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Form 990  Department of the Treasury Internal Revenue 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 2011 Open to Public Inspection
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A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011		
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☒ Amended return ☐ Application pending	C Name of organization THE CENTER FOR REPRODUCTIVE RIGHTS INC Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 120 WALL STREET 14TH FLOOR City or town, state or country, and ZIP + 4 NEW YORK, NY 10005	D Employer identification number 13-3669731
		E Telephone number (917) 637-3600
		G Gross receipts \$ 9,871,660
	F Name and address of principal officer NANCY NORTHUP 120 WALL STREET 14TH FLOOR NEW YORK, NY 10005	H(a) Is this a group return for affiliates? ☐ Yes ☒ No
		H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀(Insert no) ☐ 4947(a)(1) or ☐ 527		
J Website: ▶ WWW.REPRODUCTIVERIGHTS.ORG		
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation 1992
		M State of legal domicile DE

Part I		Summary	
Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE CENTER FOR REPRODUCTIVE RIGHTS, INC IS A NONPROFIT LEGAL ADVOCACY ORGANIZATION DEDICATED TO PROMOTING AND DEFENDING WOMEN'S REPRODUCTIVE RIGHTS WORLDWIDE THE CENTER USES THE LAW TO ADVANCE REPRODUCTIVE FREEDOM AS A FUNDAMENTAL HUMAN RIGHT THAT ALL GOVERNMENTS ARE LEGALLY OBLIGATED TO PROTECT, RESPECT, AND FULFILL 		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	23
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	22
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	50
	6 Total number of volunteers (estimate if necessary)	6	32
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	13,995,741	8,459,375
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	492,372	15,000
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	196,349	1,246,654
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,070	13,450
		14,688,532	9,734,479
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	69,396	97,797
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	5,929,042	7,160,327
	16a Professional fundraising fees (Part IX, column (A), line 11e)	214,343	344,076
	b Total fundraising expenses (Part IX, column (D), line 25) <u>1,677,338</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	3,384,287	4,097,722
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	9,597,068	11,699,922
	19 Revenue less expenses Subtract line 18 from line 12	5,091,464	-1,965,443
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	23,811,538	21,363,128
	21 Total liabilities (Part X, line 26)	832,406	872,814
	22 Net assets or fund balances Subtract line 21 from line 20	22,979,132	20,490,314

Part II	Signature Block			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
Sign Here	***** Signature of officer		2012-10-10 Date	
	NANCY NORTHUP PRESIDENT/CEO Type or print name and title			
Paid Preparer's Use Only	Preparer's signature ▶ FREDERICK H ROTHMAN	Date	Check if self-employed ▶ ☐	Preparer's taxpayer identification number (see instructions) P01275277
	Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ NEW YORK, NY 10017	LOEB & TROPER LLP 655 THIRD AVENUE 12TH FLOOR		EIN ▶ 13-1517563 Phone no ▶ (212) 867-4000

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III ☐ Yes ☒ No

1

Briefly describe the organization's mission

SEE SCHEDULE O FOR CONTINUATION

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured 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

(Code) (Expenses \$ 3,640,541 including grants of \$ 97,797) (Revenue \$ 15,000)

THE U S LEGAL PROGRAM STRIVES TO PROTECT AND ADVANCE REPRODUCTIVE LIBERTY AND ACCESS TO REPRODUCTIVE HEALTH CARE IN THE UNITED STATES BY EMPLOYING DIVERSE STRATEGIES GROUNDED IN THE CENTER'S LEGAL EXPERTISE THE LEGAL VICTORIES OF THE U S LEGAL PROGRAM, INCLUDING TWO LANDMARK U S SUPREME COURT DECISIONS, HAVE PROTECTED MILLIONS OF WOMEN'S HEALTH AND EVERY AMERICAN'S CONSTITUTIONAL RIGHTS IT HAS SECURED MEDICAID FUNDING FOR LOW INCOME WOMEN SEEKING ABORTIONS, SAFEGUARDED CONFIDENTIAL REPRODUCTIVE HEALTHCARE SERVICES FOR ADOLESCENTS, TOPPLED SO CALLED "PARTIAL BIRTH ABORTION" BANS, ENSURED THAT WOMEN RECEIVE MEDICALLY SOUND AND UNBIASED INFORMATION, AND PROTECTED MEDICAL PRIVACY

4b

(Code) (Expenses \$ 3,602,563 including grants of \$) (Revenue \$)

INTERNATIONAL LEGAL PROGRAM - STRENGTHENED REPRODUCTIVE HEALTH LAWS AND POLICIES IN MORE THAN 50 COUNTRIES IN ASIA, AFRICA, EUROPE, AND LATIN AMERICA AND THE CARIBBEAN AS WELL AS IN THE UNITED STATES IN THE PAST SIX YEARS, THE CENTER HAS SPEARHEADED THE USE OF INTERNATIONAL LITIGATION AND COMPLEMENTARY LEGAL ADVOCACY WITH GREAT SUCCESS, WINNING LANDMARK VICTORIES IN HUMAN RIGHTS FORA, INCLUDING TWO DECISIONS THAT HOLD GOVERNMENTS ACCOUNTABLE FOR ENSURING ACCESS TO ABORTION SERVICES WHERE THEY ARE LEGAL

