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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public
▶ Information about Form 990 and its instructions is at www IRS gov/form990

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 07-01-2015 , and ending 06-30-2016

B Check if applicable
- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

C Name of organization
PLANNED PARENTHOOD ACTION FUND INC

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
123 WILLIAM STREET NO 10 FL

City or town, state or province, country, and ZIP or foreign postal code
NEW YORK, NY 10038

D Employer identification number
13-3539048

E Telephone number
(212) 541-7800

G Gross receipts $ 22,495,666

F Name and address of principal officer
CECILE RICHARDS
123 WILLIAM STREET NO 10 FL
NEW YORK, NY 10038

H(a) Is this a group return for subordinates? Yes ☑ No

H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☐ 501(c)(3) ☑ 501(c) (4) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website: ▶** WWW PLANNEDPARENTHOODACTION ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1989

M State of legal domicile NY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
TO PROTECT WOMEN'S HEALTH AND REPRODUCTIVE CHOICE THROUGH ADVOCACY

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	15
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	15
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	975
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	28,057,119	22,454,650
	9	Program service revenue (Part VIII, line 2g)	18,557	0
	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)	82,801	41,016
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	28,158,477	22,495,666
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	7,233,363	4,122,852
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	6,470,918	5,945,864
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	1,683,733	1,689,537
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶4,225,717		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	8,749,598	13,085,990
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	24,137,612	24,844,243
	19	Revenue less expenses Subtract line 18 from line 12	4,020,865	-2,348,577

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	10,220,967	8,824,052
	21	Total liabilities (Part X, line 26)	2,998,604	3,950,266
	22	Net assets or fund balances Subtract line 21 from line 20	7,222,363	4,873,786

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer — Date 2017-02-13

WALLACE D'SOUZA CHIEF FINANCIAL OFFICER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
MARGARET A BRADSHAW	MARGARET A BRADSHAW			P00501222

Firm's name ▶ KPMG LLP — Firm's EIN ▶ 13-5565207

Firm's address ▶ 345 PARK AVENUE NEW YORK, NY 101540102 — Phone no (212) 758-9700

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

THE PLANNED PARENTHOOD ACTION FUND WAS ESTABLISHED BY THE PLANNED PARENTHOOD FEDERATION OF AMERICA, INC , TO PROTECT INFORMED INDIVIDUAL CHOICES REGARDING REPRODUCTIVE HEALTH CARE, TO ADVOCATE FOR PUBLIC POLICIES THAT GUARANTEE THE RIGHT TO CHOICE, AS WELL AS FULL AND NON-DISCRIMINATORY ACCESS TO REPRODUCTIVE HEALTH CARE, AND TO FOSTER AND PRESERVE A SOCIAL AND POLITICAL CLIMATE FAVORABLE TO THE EXERCISE OF REPRODUCTIVE CHOICE

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

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations 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 $ 8,217,455 including grants of $ 1,518,887) (Revenue $)

BUILD ADVOCACY CAPACITY - BUILD THE ORGANIZATIONAL CAPACITY AND EXPERTISE NECESSARY TO BE EFFECTIVE IN PROTECTING AND EXPANDING ACCESS TO THE FULL RANGE OF REPRODUCTIVE HEALTH SERVICES

4b (Code) (Expenses $ 6,883,343 including grants of $ 2,090,864) (Revenue $)

INCREASE ACCESS - IMPROVE ACCESS TO REPRODUCTIVE HEALTH SERVICES AND INFORMATION BY LEVERAGING TECHNOLOGY, ENHANCING EXISTING CAPACITY, AND SECURING THE ROLE OF WOMEN'S HEALTH CENTERS IN THE EVOLVING HEALTHCARE SYSTEM

4c (Code) (Expenses $ 3,391,111 including grants of $ 505,089) (Revenue $)

ENGAGE COMMUNITIES - ENGAGE BROAD AND DIVERSE COMMUNITIES TO REDUCE HEALTH DISPARITIES AND IMPROVE SEXUAL HEALTH FOR THE NEXT GENERATION

See Additional Data

4d Other program services (Describe in Schedule O)

(Expenses $ 134,338 including grants of $ 8,012) (Revenue $)

4e **Total program service expenses ▶** 18,626,247

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1		No
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3	Yes	
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	Yes	
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
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?*If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a		No
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		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		No
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
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 foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		No
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		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17	Yes	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		No
27	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 of any of these persons? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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*	35b	Yes	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	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	38	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response or note to any line in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	54			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
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? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b		
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" 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		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	Yes	
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		
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.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
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	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Part VI **Governance, Management, and Disclosure**
For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI . . . ☑

Section A. Governing Body and Management

					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	15			
	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	15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?			3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		No
6	Did the organization have members or stockholders?			6	Yes	
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	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following					
a	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*			9		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ AL , AK , CA , CO , CT , FL , GA , HI , IL , KS , KY , LA , ME , MD , MA , MN , MS , MO , NH , NJ , NY , NC , ND , OH , OK , OR , PA , RI , SC , TN , UT , VA , WA , WV , WI , DC , AR

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records
▶ELZBIETA SZAFRAN-BODZIONY C/O PPAF 123 WILLIAM STREET 10TH FL NEW YORK, NY 10038 (212) 541-7800

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 . . . . ☐

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

		(D)	(E)	(F)
1b	**Sub-Total** . . . ▶			
c	**Total from continuation sheets to Part VII, Section A** . . . ▶			
d	**Total (add lines 1b and 1c)** . . . ▶	617,078	2,736,407	514,973

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 5

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
O'BRIEN GARRETT 1133 19TH ST NW SUITE 300 WASHINGTON, DC 20036	CONSULTING	1,603,360
GRASSROOTS CAMPAIGNS INC 1321 15TH ST SUITE 100 DENVER, CO 80202	CANVASSING	761,855
DONOR SERVICE GROUP LLC 6715 SUNSET BLVD LOS ANGELES, CA 90028	TELEMARKETING	435,090
HART RESEARCH ASSOCIATES 1724 CONNECTICUT AVE NW WASHINGTON, DC 20009	CONSULTING	294,886
M2 HEALTH CARE CONSULTING LLC 1881 N NASH ST STE 909 ARLINGTON, VA 22209	CONSULTING	251,889

