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SCANNED JUN 2 2 2015

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public. Open to Public Inspection

A F	For the	2013 calendar year, or tax year beginning JUL 1, 2013 and endin	JUN 30, 2014					
	<u>-</u>							
B	heck if	C Name of organization	D Employer identif	ication number				
C-2-3	- ¡Addre							
	. chang Name	PLANNED PARENTHOOD VOTERS OF NEBRASKA						
LX	∴Jchang	Doing Business As	47-0	762497				
	initsal return	Number and street (or P.O. box if mail is not delivered to street address) Roomy	suite E Telephone numbe	er				
	Termu	PO BOX 4557	515-	-280-7000				
	Amen	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	53,939.				
Ē	Applic		H(a) Is this a group					
	pendi	F Name and address of principal officer: SUZANNA DE BACA	for subordinate					
		SAME AS C ABOVE						
			H(b) Are all subordinates					
		empt status: 501(c)(3) _X 501(c)(_4) ◀ (insert no.) 4947(a)(1) or te: ► WWW.PPVOTERSOFNEBRASKA.ORG		a list. (see instructions)				
			H(c) Group exemption					
			Year of formation: 1994	M State of legal domicile: NE				
Pē	art I	Summary	m::= 0003337773	170110				
ø	1	Briefly describe the organization's mission or most significant activities: EDUCATE	THE ORGANIZAT					
& Governance	l .	SUPPORTERS ON CURRENT LEGISLATIVE ISSUES (&F		SITIONS.				
Ę	2	Check this box 🕨 📖 if the organization discontinued its operations or disposed of	more than 25% of its net a	ssets.				
Š		Number of voting members of the governing body (Part VI, line 1a)	as.r. <u>Ø</u> 3	10				
g	4	Number of independent voting members of the governing body (Part William 16) 2		10				
ŝ	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	0				
ij		Total number of volunteers (estimate if necessary)	6	26				
Activities	1	Total unrelated business revenue from Part VIII, column (C), line 12	N, U 1 7a					
ă		Net unrelated business taxable income from Form 990-T, line 34	7b	·				
_	۳	Net differenced busiliess taxable income from 1 ont 1 950-1, line 54.	Prior Year	 				
	١.	O	124,305.	Current Year 52,171.				
g		Contributions and grants (Part VIII, line 1h)	<u> </u>	 				
Revenue	1	Program service revenue (Part VIII, line 2g)	0.	0.				
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.				
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,740.					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	130,045.	53,939.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.				
ω	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	84,230.	39,418.				
Expenses		Professional fundmising fees (Part IV, column (A), line 11e)	0.	0.				
per		Total fundraising expenses (Part IX, column (D), line 25) 13,929.						
Щ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	47,876.	8,937.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	132,106.					
	•		-2,061.	5,584.				
<u> </u>		Revenue less expenses. Subtract line 18 from line 12						
ats or			Beginning of Current Year	End of Year				
SSel	120	Total assets (Part X, line 16)	750.					
Net Asse	i	Total liabilities (Part X, line 26)	22,715.	35,390.				
		Net assets or fund balances. Subtract line 21 from line 20	-21,965.	-16,381.				
	art II	Signature Block						
Und	er pena	lties of perjury, I declare that I have examıned thıs return, including accompanying schedules and s	tatements, and to the best of n	ny knowledge and belief, it is				
true	, corre	t, and complete. Declaration of preparer (other than officer) is based on all information of which pre	parer has any knowledge.					
		1 Way of 1-1-1						
Sig	n	Signature of officer	Date9	, /				
Her	e	MARY ANN MOLLAND, BOARD CHAIR	3/19	1/15				
	_	Type or print name and title	, , , , , , , , , , , , , , , , , , , ,	7				
		Print/Type preparer's name Print/Type preparer's signature	Date Check	PTIN				
Paid CHRISTINE M. ABELL WUSHUM . WWW 5/4/5 sti-employed P00279655								
Preparer Firm's name CLIFTONLARSONALLEN DLP								
	Only	Firm's address 220 SOUTH SIXTH STREET, SUITE 300						
	•	MINNEAPOLIS, MN 55402	Dhone no 61	2-376-4500				
N40	the !	RS discuss this return with the preparer shown above? (see instructions)	I none no. 0 a	X Yes No				
_			···· -	Form 990 (2013)				
3320	101 10-2	9-13 LHA For Paperwork Reduction Act Notice, see the separate instructions.		roim 330 (2013)				

Form	990 (2013) PLANNED PARENTHOOD VOTERS OF NEBRASKA 47-0762497 Page 2 t III Statement of Program Service Accomplishments
Far	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	PROMOTE SOCIAL WELFARE; ENCOURAGE AND PROTECT INFORMED INDIVIDUAL
	CHOICE REGARDING REPRODUCTIVE HEALTHCARE; ADVOCATE PUBLIC POLICIES WITH GUARANTEES TO THE RIGHT OF CHOICE AS WELL AS FULL AND
	NONDISCRIMINATORY ACCESS TO REPRODUCTIVE HEALTH CARE; FOSTER AND
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 X 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?
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 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 \$ 28,637. Including grants of \$ 0.) (Revenue \$ 0
4b	(Code:) (Expenses \$
	DIRECT LOBBYING - PROVIDED DIRECT LOBBYING AND SUPPORTED AN OUTSIDE LOBBYIST IN EFFORTS TO LOBBY STATE AND FEDERAL LEGISLATORS IN PERSON AND THROUGH WRITTEN COMMUNICATION REGARDING REPRODUCTIVE HEALTH ISSUES.
4c	(Code) (Expenses \$
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ► 31,442. Form 990 (2

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
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	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		i	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			х
10	If "Yes," complete Schedule D, Part IV	9		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	40		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	10		- 21
• •	as applicable.		l	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		_X_
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
D	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, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
05	complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
<u>D</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990 (2012
		rom	マコリ (ZU 13)

Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II X 21 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III X 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete X Schedule K. If "No", go to line 25a 24a 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 Х disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 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? If "Yes," complete Х 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or 26 former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II X 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member Х of any of these persons? If "Yes," complete Schedule L, Part III 27 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): Х a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, X director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Х 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X Schedule N. Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Х 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37

