-EZ) 2010	TEEN AND U	NPLANNED PR	EGNANCY	52-1	974611 Page 2
Part II-A Complete if the org	anization is exer	npt under section	n 501(c)(3) and fil	ed Form 5768	
(election under sec	tion 501(h)).				
. —	tion belongs to an affil		•		
B Check ► if the filing organiza	tion checked box A ar	d "limited control" pro	visions apply.	_	
	ts on Lobbying Exper	nditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion (g	grass roots lobbying)		3,711.	
b Total lobbying expenditures to influence	uence a legislative boo	ly (direct lobbying)		121,099.	
c Total lobbying expenditures (add li	nes 1a and 1b)			124,810.	
d Other exempt purpose expenditure	es			9,084,917.	
 Total exempt purpose expenditure 	s (add lines 1c and 1d)		9,209,727.	
f Lobbying nontaxable amount. Enter	er the amount from the	following table in both	n columns.	610,486.	
If the amount on line 1e, column (a) o	r (b) is: The lob	bying nontaxable amo	ount is:		
Not over \$500,000	20% of	the amount on line 1e.			
Over \$500,000 but not over \$1,000	0,000 \$100,00	0 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000 \$175,00	0 plus 10% of the exc	ess over \$1,000,000.	1	
Over \$1,500,000 but not over \$17	,000,000 \$225,00	0 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,0	000			
g Grassroots nontaxable amount (er	nter 25% of line 1f)			152,622.	
h Subtract line 1g from line 1a If zer	o or less, enter -0-			0.	
i Subtract line 1f from line 1c. If zero	o or less, enter -0-			0.	
j If there is an amount other than ze	ro on either line 1h or	line 1i, did the organiza	ation file Form 4720	_	
reporting section 4911 tax for this					Yes No
		raging Period Under			
(Some organiz	ations that made a s	ection 501(h) election	do not have to comp	olete all of the five	
		e instructions for line		age 4.) —————————	
	Lobbying Exper	nditures During 4-Yea	ar Averaging Period		<u></u>
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount	436,115.	640,870.	633,089.	610,486.	2,320,560.
b Lobbying ceiling amount (150% of line 2a, column(e))					3,480,840.
c Total lobbying expenditures	37,924.	97,002.	141,545.	124,810.	401,281.

160,218.

5,086.

109,029.

Schedule C (Form 990 or 990-EZ) 2010

580,141.

870,212.

17,357.

152,622.

3,711.

158,272.

8,560.

d Grassroots nontaxable amount e Grassroots ceiling amount

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2010 TEEN AND UNPLANNED PREGNANCY 52-197461