4c

(Code) (Expenses \$ 1,108,115 including grants of \$) (Revenue \$)

THE COMMUNICATIONS PROGRAM INFORMS A WIDE RANGE OF EXTERNAL AUDIENCES ON THE CENTER'S ACTIVITIES AND IMPACT, DEVELOPING AND IMPLEMENTING MESSAGES THAT PROMOTE THE ORGANIZATION'S OVERALL MISSION AND GOALS IT WORKS WITH THE U S AND INTERNATIONAL LEGAL PROGRAMS TO PUBLICIZE NEW CASES AND REPORTS, LEGAL VICTORIES, AND ADVOCACY EFFORTS THROUGH THE MEDIA, AS WELL AS THE CENTER'S OWN WEBSITE AND NEWSLETTERS

(Code) (Expenses \$ 725,717 including grants of \$) (Revenue \$)

THE CENTER'S GOVERNMENT RELATIONS PROGRAM WORKS WITH CONGRESS AND THE EXECUTIVE BRANCH TO PROTECT AND PROMOTE REPRODUCTIVE RIGHTS AND HEALTH WE ADVOCATE FOR DOMESTIC AND FOREIGN POLICY THAT ADVANCES REPRODUCTIVE HEALTH AND FREEDOM AND ALLOWS WOMEN AND FAMILIES TO PROSPER

4d

Other program services (Describe in Schedule O)

(Expenses \$ 725,717 including grants of \$) (Revenue \$)

4e

Total program service expenses \$ 9,076,936

Part IV 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.	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
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.		No
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.	Yes	
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.		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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.		No
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.		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.		No
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.		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	Yes	
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.		No
c	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.		No
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.		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	Yes	
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.	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	Yes	
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.		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I.	Yes	
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 U S? If "Yes," complete Schedule F, Part II and IV.		No
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 U S? If "Yes," complete Schedule F, Part III and IV.		No
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.	Yes	
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.	Yes	
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.		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H.		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements.		

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
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 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	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 disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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 prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance			Yes	No
Check if Schedule O contains a response to any question in this Part V ☐				
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a63		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
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. .	2a50		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
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 or securities account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country: KE, CO See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	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 any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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 organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders.	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b		
c	Enter the aggregate amount of reserves on hand.	13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Part VI

Governance, Management, and Disclosure For each “Yes” response to lines 2 through 7b below, and for a “No” response to lines 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
1a Enter the number of voting members of the governing body at the end of the tax year	1a 23		
b Enter the number of voting members included in line 1a, above, who are independent	1b 22		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5 Did the organization become aware during the year of a significant diversion of the organization’s assets?	5		No
6 Did the organization have members or stockholders?	6		No
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a The governing body?	8a	Yes	
b Each committee with authority to act on behalf of the governing body?	8b	Yes	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization’s mailing address? If “Yes,” provide the names and addresses in Schedule O	9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a		No
b If “Yes,” did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization’s exempt purposes?	10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a Did the organization have a written conflict of interest policy? <i>If “No,” go to line 13</i>	12a	Yes	
b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If “Yes,” describe in Schedule O how this was done	12c	Yes	
13 Did the organization have a written whistleblower policy?	13	Yes	
14 Did the organization have a written document retention and destruction policy?	14	Yes	
15 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?			
a The organization’s CEO, Executive Director, or top management official	15a	Yes	
b Other officers or key employees of the organization	15b	Yes	
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 taxable entity during the year?	16a		No
b If “Yes,” did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization’s exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed	AL , AK , AZ , AR , CA , CT , FL , GA , HI , IL , KS , KY , ME , MD , MA , MI , MN , MS , NH , NJ , NM , NY , NC , OH , OK , OR , PA , RI , SC , TN , VA , WV , WI
18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another’s website ☒ Upon request	
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization	LAURA MCQUADE 120 WALL STREET 14TH FLOOR NEW YORK,NY 10005 (917) 637-3643

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

- List all of the organization’s **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees 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, or 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

Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) NANCY NORTHUP PRESIDENT AND CEO	40 00	X		X				303,721	0	32,263
(2) BARBARA GROSSMAN CHAIR	3 00	X		X				0	0	0
(3) HOPE WINTHROP VICE-CHAIR	3 00	X		X				0	0	0
(4) LAURIE CAMPBELL TREASURER	1 00	X		X				0	0	0
(5) ROBERTA SCHNEIDERMAN SECRETARY	1 00	X		X				0	0	0
(6) REBECCA COOK ASSISTANT SECRETARY	1 00	X		X				0	0	0
(7) BARKLEY STUART ASSISTANT SECRETARY	1 00	X		X				0	0	0
(8) VICTOR ABRAMOVICH DIRECTOR	1 00	X						0	0	0
(9) MACHELLE ALLEN DIRECTOR	1 00	X						0	0	0
(10) JOSE ALVAREZ DIRECTOR	1 00	X						0	0	0
(11) NONNIE BURNES DIRECTOR	1 00	X						0	0	0
(12) JULIE CHAIKEN DIRECTOR	1 00	X						0	0	0
(13) NICKI NICHOLS GAMBLE DIRECTOR	1 00	X						0	0	0
(14) ROBERTA GOSS DIRECTOR	1 00	X						0	0	0
(15) PAULA JOHNSON DIRECTOR	1 00	X						0	0	0
(16) CAROLINE KENNEDY DIRECTOR	1 00	X						0	0	0
(17) SYLVIA LAW DIRECTOR	1 00	X						0	0	0