Form **990** (2013)

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note. All Form 990 filers are required to complete Schedule O

	Check if Schedule O contains a response or note to any line in this Part V			
		Ï	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	ł I		
С	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 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		_	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ►			
	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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	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 as charitable contributions?	6a		X
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).			
а	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		X
þ	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		j	
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
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	ı l		
_	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		
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	9b		
а	Initiation fees and capital contributions included on Part VIII, line 12 10a	ı l		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	ı l		
11	Section 501(c)(12) organizations. Enter:	.		
а	Gross income from members or shareholders 11a	ı l		
	Gross income from other sources (Do not net amounts due or paid to other sources against	.	1	
	amounts due or received from them.)	ı l		,
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	.		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	.		
С	Enter the amount of reserves on hand	.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990	(2013)

PLANNED PARENTHOOD VOTERS OF NEBRASKA Form 990 (2013) 47-0762497 Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management	·		X
000			Vac	No
12	Enter the number of voting members of the governing body at the end of the tax year 1a 1		Yes	NO
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 10			
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		х
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	Х	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		X
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		Х
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
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		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		Ψ,	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done			
12		12c	X	
13 14	Did the organization have a written whistleblower policy?	13	X	
15	Did the organization have a written document retention and destruction policy?	14	^	
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	450		х
	Other officers or key employees of the organization	15a 15b	\dashv	$\frac{x}{x}$
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130	$\overline{}$	 -
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		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	.00		
	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	l	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who person of the person who person of the person who person of the perso	ion: 🕨	·	
	JAMIE BUSSELL, CHIEF FINANCIAL OFFICER - 515-280-7000			
	1171 7TH STREET, DES MOINES, IA 50314			

Form 990 (2013)

Form 990 (2013) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

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

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

Check this box if neither the organization in (A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average	Position		Position check more than one			ona	Reportable	Reportable	Estimated
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week	Ь—	ceran	dad	recto	or/trus	tee)	from	from related	other
	(list any	recto			ı			the	organizations	compensation
	hours for related	o d	e			saled		organization	(W-2/1099-MISC)	from the
	organizations	ruste	i trusi		<u>ရ</u>	ng du		(W-2/1099-MISC)		organization and related
	below	dalt	Ilona		[원	is st	<u> </u>			organizations
	line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former			- · g
(1) JANET STEWART	1.00						<u> </u>			
CHAIR	0.00	x		X	l	l		0.	0.	0
(2) RANDY MOODY	1.00						 			
VICE CHAIR	0.00	х		Х				0.	0.	0
(3) MARY ANN HOLLAND	1.00				\vdash					
SECRETARY/TREASURER & INTERIM CHAIR	0.00	x		Х				0.	0.	0
(4) MARGARET KIRKEBY BATT	1.00		H				_			
DIRECTOR	0.00	Х						0.	0.	0
(5) ZACH BURGIN	1.00		П							
DIRECTOR		х						0.	0.	0
(6) PAUL LANDOW	1.00						\vdash			
DIRECTOR		x						0.	0.	0.
(7) BOB MUNDY	1.00									
DIRECTOR	0.00	х						0.	0.	0.
(8) W. DON NELSON	1.00									
DIRECTOR	0.00	х						0.	0.	0
(9) CINDY RYMAN YOST	1.00						_			
DIRECTOR	0.00	X						0.	0.	0.
(10) CHRISTA YOAKUM	1.00									
DIRECTOR	0.00	x						0.	0.	0
(11) JILL JUNE	1.00									-
PRESIDENT/CEO	39.00	1		Х				0.	282,095.	10,688
(12) DOUG JACKSON, SPECIAL	1.00	_	П							
ASSISTANT TO THE PRESIDENT/CEO	29.00	1		X			ĺ	0.	0.	0
(13) JAMIE PEARSON	1.00	\vdash					\vdash			
CHIEF FINANCIAL OFFICER	39.00	1		X				l o.	82,181.	3,931
(14) EMILY WILLIAMS BOUSKA, CHIEF	1.00		М							
DEVELOPMENT & PUBLIC AFFAIRS OFFICER	39.00	1		х				l o.	84,951.	6,353
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Pa	7 VII Section A. Officers, Directors, Tru		ploy	ees	and	d Hi	ghe	st C	Compensated Employe	es (continued)				
	(A)	(B)		(C)					(D)	(E)			(F)	
	Name and title	Average	Position (do not check more than on					one	Reportable	Reportable		Es	timate	ed .
		hours per week		unle cer an					compensation	compensation			nount	of
	•	(list any	Ē					Ė	from the	from related organization			other pensa	ition
		hours for	138			ĺ	ļ.,	Ì	organization	(W-2/1099-MI			om the	
		related	lee o	trustee		ŀ	Susate		(W-2/1099-MISC)	,	-,		anızat	
		organizations	l fres	nal tru		oyee	ğ .					and	d relate	ed
		below line)	individual trustee or director	Institutional t	Officer	Кеу етрюуев	Highest compensated emptoyee	퍝				orga	anızati	ons
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	Sub-total							>	0.	449,2		2	0,9	
С	Total from continuation sheets to Part \	/II, Section A					-		0.	110	0.			0.
d				_	_	_		<u> </u>	0.	449,2		2	0,9	72.
2	Total number of individuals (including but	not limited to the	nose	liste	ed al	bove	e) wi	no r	eceived more than \$100	,000 of reportab	le			
	compensation from the organization												Vaal	(
	D. I. I												Yes	No
3	Did the organization list any former office				-	•	_		•	mployee on				х
	line 1a? If "Yes," complete Schedule J for									 the every instant		_3_		
4	For any individual listed on line 1a, is the sand related organizations greater than \$15								C			أمأ	х	l
5	Did any person listed on line 1a receive or								•		·	4		
3	rendered to the organization? If "Yes," col							CIAL	ied organization or thur	dual for Services	•	5		Х
Sec	tion B. Independent Contractors	inpicte deriedar		0. 3.	3011	<i>D C I C C C C C C C C C C</i>	3017		···	• • •				
1	Complete this table for your five highest of	ompensated in	dene	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of con	nnens	ation t	from	
-	the organization. Report compensation fo	•	-							-				
	(A)							Ī	(B)			(0		
	Name and busines	s address	N	INC	3				Description of s	ervices	С		nsatio	n
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								- 1						
	Take a make a still dame of the track of	Gooding to the state				41-			d ab					
2	Total number of independent contractors \$100,000 of compensation from the organ		not li	mite	d to		se li	stec	d above) who received n	nore than			-	