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

local legislation or referendur a Volunteers? b Paid staff or c Media advert d Mailings to me Publications, f Grants to oth g Direct contact h Rallies, demo	embers, legislators, or the public? or published or broadcast statements? er organizations for lobbying purposes?	Yes	No	Amo	ount
local legislaturor referendur a Volunteers? b Paid staff or c Media advert d Mailings to me Publications, f Grants to oth g Direct contact h Rallies, demo	n, including any attempt to influence public opinion on a legislative matter in, through the use of: nanagement (include compensation in expenses reported on lines 1c through 1i)? sements? embers, legislators, or the public? or published or broadcast statements? er organizations for lobbying purposes?				
or referendur a Volunteers? b Paid staff or c Media advert d Mailings to m e Publications, f Grants to oth g Direct contact h Rallies, demo	nanagement (include compensation in expenses reported on lines 1c through 1i)? sements? embers, legislators, or the public? or published or broadcast statements? er organizations for lobbying purposes?				
 a Volunteers? b Paid staff or it c Media advert d Mailings to me e Publications, f Grants to oth g Direct contact h Rallies, demonstrate 	nanagement (include compensation in expenses reported on lines 1c through 1i)? sements? embers, legislators, or the public? or published or broadcast statements? er organizations for lobbying purposes?				
 b Paid staff or it c Media advert d Mailings to me e Publications, f Grants to oth g Direct contact h Rallies, demo 	sements? embers, legislators, or the public? or published or broadcast statements? er organizations for lobbying purposes?				
c Media advertd Mailings to me Publications,f Grants to othg Direct contacth Rallies, demo	sements? embers, legislators, or the public? or published or broadcast statements? er organizations for lobbying purposes?				
d Mailings to me Publications,f Grants to othg Direct contacth Rallies, demo	embers, legislators, or the public? or published or broadcast statements? er organizations for lobbying purposes?				
e Publications,f Grants to othg Direct contacth Rallies, demo	or published or broadcast statements? er organizations for lobbying purposes?				
f Grants to oth g Direct contact h Rallies, demo	er organizations for lobbying purposes?				
g Direct contacth Rallies, demo			ļ		
h Rallies, demo					
	with legislators, their staffs, government officials, or a legislative body?		<u> </u>		
 Other activities 	nstrations, seminars, conventions, speeches, lectures, or any similar means?		ļ		
	s? If "Yes," describe in Part IV		<u> </u>		
•	es 1c through 1ı	<u> </u>	ļ		
	ies in line 1 cause the organization to be not described in section 501(c)(3)?		<u> </u>		
•	the amount of any tax incurred under section 4912				
	the amount of any tax incurred by organization managers under section 4912		 		
art III-A Co	panization incurred a section 4912 tax, did it file Form 4720 for this year? nplete if the organization is exempt under section 501(c)(4), sectio	tion 501/c	1/5) or se	ction	
	(c)(6).		,,(J), OI 36	CUOII	
				Yes	
Were substa	tially all (90% or more) dues received nondeductible by members?		1		
Did the organ	zation make only in-house lobbying expenditures of \$2,000 or less?		2		
B Did the organ	zation agree to carryover lobbying and political expenditures from the prior year? nplete if the organization is exempt under section 501(c)(4), sec		3		<u> </u>
"Ye	S." ments and similar amounts from members	 .	1		
	o) nondeductible lobbying and political expenditures (do not include amounts of poli	itical			
,	which the section 527(f) tax was paid).				
a Current year			2a		
b Carryover from	n last vear		2b		
c Total			2c		
Aggregate ar	nount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
If notices we	e sent and the amount on line 2c exceeds the amount on line 3, what portion of the e	excess			
does the org	inization agree to carryover to the reasonable estimate of nondeductible lobbying and	d political			
expenditure	ext year?		4		
Taxable amo	int of lobbying and political expenditures (see instructions)		5		
	pplemental Information				
	opiemental information to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5,	and Part II-B	, line 1) Also	o, complete	th:

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public

OMB No 1545-0047

Inspection

Name of the organization

THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY

Employer identification number 52-1974611

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an hi	storically important land area
	Protection of natural habitat	Preservation of a cei	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
¢	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i		└── Yes └── No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements	during the year ►
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements durin	g the year ▶ \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		└── Yes └── No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	s the organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections o		Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue state	ement and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	ance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descr		
þ	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of p	ublic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical tre		ial gaın, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		▶ \$