Part VII

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JAMIE LEVITT DIRECTOR	1 00	X						0	0	0
(19) MARGARET MUNZER LOEB DIRECTOR	1 00	X						0	0	0
(20) NAFIS SADIK DIRECTOR	1 00	X						0	0	0
(21) MARSHALL WEINBERG DIRECTOR	1 00	X						0	0	0
(22) LOIS WHITMAN DIRECTOR	1 00	X						0	0	0
(23) SOPHIA YEN DIRECTOR	1 00	X						0	0	0
(24) LAURA MCQUADE EXECUTIVE VICE PRESIDENT, COO	40 00			X				200,420	0	38,706
(25) ANNE MATSUI DEVELOPMENT DIRECTOR	40 00				X			167,506	0	15,645
(26) LUISA CABAL DIRECTOR OF THE INTERNATIONAL LEGAL PROGRAM	40 00				X			158,092	0	26,269
(27) LAURA MACCLEERY DIRECTOR OF GOVERNMENT RELATIONS	40 00					X		140,266	0	34,662
(28) JANET CREPPS SENIOR COUNSEL	40 00					X		133,858	0	33,770
(29) BEBE ANDERSON DIRECTOR OF U S LEGAL PROGRAM	40 00					X		116,371	0	9,421
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,220,234	0	190,736

2

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶10

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
ILEANA FUTTER 2231 HALL PLACE NW WASHINGTON, DC 20007	PROFESSIONAL FUNDRAISING	139,312

2

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶1

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	6,231				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	8,453,144				
	g	Noncash contributions included in lines 1a-1f \$ 613,573						
	h	Total. Add lines 1a-1f		8,459,375				
Program Service Revenue			Business Code					
	2a	ATTORNEY FEES	900099	15,000	15,000			
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		15,000				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		244,983			244,983	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties						
	6a	(i) Real		(ii) Personal				
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)						
	7a	(i) Securities		(ii) Other				
		1,135,419						
		133,748						
		1,001,671						
	b	Less cost or other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss)		1,001,671			1,001,671	
	8a	Gross income from fundraising events (not including \$ 6,231 of contributions reported on line 1c) See Part IV, line 18						
	a		9,930					
	b	Less direct expenses	b	3,433				
	c	Net income or (loss) from fundraising events . .		6,497			6,497	
	9a	Gross income from gaming activities See Part IV, line 19						
	a							
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities . .						
10a	Gross sales of inventory, less returns and allowances	a						
a								
b	Less cost of goods sold	b						
c	Net income or (loss) from sales of inventory . .							
Miscellaneous Revenue		Business Code						
11a	OTHER INCOME	900099	4,796			4,796		
b	HONORARIUM	900099	2,157			2,157		
c								
d	All other revenue							
e	Total. Add lines 11a-11d		6,953					
12	Total revenue. See Instructions		9,734,479	15,000	0	1,260,104		

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)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	97,797	97,797		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	574,296	401,824	102,502	69,970
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	5,199,294	4,359,576	254,712	585,006
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	263,453	221,127	17,329	24,997
9	Other employee benefits	689,152	548,079	53,842	87,231
10	Payroll taxes	434,132	361,131	25,648	47,353
11	Fees for services (non-employees)				
a	Management				
b	Legal	14,632	13,830	683	119
c	Accounting	44,900		44,900	
d	Lobbying	36,392	36,392		
e	Professional fundraising See Part IV, line 17	344,076			344,076
f	Investment management fees	36,874		36,874	
g	Other	692,008	589,651	6,081	96,276
12	Advertising and promotion				
13	Office expenses	609,025	504,306	29,345	75,374
14	Information technology	206,854	120,046	71,762	15,046
15	Royalties				
16	Occupancy	1,198,410	873,909	241,733	82,768
17	Travel	593,220	553,875	9,741	29,604
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	61,560	60,336	19	1,205
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	34,909	23,814	8,233	2,862
23	Insurance	57,373	38,761	14,222	4,390
24	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)				
a					
b					
c					
d					
e					
f	All other expenses	511,565	272,482	28,022	211,061
25	Total functional expenses. Add lines 1 through 24f	11,699,922	9,076,936	945,648	1,677,338
26	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 solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			211,514	1	416,871
	2	Savings and temporary cash investments			10,370,470	2	7,995,215
	3	Pledges and grants receivable, net			4,981,535	3	4,629,340
	4	Accounts receivable, net				4	
	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)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			257,082	9	157,534
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	2,019,721			
	b	Less: accumulated depreciation	10b	1,928,477	126,153	10c	91,244
	11	Investments—publicly traded securities			7,734,575	11	7,963,758
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			130,209	15	109,166
16	Total assets. Add lines 1 through 15 (must equal line 34)			23,811,538	16	21,363,128	
Liabilities	17	Accounts payable and accrued expenses			570,414	17	671,281
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			261,992	25	201,533
	26	Total liabilities. Add lines 17 through 25			832,406	26	872,814
	Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
27		Unrestricted net assets			13,477,681	27	13,450,647
28		Temporarily restricted net assets			8,497,331	28	6,035,547
29		Permanently restricted net assets			1,004,120	29	1,004,120
Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.							
30		Capital stock or trust principal, or current funds				30	
31		Paid-in or capital surplus, or land, building or equipment fund				31	
32		Retained earnings, endowment, accumulated income, or other funds				32	
33		Total net assets or fund balances			22,979,132	33	20,490,314
34	Total liabilities and net assets/fund balances			23,811,538	34	21,363,128	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,734,479
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,699,922
3	Revenue less expenses Subtract line 2 from line 1	3	-1,965,443
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	22,979,132
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-523,375
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	20,490,314