Total revenue Related or Description of Total Related or Description or Descrip			Check if Schedule O contains a	response	or note to any lin	e in this Part VIII			
The Pediate of Campagns b Membership dues b With Pediated Campagns c Fundrasing events d 28,242. d Related organizations d 28,242. d Related organizations d 28,242. d Related organizations d Related organization		•				(A)	Related or exempt function	Unrelated business	i from tax under
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g Total. Add lines 2a2? 3 Investment ncome (including dividends, interest, and other similar amounts). 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gan or (loss) 8 a Gross rents b Less. direct expenses c Gan or (loss) b Less. direct expenses c Net income or (loss) from fundraising events b Less. direct expenses c Net income or (loss) from fundraising events b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a Less: cost of goods sold b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b C All other revenue e Total. Add lines 11a-11d 12 Tetal revenue. See instructions. 5 3, 939. 0 0 0 0 1, 768.					Business Code	·			
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	33200 10-29				<u> </u>				

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a response			mplete column (A).	
_		(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	1			
2	Grants and other assistance to individuals in			<u> </u>	
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the			İ	
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			Ì	
	trustees, and key employees			-	
6	Compensation not included above, to disqualified			Ì	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	22 521	21,460.	1 470	0 502
7	Other salaries and wages	32,531.	21,400.	1,478.	9,593.
8	Pension plan accruals and contributions (include	1	1		
_	section 401(k) and 403(b) employer contributions)	6,887.	5,059.	346.	1,482.
9	Other employee benefits ,	0,007.	3,033.	340.	1,402.
10 11	Payroll taxes				
	Fees for services (non-employees):				
a b	Management				
C	Legal	840.		840.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
•	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses	3,194.	2,524.		670.
14	Information technology				
15	Royalties				
16	Occupancy				·
17	Travel ,	1,662.	909.		753.
18	Payments of travel or entertainment expenses		Ì		•
	for any federal, state, or local public officials	4 100	4 400		
19	Conferences, conventions, and meetings	1,490.	1,490.		4 454
20	Interest	1,431.			1,431.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	320.		320.	
23	Insurance	320.			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line)				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а		· · · · · · · · · · · · · · · · · · ·			
b					
C					
ď					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	48,355.	31,442.	2,984.	13,929.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	Į			
	Check here if following SOP 98-2 (ASC 958-720)				

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	Check if Schedule O contains a response or note to any line in this Part X	· · · · · · · · · · · · · · · · · · ·	·¨	
		(A) Beginning of year		(B) End of year
11	Cash - non-interest-bearing	750.	1	19,009
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	0
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
- [Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
- 1	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
i	employers and sponsoring organizations of section 501(c)(9) voluntary		1	
<u>.</u>	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
[₹] 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment: cost or other			
İ	basis. Complete Part VI of Schedule D 10a			
b	Less accumulated depreciation 10b		10c	
111	Investments - publicly traded securities		11	
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		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	750.	16	19,009
17	Accounts payable and accrued expenses	22,715.	17	35,390
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 م	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons.			
ā	Complete Part II of Schedule L		22	
j 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		25	
26	Total liabilities. Add lines 17 through 25	22,715.	26	35,390
	Organizations that follow SFAS 117 (ASC 958), check here			
2	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	-21,965.	27	-16,381
28	Temporanly restricted net assets		28	
29	Permanently restricted net assets		29	
5	Organizations that do not follow SFAS 117 (ASC 958), check here			
<u>.</u>	and complete lines 30 through 34.			
2 30	Capital stock or trust principal, or current funds		30	
2 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
27 28 29 30 31 32 31 32 3	Retained earnings, endowment, accumulated income, or other funds		32	
2 33	Total net assets or fund balances	-21,965.	33	-16,381
34	Total liabilities and net assets/fund balances	750.	34	19,009

Form 990 (2013)

<u>Form</u>	990 (2013)	PLANNED	PARENTHOOD	VOTERS OF	NEBRASKA	47-0762	497	Pag	ge 12
Par	t XI Reconciliation	on of Net Asse	ts						
	Check if Schedu	le O contains a res	ponse or note to any l	ine in this Part XI	<u> </u>				
	•						_		
1	Total revenue (must ed	qual Part VIII, colun	nn (A), line 12)			1		3,9	
2	Total expenses (must e	equal Part IX, colur	nn (A), line 25) 🚬			2		3,3	
3	Revenue less expense	s. Subtract line 2 fi	rom line 1			3		5,5	
4	Net assets or fund bala	ances at beginning	of year (must equal Page 1)	art X, line 33, colum	n (A))	4	-2.	1,9	<u>65.</u>
5	Net unrealized gains (le	osses) on investme	nts			5			
6	Donated services and	use of facilities _				6			
7	Investment expenses				<i></i>	7			
8	Prior period adjustmen	ıts				8		_	
9	Other changes in net a	ssets or fund bala	nces (explain in Sched	lule O)		9			0.
10	Net assets or fund ball	ances at end of yea	ar. Combine lines 3 thr	rough 9 (must equal	Part X, line 33,				
	column (B))				· · · · · · · · · · · · · · · · · · ·	10	-10	5,3	<u>81.</u>
Par	t XII Financial Sta	atements and	Reporting						
	Check if Schedu	le O contains a res	ponse or note to any I	ine in this Part XII	<u>.</u>	<u></u>			<u> </u>
1	Accounting method us				Other			Yes	No
	~	-	-	·	"Other," explain in Schedule	: O.			37
2a	Were the organization		•				2a		<u> </u>
	•			atements for the yea	ar were compiled or reviewed	d on a			i
	separate basis, consol		·						
	Separate basis			Both consolidated a	· ·				
b	Were the organization		•	-			2b		<u> </u>
			hether the financial sta	atements for the yea	ar were audited on a separat	e basis,	1 1		
	consolidated basis, or Separate basis		ated basis 🔲 E	Both consolidated a	nd separate basis				: !
c	If "Yes" to line 2a or 2b	o, does the organiz	ation have a committe	e that assumes resp	ponsibility for oversight of th	e audīt,		l	
	review, or compilation	of its financial state	ements and selection of	of an independent a	ccountant?		2c		
	If the organization cha	nged either its ove	rsight process or selec	ction process during	the tax year, explain in Sch	edule O.			
За	As a result of a federal	award, was the or	ganization required to	undergo an audit or	audits as set forth in the Si	ngle Audıt			ł
	Act and OMB Circular	A-133?					3a		X
b	If "Yes," did the organi	zation undergo the	required audit or audi	its? If the organizati	on did not undergo the requ	ired audit			
	or audits, explain why	in Schedule O and	describe any steps ta	ken to undergo sucl	h audīts	<u> </u>	3b		
							Form	990 (2013)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ➤ See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