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 17

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . ☐

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . .	1a					
	b	Membership dues	1b	952,790				
	c	Fundraising events	1c					
	d	Related organizations . . .	1d	3,000,000				
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	18,501,860				
	g	Noncash contributions included in lines 1a-1f $						
	h	**Total.** Add lines 1a-1f . . . . ▶			22,454,650			
Program Service Revenue				Business Code				
	2a							
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	**Total.** Add lines 2a–2f . . . . ▶						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶						
	4	Income from investment of tax-exempt bond proceeds . . ▶						
	5	Royalties . . . . ▶			21,006			21,006
			(i) Real	(ii) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss) . . . . ▶						
			(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory						
	b	Less cost or other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss) . . . . ▶						
	8a	Gross income from fundraising events (not including $ ____ of contributions reported on line 1c) See Part IV, line 18 . .	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from fundraising events . . ▶						
	9a	Gross income from gaming activities See Part IV, line 19 . . .	a					
	b	Less direct expenses . . .	b					
	c	Net income or (loss) from gaming activities . . . ▶						
	10a	Gross sales of inventory, less returns and allowances .	a					
	b	Less cost of goods sold . .	b					
	c	Net income or (loss) from sales of inventory . . ▶						
		Miscellaneous Revenue		Business Code				
	11a	OVERHEAD FEE FROM COG		561000	17,160	17,160		
	b	MISCELLANEOUS INCOME		900099	2,850	2,850		
	c							
	d	All other revenue						
	e	**Total.** Add lines 11a–11d . . . . . . ▶			20,010			
	12	**Total revenue.** See Instructions . . . . . . ▶			22,495,666	20,010	0	21,006

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☑

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	4,122,852	4,122,852		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	455,650	333,592	68,333	53,725
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,341,635	3,375,641	517,327	448,667
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	16,963	12,202	2,723	2,038
9 Other employee benefits	825,016	626,646	105,515	92,855
10 Payroll taxes	306,600	234,620	38,713	33,267
11 Fees for services (non-employees)				
a Management				
b Legal	77,032		77,032	
c Accounting	30,960		30,960	
d Lobbying	68,731	68,731		
e Professional fundraising services See Part IV, line 17	1,689,537			1,689,537
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,318,311	3,538,888	532,099	247,324
12 Advertising and promotion	717,337	717,337		
13 Office expenses	1,026,371	655,404	294,697	76,270
14 Information technology	92,049	27,709	44,097	20,243
15 Royalties . .				
16 Occupancy	400,193	309,673	48,685	41,835
17 Travel	1,896,493	1,855,047	14,617	26,829
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	80,709	80,709		
19 Conferences, conventions, and meetings	1,020,866	964,860	3,100	52,906
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	199,762	154,577	24,302	20,883
23 Insurance	90,694	70,180	11,033	9,481
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 O)				
a OTHER FUNDRAISING EXPEN	2,388,689	996,832		1,391,857
b MEMBERSHIP DUES	258,971	133,803	125,168	
c PRINTING & ARTWORK	249,118	239,310	3,347	6,461
d REIMBURSED EXPENSES	60,330	51,003	8,539	788
e All other expenses	109,374	56,631	41,992	10,751
25 **Total functional expenses.** Add lines 1 through 24e	24,844,243	18,626,247	1,992,279	4,225,717
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☑ if following SOP 98-2 (ASC 958-720)	3,974,352	1,658,550	0	2,315,802

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . . . . ☐

Section	Line	Description		(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		8,563,387	1	6,153,995
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		496,936	3	1,224,648
	4	Accounts receivable, net			4	60,272
	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 section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		95,308	9	491,255
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a			
	b	Less accumulated depreciation	10b		10c	
	11	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		1,065,336	15	893,882
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		10,220,967	16	8,824,052
Liabilities	17	Accounts payable and accrued expenses		1,117,869	17	1,644,219
	18	Grants payable		363,613	18	638,213
	19	Deferred revenue		1,517,122	19	1,667,834
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		2,998,604	26	3,950,266
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		-385,440	27	166,710
	28	Temporarily restricted net assets		7,607,803	28	4,707,076
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		7,222,363	33	4,873,786
	34	Total liabilities and net assets/fund balances		10,220,967	34	8,824,052

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	22,495,666
2	Total expenses (must equal Part IX, column (A), line 25)	2	24,844,243
3	Revenue less expenses Subtract line 2 from line 1	3	-2,348,577
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,222,363
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	4,873,786

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ____________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:
Software Version:
EIN: 13-3539048
Name: PLANNED PARENTHOOD ACTION FUND INC

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

(Code) (Expenses $ 116,549 including grants of $ 6,256) (Revenue $) RENEW LEADERSHIP - RECRUIT AND DEVELOP YOUNG, DIVERSE LEADERS DEDICATED TO PROVIDING SEXUAL HEALTHCARE AND EDUCATION
(Code) (Expenses $ 17,789 including grants of $ 1,756) (Revenue $) REFRESH OUR BRAND - RAISE VISIBILITY SO THAT DIVERSE COMMUNITIES AND INDIVIDUALS ARE AWARE OF AND UNDERSTAND THE FULL RANGE OF HEALTH SERVICES OFFERED