Part XII 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 ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990EZ)

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.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization THE CENTER FOR REPRODUCTIVE RIGHTS INC	Employer identification number 13-3669731
--	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches **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).**
- 4

☐

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
- 5

☐

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)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

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)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

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 Se**section 509(a)(4).**
- 11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

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)

f

☐

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

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 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.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	11,223,445	6,963,011	9,497,046	13,995,741	8,459,375	50,138,618
2 Tax revenues levied for the organization'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	11,223,445	6,963,011	9,497,046	13,995,741	8,459,375	50,138,618
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)						17,268,164
6 Public Support. Subtract line 5 from line 4						32,870,454

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	11,223,445	6,963,011	9,497,046	13,995,741	8,459,375	50,138,618
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	831,757	395,398	271,702	240,817	244,983	1,984,657
9 Net income from unrelated business activities, whether or not the business is regularly carried on					6,497	6,497
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	23,514	40,607	34,991	9,993	6,953	116,058
11 Total support (Add lines 7 through 10)						52,245,830
12 Gross receipts from related activities, etc (See instructions)					12	1,988,841
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage		
14	Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14 62 910 %
15	Public Support Percentage for 2010 Schedule A, Part II, line 14	15 61 910 %
16a	33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☐
b	33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☐
17a	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	☐
b	10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	☐
18	Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions	☐

Part IIIPart III

Support Schedule for Organizations Described in IRC 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 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 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage			
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15		
16 Public support percentage from 2010 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17		
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2011. 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—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and 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			

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

Facts And Circumstances Test

Explanation
SCHEDULE A, PART IV, SUPPLEMENTAL INFORMATION MISCELLANEOUS INCOME

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.**
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No 1545-0047

2011

Open to Public Inspection

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, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization THE CENTER FOR REPRODUCTIVE RIGHTS INC	Employer identification number 13-3669731
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A

Check

☐

if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	9,357													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	106,201													
c	Total lobbying expenditures (add lines 1a and 1b)	115,558													
d	Other exempt purpose expenditures	11,699,922													
e	Total exempt purpose expenditures (add lines 1c and 1d)	11,815,480													
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	740,774													
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)	185,194													
h	Subtract line 1g from line 1a If zero or less, enter -0-	0													
i	Subtract line 1f from line 1c If zero or less, enter -0-	0													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount	584,274	597,563	629,853	740,774	2,552,464
b Lobbying ceiling amount (150% of line 2a, column(e))					3,828,696
c Total lobbying expenditures	32,477	235,470	63,306	115,558	446,811
d Grassroots non-taxable amount	146,069	149,391	157,463	185,194	638,117
e Grassroots ceiling amount (150% of line 2d, column (e))					957,176
f Grassroots lobbying expenditures	355	147,632	6,545	9,357	163,889

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)).

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV			
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a	Current year		
b	Carryover from last year		
c	Total		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Complete this part 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 1i. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
Attach to Form 990. See separate instructions.

Name of the organization THE CENTER FOR REPRODUCTIVE RIGHTS INC	Employer identification number 13-3669731
--	--

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 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 advised funds are the organization's property, subject to the organization's exclusive legal control?	
	Yes No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit	
	Yes No	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Protection of natural habitat

☐ Preservation of open space

☐ Preservation of an historically importantly land area

☐ Preservation of a certified historic structure

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year

4

Number of states where property subject to conservation easement is located

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

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 during the year

\$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

Yes

No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or 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, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

\$

b

Assets included in Form 990, Part X

\$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- ☐ Public exhibition
- ☐ Loan or exchange programs
- ☐ Scholarly research
- ☐ Other
- ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance	1,508,851	1,379,718	1,171,325	1,591,306	
b Contributions					
c Investment earnings or losses	-53,635	205,053	286,450	-412,582	
d Grants or scholarships					
e Other expenditures for facilities and programs	67,665	69,039	72,000		
f Administrative expenses	7,094	6,881	6,057	7,399	
g End of year balance	1,380,457	1,508,851	1,379,718	1,171,325	

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment 27 210 %
- b Permanent endowment 72 740 %
- c Term endowment 0 050 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations	3a(i)	No
(ii) related organizations	3a(ii)	No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		605,208	565,675	39,533
d Equipment		362,095	319,349	42,746
e Other		1,052,418	1,043,453	8,965
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				91,244

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	9,734,479
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	11,699,922
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,965,443
4	Net unrealized gains (losses) on investments	4	-523,375
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-523,375
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,488,818