 Section 501(c)(4), (5), or (6) organiza 	tions: Complete Part III.			
Name of organization				Employer identification number
PLANNED	PARENTHOOD VOTER	S OF NEBRAS	SKA	47-0762497
	ganization is exempt unde			
Provide a description of the organiz Political expenditures				^
	ganization is exempt unde			
1 Enter the amount of any excise tax	incurred by the organization unde	r section 4955		▶\$
2 Enter the amount of any excise tax				
3 If the organization incurred a section	n 4955 tax, did it file Form 4720 fo	or this year?		Yes No
4a Was a correction made?			• • • • • • • • • • • • • • • • • • • •	Yes 🔲 No
b If "Yes," describe in Part IV.				
Part I-C Complete if the org				
1 Enter the amount directly expended				▶ \$ 20,339.
2 Enter the amount of the filing organ		-		
exempt function activities				▶ \$0.
3 Total exempt function expenditures		-		
line 17b				▶ \$ 20,339.
4 Did the filing organization file Form				
5 Enter the names, addresses and en	nployer identification number (EIN) of all section 527 po	litical organizations t	o which the filing organization
made payments. For each organiza	tion listed, enter the amount paid	from the filing organiz	ation's funds. Also e	nter the amount of political
contributions received that were pro				separate segregated fund or a
political action committee (PAC). If	additional space is needed, provid	le information in Part	IV.	
(a) Name	(b) Address	(c) EIN	(d) Amount paid filing organizatio funds. If none, ent	n's contributions received and
For Paperwork Reduction Act Notice,	see the Instructions for Form 99	0 or 990-EZ.	Sched	ule C (Form 990 or 990-EZ) 2013

LHA

332041 11-08-13

	dule C (Form 990 or 990-EZ) 2013	PLANN	ED PAR	ENTHOOD VO	TERS OF NEBRA	ASKA 47-	0762497 Page 2
1 4	(election under sec			inprunder section	on soricijoj and me	sa romi 5706	
A C	neck X if the filing organiza			liated group (and list	in Part IV each affiliated	aroun member's nar	ne address FIN
	expenses, and sha				arr arriv cacir animates	group member 3 nai	ne, address, Lif4,
вс	, , , , , , , , , , , , , , , , , , , ,			nd "limited control" pi	rovisions annly		
<u> </u>	Limi	ts on Lob	bying Expe			(a) Filing organization's totals	(b) Affiliated group totals
	Total labbuing avanditures to infli	uongo nuk	dia aninian (grana roata labbum -\	·		
	Total lobbying expenditures to influence to	-	•	,	· · · · · · · · · · · · · · · · · · ·		
	Total lobbying expenditures to influence and lobbying expenditures (add lobbying expenditures)					-	
G							
	Other exempt purpose expenditure						
e	Total exempt purpose expenditure Lobbying nontaxable amount. Enter	•		<i>,</i> , , , ,			
•	If the amount on line 1e, column (a) of						
	Not over \$500,000	פו (ט) ווי.		bying nontaxable an			1
		0.000		the amount on line 1			
	Over \$500,000 but not over \$1,000			00 plus 15% of the ex			
	Over \$1,000,000 but not over \$1,5				cess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	,000,000		00 plus 5% of the exc	ess over \$1,500,000.		
	Over \$17,000,000		\$1,000,				
	Grassroots nontaxable amount (er	tor 25% a	of line 16				
_	Subtract line 1g from line 1a. If zer				· · · •		
''	-		•				
:	Subtract line 1f from line 1c. If zero		-	line 1: did the ergoni			<u> </u>
,	If there is an amount other than ze reporting section 4911 tax for this		er line in or	line ii, dio the organi	zation file Form 4720		Yes No
	reporting section 4311 tax for this	yearr	4-Vear Ave	eraging Period Unde	r Saction 501/h)	······································	Yes No
			at made a s	ection 501(h) election	on do not have to comp les 2a through 2f on pag		
						<u></u>	
		LOD	bying Expe	Taltures During 4-16	ear Averaging Period		
	Calendar year (or fiscal year beginning in)	(a)	2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount						
	Lobbying ceiling amount						
	(150% of line 2a, column(e))		·				
c	Total lobbying expenditures		- ·				
d	Grassroots nontaxable amount						
	Grassroots ceiling amount				1		
	(150% of line 2d, column (e))				1		
	Grassroots Johnving evnendtures						

Schedule C (Form 990 or 990-EZ) 2013 PLANNED PARENTHOOD VOTERS OF NEBRASKA 47-0762497 Page 3 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)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(6	a)	(b)
of the lobbying activity	Yes	No	Amo	unt
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)?			1	
c Media advertisements?				-
d Mailings to members, legislators, or the public?	į.			
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?				
j Total. Add 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), sect 501(c)(6).	ion 501(c)	(5), or s	ection	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		X
Part III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	ion 501(c) d "No," Ol	(5), or se R (b) Pa	ection rt III-A, lin	e 3, is
Dues, assessments and similar amounts from members		1	ļ	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ical	" · •	· · · · ·	
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year	• • • •	<u>22</u>		
c Total		2c		
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 ex				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
expenditure next year?	political	4		
5 Taxable amount of lobbying and political expenditures (see instructions)	• • • • • • • • • • • • • • • • • • • •	5		
Part IV Supplemental Information			1	·
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groundless), complete this part for any additional information.	p list); Part II	-A, line 2;	and Part II-B	line 1.
				