Sche		IONAL CAMP D UNPLANNE					52-	197461:	1 Page 2
	t III Organizations Maintaining C					or Other			
3 a	Using the organization's acquisition, accession (check all that apply): Public exhibition		ds, check	any of the		at are a sign			
b	Scholarly research				nange progr				
C	Preservation for future generations	•	٠ ــــا ،						
4	Provide a description of the organization's co	illections and explai	in how th	ev further t	he organizat	on's exemn	nt numose in	Part XIV.	
5	During the year, did the organization solicit or								
•	to be sold to raise funds rather than to be ma							Yes	☐ No
Par	t IV Escrow and Custodial Arran					"Yes" to Fo	rm 990, Par	IV, line 9, or	
	reported an amount on Form 990, Par			•					
1a	Is the organization an agent, trustee, custodi	an or other interme	diary for	contribution	s or other as	ssets not in	cluded		
	on Form 990, Part X?						•	Yes	□ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing t	able:					
								Amount	<u>t</u>
С	Beginning balance						1c		
d	Additions during the year						1d		
е	Distributions during the year						1e		
f	Ending balance						1f		
	Did the organization include an amount on Fo	orm 990, Part X, line	21?					└── Yes	L No
_	If "Yes," explain the arrangement in Part XIV.								
Par	t V Endowment Funds. Complete				T		· - , ,		
		(a) Current year	(b) P	rior year	(c) Two yea	rs back (d)	Three years t	Dack (e) Four	years back
	Beginning of year balance								
b	Contributions								
С.	Net investment earnings, gains, and losses		<u> </u>		 				
d	Grants or scholarships		 		-				
е	Other expenditures for facilities								
	and programs		· · · -		-				
	Administrative expenses				-				
g	End of year balance Provide the estimated percentage of the yea	r and halance held	20:		<u> </u>		•••		
2	Board designated or quasi-endowment	end balance neld	as. %						
a b	Permanent endowment	%	— ″						
c		^~~							
	Are there endowment funds not in the posse	· -	ation tha	t are held a	and administr	ered for the	organization	1	
Ju	by.	oolon or the organiz	anon me	4.0 110.0 0		3700 107 1110	organization	· [Yes No
	(i) unrelated organizations							3a(ı)	
	(ii) related organizations							3a(11)	
ь	If "Yes" to 3a(ii), are the related organizations	s listed as required	on Sched	lule R?				3b	
4	Describe in Part XIV the intended uses of the								
_	t VI Land, Buildings, and Equipm								
	Description of investment	(a) Cost or o			t or other	(c) Acci	umulated	(d) Boo	k value

basis (investment)

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2010

148,523. 172,291. 1,294,338.

1,615,152.

1a Land **b** Buildings

d Equipment

e Other

basis (other)

384,788. 592,575.

1,775,442.

depreciation

236,265. 420,284.

481,104.

c Leasehold improvements

Description of investment

Part VII Investments - Other Securities.	See Form 990, Part X, I	ine 12	· · · · · · · · · · · · · · · · ·
(a) Description of security or category (including name of security)	(b) Book value	(c)	Method of valuation. r end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
<u>(F)</u>			
(G)			
(H)			
(1)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related	See Form 990, Part X,		Method of valuation:
(a) Description of investment type	(b) Book value		r end-of-year market value
(1)		·	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	<u> </u>		
(10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)			
Part IX Other Assets. See Form 990, Part X,	line 15.	 _	
1 47 5 5 7 5 6 6 7 5 7 7 7 7 7 7 7 7 7 7 7	(a) Description		(b) Book value
(1)	· · · · · · · · · · · · · · · · · · ·		
(2)			
(3)			
(4)	-		
(5)	-		
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col (B Part X Other Liabilities. See Form 990, Pa		——————————————————————————————————————	>
1. (a) Description of liability		(b) Amount	
(1) Federal income taxes			
(2) DEFERRED RENT LIABILITY		216,988.	
(3) OBLIGATIONS UNDER CAPIT	AL LEASES	67,632.	
(4) SECURITY DEPOSITS		3,000.	
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, col (E) line 25)	287,620.	AN'E BANDO AV DAFANSIA 13V KARDIARE DRAS
2. FIN 48 (ASC 740).	note to the organization's financia	ar statements that reports the organization	· · · · · · · · · · · · · · · · · · ·
032053 12-20-10			Schedule D (Form 990) 2010

Schedule D (Form 990) 2010

44,222.

COST OF GOODS SOLD

Schedule D (Form 990) 2010 TEEN AND UNPLANNED PREGNANCY Part XIV Supplemental Information (continued)	52-1974611 Page 5
Part XIV Supplemental Information (continued)	
PART XIII, LINE 2D - OTHER ADJUSTMENTS:	
	44 222
COST OF GOODS SOLD	44,222.
	·
	

032055 12-20-10 Schedule D (Form 990) 2010

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY 52-1974611 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the Yes No grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States. 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed.) (f) Total (a) Region (b) Number of (c) Number of (d) Activities conducted in region (e) If activity listed in (d) employees, agents, and independent expenditures offices (by type) (e.g., fundraising, program is a program service, for and in the region services, investments, grants to describe specific type investments contractors recipients located in the region) of service(s) in region in region in region EUROPE (INCLUDING ICELAND AND GREENLAND) PROGRAM SERVICES RESEARCH PAPERS 46,500. 46,500. 0 3 a Sub-total b Total from continuation ٥. O sheets to Part I

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Schedule F (Form 990) 2010

46,500.

c Totals (add lines 3a

THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY

Schedule F (Form 990) 2010 TEEN AND UNPLANNED PREGNANCY

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any

Page 2

52-1974611

ecipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000	ant II can be duplicated if additional space is needed.	