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	13,813,309
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-523,375
b	Donated services and use of facilities	2b	4,635,646
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	3,433
e	Add lines 2a through 2d	2e	4,115,704
3	Subtract line 2e from line 1	3	9,697,605
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	36,874
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	36,874
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	9,734,479

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	16,302,127
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	4,635,646
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	3,433
e	Add lines 2a through 2d	2e	4,639,079
3	Subtract line 2e from line 1	3	11,663,048
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	36,874
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	36,874
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	11,699,922

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE ENDOWMENT FUND WAS ESTABLISHED TO SUPPORT A LEGAL FELLOWSHIP POSITION AT THE CENTER FOR REPRODUCTIVE RIGHTS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE CENTER HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS PERIODS ENDING DECEMBER 31, 2008 AND SUBSEQUENT REMAIN SUBJECT TO EXAMINATION BY APPLICABLE TAXING AUTHORITIES
PART XII, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENT EXPENSES 3,433
PART XIII, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENT EXPENSES 3,433

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

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

2011

Open to Public Inspection

Name of the organization
THE CENTER FOR REPRODUCTIVE RIGHTS INC

Employer identification number
13-3669731

Part I **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 grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Part V if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	13	PROGRAM SERVICES	REPRODUCTIVE RIGHTS ADVOCACY AND LITIGATION	278,774
SOUTH AMERICA	1	18	PROGRAM SERVICES	REPRODUCTIVE RIGHTS ADVOCACY AND LITIGATION	300,283
SOUTH ASIA	0	6	PROGRAM SERVICES	REPRODUCTIVE RIGHTS ADVOCACY AND LITIGATION	80,648
SUB-SAHARAN AFRICA	1	12	PROGRAM SERVICES	REPRODUCTIVE RIGHTS ADVOCACY AND LITIGATION	475,394
CARRIBEAN	0	2	PROGRAM SERVICES	REPRODUCTIVE RIGHTS ADVOCACY AND LITIGATION	5,500
RUSSIA AND THE NEWLY INDEPENDENT STATES	0	3	PROGRAM SERVICES	REPRODUCTIVE RIGHTS ADVOCACY AND LITIGATION	7,224
3a Sub-total	2	54			1,147,823
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	2	54			1,147,823

[illegible]

3 Enter total number of other organizations or entities ►

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. Use Part V if additional space is needed.

[illegible]

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 (see instructions for Form 926)*

☐

Yes

☒

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 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐

Yes

☒

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

☒

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

☒

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

☒

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

☒

No

Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

[illegible]

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
THE CENTER FOR REPRODUCTIVE RIGHTS INC

Employer identification number
13-3669731

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a ☒ Mail solicitations

e ☒ Solicitation of non-government grants

b ☒ Internet and e-mail solicitations

f ☒ Solicitation of government grants

c ☒ Phone solicitations

g ☒ Special fundraising events

d ☒ In-person solicitations
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ Yes ☐ No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
MINDSET DIRECT 1700 N JEFFERSON STREET SUITE 200 ARLINGTON, VA 22205	DIRECT MAIL CONSULTANT AND COPY WRITER		No	185,785	90,001	95,784
RENEE M SIMI 1510 FOURTH ST SUITE 4 BERKELEY, CA 94710	DIRECT MAIL CONSULTANT AND COPY WRITER		No	159,210	65,000	94,210
PUBLIC INTEREST COMMUNICATIONS INC 7700 LEESBURG PIKE SUITE 301 NORT FALLS CHURCH, VA 22043	TELEFUNDRAISER		No	18,473	43,113	-24,640
ILEANA FUTTER 2231 HALL PLACE NW WASHINGTON, DC 20007	INDIVIDUAL DONOR CONSULTANT		No	0	139,312	-139,312
WILLIAM WHITEHEAD DESIGN 1354 MCALLISTER ST SAN FRANCISCO, CA 94115	DESIGN OF DIRECT MAIL MATERIALS		No	0	6,650	-6,650
Total ▶				363,468	344,076	19,392

- 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.
- AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, IA, ID, IN, IL, KY, KS, LA, MA, MD, ME, MO, MS, MN, MI, MT, NE, NC, NY, NM, NJ, NH, NV, ND, OH, OR, OK, PA, RI, SC, SD, TX, TN, VA, VT, WA, WV, WI, WY

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		SILENT AUCTION			(Add col (a) through col (c))
		(event type)	(event type)	(total number)	
1	Gross receipts	16,161			16,161
2	Less Charitable contributions	6,231			6,231
3	Gross income (line 1 minus line 2)	9,930			9,930
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes			
	6	Rent/facility costs	3,433		3,433
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Combine lines 3 and 10 in column (d). ▶			
					(3,433)
					6,497

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
1	Gross revenue				
Direct Expenses	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor			
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶			
					()

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

11

Does the organization operate gaming activities with nonmembers?