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
LAURA TUCKER CHAIR	1 00	X		X				0	0	0
MICHAEL VACHON VICE CHAIR THRU 6/10/16	1 00	X		X				0	0	0
URVASHI VAID VICE CHAIR STARTING 6/10/16	1 00	X		X				0	0	0
KIKI MCLEAN SECRETARY	1 00	X		X				0	0	0
JULIANNA SMOOT TREASURER	1 00	X		X				0	0	0
NAOMI ABERLY DIRECTOR THRU 6/10/16	1 00	X						0	0	0
UMI SELAH FKA PHILLIP AGNEW DIRECTOR	1 00	X						0	0	0
JENNIE ROSENTHAL BERLIANT DIRECTOR STARTING 6/10/16	1 00	X						0	0	0
LORI CARPENTIER DIRECTOR	1 00	X						0	0	0
STACY CROSS DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
GOV JIM DOYLE DIRECTOR	1 00	X						0	0	0
JOANNE EGERMAN DIRECTOR THRU 6/10/16	1 00	X						0	0	0
ALEXIS MCGILL JOHNSON DIRECTOR	1 00	X						0	0	0
KIM MOLSTRE DIRECTOR	1 00	X						0	0	0
DONYA NASSER DIRECTOR	1 00	X						0	0	0
ELAINE TAYLOR ROSE DIRECTOR THRU 6/10/16	1 00	X						0	0	0
TIMOTHY STANLEY DIRECTOR STARTING 6/10/16	1 00	X						0	0	0
GABRIEL STRICKER DIRECTOR STARTING 6/10/16	1 00	X						0	0	0
LUZ TOWNS-MIRANDA DIRECTOR STARTING 6/10/16	1 00	X						0	0	0
NINA TURNER DIRECTOR THRU 5/3/16	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
CECILE RICHARDS PRESIDENT	2 00 33 00			X				36,438	570,867	119,897
WALLACE D'SOUZA CHIEF FINANCIAL OFFICER	3 00 32 00			X				22,049	253,561	48,770
DAWN LAGUENS CHIEF EXPERIENCE OFFICER	11 00 24 00				X			158,091	351,882	125,153
JETHRO MILLER CHIEF DEVELOPMENT OFFICER	1 00 34 00				X			15,676	376,206	9,806
DEBRA ALLIGOOD WHITE SR VP & GENERAL COUNSEL	3 00 32 00				X			33,848	304,632	38,318
ANN MCGUINESS SR PRINCIPAL GIFTS OFFICER	20 00 15 00					X		139,764	101,209	44,774
DANA SINGISER VP OF GOVERNMENT AFFAIRS	12 00 23 00					X		83,040	161,196	28,392
JENNIE THOMPSON MANAGING DIRECTOR OF DEVEL	2 00 33 00					X		13,736	260,982	25,985
REBECCA EPSTEIN VP OPERATIONS & STRATEGIC INITIATIVES	9 00 26 00					X		59,227	160,134	52,577
ERIC FERRERO VP OF COMMUNICATIONS	8 00 27 00					X		55,209	195,738	21,301

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

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

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

Name of the organization	**Employer identification number**
PLANNED PARENTHOOD ACTION FUND INC	13-3539048

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

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures ▶	$ 4,864,097
3	Volunteer hours	2,500

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

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

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

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶	$ 2,559,370
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶	$ 1,825,582
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶	$ 4,384,952
4	Did the filing organization file **Form 1120-POL** for this year?	☑ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) DEMOCRATIC GOVERNORS ASSOCIATION	1401 K STREET NW WASHINGTON,DC 20005	52-1304889	50,000	0
(2) EMILY'S LIST	180 M ST NW STE 375N WASHINGTON,DC 20036	52-1391360	10,000	0
(3) PLANNED PARENTHOOD ILLINOIS ACTION PAC	18 SOUTH MICHIGAN AVE 6TH FLOOR CHICAGO,IL 60603	90-0040382	16,010	0
(4) PLANNED PARENTHOOD VIRGINIA POLITICAL ACTION COMMITTEE	PO BOX 7271 RICHMOND,VA 23221	20-8710245	500,000	0
5				
6				

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

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

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a) Filing organization's totals**	**(b) Affiliated group totals**
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount Enter the amount from the following table in both columns		

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a If zero or less, enter -0-		
i Subtract line 1f from line 1c If zero or less, enter -0-		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

☐ **Yes** ☐ **No**

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2012	**(b)** 2013	**(c)** 2014	**(d)** 2015	**(e)** Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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 on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
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), section 501(c)(5), or section 501(c)(6).

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

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
PART I-A, LINE 1	PLANNED PARENTHOOD ACTION FUND COMMUNICATED WITH ITS MEMBERS AND THE GENERAL PUBLIC ABOUT FEDERAL AND STATE ELECTIONS ITS SPECIFIC ACTIVITIES INCLUDED USE OF THE MAIL, INTERNET, RADIO, TELEVISION ADVERTISING, AND PHONE BANKING TO EDUCATE ITS MEMBERS AND THE PUBLIC ABOUT THE POSITIONS OF CANDIDATES ON ISSUES PERTINENT TO WOMEN'S HEALTH AND TO URGE THEM TO VOTE FOR CANDIDATES LIKELY TO ADVANCE THE ORGANIZATION'S MISSION PLANNED PARENTHOOD ACTION FUND SUPPORTED OTHER ORGANIZATIONS UNDERTAKING SIMILAR EFFORTS, INCLUDING FUNDRAISING AND ADMINISTRATIVE EXPENSES OF RELATED 527 ORGANIZATIONS (PLANNED PARENTHOOD ACTION FUND INC PAC AND PLANNED PARENTHOOD VOTES)

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047
2015
Open to Public Inspection

Name of the organization	Employer identification number
PLANNED PARENTHOOD ACTION FUND INC	13-3539048

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b)Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

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

☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶______________

4 Number of states where property subject to conservation easement is located ▶______________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶______________

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ $ ______________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ ______________

(ii) Assets included in Form 990, Part X ▶ $ ______________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ______________

b Assets included in Form 990, Part X ▶ $ ______________

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

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

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

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

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

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

			Amount
c	Beginning balance	**1c**	
d	Additions during the year	**1d**	
e	Distributions during the year	**1e**	
f	Ending balance	**1f**	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

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

		(a) Current year	**(b)** Prior year	**b (c)** Two years back	**(d)** Three years back	**(e)** Four years back
1a	Beginning of year balance					
b	Contributions					
c	Net investment earnings, gains, and losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

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

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

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

Part VI **Land, Buildings, and Equipment.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	**(a)** Cost or other basis (investment)	**(b)** Cost or other basis (other)	**(c)** Accumulated depreciation	**(d)** Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . . . ▶				0

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) DUE FROM PLANNED PARENTHOOD FEDERATION OF AMERICA, INC	773,913
(2) DUE FROM PLANNED PARENTHOOD VOTES	119,969
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* . . . . ▶	893,882

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
Federal income taxes	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue Add lines **3** and **4c.**(This must equal Form 990, Part I, line 12)			5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	

Part XIII Supplemental Information

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

Return Reference	Explanation
PART X, LINE 2	THE FIN 48 FOOTNOTE PER THE AUDITED FINANCIAL STATEMENTS STATES THAT THE ACTION FUND RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a

▶Attach to Form 990 or Form 990-EZ

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
PLANNED PARENTHOOD ACTION FUND INC