(i) Method of valuation (book, FMV, appraisal, other)					
(h) Description of non-cash assistance					
(g) Amount of non-cash assistance					yomut hy
(c) Amount (f) Manner of of cash grant cash disbursement		,			yd tamovo yet ac borigooga
(e) Amount of cash grant					foroion country
(d) Purpose of grant					and out and on the same of the
(c) Region					the state of the s
(b) IRS code section and EIN (if applicable)					
1 (a) Name of organization					

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities က

Schedule F (Form 990) 2010

39

Page 3

Schedule F (Form 990) 2010 TEEN AND UNPLANNED PREGNANCY 52-1974611
Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16

Part III can be duplicated if additional space is needed

7.5.44.44.4	(n) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2010
	(g) Description of non-cash assistance					Schedu
, ,	(f) Amount of non-cash assistance					
	(e) Manner of cash disbursement					
	(d) Amount of cash grant					
	(c) Number of recipients					
ditional space is needer	(b) Region					
Part III can be duplicated if additional space is needed	(a) Type of grant or assistance					

THE NATIONAL CAMPAIGN TO PREVENT Schedule F (Form 990) 2010 TEEN AND UNPLANNED PREGNANCY

Sched	ule F (Form 990) 2010 TEEN AND UNPLANNED PREGNANCY	52-1974611	Page 4
Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	☐ Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY

General Information on Grants and Assistance

Part

Open to Public Inspection Employer identification number 52-1974611

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	o substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	istance, and the selec	
	tance?	,					X Yes No
햜	cedures for mont	toring the use of grant	funds in the United	States			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments and	d Organizations in the	United States. Co	omplete if the orga	nization answered "Y	es" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Check this box if	55,000 Check this	s box if no one recipien	it received more th	an \$5,000. Part II	can be duplicated if a	no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed	▲ pep
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST VIRGINIA COMMUNITY VOICES							PREVENTING UNPLANNED
2207 WASHINGTON STREET							PREGNANCY IN WEST
CHARLESTON, WV 25311	20-0625456	501(C)(3)	128,511.	0.			VIRGINIA.
							EDUCATING STATE
NATIONAL CONFERENCE OF STATE							LEGISLATORS ABOUT POLICY
LEGISLATORS - 700 EAST FIRST PLACE							DPTION TO PREVENT TEEN
- DENVER , CO 80230	84-0772595	N/A	99,636.	0.			PREGNANCY.
							CREATING INNOVATIVE
UNIVERSITY OF SOUTH PLORIDA							DIGITAL MESSAGING TO
4202 E. FOWLER AVENUE							ENCOURAGE USE OF LONG
TAMPA, PL 33620	59-3102112	501(C)(3)	60,945.	.0			ACTING REVERSIBLE
							USE OF NEW MEDIA TO RAISE
HEALTHY FUTURES OF TEXAS							AWARENESS OF LONG ACTING
1408 EL PASO STREET							REVERSIBLE CONTRACEPTION
SAN ANTONIO, TX 78207	20-5793076	501(C)(3)	50,000.	0.			AMOUNG YOUNG ADULTS.
REGENTS OF UNIVERSITY OF							
CALIFORNIA - 3333 CALIFORNIA				•			RESEARCH ON FACTORS THAT
STREET, SUITE 315 - SAN FRANCISCO,							INFLUENCE TEEN AND
CA 94143	94-6036493	501(C)(3)	40,000.	0.			UNPLANNED PREGNANCY.
COLUMBIA UNIVERSITY							RESEARCH ON FACTORS THAT
630 W. 168TH STREET							INFLUENCE TEEN AND
NEW YORK, NY 10032	13-5598093	501(C)(3)	39,981.	0.			UNPLANNED PREGNANCY.
2 Enter total number of section 501(c)(3) and government organizations	nd aovernment or	qanizations					10.
							2.