Yes

No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

Yes

No

13

Indicate the percentage of gaming activity operated in

13a

13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

Yes

No

b

If "Yes," enter the amount of gaming revenue received by the organization and the amount of gaming revenue retained by the third party

c

If "Yes," enter name and address

Name

Address

16

Gaming manager information

Name

Gaming manager compensation

Description of services provided

Director/officer

Employee

Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

Yes

No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year

Part IV

Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
EXPLANATION OF FUNDRAISING PAYMENTS	SCHEDULE G, PART I, LINE 2B, COLUMN (V)	FOR ILEANA FUTTER, THE CENTER PAID IN 2011 \$134,000 FOR CONSULTANCY FEES AND \$5,311 50 OF EXPENSE REIMBURSEMENTS ACCORDING TO THE AGREEMENT WITH ILEANA FUTTER, THE CENTER WILL PAY CONSULTANCY FEES AMOUNTING TO \$20,000 PER MONTH AND THE CENTER WILL ALSO PAY FOR REASONABLE AND VERIFIABLE EXPENSES SUCH AS TELEPHONE, FAX, PARKING AND POSTAGE AND ANY EXPENSE GREATER THAN \$100 WILL NEED PRIOR APPROVAL FROM THE CENTER FOR MINDSET DIRECT, THE CENTER PAID IN 2011 \$60,000 FOR MANAGEMENT OF THE CENTER'S DIRECT RESPONSE FUNDRAISING PROGRAM, \$26,752 FOR COPYWRITING, DESIGN AND ART SERVICES AND \$3,248 95 OF EXPENSE REIMBURSEMENTS ACCORDING TO THE AGREEMENT WITH MINDSET, THE FUNDRAISING PROGRAM CONSULTANCY FEES SHALL BE \$10,000 PER MONTH EFFECTIVE JULY 1, 2011 AND WILL CONTINUE FOR 12 MONTHS THE CENTER SHALL ALSO BE INVOICED FOR PROGRAM ENHANCEMENTS SUCH AS COPY DEVELOPMENT AND AN ESTIMATE OF THESE COSTS WILL BE PREPARED PRIOR TO UNDERTAKING AND MINDSET WILL NOT PROCEED UNTIL APPROVAL FROM THE CENTER IS RECEIVED THE CENTER SHALL BE RESPONSIBLE FOR OUT-OF-POCKET COSTS SUCH AS TRAVEL, POSTAGE AND OVERNIGHT OR COURIER SERVICES FOR RENEE M SIMI, THE CENTER PAID IN 2011 \$60,000 FOR FUND RAISING SERVICES AND \$5,000 FOR COPYWRITING SERVICES ACCORDING TO THE AGREEMENT WITH RENEE M SIMI, THE FUND RAISING SERVICES FEE AMOUNTED TO \$10,000 PER MONTH ALSO ACCORDING TO THE AGREEMENT, EXPENSE REIMBURSEMENTS WILL BE BILLED AFTER THEY ARE INCURRED, AT FACE VALUE WITH DOCUMENTING RECEIPTS FOR PUBLIC INTEREST COMMUNICATIONS, INC , THE CENTER PAID \$42,620 48 FOR CONDUCTING TELEFUNDRAISING CAMPAIGNS AND \$492 35 OF EXPENSE REIMBURSEMENTS ACCORDING TO THE AGREEMENT WITH PUBLIC INTEREST COMMUNICATIONS, INC , THE CENTER WILL PAY BASED ON A FEE SCHEDULE PER TYPE OF DONOR'S COMPLETED DECISION THE CENTER SHALL ALSO PAY FOR ALL OUT-OF-POCKET EXPENSES INCURRED BY THE PUBLIC INTEREST COMMUNICATIONS, INC LASTLY, THE CENTER WORKS WITH WILLIAM WHITEHEAD DESIGN ON A PER PROJECT BASIS

Schedule G (Form 990 or 990-EZ) 2011

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
THE CENTER FOR REPRODUCTIVE RIGHTS INC

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Employer identification number
13-3669731

Part I

General Information on Grants and Assistance

- 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 criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring 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 recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3

Enter total number of other organizations listed in the line 1 table ▶

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) GENERAL SUPPORT	6	97,797			

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE GRANTS WERE IN THE FORM OF STIPENDS PAID TO FELLOWS FOR THEIR WORK ON REPRODUCTIVE HEALTH AND HUMAN RIGHTS THE FELLOWS REGULARLY SUBMIT TO THEIR SUPERVISORS ACTIVITY REPORTS WHICH PROVIDE AN UPDATE ON THE STATUS OF THEIR DELIVERABLES THE SUPERVISORS THEN REVIEW THE ACTIVITY REPORTS TO ENSURE THAT THE FELLOWS COMPLY WITH THE TERMS OF THEIR INTERNSHIP/FELLOWSHIP THE INTERNS ARE GIVEN DEADLINES BY THEIR SUPERVISORS TO COMPLETE THEIR TASK THE SUPERVISORS REGULARLY CHECK IN WITH THE INTERNS BEFORE THE DEADLINE, TO SEE IF THEY HAVE PROGRESSED WITH THEIR TASKS

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization THE CENTER FOR REPRODUCTIVE RIGHTS INC	Employer identification number 13-3669731
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Part I