Employer identification number
13-3539048

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

- **a** ☑ Mail solicitations
- **b** ☑ Internet and email solicitations
- **c** ☑ Phone solicitations
- **d** ☑ In-person solicitations
- **e** ☑ Solicitation of non-government grants
- **f** ☐ Solicitation of government grants
- **g** ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑Yes ☐No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
1 O'BRIEN GARRETT 1133 19TH STREET NW SUITE 300 WASHINGTON, DC 20036	CONSULTING		No	8,667,666	123,636	8,544,030
2 MR STRATEGIC SERVICES INC 1901 L STREET NW STE 800 WASHINGTON, DC 20036	CONSULTING		No	1,623,131	115,845	1,507,286
3 GRASSROOTS CAMPAIGNS INC 1321 15TH ST SUITE 100 DENVER, CO 80202	CANVASSING		No	440,018	938,137	-498,119
4 DONOR SERVICES GROUP 6715 SUNSET BLVD LOS ANGELES, CA 90028	TELEMARKETING		No	273,930	292,474	-18,544
5 INTEGRAL RESOURCES INC 1972 MASSACHUSETTS AVE CAMBRIDGE, MA 02140	TELEMARKETING		No	67,204	79,735	-12,531
6 PUBLIC INTEREST COMMUNICATIONS 7700 LEESBURG PIKE SUITE 301N FALLS CHURCH, VA 22043	TELEMARKETING		No	51,447	4,790	46,657
7 TELEFUND INC PO BOX 2366 DENVER, CO 80201	TELEMARKETING		No	21,202	134,920	-113,718
8						
9						
10						
Total ▶				11,144,598	1,689,537	9,455,061

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY, DC

Part II **Fundraising Events.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts				
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities ____________

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

b If "No," explain ____________

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

b If "Yes," explain ____________

11 Does the organization conduct gaming activities with nonmembers? ☐ **Yes** ☐ **No**

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ **Yes** ☐ **No**

13 Indicate the percentage of gaming activity conducted in

a	The organization's facility	**13a**	%
b	An outside facility	**13b**	%

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

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ **Yes** ☐ **No**

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

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

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

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
SCHEDULE G, PART I, LINE 2B, COLUMN (V)	ACTIVITIES PROVIDED BY SELECT FUNDRAISERS RESULTED IN A CURRENT YEAR LOSS BUT SECURED FUTURE DONORS
PART 1, LINE 2B, COLUMN (V) & FORM 990, PART IX, LINE 24A	IN ADDITION TO PROFESSIONAL FUNDRAISER EXPENSES INCLUDED IN LINE 11E, $2,388,690 OF OTHER REIMBURSED EXPENSES WERE PAID DIRECTLY TO PROFESSIONAL FUNDRAISERS FOR POSTAGE ($1,033,709), PRINTING ($641,518), MAILHOUSE COSTS ($324,700), LIST USAGE ($290,661), PHOTOCOPYING ($80,713) AND MISCELLANEOUS EXPENSES ($17,389) THE PROFESSIONAL FUNDRAISER CONTRACTS AND THE INVOICES PAID DISTINGUISH BETWEEN PAYMENT FOR SERVICES AND PAYMENT OF THESE EXPENSES

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
PLANNED PARENTHOOD ACTION FUND INC

Employer identification number
13-3539048

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000 Part II can be duplicated if additional space is needed

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

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 41

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 45

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

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

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	**Explanation**
PART I, LINE 2	THE ORGANIZATION'S MANAGEMENT MONITORS ON A CONTINUING BASIS THE USAGE OF GRANTS TO ENSURE SUCH GRANTS ARE USED FOR INTENDED PURPOSES GRANTEES ARE REQUIRED TO SUBMIT A NARRATIVE AND FINANCIAL REPORT EXPLAINING HOW THE GRANT FUNDS WERE EXPENDED

Additional Data

Software ID:
Software Version:
EIN: 13-3539048
Name: PLANNED PARENTHOOD ACTION FUND INC

