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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2017

Open to Public Inspection

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](#)

Department of the Treasury
Internal Revenue Service

2017

Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 07-01-2017 , and ending 06-30-2018

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

F Name and address of principal officer

DRLEANA WEN

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 ▶

D Employer identification number

13-3539048

E Telephone number

(212) 541-7800

G Gross receipts \$ 36,569,906

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)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, line 34

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶8,173,349

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

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

VICKIE BARROW-KLEIN CFO

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

MARGARET A BRADSHAW

Preparer's signature

MARGARET A BRADSHAW

Date

Check ☐ if self-employed

PTIN 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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2017)

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:

SEE SCHEDULE O THE PLANNED PARENTHOOD ACTION FUND, INC (THE "ACTION FUND") WAS ESTABLISHED BY PLANNED PARENTHOOD FEDERATION OF AMERICA, INC ("PPFA"), 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 \$ 24,096,782	including grants of \$ 9,291,313	(Revenue \$)
See Additional Data				























4b	(Code)	(Expenses \$	including grants of \$	(Revenue \$)
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4c	(Code)	(Expenses \$	including grants of \$	(Revenue \$)
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4d	Other program services (Describe in Schedule O)	(Expenses \$	including grants of \$	(Revenue \$)
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4e	Total program service expenses ▶	24,096,782
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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)? <i>If "Yes," complete Schedule A</i>	1	No
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (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? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i> 	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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i> 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 	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? <i>If "Yes," complete Schedule D, Part IV</i> 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 	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? <i>If "Yes," complete Schedule D, Part VI</i> 	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? <i>If "Yes," complete Schedule D, Part VII</i> 	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? <i>If "Yes," complete Schedule D, Part VIII</i> 	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? <i>If "Yes," complete Schedule D, Part IX</i> 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 	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)? <i>If "Yes," complete Schedule D, Part X</i> 	11f	Yes
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> 	12b	Yes
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	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? <i>If "Yes," complete Schedule F, Parts I and IV</i> 	14b	Yes
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? <i>If "Yes," complete Schedule F, Parts II and IV</i> 	15	Yes
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? <i>If "Yes," complete Schedule F, Parts III and IV</i> 	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? <i>If "Yes," complete Schedule G, Part I</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? <i>If "Yes," complete Schedule G, Part II</i> 	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> 	19	No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>	Yes	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		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? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	Yes	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		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	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.	72	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	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.	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	14	
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	14	
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

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

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

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[illegible]

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 ▶ 3

Section B. Independent Contractors

(A) Name and business address	(B) Description of services	(C) Compensation
BLUEWEST MEDIA LLC 8999 E VASSAR AVE DENVER, CO 80231	ADVERTISING	3,901,532
O'BRIEN GARRETT 1133 19TH ST NW SUITE 300 WASHINGTON, DC 20036	CONSULTING & OTHER	2,764,924
MR STRATEGIC SERVICES INC 1101 CONNECTICUT AVE NW 7TH FL WASHINGTON, DC 20036	CONSULTING	1,446,481
BLUEPRINT INTERACTIVE 1155 CONNECTICUT AVE NW SUITE 601 WASHINGTON, DC 20036	ADVERTISING	1,272,054
GRASSROOTS CAMPAIGNS INC PO BOX 120557 BOSTON, MA 02112	CANVASSING	1,114,462

Form 990 (2017)

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	1,348,400				
	c Fundraising events . . .	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	35,209,221				
	g Noncash contributions included in lines 1a-1f \$ _____						
	h Total. Add lines 1a-1f ▶		36,557,621				
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 ▶		12,285			12,285	
		(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 _____							
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d ▶							
12 Total revenue. See Instructions ▶		36,569,906	0	0	12,285		

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 ☐

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	9,141,313	9,141,313		
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, line 15 and 16.	150,000	150,000		
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	305,780	93,225	128,931	83,624
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	5,105,639	2,948,404	1,020,240	1,136,995
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	76,461	66,753	4,710	4,998
9 Other employee benefits.	1,014,891	619,145	187,876	207,870
10 Payroll taxes.	349,559	193,094	75,603	80,862
11 Fees for services (non-employees):				
a Management.				
b Legal.	131,613	28,635	102,978	
c Accounting.	34,803		34,803	
d Lobbying.	841,645	841,645		
e Professional fundraising services. See Part IV, line 17.	3,012,650			3,012,650
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).	3,187,299	2,568,492	213,334	405,473
12 Advertising and promotion.	2,854,676	2,561,864		292,812
13 Office expenses.	1,182,931	520,726	48,193	614,012
14 Information technology.	1,393,493	485,673	37,580	870,240
15 Royalties.				
16 Occupancy.	430,467	245,077	89,579	95,811
17 Travel.	854,539	810,149	22,898	21,492
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	64,516	64,516		
19 Conferences, conventions, and meetings.	1,174,122	1,116,633	30,079	27,410
20 Interest.	7,496		7,496	
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	290,807	164,007	61,269	65,531
23 Insurance.	78,858	44,474	16,614	17,770
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	2,362,071	1,148,498		1,213,573
b MEMBERSHIP DUES	125,067	124,937	130	
c PRINTING & ARTWORK	95,798	91,288	1,094	3,416
d TAXES & FEES	38,375	6,298	30,600	1,477
e All other expenses	793,526	61,936	714,257	17,333
25 Total functional expenses. Add lines 1 through 24e.	35,098,395	24,096,782	2,828,264	8,173,349
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 <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720).	4,433,969	2,155,907	0	2,278,062