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 ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	
3	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		
	☒ Compensation committee ☐ Independent compensation consultant ☒ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee		
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		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only 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		
a	The organization?	5a	No
b	Any related organization?	5b	No
	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		
a	The organization?	6a	No
b	Any related organization?	6b	No
	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 not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) NANCY NORTHUP	(i)	278,076	25,000	645	18,375	13,888	335,984	0
	(ii)	0	0	0	0	0	0	0
(2) LAURA MCQUADE	(i)	185,251	15,000	169	15,393	23,313	239,126	0
	(ii)	0	0	0	0	0	0	0
(3) ANNE MATSUI	(i)	165,855	0	1,651	0	15,645	183,151	0
	(ii)	0	0	0	0	0	0	0
(4) LUISA CABAL	(i)	157,958	0	134	12,119	14,150	184,361	0
	(ii)	0	0	0	0	0	0	0
(5) LAURA MACCLEERY	(i)	140,059	0	207	11,139	23,523	174,928	0
	(ii)	0	0	0	0	0	0	0
(6) JANET CREPPS	(i)	133,615	0	243	10,349	23,421	167,628	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

Identifier	Return Reference	Explanation
	PART I, LINE 7	THE CENTER'S PRESIDENT AND CHIEF OPERATING OFFICER ARE GIVEN A BONUS BASED ON THE RESULTS OF THE ANNUAL PERFORMANCE REVIEW AND UPON THE DISCRETION OF THE CENTER'S BOARD OF DIRECTORS

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
THE CENTER FOR REPRODUCTIVE RIGHTS INC

Employer identification number
13-3669731

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	11	602,838	SALE OF COMP PROPERTY
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 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>FOOD</u>)	X	1	2,979	COST
MISC				
26 Other ► (<u>INKINDS</u>)	X	47	7,756	SELLING PRICE
27 Other ► (<u> </u>)				
28 Other ► (<u> </u>)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that 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 the entire holding period?

30a

Yes

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?

32a

Yes

b If "Yes," describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Cat No 51227J

Schedule M (Form 990) 2011

Part III

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS
THIRD PARTY USE	PART I, LINE 32B	THE CENTER HIRED A BROKERAGE FIRM TO SELL PUBLICLY-TRADED SECURITIES THAT THE CENTER RECEIVED FROM ITS DONORS

SCHEDULE O

(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 to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization THE CENTER FOR REPRODUCTIVE RIGHTS INC	Employer identification number 13-3669731
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Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 4	CENTER AMENDED ITS BY-LAWS TO CHANGE ITS FISCAL YEAR END FROM DECEMBER 31 TO JUNE 30 THE RESOLUTION WAS DATED 3/1/11 TO CHANGE THE YEAR END FROM 12/31 TO 6/30, EFFECTIVE 1/1/12THE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE FINANCE AND AUDIT COMMITTEE IS AUTHORIZED BY THE BOARD OF DIRECTORS TO REVIEW AND APPROVE THE FORM 990 THE ORGANIZATION'S AUDIT FIRM PROVIDES THE FINANCE AND AUDIT COMMITTEE WITH A DRAFT OF THE FORM 990 WHICH THE COMMITTEE THEN REVIEWS FOR COMPLETENESS AND ACCURACY THE AUDIT FIRM THEN ADDRESSES ANY CONCERNS OR REVISIONS TO THE FORM 990 PROPOSED BY THE FINANCE AND AUDIT COMMITTEE THE FINANCE AND AUDIT COMMITTEE THEN VOTES FOR THE APPROVAL OF THE FORM 990 THROUGH AN ELECTRONIC PROXY VOTE THEN, THE CENTER PROVIDES A COPY OF THE FORM 990 TO ITS BOARD OF DIRECTORS PRIOR TO FILING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	AT THE BEGINNING OF EACH FISCAL YEAR, THE CENTER'S DIRECTORS, TRUSTEES AND STAFF COMPLETE CONFLICT OF INTEREST FORMS TO DISCLOSE IF THEY OR THEIR IMMEDIATE FAMILY HAVE INTERESTS WHICH WOULD ALLOW THEM TO BENEFIT FINANCIALLY FROM DECISIONS MADE IN THEIR CAPACITY THE CENTER'S DIRECTOR OF ADMINISTRATION THEN REVIEWS THE CONFLICT OF INTEREST DISCLOSURE FORMS AND IF A CONFLICT IS IDENTIFIED,THE CHIEF OPERATING OFFICER WILL BE NOTIFIED AND WILL DISCUSS THE CONFLICT WITH THE APPROPRIATE PARTIES AND TAKE FURTHER ACTION IF NECESSARY

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	EVERY THREE YEARS, THE CENTER CONDUCTS A COMPENSATION AND BENEFITS ANALYSIS TO DETERMINE IF THE CENTER'S COMPENSATION, LEAVE AND BENEFIT PROGRAMS ARE COMPETITIVE WITH COMPARABLE ORGANIZATIONS. FOR THE MOST RECENT COMPENSATION AND BENEFITS ANALYSIS THE CENTER UNDERTOOK IN 2011, THE CENTER ANALYZED SALARY AND BENEFITS INFORMATION PROVIDED BY 12 COMPARABLE ORGANIZATIONS TO EACH STAFF BASED ON THE RESULTS OF THE EVALUATION. ANNUALLY, THE CENTER DISCLOSES TO ITS EXECUTIVE COMMITTEE THE COMPENSATION AND BENEFITS OF THE MEMBERS OF THE MANAGEMENT. ANNUALLY, THE BOARD OF DIRECTORS ALSO REVIEW THE PERFORMANCE OF THE CENTER'S PRESIDENT AND CEO AND THEN SETS THE PRESIDENT AND CEO'S COMPENSATION BASED ON THE RESULTS OF THE REVIEW.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE CENTER'S FINANCIAL STATEMENTS ARE PART OF ITS ANNUAL REPORT WHICH IS AVAILABLE ONLINE IN THE CENTER'S WEBSITE. THE CENTER PROVIDES ITS GOVERNING DOCUMENTS AND CONFLICT-OF-INTEREST POLICY TO THE PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -523,375