				
				 .
		···-		

SCHEDULE J (Form 990)

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

Department of the Treasury Internal Revenue Service

PLANNED PARENTHOOD VOTERS OF NEBRASKA

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990 **Employer identification number**

47-0762497

So 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. Ine 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel	Pa	rt I Questions Regarding Compensation			
Part WI, Section A, Ine 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel				Yes	No
First-class or charter travel	ta	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
Travel for companions Payments for business use of personal residence Health or social club dues or initiation fees Discretionary opending account Personal services (e.g., maid, chauffer, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b III to explain 1b III to explain 1b III to explain 1c III III III III III III III III III		Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
Tax indemnification and gross-up payments		First-class or charter travel Housing allowance or residence for personal use			
Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 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: Receive a severance payment form, as supplemental nonqualified retirement plan? A Extincipate in, or receive payment from, a supplemental nonqualified retirement plan? A Participate in, or receive payment from, a equity based compensation arrangement? A C Participate in, or receive payment from, an equity based compensation arrangement? The organization of line 1a, did the organization pay or accrue any compensation contingent on the revenues of: The organization? The organization? The organization? The organization? The organization? The organization? The organization? The organization? The organization? The organization? The organization? The organization? The organization? The organization? The organization in the net earnings of: The organization in the net earnings of: The organization? The organization? The organization?		Travel for companions Payments for business use of personal residence			
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b 1b 1b 1b 1b 1b 1b 1b 1b 1b 1b 1b 1b		Tax indemnification and gross-up payments Health or social club dues or initiation fees			l '
reimbursement or provision of all of 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 directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization to establish the compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Independent compensation consultant		Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			İ
reimbursement or provision of all of 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 directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization to establish the compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Independent compensation consultant					1 :
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Receive a severance payment or change-of-control payment? Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, a requiry-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 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: The organization? The organization? 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: Any related organization? If "Yes" to line 6a or 5b, describe in Part III. 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? A Participate in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: A Participate in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described i	D		1		
trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 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: Receive a severance payment form, a supplemental nonqualified retirement plan? Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 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: The organization? If 'Yes' to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net eamings of: The organization? For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net eamings of: The organization? For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net eamings of: The organization? For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments and test payments and fell yets	_		10		├──
Indicate which, if any, of the following the filling organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee	2			:	
CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee		trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2_		
CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee	3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations 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? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? if "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 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? if "Yes" to line 5a or 5b, describe in Part III. 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? for yes to line 5a or 5b, describe in Part III. 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? for yes to line 5a or 6b, describe in Part III. 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. 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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exce	-			i	
Compensation committee					
Independent compensation consultant Compensation survey or study Form 990 of other organizations 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? b Participate in, or receive payment from, an equity-based compensation arrangement? c Participate in, or receive payment from, an equity-based compensation arrangement? ff "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 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? ff "Yes" to line 5a or 5b, describe in Part III. 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? ff "Yes" to line 6a or 6b, describe in Part III. 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. 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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?					
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? 4 Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4 Participate in, or receive payment from, an equity-based compensation arrangement? 4 Participate in, or receive payment from, an equity-based compensation arrangement? 4 Participate in, or receive payment from, an equity-based compensation arrangement? 5 Participate in, or receive payment from, an equity-based compensation arrangement? 6 Participate in, or receive payment from, an equity-based compensation arrangement? 7 Participate in, or receive payment from, an equity-based compensation arrangement? 9 Participate in, or receive payment from, an equity-based compensation arrangement? 9 Participate in, or receive payment from, an equity-based compensation arrangement? 9 Participate in, or receive payment from, an equity-based compensation arrangement? 9 Participate in, or receive payment from, an equity-based compensation arrangement? 9 Part Vill, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 1 Participate in, or receive payment in a part III. 1 Participate in, or receive payments in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments in described in lines 5 and 6? If "Yes," describe in Part III. 7 Participate in, or receive payments in Part III. 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 Participate in, or receive payments in Part III. 9 Participate in, or receive payments in Part III. 9 Participate in, or receive payments in Part III. 1 Participate in, or receive pay]		
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b Any related organization? If "Yes" to line 5a or 5b, describe in Part III. 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? b Any related organization? If "Yes" to line 6a or 6b, describe in Part III. 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. 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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	а	-	5a		Х
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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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9	•	and done the distribution of and CO M N/co B december to Dark III	,		x
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PLANNED PARENTHOOD VOTERS OF NEBRASKA

47-0762497

Schedule J (Form 990) 2013 PLANNED PARENTHOOD VOTERS OF NEBRASKA 47-0762497

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii).

Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
(A) Name and Title		(I) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation		(O)·(J)(B)	reported as deferred in prior Form 990
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Schedule J (Form 990) 2013

Schedule J (Form 990) 2013	Provide the information, explanation, o
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ART I, LINE 3:
XPLANATION: PLANNED PARENTHOOD OF THE HEARTLAND, INC., DETERMINES THE
COMPENSATION OF THE PRESIDENT/CEO, AND ALL OTHER EMPLOYEES. PLANNED
ARENTHOOD OF THE HEARTLAND, INC., USES COMPENSATION COMMITTEES,
OMPENSATION SURVEYS AND STUDIES, AS WELL AS APPROVAL BY THE BOARD OF
IRECTORS' COMPENSATION COMMITTEE, TO DETERMINE THE COMPENSATION OF THE
ANAGEMENT OFFICIALS EMPLOYED BY THE ORGANIZATION.
Schedule J (Form 990) 2013

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Supplemental Information to Form 990 or 990-EZ complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