3 Enter total number of other organizations

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SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2010)

TEEN AND UNPLANNED PREGNANCY

Page 1 Schedule I (Form 990) ESEARCH ON FACTORS THAT COLLABORATION TO REDUCE ARTNERSHIP TO ADDRESS TOUNG AFRICAN-AMERICAN REGNANCY AMONG HUMAN MONG YOUTH IN FOSTER MONG YOUTH IN FOSTER MONG YOUTH IN FOSTER (h) Purpose of grant or assistance EEN PREGNANCY AMONG REVENTING PREGNANCY REVENTING PREGNANCY REVENTING PREGNANCY INPLANNED PREGNANCY. NFLUENCE TEEN AND EEN AND UNPLANNED ERVICES AGENCIES. 52-1974611 JOMEN. CARE. ARE. CARE. (g) Description of non-cash assistance Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) appraisal, other) (f) Method of valuation (book, FMV, 0. 0. 0 ٥. ٥. ٥. (e) Amount of assistance 25,000. (d) Amount of cash grant 39,014. 16,000. 16,000, 15,000, 16,027 (c) IRC section if applicable WOLFE STREET - BALTIMORE, MD 21205 | 15-0595110 | 501(C)(3) 501(C)(7) 501(C)(3) 501(C)(3) 26-3566862 501(C)(3) 36-2166948 501(C)(3) 36-2167937 35-6020472 22-2540285 (p) EIN JOHNS HOPKINS UNIVERSITY BLOOMBERG SCHOOL OF PUBLIC HEALTH - 615 N. NETWORK - 3737 N. MOZART STREET ADOLESCENT SEXUAL HEALTH - 6035 PREGNANCY - 105 CHAUNCY STREET, ASSOCIATION - 1133 19TH STREET MASSACHUSETTS ALLIANCE ON TEEN AMERICAN PUBLIC HUMAN SERVICES 8TH FLOOR - BOSTON, MA 02111 EXECUTIVE DRIVE, SUITE 103 -(a) Name and address of organization or government UHLICH CHILDREN'S ADVANTAGE SIGMA GAMMA RHO SORORITY MICHIGAN ORGANIZATION ON WASHINGTON, DC 20036 1000 SOUTHHILL DRIVE LANSING, MI 48911 CHICAGO, IL 60618 Schedule I (Form 990) CARY, NC 27513 |₹

TEEN AND UNPLANNED PREGNANCY

Page 2

52-1974611

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

Schedule I (Form 990) (2010)

Part III

(f) Description of non-cash assistance			
(book, FMV, appraisal, other)			
(d) Amount of non- cash assistance			
(c) Amount of cash grant			
(b) Number of recipients			
(a) Type of grant or assistance			

LINE 2: THE CAMPAIGN MAKES GRANTS THROUGH ITS NATIONAL Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information SCHEDULE I, PART I, Part IV

CAMPAIGN FUND PROGRAM. SOME OF THESE GRANTS ARE AWARDED THROUGH A

A FORMAL PROCESS HAS BEEN DEVELOPED COMPETITIVE, PEER-REVIEWED PROCESS. WHEREBY THE ORGANIZATION PERIODICALLY MONITORS THE SUBSTANTIVE PROGRESS OF

THE GRANT PROGRAM, REVIEWS FINANCIAL REPORTS FROM THE GRANTEE, REVIEWS THE

APPLICABLE) AND ALSO HOLDS PERIODIC CONFERENCE CALLS WITH THE GRANTEE TO

GRANTEE'S PUBLICLY AVAILABLE FINANCIAL REPORTS AND TAX FILINGS (WHERE

CONFIRM THAT THE FUNDS ARE BEING EXPENDED AS AGREED UPON IN THE AWARD

DOCUMENT.

Schedule I (Form 990) 2010 TEEN AND UNPLANNED PREGNANCY Part IV Supplemental Information	52-1974611 Page 2					
Just 14 Supplemental information						
•						
PART II, LINE 1, COLUMN (H):						
NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF SOUTH FLORIDA						
(H) PURPOSE OF GRANT OR ASSISTANCE: CREATING INNOVATIVE DIGIT	PAL					
MESSAGING TO ENCOURAGE USE OF LONG ACTING REVERSIBLE CONTRACE	PTION AMONG					
COLLEGE STUDENTS.						