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ADVOCATES POLITICAL ARM OF PP OF THE ST LOUIS REGION 4252 FOREST PARK AVE ST LOUIS, MO 63108	43-1699908	501(C)(3)	11,428				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
AMERICANS UNITED FOR CHANGE 455 MASSACHUSETTS AVE NW WASHINGTON, DC 20001	03-0556312	501(C)(4)	15,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
CALIFORNIA PP EDUCATION FUND INC 555 CAPITOL MALL STE 500 SACRAMENTO, CA 95814	68-0358026	501(C)(3)	60,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CENTER FOR REPRODUCTIVE RIGHTS INC 199 WATER ST FL 22 NEW YORK, NY 10038	13-3669731	501(C)(3)	7,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
COLOROFCHANGEORG EDUCATION FUND 1714 FRANKLIN ST STE 100-136 OAKLAND, CA 94612	45-5569879	501(C)(3)	10,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
DEMOCRATIC GOVERNORS ASSOCIATION 1401 K STREET NW WASHINGTON, DC 20005	52-1304889	527	50,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMILY'S LIST 180 M ST NW STE 375N WASHINGTON,DC 20036	52-1391360	527	10,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
FLORIDA ALLIANCE OF PP AFFILIATES INC 736 CENTRAL AVE 100 SARASOTA,FL 34236	59-3142119	501(C)(4)	106,636				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
FUND FOR THE CITY OF NEW YORK 121 AVENUE OF THE AMERICAS 6TH FL NEW YORK,NY 10013	13-2612524	501(C)(3)	12,500				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HIGHER HEIGHTS LEADERSHIP FUND 1835 CALIFORNIA ST NW APT D WASHINGTON,DC 20009	46-3554404	501(C)(3)	15,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
NATIONAL COALITION ON BLACK CIVIC PARTICIPATION 1050 CONNECTICUT AVE NW 10TH FL WASHINGTON,DC 20036	52-1253112	501(C)(3)	17,500				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
NATIONAL DOMESTIC WORKERS ALLIANCE INC 395 HUDSON ST 4TH FLOOR NEW YORK,NY 10014	35-2420942	501(C)(3)	10,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NATIONAL MINORITY AIDS COUNCIL 1931 13TH STREET NW WASHINGTON,DC 20009	52-1578289	501(C)(3)	10,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
NEVADA ADVOCATES FOR PP AFFILIATES INC 550 WEST PLUMB LANE B-104 RENO,NV 89509	74-3234716	501(C)(4)	6,612				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ACTION COUNCIL OF UTAH INC 654 SOUTH 900 EAST SALT LAKE CTY,UT 84102	87-0489105	501(C)(4)	7,356				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PP ACTION FUND OF CENTRAL AND WESTERN NY INC 114 UNIVERSITY AVE ROCHESTER,NY 14605	16-0746860	501(C)(3)	19,351				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ACTION FUND OF NEW JERSEY INC PO BOX 928 ELIZABETH,NJ 07207	22-3243732	501(C)(4)	25,078				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ACTION FUND OF THE PACIFIC SOUTHWEST 1075 CAMINO DEL RIO SOUTH SAN DIEGO,CA 92108	33-0476427	501(C)(4)	28,619				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PP ACTION KENTUCKY 200 S MERIDIAN STREET SUITE 400 INDIANAPOLIS,IN 46225	47-5049056	501(C)(4)	100,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCACY FUND OF MASSACHUSETTS INC 1055 COMMONWEALTH AVE BOSTON,MA 02215	22-2517673	501(C)(4)	35,024				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCACY PROJECT LOS ANGELES COUNTY 400 W 30TH ST LOS ANGELES,CA 90007	95-4292938	501(C)(4)	14,471				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PP ADVOCATES MAR MONTE 1691 THE ALAMEDA SAN JOSE,CA 95126	77-0261817	501(C)(4)	91,808				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF ARIZONA PO BOX 47240 PHOENIX,AZ 85068	86-0701472	501(C)(4)	18,481				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF INDIANA AND KENTUCKY INC 199 SOUTH MERIDIAN ST NO 400 INDIANAPOLIS,IN 46206	35-1959672	501(C)(4)	40,229				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PP ADVOCATES OF MICHIGAN PO BOX 19104 LANSING,MI 48901	38-2765858	501(C)(4)	103,801				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF MONTANA 1116 GRAND AVE STE 101 201 BILLINGS,MT 59101	81-0467220	501(C)(4)	5,094				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF NEW YORK INC 194 WASHINGTON AVE SUITE 620 ALBANY,NY 12210	14-1748419	501(C)(4)	5,362				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PP ADVOCATES OF OHIO 206 EAST STATE ST COLUMBUS,OH 43215	31-0937837	501(C)(4)	93,666				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF OREGON PO BOX 12267 PORTLAND,OR 97212	93-1040482	501(C)(4)	14,433				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF VIRGINIA INC 201 N HAMILTON ST RICHMOND,VA 23221	54-1186756	501(C)(4)	181,830				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PP ADVOCATES OF WISCONSIN 302 N JACKSON ST MILWAUKEE,WI 53202	39-1678012	501(C)(4)	8,468				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES PASADENA AND SAN GABRIEL VALLEY 2333 LAKE AVE FL 2 ALTADENA,CA 91001	47-5501097	501(C)(4)	8,216				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP AFFILIATES OF MICHIGAN PO BOX 15041 LANSING,MI 48901	38-2346424	501(C)(3)	7,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PP ARIZONA INC 5651 N 7TH ST PHOENIX,AZ 85014	86-0146520	501(C)(3)	204,500				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ASSOCIATION OF PENNSYLVANIA 1514 N 2ND ST HARRISBURG,PA 17102	23-1989400	501(C)(3)	25,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP CENTRAL COAST ACTION FUND 518 GARDEN ST SANTA BARBARA,CA 93101	77-0704037	501(C)(4)	11,767				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PP FEDERATION OF AMERICA 123 WILLIAM ST NEW YORK,NY 10038	13-1644147	501(C)(3)	81,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP GREAT PLAINS VOTES 4401 W 109TH ST STE 200 OVERLAND PARK,KS 66211	43-1621500	501(C)(4)	26,328				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP GULF COAST INC 4600 GULF FREEWAY HOUSTON,TX 77023	74-1100163	501(C)(3)	12,500				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PP HUDSON PECONIC ACTION FUND INC 4 SKYLINE DR HAWTHORNE,NY 10532	13-4133042	501(C)(4)	16,742				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP HUDSON PECONIC INC 4 SKYLINE DR HAWTHORNE,NY 10532	11-2454790	501(C)(3)	15,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ILLINOIS ACTION PAC 18 SOUTH MICHIGAN AVE 6TH FLOOR CHICAGO,IL 60603	90-0040382	527	16,010				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PP LEAGUE OF MASSACHUSETTS INC 1055 COMMONWEALTH AVE BOSTON,MA 02215	04-2698497	501(C)(3)	55,500				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP MAINE ACTION FUND 138 LAKESIDE AVE BURLINGTON,VT 05401	46-5689688	501(C)(4)	50,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP MAR MONTE INC 1691 THE ALAMEDA SAN JOSE,CA 95126	94-1583439	501(C)(3)	9,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PP MINNESOTA ND AND SD 671 VANDALIA ST SAINT PAUL,MN 55114	41-0948382	501(C)(3)	35,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP MOHAWK HUDSON INC 1424 GENESEE ST UTICA,NY 13502	14-6004167	501(C)(3)	40,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP NEW HAMPSHIRE ACTION FUND 18 LOW AVE CONCORD,NH 03301	46-5554692	501(C)(4)	61,440				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

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PP NORTHERN CALIFORNIA ACTION FUND 2185 PACHECO ST CONCORD,CA 94520	20-1489361	501(C)(4)	66,539				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF CENTRAL OKLAHOMA INC 619 NW 23RD ST OKLAHOMA CITY,OK 73103	73-0660035	501(C)(3)	5,500				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF ILLINOIS ACTION 18 SOUTH MICHIGAN AVE 6TH FLOOR CHICAGO,IL 60603	37-1021751	501(C)(4)	26,492				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PP OF METRO WASHINGTON DC ACTION FUND INC 1201 NEW YORK AVE NW FL 180 WASHINGTON,DC 20005	52-1687743	501(C)(4)	21,825				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF METROPOLITAN WASHINGTON DC INC 1108 16TH STREET NW WASHINGTON,DC 20036	53-0204621	501(C)(3)	14,110				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF MIDDLE AND EAST TENNESSEE INC 50 VANTAGE WAY NASHVILLE,TN 37228	62-6050064	501(C)(3)	85,600				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PP OF MINNESOTA ND AND SD ACTION FUND INC 671 VANDALIA ST ST PAUL,MN 55114	41-1709702	501(C)(4)	35,334				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF NASSAU COUNTY INC 540 FULTON AVE HEMPSTEAD,NY 11550	11-1776035	501(C)(3)	15,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF NEW YORK CITY INC 26 BLEECKER ST NEW YORK,NY 10012	13-2621497	501(C)(3)	17,730				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PP OF NORTHERN NEW ENGLAND INC 125 LAKESIDE AVE SUITE 301 BURLINGTON,VT 05401	03-0222941	501(C)(3)	50,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF CENTRAL AND GREATER NJ INC 196 SPEEDWELL AVE MORRISTOWN,NJ 07960	22-1643997	501(C)(3)	39,500				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF SOUTH EAST AND NORTH FLORIDA 2300 N FLORIDA MANGO RD WEST PALM BEACH,FL 33409	59-1391115	501(C)(3)	28,500				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PP OF SOUTHERN NEW ENGLAND INC 345 WHITNEY AVE NEW HAVEN,CT 06511	06-0263565	501(C)(3)	7,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF THE GREAT NW AND THE HAWAIIAN ISLANDS 2001 E MADISON ST SEATTLE,WA 98122	91-0586012	501(C)(3)	54,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF THE HEARTLAND INC PO BOX 4557 DES MOINES,IA 50305	42-0727488	501(C)(3)	10,500				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PP OF THE MID-HUDSON VALLEY INC 178 CHURCH ST POUGHKEEPSIE,NY 12601	14-1344810	501(C)(3)	15,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF THE NORTH COUNTRY NEW YORK INC 160 STONE ST WATERTOWN,NY 13601	16-0919175	501(C)(3)	15,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF THE ROCKY MOUNTAINS ACTION FUND 7155 E 38TH AVE DENVER,CO 80207	84-1191279	501(C)(4)	65,663				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PP OF THE SOUTHERN FINGER LAKES INC 620 WEST SENECA ST ITHACA,NY 14850	16-0953368	501(C)(3)	15,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP PENNSYLVANIA ADVOCATES 1514 N 2ND ST HARRISBURG,PA 17102	23-2208281	501(C)(4)	188,291				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP SOUTH ATLANTIC 100 SOUTH BOYLAN AVE RALEIGH,NC 27603	56-1282557	501(C)(3)	77,940				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