Identifier	Return Reference	Explanation
	FORM 990 PART XII LINE 2C	THE PROCESS HAS NOT CHANGED FROM PRIOR YEARS

Identifier	Return Reference	Explanation
	AMENDMENTS MADE TO FORM 990	THE FOLLOWING ARE THE AMENDMENTS MADE TO FORM 990

Identifier	Return Reference	Explanation
	FORM 990 PART V LINE 4B	CAMBODIA WAS REPLACED WITH KENYA

Identifier	Return Reference	Explanation
	FORM 990 PART VI SECTION A LINE 1A	NUMBER OF VOTING MEMBERS WAS CHANGED FROM 24 TO 23

Identifier	Return Reference	Explanation
	FORM 990 PART VI SECTION C LINE 17	THE FOLLOWING STATE WAS REMOVED WASHINGTON

Identifier	Return Reference	Explanation
	FORM 990 PART VII LINE 26	THE WORD INTERNATIONAL WAS MISSPELLED

Identifier	Return Reference	Explanation
	FORM 990 SCHEDULE B PART 1 NUMBER 4	NONCASH WAS REMOVED

Identifier	Return Reference	Explanation
	FORM 990 PART VI SECTION C LINE 20	THE BOOKS AND RECORDS OF THE ORGANIZATION HAS BEEN REMOVED FROM THE CARE OF PAULA ZAMORA AND PLACED IN THE CARE OF LAURA MCQUADE

Additional Data

Software ID:
Software Version:
EIN: 13-3669731
Name: THE CENTER FOR REPRODUCTIVE RIGHTS INC

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services
(Code) (Expenses \$ 725,717 including grants of \$) (Revenue \$) THE CENTER'S GOVERNMENT RELATIONS PROGRAM WORKS WITH CONGRESS AND THE EXECUTIVE BRANCH TO PROTECT AND PROMOTE REPRODUCTIVE RIGHTS AND HEALTH WE ADVOCATE FOR DOMESTIC AND FOREIGN POLICY THAT ADVANCES REPRODUCTIVE HEALTH AND FREEDOM AND ALLOWS WOMEN AND FAMILIES TO PROSPER

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
NANCY NORTHUP PRESIDENT AND CEO	40 00	X		X				303,721	0	32,263
BARBARA GROSSMAN CHAIR	3 00	X		X				0	0	0
HOPE WINTHROP VICE-CHAIR	3 00	X		X				0	0	0
LAURIE CAMPBELL TREASURER	1 00	X		X				0	0	0
ROBERTA SCHNEIDERMAN SECRETARY	1 00	X		X				0	0	0
REBECCA COOK ASSISTANT SECRETARY	1 00	X		X				0	0	0
BARKLEY STUART ASSISTANT SECRETARY	1 00	X		X				0	0	0
VICTOR ABRAMOVICH DIRECTOR	1 00	X						0	0	0
MACHELLE ALLEN DIRECTOR	1 00	X						0	0	0
JOSE ALVAREZ DIRECTOR	1 00	X						0	0	0
NONNIE BURNES DIRECTOR	1 00	X						0	0	0
JULIE CHAIKEN DIRECTOR	1 00	X						0	0	0
NICKI NICHOLS GAMBLE DIRECTOR	1 00	X						0	0	0
ROBERTA GOSS DIRECTOR	1 00	X						0	0	0
PAULA JOHNSON DIRECTOR	1 00	X						0	0	0
CAROLINE KENNEDY DIRECTOR	1 00	X						0	0	0
SYLVIA LAW DIRECTOR	1 00	X						0	0	0
JAMIE LEVITT DIRECTOR	1 00	X						0	0	0
MARGARET MUNZER LOEB DIRECTOR	1 00	X						0	0	0
NAFIS SADIK DIRECTOR	1 00	X						0	0	0
MARSHALL WEINBERG DIRECTOR	1 00	X						0	0	0
LOIS WHITMAN DIRECTOR	1 00	X						0	0	0
SOPHIA YEN DIRECTOR	1 00	X						0	0	0
LAURA MCQUADE EXECUTIVE VICE PRESIDENT, COO	40 00			X				200,420	0	38,706
ANNE MATSUI DEVELOPMENT DIRECTOR	40 00				X			167,506	0	15,645

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LUISA CABAL DIRECTOR OF THE INTERNATIONAL LEGAL PROGRAM	40 00				X			158,092	0	26,269
LAURA MACCLEERY DIRECTOR OF GOVERNMENT RELATIONS	40 00					X		140,266	0	34,662
JANET CREPPS SENIOR COUNSEL	40 00					X		133,858	0	33,770
BEBE ANDERSON DIRECTOR OF U S LEGAL PROGRAM	40 00					X		116,371	0	9,421