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY

2010

Open to Public Inspection

Employer identification number

52-1974611

Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Health or social club dues or initiation fees Tax indemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, 2 trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply X Compensation committee X Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee J Form 990 of other organizations 4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: 4a a Receive a severance payment or change-of-control payment from the organization or a related organization? X 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4c c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of. X 5a a The organization? 5b b Any related organization? If "Yes" to line 5a or 5b, describe in Part III. 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a a The organization? 6b b Any related organization? If "Yes" to line 6a or 6b, describe in Part III. 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments X 7 not described in lines 5 and 6? If "Yes," describe in Part III 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the 8 X initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2010

Regulations section 53.4958-6(c)?

TEEN AND UNPLANNED PREGNANCY

Schedule J (Form 990) 2010

52-1974611

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-{iii} must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C)	(a)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ
	19	219 431	35 000.	C	14.470.	8.929.	277.830.	0
NACE BROWN	<u> </u>	0	0,00	0	•	-1	٠l	0
;	<u> </u>	178,23	5,000.	0	11,349.	1,095.	195,682.	0
2 SUSAN LEFKOWITZ	<u> </u>		٠l		0			0
	Ξ	171,76	5,000.		11,764.	12,124.	200,648.	0.
3 WILLIAM ALBERT	(ii)							0
	Ξ	182,81	3,750.		11,477.	1,095.	202,137.	0
4 LARRY SWIADER	(ii)				- 1	- 1	- 1	0
l	Ξ	158,93	3,750.		10,037.	4,827.	177,549.	0
5 ROBERT DODD	(ii)				ı			0
	Ξ	152,50	3,750.		9,844.	4,827.	170,928.	0
6 ANDREA KANE	€					1		0
	ε	130,295.	3,750.	0	6,039	12,179.	155,263.	0.
7 KELLEEN KAYE	(1)	0	0	0	0	0	0	0
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8	▣							
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Schedule J (Form 990) 2010

-Page 3 52-1974611 TEEN AND UNPLANNED PREGNANCY Schedule J (Form 990) 2010

Part III | Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Schedule J (Form 990) 2010

SCHEDULE M (Form 990)

Department of the Treasury

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY

Employer identification number 52-1974611

Pai	rt I Types of Property				'				
		(a) Check if	(b) Number of	(c) Noncash contribution	(d) Method of de				
	•	applicable	contributions or	amounts reported on	noncash contribu		•	s	
		ļ. · · · · ·	items contributed	Form 990, Part VIII, line 1g					
1	Art - Works of art								
2	Art - Historical treasures		 						
3 4	Art - Fractional interests								
5	Books and publications Clothing and household goods				-				
6	Cars and other vehicles		l						
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	X	1	900,000.	FMV				
10	Securities - Closely held stock								
11	Securities · Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16									
17	Real estate - Other								
18	Collectibles								
19	Food inventory Control of the Contro								
20									
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens Archaelegical artifacts								
24 25	Archeological artifacts Other ()			,					
26	Other () Other ()	<u> </u>							
27	Other (
28	Other (
29									
	for which the organization completed Form 8283, Part IV, Donee Acknowledgement								
							Yes	No	
30a	During the year, did the organization receive b	y contribution	on any property rej	ported in Part I, lines 1-28 th	at it must hold for				
	at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for							l	
	the entire holding period?						X		
b	b If "Yes," describe the arrangement in Part II.								
31	1 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?					31	X	<u> </u>	
32a	32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash								
	contributions?			•		32a		X	
	If "Yes," describe in Part II.							1	
33	If the organization did not report an amount in	column (c) t	for a type of prope	rty for which column (a) is ch	necked,			1	
	describe in Part II			_		<u></u>			
LHA	For Paperwork Reduction Act Notice, see	the instruc	tions for Form 99	Ю.	Schedule M	(Form	990) ((2010)	