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PP SOUTHEAST ADVOCATES 75 PIEDMONT AVE NE STE 800 ATLANTA,GA 30303	58-1899303	501(C)(4)	76,389				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP SOUTHEAST INC 75 PIEDMONT AVE NE STE 800 ATLANTA,GA 30303	58-6045874	501(C)(3)	17,500				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP TEXAS VOTES 201 E BEN WHITE BLDG B STE 100 AUSTIN,TX 78704	46-5305326	501(C)(4)	226,511				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PP VERMONT ACTION FUND 125 LAKESIDE AVE SUITE 301 BURLINGTON,VT 05401	03-0326364	501(C)(4)	14,986				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP VIRGINIA POLITICAL ACTION COMMITTEE PO BOX 7271 RICHMOND,VA 23221	20-8710245	527	500,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP VOTERS OF IOWA 1171 7TH STREET DES MOINES,IA 50314	42-1357011	501(C)(4)	69,334				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PP VOTERS OF NEBRASKA 1171 7TH STREET DES MOINES,IA 50314	47-0762497	501(C)(4)	17,575				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP VOTES NORTHWEST AND HAWAII 2001 E MADISON ST SEATTLE,WA 98122	94-3168114	501(C)(4)	110,330				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP VOTES CONNECTICUT 345 WHITNEY AVE NEW HAVEN,CT 06511	06-1309773	501(C)(4)	25,912				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PP VOTES SOUTH ATLANTIC 100 SOUTH BOYLAN AVE RALEIGH,NC 27603	56-2208857	501(C)(4)	29,711				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
RELIGIOUS INSTITUTE 21 CHARLES ST STE 140 WESTPORT,CT 06880	90-0802328	501(C)(3)	6,500				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
SISTERSONG 1237 RALPH D ABERNATHY BLVD SW ATLANTA,GA 30310	51-0544927	501(C)(3)	16,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
TENNESSEE ADVOCATES FOR PP 50 VANTAGE WAY STE 102 NASHVILLE,TN 37228	46-2511274	501(C)(4)	77,489				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
THE VIRGINIA LEAGUE FOR PP INC 201 N HAMILTON ST RICHMOND,VA 23221	54-0505973	501(C)(3)	21,250				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
TIDES CENTER PO BOX 29907 SAN FRANCISCO,CA 94129	94-3213100	501(C)(3)	30,300				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UPPER HUDSON PP INC 885 CENTRAL AVE ALBANY,NY 12206	14-6000805	501(C)(3)	15,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
VOICE FOR CHOICE PP OF NYCACTION FUND 26 BLEECKER ST NEW YORK,NY 10012	13-3731867	501(C)(4)	62,920				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
PLANNED PARENTHOOD ACTION FUND INC

Employer identification number
13-3539048

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all 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, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
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 ☐ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
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	**4c**		No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," on line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," on line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported on Form 990, Part VII, paid or accured 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**		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

For each individual whose compensation must be reported on 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

(A) Name and Title	**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
See Additional Data Table							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference	Explanation
PART I, LINE 4B	THE PRESIDENT, CECILE RICHARDS, PARTICIPATED IN A NONQUALIFIED DEFERRED COMPENSATION PLAN ("457(F) PLAN") BEGINNING IN CALENDAR YEAR 2011 THE TOTAL AMOUNT DEFERRED TO THIS PLAN FOR CALENDAR YEAR 2015 AMOUNTED TO $106,575 THE CHIEF EXPERIENCE OFFICER, DAWN LAGUENS, PARTICIPATED IN A 457(F)PLAN BEGINNING IN CALENDAR YEAR 2014 THE TOTAL AMOUNT DEFERRED TO THIS PLAN FOR THE CALENDAR YEAR 2015 AMOUNTED TO $77,842
PART 1, LINE 3	PLANNED PARENTHOOD FEDERATION OF AMERICA, INC (PPFA), A RELATED ORGANIZATION, USED THE FOLLOWING METHODS TO ESTABLISH THE COMPENSATION OF THE ORGANIZATION'S PRESIDENT COMPENSATION COMMITTEE, FORM 990 OF OTHER ORGANIZATIONS, COMPENSATION SURVEY/STUDY AND APPROVAL BY THE BOARD OR COMPENSATION COMMITTEE