➤ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047 Open to Public

Inspection

PLANNED PARENTHOOD VOTERS OF NEBRASKA

Employer identification number 47-0762497

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PRESERVE A SOCIAL AND POLITICAL CLIMATE FAVORABLE TO THE EXERCISE OF
REPRODUCTIVE CHOICE; IDENTIFY AND ENDORSE CANDIDATES FOR POLITICAL
OFFICE; AND SUPPORT THE POSITION AND PHILISOPHY OF PLANNED PARENTHOOD.
FORM 990, PART VI, SECTION A, LINE 3:
EXPLANATION: DOUG JACKSON PROVIDED CONTRACT CEO SERVICES WHILE JILL JUNE
WAS INCAPACITATED (INJURED).
FORM 990, PART VI, SECTION A, LINE 4:
EXPLANATION: THE ORGANIZATION'S ARTICLES OF INCORPORATION WERE AMENDED TO
REFLECT A NAME CHANGE TO PLANNED PARENTHOOD VOTERS OF NEBRASKA.
FORM 990, PART VI, SECTION B, LINE 11:
EXPLANATION: THE FORM 990 WAS REVIEWED BY MANAGEMENT AND A COPY WAS SENT TO
EACH BOARD MEMBER PRIOR TO FILING WITH THE IRS.
FORM 990, PART VI, SECTION C, LINE 19:
EXPLANATION: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST
POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON WRITTEN REQUEST.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Part

▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

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parate	
See se	

Open to Public Inspection OMB No 1545-0047 2013

Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number 47-0762497

PARENTHOOD VOTERS OF NEBRASKA PLANNED Name of the organization

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Direct controlling entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. ε End-of-year assets **e** Total income ਉ Legal domicile (state or foreign country) Primary activity 9 Name, address, and EIN (if applicable) of disregarded entity Part II

(g) Section 512(b)(13) Š × × × × controlled entity? Yes PARENTHOOD OF THE ARENTHOOD VOTERS Direct controlling INC. entity HEARTLAND, PLANNED OF IOWA LANNED **4/** status (if section Public chanty 501(c)(3)) INE 11C, INE 7 III-FI Exempt Code section 501(C)(3) 501(C)(4) 501(C)(3) ਉ 527 Legal domicile (state or foreign country) COWA IOWA IOWA IOWA SUPPORT PLANNED PARENTHOOD PATIENT CLINICAL SERVICES SUPPORT OF PRIVACY RIGHTS AND REPRODUCTIVE HEALTH EDUCATE SUPPORTERS ON Pnmary activity ENGAGE IN POLITICAL EGISLATIVE ISSUES OF THE HEARTLAND <u>e</u> AND EDUCATION 42-0727488, 1171 7TH STREET, DES MOINES, IA I 42-1357011, 1171 7TH STREET, DES MOINES, IA INC. FOUNDATION - 42-1240096, 1171 7TH STREET, PLANNED PARENTHOOD VOTERS OF IOWA PAC - 42-1471296, 1171 7TH STREET, DES MOINES, PLANNED PARENTHOOD OF THE HEARTLAND, PLANNED PARENTHOOD OF THE HEARTLAND PLANNED PARENTHOOD VOTERS OF IOWA Name, address, and EIN of related organization DES MOINES, IA 50314

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SEE PART VII FOR CONTINUATIONS

332181 09-12-13 LHA

Schedule R (Form 990) 2013

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. 47-0762497 Part III

(a)	(q)	(0)	9		(e)	£	(6)	-	3	=	5	(4)
Name, address, and EIN of related organization	Pnmary activity	Legal domicile (state or foreign country)	Direct controlling entity		Predominant income (related, excluded from tax under sections 512-514)	Share of total income	en de		onate S	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner? 5) Yes No	م م
				,								
Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	ganizations Taxable a rporation or trust durin	is a Corpc g the tax y	wation or Trust Co /ear.	mplete if the	e organization	answered "Y	'es" on Form	1 990, Part	IV, line 34	because it had	one or m	ore related
(a) Name, address, and EIN of related organization	<u>Z</u> c	(b Primary) activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity		(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income		(g) Share of Pend-of-year cassets	(h) Percentage ownership	Section 512(bX13) controlled entity?
									_			
332162 06-12-13				26						Schedu	le R (For	Schedule R (Form 990) 2013

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Į	Yos	S No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more r	elated organizatlons listed in Pa	irts II-IV?		4	
a Receipt of (I) Interest (II) annuities (III) royalties or (Iv) rent from a controlled entity			•	Ta	_	×
b Gift, grant, or capital contribution to related organization(s)		:		16	_	×
c Gift. grant. or capital contribution from related organization(s)				+	×	
] -	-	×
	:			<u>}</u> :	+	>
 Loans or loan guarantees by related organization(s) 		: : : : : : : : : : : : : : : : : : : :		<u>위</u> :	\downarrow	4
						:
f Dividends from related organization(s)	:	: : : : : : : : : : : : : : : : : : : :	:	=	_	×
g Sale of assets to related organization(s)				19		×
Purchase of assets from related organization(s)				f	_	×
				-	L	×
	•	:	:	- -	+	×
ן במספר טו ומכוווונפט, פעטוטווופוון, טו טווופו מסספרט וט ופומופט טושמוווגמווטוןט/	: : : : : : : : : : : : : : : : : : : :			<u>-1</u> :	\downarrow	<u>{</u>
k ease of facilities equipment or other assets from related organization(s)				<u>+</u>		×
				: :	1	 -
reformation of services or membership or fundralship solicitations for related organization(s)	anization(s)				4	4
 Performance of services or membership or fundraising solicitations by related organization(s) 	anization(s)	: : : : :		튀	4	4
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)	:		4	× -	
o Shanng of paid employees with related organization(s)				٩	×	
	:			L	ļ_	
p Reimbursement paid to related organization(s) for expenses						×
Reimbursement paid by related organization(s) for expenses	•			Ş	×	
		:		<u>}</u> :	1	
r Other transfer of cash or property to related organization(s)				÷		×
s Other transfer of cash or property from related organization(s)	:			15	ļ	×
ģ	who must complete the	nis line, including covered relati	information on who must complete this line, including covered relationships and transaction thresholds.			
(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount involved	t involved	_	
	type (a-s)				İ	
(1)						
(5)						
(6)						
(4)						
(5)						
(9)						
332163 06-12-13	2.7		Schedu	Schedule R (Form 990) 2013	66 E	0) 2013

Page 4

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(k) Percentage Dwnership				
General or F managing partner?				
Uspropor- Dispropor- D				
(h) Dispropor- tionate a allocations?		 		
(g) Share of end-of-year assets				
(f) Share of total income				
(e) Are all partners sec. 501(c)(3) orgs?		 		
Predominant income (related, unrelated, excluded from tax under section 512-514) y				
(c) Legal domicle (state or foreign country)				
(b) Primary activity				
(a) Name, address, and EIN of entity				