032141

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY

Employer identification number 52-1974611

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:							
PREVENT TEEN PREGNANCY AND UNPLANNED PREGNANCY, ESPECIALLY AMONG							
SINGLE, YOUNG ADULTS. WE SUPPORT A COMBINATION OF RESPONSIBLE VALUES							
AND BEHAVIOR BY BOTH MEN AND WOMEN AND RESPONSIBLE POLICIES IN BOTH THE							
PUBLIC AND PRIVATE SECTORS. IF WE ARE SUCCESSFUL, CHILD AND FAMILY							
WELL-BEING WILL IMPROVE. THERE WILL BE LESS POVERTY, MORE OPPORTUNITIES							
FOR YOUNG MEN AND WOMEN TO COMPLETE THEIR EDUCATION OR ACHIEVE OTHER							
LIFE GOALS, FEWER ABORTIONS, AND A STRONGER NATION.							
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:							
RESEARCH							
EXPENSES \$ 678,681. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.							
PUBLIC POLICY							
EXPENSES \$ 453,762. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.							
PARTNERSHIPS AND SPECIAL INITIATIVES							
EXPENSES \$ 444,439. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.							
STATE AND LOCAL ACTION							
EXPENSES \$ 437,630. INCLUDING GRANTS OF \$ 58,027. REVENUE \$ 0.							
LATINO INITIATIVE							
EXPENSES \$ 419,552. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.							

LEADERSHIP AND PLANNING

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032211 01-24-11

Schedule O (Form 990 or 990-EZ) (2010)

EXPENSES \$ 350,501. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM WITH THE ASSISTANCE OF THE CHIEF OPERATING OFFICER AND THE CHIEF FINANCIAL OFFICER. ONCE THE FORM 990 IS COMPLETE, AND PRIOR TO ITS SUBMISSION TO THE INTERNAL REVENUE SERVICE, THE FORM 990 IS REVIEWED AND APPROVED BY THE CHAIRMAN OF THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS AND IS ALSO MADE AVAILABLE TO THE ENTIRE BOARD FOR COMMENT PRIOR TO FILING THE RETURN.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION HAS A FORMAL CONFLICT OF INTEREST POLICY. THE MEMBERS OF THE BOARD OF DIRECTORS ARE REQUIRED TO REVIEW AND ACKNOWLEDGE THE CONFLICT OF INTEREST POLICY ONCE A YEAR. ALL STAFF MEMBERS SIGN AND ACKNOWLEDGE THIS POLICY AT INITIAL HIRE AND ON AN ANNUAL BASIS. THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS AND HANDLES ANY INSTANCES WHERE A CONFLICT OF INTEREST IS REPORTED AMONG BOARD MEMBERS. THE CEO AND/OR COO REVIEW AND HANDLE INSTANCES OF REPORTED CONFLICTS OF INTEREST BY STAFF MEMBERS. FURTHER, THE CHAIR OF THE FINANCE AND DEVELOPMENT COMMITTEE OF THE BOARD IS THE COMPLIANCE OFFICER AND IS SO DESIGNATED IN THE EMPLOYEE HANDBOOK.

FORM 990, PART VI, SECTION B, LINE 15: THE COMPENSATION OF THE CHIEF

EXECUTIVE OFFICER IS DETERMINED AND APPROVED BY THE COMPENSATION COMMITTEE

OF THE BOARD OF DIRECTORS AND THE BOARD ITSELF USING A STUDY COMPARING THE

CAMPAIGN'S SALARIES WITH THOSE OF HUNDREDS OF OTHER NOT-FOR-PROFIT

ORGANIZATIONS. COMPENSATION OF EMPLOYED OFFICERS AND KEY EMPLOYEES IS SET

BY THE CEO USING THE SAME NATIONALLY-AVAILABLE STUDY.

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY	Employer identification number 52-1974611
FORM 990, PART VI, SECTION C, LINE 19: THE CAMPAIGN'S GOV	ERNING DOCUMENTS,
CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE	E AVAILABLE IN ITS
MAIN OFFICE AND CAN BE SEEN THROUGH REQUEST TO THE CEO, C	COO, OR CFO.
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED GAINS ON INVESTMENTS:	182,009.