Additional Data

Software ID:
Software Version:
EIN: 13-3539048
Name: PLANNED PARENTHOOD ACTION FUND INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1 CECILE RICHARDS PRESIDENT	(i)	33,386	3,000	52	7,081	113	43,632	0
	(ii)	523,055	47,000	812	110,929	1,774	683,570	0
1 WALLACE D'SOUZA CHIEF FINANCIAL OFFICER	(i)	20,026	2,000	23	1,214	2,688	25,951	0
	(ii)	230,293	23,000	268	13,959	30,909	298,429	0
2 DAWN LAGUENS CHIEF EXPERIENCE OFFICER	(i)	148,653	9,300	138	28,239	10,559	196,889	0
	(ii)	330,874	20,700	308	62,853	23,502	438,237	0
3 JETHRO MILLER CHIEF DEVELOPMENT OFFICER	(i)	14,268	1,400	8	263	129	16,068	0
	(ii)	342,420	33,600	186	6,323	3,091	385,620	0
4 DEBRA ALLIGOOD WHITE SR VP & GENERAL COUNSEL	(i)	31,265	2,500	83	1,590	2,242	37,680	0
	(ii)	281,381	22,500	751	14,310	20,176	339,118	0
5 ANN MCGUINESS SR PRINCIPAL GIFTS OFFICER	(i)	139,764	0	0	8,414	17,555	165,733	0
	(ii)	101,209	0	0	6,093	12,712	120,014	0
6 DANA SINGISER VP OF GOVERNMENT AFFAIRS	(i)	82,945	0	95	4,926	4,727	92,693	0
	(ii)	161,011	0	185	9,562	9,177	179,935	0
7 JENNIE THOMPSON MANAGING DIRECTOR OF DEVEL	(i)	13,617	0	119	613	687	15,036	0
	(ii)	258,727	0	2,255	11,639	13,046	285,667	0
8 REBECCA EPSTEIN VP OPERATIONS & STRATEGIC INITIATIVE	(i)	59,180	0	47	3,704	10,492	73,423	0
	(ii)	160,006	0	128	10,014	28,367	198,515	0
9 ERIC FERRERO VP OF COMMUNICATIONS	(i)	52,614	2,552	43	1,667	3,020	59,896	0
	(ii)	186,539	9,048	151	5,909	10,705	212,352	0

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
PLANNED PARENTHOOD ACTION FUND INC	13-3539048

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	PLANNED PARENTHOOD ACTION FUND HAS AN EXECUTIVE COMMITTEE THAT MAY EXERCISE ALL THE AUTHORITY OF THE FULL BOARD EXCEPT FOR MATTERS REQUIRING THE APPROVAL OF THE REGULAR MEMBERS, FILLING OF VACANCIES ON THE BOARD OR COMMITTEES, AMENDMENT OR REPEAL OF RESOLUTIONS OF THE BOARD THAT BY THEIR TERMS MAY NOT BE AMENDED OR REPEALED BY THE COMMITTEE, REMOVAL OF VOTING DIRECTORS, INDEMNIFICATION, DISPOSITION OF REAL PROPERTY, AND DISSOLUTION ALL MEMBERS OF THE EXECUTIVE COMMITTEE ARE MEMBERS OF THE BOARD OF DIRECTORS

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	MEMBERS AND ELECTION OF MEMBERS THE ACTION FUND IS A NOT-FOR-PROFIT MEMBERSHIP ORGANIZATION THERE ARE THREE CLASSES OF MEMBERS OF THE ACTION FUND REGULAR, CONTRIBUTING AND ASSOCIATE MEMBERS THE ASSOCIATE MEMBERS ELECT ONE DIRECTOR, THE REGULAR MEMBERS ELECT THE BALANCE OF THE DIRECTORS REGULAR MEMBERS ARE THOSE INDIVIDUALS WHO SERVE AS VOTING MEMBERS OF THE BOARD OF DIRECTORS OF PLANNED PARENTHOOD FEDERATION OF AMERICA, INC CONTRIBUTING MEMBERS ARE THOSE INDIVIDUALS WHO (1)PAY ANNUAL DUES IN AN AMOUNT ESTABLISHED BY THE BOARD, OR (2)ARE "LIFETIME MEMBERS" AS A RESULT OF MAKING ONE OR MORE DUES PAYMENTS IN AN AMOUNT ESTABLISHED BY THE BOARD CONTRIBUTING MEMBERS HAVE NO VOTING OR OTHER RIGHTS WITH RESPECT TO THE CORPORATION ASSOCIATE MEMBERS ARE THOSE INDIVIDUALS WHO ANNUALLY AFFIRM THEIR DESIRE TO BE A MEMBER PURSUANT TO A PROPERLY EXECUTED FORM PROVIDED BY THE CORPORATION

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	SEE RESPONSE TO PART VI, SECTION A, LINE 6

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	IN ADDITION TO THE BOARD, THE REGULAR MEMBERS APPROVE CHANGES TO THE BYLAWS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	BOARD REVIEW OF FORM 990 THE PLANNED PARENTHOOD ACTION FUND USES THE SERVICES OF THE EMPLOYEES OF PLANNED PARENTHOOD FEDERATION OF AMERICA, INC ("PPFA"), A RELATED ORGANIZATION THE PLANNED PARENTHOOD ACTION FUND FORM 990 IS PREPARED BY THE ORGANIZATION'S SHARED FINANCE STAFF AND REVIEWED INTERNALLY BY THE CHIEF FINANCIAL OFFICER AND THE LEGAL DEPARTMENT THE DRAFT FORM 990 IS THEN REVIEWED EXTERNALLY BY AN INDEPENDENT PAID TAX PREPARER ANY REVISIONS ARE PRESENTED TO THE ORGANIZATION AND ONCE REVISED, THE FINAL DRAFT FORM 990 IS REVIEWED BY THE ACTION FUND'S FINANCE COMMITTEE ONCE THE DRAFT FORM 990 IS APPROVED BY THE FINANCE COMMITTEE, COPIES OF THE COMPLETE FORM 990 ARE PROVIDED TO EACH VOTING MEMBER OF THE GOVERNING BOARD PRIOR TO SUBMISSION AND FILING WITH THE INTERNAL REVENUE SERVICE

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST POLICY PLANNED PARENTHOOD ACTION FUND USES THE SERVICES OF THE EMPLOYEES OF PLANNED PARENTHOOD FEDERATION OF AMERICA, INC (PPFA), A RELATED ORGANIZATION ANNUALLY, PPFA ASKS ITS KEY EMPLOYEES, AS WELL AS ALL OTHER EMPLOYEES, AND OFFICERS TO REVIEW AND SIGN A CONFLICT OF INTEREST POLICY IN ADDITION, THE ACTION FUND HAS ITS BOARD MEMBERS SIGN A CONFLICT OF INTEREST POLICY ANNUALLY THE ACTION FUND'S LEGAL COUNSEL FOLLOWS UP TO RESOLVE ANY DISCLOSED CONFLICTS IF A CONFLICT IS IDENTIFIED, THE INTERESTED INDIVIDUAL MAY NOT PARTICIPATE IN DELIBERATIONS OR DISCUSSIONS, BE PRESENT FOR A VOTE, OR VOTE ON THE MATTER