Schedule R (Form 990) 2013

Schedule R (Form 990) 2013	PLANNEI	PARENTI	HOOD VOTERS	OF	NEBRASKA	47-0762497	Page 5
Part VII Supplemental Info							_
Provide additional inform	ation for respon	ses to question	s on Schedule R (see	instruc	ctions).		
DADE II IDDAMINIO	mrou on	200	M11 H11 H1		*******		
PART II, IDENTIFICA	TION OF	RELATED	TAX-EXEMPT	ORG	ANIZATIO	NS:	
NAME OF RELATED ORG	ANTZATTO)N:					
							
PLANNED PARENTHOOD	ENDOWMEN	TRUST					
			······································				
DIRECT CONTROLLING	ENTITY:	PLANNED	PARENTHOOD	OF	ARKANSAS	AND EASTERN	
					•		
OKLAHOMA, INC.	<u> </u>						
						· · · · ·	
							
							
							
-		·					
							
							
		·				 	
							
							

PLANNED PARENTHOOD VOTERS OF NEBRASKA

Schedule R (Form 990) PLANNED PARENTHOOD	VOTERS OF	NEBRASKA			47-0762497	97	
Part II Continuation of Identification of Related Tax-Exempt Organizations	Exempt Organizations						
(a)	(q)	(0)	(p)	(0)	(J)	(a)	و ا
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Exempt Code	Public chanty	Direct controlling	Section 512(b)(1 controlled	12(b)(13) illed
		ioreign country)		501(c)(3))		Yes	2
PLANNED PARENTHOOD VOTERS OF NEBRASKA PAC -	ENGAGE IN POLITICAL				PLANNED		
45-4138524, PO BOX 4557, DES MOINES, IA	SUPPORT OF PRIVACY RIGHTS				PARENTHOOD VOTERS		
50314	AND REPRODUCTIVE HEALTH	NEBRASKA	527		OF NEBRASKA	×	
HOOD OF ARKANS					PLANNED		
'	PATIENT CLINICAL SERVICES						
DES MOINES, IA 50314	AND EDUCATION	ОКГАНОМА	501(C)(3)	LINE 7	HEARTLAND, INC.		×
PLANNED PARENTHOOD VOTERS OF ARKANSAS -							
46-1203976, PO BOX 4557, DES MOINES, IA	EDUCATE SUPPORTERS ON						
50314	LEGISLATIVE ISSUES	ARKANSAS	501(C)(4)		N/A		×
PLANNED PARENTHOOD ENDOWMENT TRUST -	SUPPORT PLANNED PARENTHOOD				PLANNED		
73-6272238, PO BOX 1620, TULSA, OK	OF ARKANSAS AND EASTERN				PARENTHOOD OF		
74101-1620	ркганома	ркганома	501(C)(3)	LINE 11A, I	ARKANSAS AND		×
						-	
	- 1						

332222 05-01-13

PLANNED PARENTHOOD VOTERS OF NEBRASKA

RESOLUTION TO APPROVE

RESTATED ARTICLES OF INCORPORATION

RESOLVED, that the Planned Parenthood Voters of Nebraska, Inc. ("PPVN") Board of Directors approves the Restated Articles of Incorporation presented to the PPVN Board of Directors at this meeting (the "Restated Articles").

RESOLVED FURTHER, that the PPVN Board of Directors approves all of the amendments to the corporation's articles of incorporation contained in the Restated Articles.

RESOLVED FURTHER, that PPVN's Board Officers and its President/CEO be, and each of them is authorized, empowered, and directed, on behalf of PPVN and in its name:

to execute and deliver the Restated Articles of Incorporation along with all other certificates, agreements and other documents required to file the Restate Articles with the Nebraska Secretary of State,

to take, or cause to be taken, any and all other actions; and

to pay, or cause to be paid, all such fees and expenses;

that each such PPVN officer may approve in order to effectuate the purpose and intent of the foregoing resolution and to file the Restated Articles of Incorporation with the Nebraska Secretary of State, with the execution of any such certificate, agreement or document or the taking of any such other action or the payment of any such fees and expenses conclusively evidencing such approval.

RESTATED ARTICLES OF INCORPORATION OF PLANNED PARENTHOOD VOTERS OF NEBRASKA

TO THE SECRETARY OF STATE OF THE STATE OF NEBRASKA:

Pursuant to the provisions of the Nebraska Nonprofit Corporation Act, Planned Parenthood Voters of Nebraska (the "Corporation") adopts the following Restated Articles of Incorporation:

ARTICLE I - NAME

The name of the Corporation is **Planned Parenthood Voters of Nebraska**. It is organized as a public benefit corporation under the Nebraska Nonprofit Corporation Act.

ARTICLE II - CORPORATE EXISTENCE

The Corporation shall have perpetual existence unless dissolved as provided by law.

ARTICLE III - MEMBERS

The Corporation shall have two (2) classes of members: Regular Members and Special Members. Classification and eligibility for membership shall be set forth in the Corporation's bylaws.

Consistent with Section 21-1960 of the Nebraska Nonprofit Corporation Act, the rights of the Regular Members and Special Members to vote may be limited, enlarged or denied to the extent specified in the Corporation's bylaws, and the bylaws may provide that neither the Regular Members nor the Special Members shall have any voting rights.

ARTICLE IV - BOARD OF DIRECTORS

The business and affairs of the Corporation shall be conducted by a Board of Directors. The composition of the Board of Directors shall be governed by the Corporation's bylaws.

ARTICLE V - PURPOSES AND POWERS

- A. General Purposes. The Corporation is organized exclusively for the promotion of social welfare within the meaning of Section 501(c)(4) of the Internal Revenue Code of 1986, as amended from time to time (the "Code").
- B. Primary Purpose. The primary purposes of the Corporation shall be to encourage and protect informed individual choice regarding reproductive healthcare and to advocate public policies which guarantee the right, as well as full and non-discriminatory access, to such care, and to foster and preserve a social and political climate favorable to the exercise of reproductive choice, as well as such other social welfare purposes as may be

- undertaken by the Board of Directors as long as such purposes are within the meaning of Section 501(c)(4) of the Code.
- C. Powers. As a means of accomplishing the foregoing purposes, and except as otherwise provided herein or in the Bylaws of the Corporation, the Corporation shall have all of the general powers set forth in the Nebraska Nonprofit Corporation Act, as amended from time to time. These general powers shall be exercised exclusively for the attainment of the charitable, educational and scientific purposes of the Corporation as set forth in this Article.

ARTICLE VI – LIMITATIONS ON POWERS

- A. No Private Benefit. No part of the net earnings of the Corporation shall inure to the benefit of, or be distributable to, any director or officer of the Corporation or any private individual (except that reasonable compensation may be paid for services rendered to or for the Corporation affecting one or more of its purposes). No director or officer of the Corporation, or any private individual, shall be entitled to share in the distribution of any of the corporate assets on dissolution of the Corporation.
- B. Impermissible Activities. Notwithstanding any other provisions of these Articles, the Corporation shall not conduct or carry on activities not permitted to be conducted or carried on by any organization exempt under Section 501(c)(4) of the Code.

ARTICLE VII - DISSOLUTION PROVISIONS

- Board of Directors. Upon the dissolution of the Corporation, the Board of Directors A. shall, after paying or making provisions for the payment of all of the liabilities of the Corporation, distribute all of the remaining assets of the Corporation exclusively for the purposes of the Corporation set forth in Article V hereof to Planned Parenthood of the Heartland, Inc., an Iowa nonprofit corporation, to the extent Planned Parenthood of the Heartland, Inc. accepts such assets and provided that, at the time of such distribution. Planned Parenthood of the Heartland, Inc. is a qualified organization as hereinafter defined. To the extent that Planned Parenthood of the Heartland, Inc. does not accept such assets or is not a qualified organization as hereinafter defined, the remaining assets of the Corporation shall be distributed exclusively for the purposes of the Corporation set forth in Article V to one or more qualified organizations as the Board of Directors shall For the purposes of this provision, a "qualified organization" is an organization organized and operated exclusively for charitable, educational or scientific purposes or for the promotion of social welfare and which is, at the time of such distribution, exempted from Federal income taxation as an organization described in Section 501(c)(3) or Section 501(c)(4) of the Code, and which agrees to apply and devote such distributed assets for the purposes of the Corporation set forth in Article V hereof.
- B. By Court Order. Any assets of the Corporation not disposed of or distributed by the Board of Directors shall be disposed of pursuant to an order of the District Court of the County in which the principal office of the Corporation is then located, exclusively for the charitable, educational or scientific purposes of the Corporation set forth in Article V

hereof or distributed to one or more nonprofit organizations organized and operated exclusively for charitable or educational purposes or for the promotion of social welfare and which are, at the time of such distribution, exempted from Federal income taxation as an organization described in Section 501(c)(3) or Section 501(c)(4) of the Code.

ARTICLE VIII - REGISTERED AGENT AND REGISTERED OFFICE

The current registered agent and registered office of the Corporation in the State of Nebraska is:

Jill June 4610 133rd Street Omaha, NE 68137

ARTICLE IX – INDEMNIFICATION

- A. Indemnification. The Corporation shall indemnify the Corporation's directors, officers, employees and agents in a manner consistent with Sections 21-1996 to 21-19,104 of the Nebraska Nonprofit Corporation Act, and the Corporation shall exercise all of its permissive indemnification powers under the Nebraska Nonprofit Corporation Act to indemnify and advance expenses to its directors, officers, employees and agents to the fullest extent permitted by law.
- B. Expansion of Law. If the Nebraska Nonprofit Corporation Act is hereafter amended to authorize broader indemnification, then the indemnification obligations of the Corporation shall be deemed to be automatically amended without any further action to require the Corporation to indemnify and advance expenses of its directors and officers to the fullest extent then permitted by law.
- C. No Retroactive Repeal. Any repeal or modification of this Article shall be prospective only and shall not adversely affect any indemnification obligations of the Corporation with respect to any state of facts existing at or prior to the time of such repeal or modification.

ARTICLE X - AMENDMENTS

These Articles of Incorporation may be amended at any time and from time to time by the Board of Directors as provided by the Nebraska Nonprofit Corporation Act provided, however that no amendment shall be adopted which disqualifies the corporation of exemption from federal income taxation as an organization described in Section 501(c)(4) of the Code.

Dated as of this the part of t

PLANNED PARENTHOOD VOTERS

 $MM \wedge$

Board Chairperson

CERTIFICATION REGARDING RESTATED ARTICLES OF INCORPORATION

Pursuant to Section 21-19,110 of the Nebraska Nonprofit Corporation Act, the undersigned Corporation hereby certifies that:

a.	The foregoing Restated Articles of Incorporation consolidate all amendments into a single document:
b .	The Corporation's Board of Directors adopted the foregoing Restated Articles of Incorporation, and all of the amendments contained therein, by a sufficient vote and in the manner required by law on, 2010;
c.	Approval of the Restated Articles of Incorporation by members was not required; and
d.	The Restated Articles of Incorporation do not contain any provisions requiring any approval by a person whose approval is required pursuant to Section 21-19,116 of the Nebraska Nonprofit Corporation Act.
Dated as of _	toril t , 2010.
	PLANNED PARENTHOOD VOTERS

y: JUM (Chairman

BELIN\P0605\0004\art restated pp voters of Nebraska (00547069).DOC

STATE OF NEBRASKA

United States of America,	} ss.
State of Nebraska	}

Secretary of State State Capitol Lincoln, Nebraska

I, John A. Gale, Secretary of State of the State of Nebraska, do hereby certify that

PLANNED PARENTHOOD VOTERS OF NEBRASKA,

was duly incorporated as a Nonprofit Corporation under the laws of this state on September 26, 1989 and do further certify that no fees, taxes and penalties are unpaid and no fees, taxes and penalties are delinquent; Articles of Dissolution have not been filed and said Corporation is in existence as of the date of this certificate.

This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

In Testimony Whereof,



I have hereunto set my hand and affixed the Great Seal of the State of Nebraska on this date of May 11, 2015

Secretary of State