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION REVIEW PROCESS PLANNED PARENTHOOD ACTION FUND USES THE SERVICES OF THE EMPLOYEES OF PLANNED PARENTHOOD FEDERATION OF AMERICA, INC (PPFA), A RELATED ORGANIZATION PPFA HAS A COMPENSATION SETTING BODY (THE BODY) THAT REVIEWS AND APPROVES THE COMPENSATION OF THE LEADERSHIP STAFF OF PPFA, INCLUDING THE PRESIDENT, CHIEF FINANCIAL OFFICER, CHIEF OPERATING OFFICER, AND OTHER MEMBERS OF THE EXECUTIVE TEAM THIS INDEPENDENT BODY IS COMPRISED OF THE OFFICERS OF THE PPFA BOARD AND 3 OTHER DIRECTORS, WITH THE CHAIR OF THE BOARD SERVING AS ITS CHAIR THE REVIEW AND APPROVAL OF THE SALARIES OF THESE EMPLOYEES TAKES PLACE ON AN ANNUAL BASIS USING COMPARABILITY DATA SUCH AS INDUSTRY SURVEYS, DOCUMENTED COMPENSATION OF PERSONS HOLDING SIMILAR POSITIONS IN SIMILAR ORGANIZATIONS, AND/OR INDEPENDENT COMPENSATION STUDIES THE PROCEEDINGS ARE DOCUMENTED CONTEMPORANEOUSLY IN MINUTES

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	PUBLIC DISCLOSURE OF GOVERNING DOCUMENTS PLANNED PARENTHOOD ACTION FUND'S FINANCIAL REPORT AND FORM 990 ARE AVAILABLE UPON REQUEST

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	OTHER FEES FOR SERVICES PROGRAM SERVICE EXPENSES 3,538,888 MANAGEMENT AND GENERAL EXPENSES 532,099 FUNDRAISING EXPENSES 247,324 TOTAL EXPENSES 4,318,311

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	FEES FOR SERVICES - OTHER OTHER FEES FOR SERVICES OF $4,318,311 CONSIST OF CONSULTANT FEES ($3,670,957), MARKETING ($101,068), SECURITY ($90,916), TEMPORARY HELP FROM EXTERNAL AGENCIES ($28,451) AND OTHER PROFESSIONAL FEES ($426,919)

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
PLANNED PARENTHOOD ACTION FUND INC

Employer identification number
13-3539048

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1) PLANNED PARENTHOOD FEDERATION OF AMERICA INC 123 WILLIAM STREET NEW YORK, NY 10038 13-1644147	SEXUAL HEALTH	NY	501(C)(3)	LINE 7	N/A		No
(2) PLANNED PARENTHOOD ACTION FUND INC PAC 123 WILLIAM STREET NEW YORK, NY 10038 13-3885199	POLITICAL ACTIVITY	NY	527		PLANNED PARENTHOOD ACTION FUND	Yes	
(3) PLANNED PARENTHOOD VOTES 123 WILLIAM STREET NEW YORK, NY 10038 13-4128897	POLITICAL ACTIVITY	NY	527		PLANNED PARENTHOOD ACTION FUND	Yes	
(4) PPFA 21ST CENTURY INC 123 WILLIAM STREET NEW YORK, NY 10038 16-1681541	SUPPORTING	NY	501(C)(3)	LINE 11A, I	PPFA	Yes	
(5) VOXENT 72960 FRED WARING DRIVE PALM DESERT, CA 92260 61-1541009	TECHNOLOGY SUPPORT	CA	501(C)(3)	LINE 11A, I	PPFA	Yes	
(6) PLANNED PARENTHOOD GLOBAL INC 123 WILLIAM STREET NEW YORK, NY 10038 47-5312115	INTERNATIONAL SEXUAL HEALTH	NY	501(C)(3)	LINE 11A, I	PPFA	Yes	

Part III **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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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.

(a) Name, address, and EIN of related organization	(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 end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity? Yes	(i) No
(1) COMMUNITY OUTREACH GROUP LLC C/O PPAF 123 WILLIAM ST NEW YORK, NY 10038 46-5346839	COMMUNITY-BASED ORGANIZING, ADVOCACY AND CANVASSING ACTIVITIES	DE	PLANNED PARENTHOD ACTION FUND INC	C	4,143,102	1,010,596	100 000 %	Yes	

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

		Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	1o	Yes	
p Reimbursement paid to related organization(s) for expenses	1p	Yes	
q Reimbursement paid by related organization(s) for expenses	1q	Yes	
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	1s	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) PLANNED PARENTHOOD ACTION FUND INC PAC	L	130,938	ACTUAL PAYMENTS
(2) COMMUNITY OUTREACH GROUP LLC	M	505,592	ACTUAL PAYMENTS
(3) PLANNED PARENTHOOD VOTES	S	75,000	ACTUAL PAYMENTS

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 13-3539048
Name: PLANNED PARENTHOOD ACTION FUND INC

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
PLANNED PARENTHOOD FEDERATION OF AMERICA INC 123 WILLIAM STREET NEW YORK, NY 10038 13-1644147	SEXUAL HEALTH	NY	501(C)(3)	LINE 7	N/A		No
PLANNED PARENTHOOD ACTION FUND INC PAC 123 WILLIAM STREET NEW YORK, NY 10038 13-3885199	POLITICAL ACTIVITY	NY	527		PLANNED PARENTHOOD ACTION FUND	Yes	
PLANNED PARENTHOOD VOTES 123 WILLIAM STREET NEW YORK, NY 10038 13-4128897	POLITICAL ACTIVITY	NY	527		PLANNED PARENTHOOD ACTION FUND	Yes	
PPFA 21ST CENTURY INC 123 WILLIAM STREET NEW YORK, NY 10038 16-1681541	SUPPORTING	NY	501(C)(3)	LINE 11A, I	PPFA	Yes	
VOXENT 72960 FRED WARING DRIVE PALM DESERT, CA 92260 61-1541009	TECHNOLOGY SUPPORT	CA	501(C)(3)	LINE 11A, I	PPFA	Yes	
PLANNED PARENTHOOD GLOBAL INC 123 WILLIAM STREET NEW YORK, NY 10038 47-5312115	INTERNATIONAL SEXUAL HEALTH	NY	501(C)(3)	LINE 11A, I	PPFA	Yes	