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	12,168,563	1	11,586,425
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	6,726,767	3	4,440,376
	4	Accounts receivable, net	13,995	4	
	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	205,557	9	751,920
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation		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	0	15	394,098
16	Total assets. Add lines 1 through 15 (must equal line 34)	19,114,882	16	17,172,819	
Liabilities	17	Accounts payable and accrued expenses	2,983,013	17	972,315
	18	Grants payable	1,945,529	18	1,719,841
	19	Deferred revenue	1,264,438	19	974,111
	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	86,861	25	0
	26	Total liabilities. Add lines 17 through 25	6,279,841	26	3,666,267
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	1,538,706	27	4,341,888
	28	Temporarily restricted net assets	11,296,335	28	9,164,664
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	12,835,041	33	13,506,552
34	Total liabilities and net assets/fund balances	19,114,882	34	17,172,819	

Part XI Reconciliation of Net AssetsCheck 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	36,569,906
2	Total expenses (must equal Part IX, column (A), line 25)	2	35,098,395
3	Revenue less expenses Subtract line 2 from line 1	3	1,471,511
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12,835,041
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	-800,000
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	13,506,552

Part XII Financial Statements and ReportingCheck 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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? 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 <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:

Software Version:

EIN: 13-3539048

Name: PLANNED PARENTHOOD ACTION FUND INC

Form 990 (2017)

Form 990, Part III, Line 4a:

ADVOCACY - PROGRAMS DESIGNED TO EMPOWER ALL PEOPLE TO BUILD THE FUTURE THEY WANT AND CHANGE CULTURAL ATTITUDES ABOUT REPRODUCTIVE HEALTH

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 (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			
URVASHI VAID CHAIR	1 00	X		X				0	0	0
JENNIE ROSENTHAL BERLIANT VICE CHAIR	1 00	X		X				0	0	0
KIKI MCLEAN SECRETARY	1 00	X		X				0	0	0
GABRIEL STRICKER TREASURER	1 00	X		X				0	0	0
PHILLIP AGNEW DIRECTOR	1 00	X						0	0	0
LORI CARPENTIER DIRECTOR	1 00	X						0	0	0
STACY CROSS DIRECTOR	1 00	X						0	0	0
ALEXIS MCGILL JOHNSON DIRECTOR	1 00	X						0	0	0
JILL LAFER DIRECTOR AS OF 4/27/18	1 00	X						0	0	0
KIM MOLSTRE 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 (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			
DONYA NASSER DIRECTOR	1 00	X						0	0	0
JULIANNA SMOOT DIRECTOR	1 00	X						0	0	0
TIMOTHY STANLEY DIRECTOR	1 00	X						0	0	0
JOE SOLMONESE DIRECTOR THRU 5/1/18 THEN TC	2 00 33 00	X						0	0	0
LUZ TOWNS-MIRANDA DIRECTOR	1 00	X						0	0	0
CECILE RICHARDS PRESIDENT & CEO THRU 5/2/18	2 00 33 00			X				69,123	843,312	120,839
WALLACE D'SOUZA CFO THRU 10/20/17	3 00 32 00			X				21,366	216,035	49,385
ABIGAIL SMITH INTERIM CFO (10/20/17-3/5/18)	3 00 32 00			X				17,603	177,986	58,979
VICKIE BARROW-KLEIN CFO STARTING 3/5/18	3 00 32 00			X				0	0	0
DAWN LAGUENS EVP & CHIEF BRAND & CXO	5 00 30 00				X			142,871	618,860	129,361

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 (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			
JETHRO MILLER CHIEF DEVELOPMENT OFFICER	5 00 30 00				X			62,215	352,551	18,993
MELVIN GALLOWAY EVP & COO	3 00 32 00				X			38,213	386,377	30,266
DEBRA ALLIGOOD WHITE SR VP & GENERAL COUNSEL	3 00 32 00				X			33,516	338,892	37,677
TOM SUBAK CHIEF STRATEGY OFFICER	1 00 34 00					X		8,075	395,665	47,314
DANA SINGISER VP PUB POLICY & GOVT AFFAIRS	1 00 34 00					X		4,960	243,035	31,926
DEIRDRE SCHIFELING VP ORGANIZING, ELECTORAL & CAMPAIGN	15 00 30 00					X		96,183	127,498	14,393
REBECCA EPSTEIN VP OPERATIONS & STRATEGIC INITIATIVES	1 00 34 00					X		2,215	219,277	48,004
EMILY STEWART VP PUBLIC POLICY	4 00 31 00					X		23,202	187,719	35,386

SCHEDULE C (Form 990 or 990-EZ)	Political Campaign and Lobbying Activities	OMB No 1545-0047
Department of the Treasury Internal Revenue Service	For Organizations Exempt From Income Tax Under section 501(c) and section 527	2017
▶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.		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 PLANNED PARENTHOOD ACTION FUND INC	Employer identification number 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 (see instructions for definition of "political campaign activities")	
2	Political campaign activity expenditures (see instructions)	▶ \$ 5,243,017
3	Volunteer hours for political campaign activities (see instructions)	0

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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?		<input type="checkbox"/> Yes <input type="checkbox"/> 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	▶ \$	3,488,054
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$	704,264
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$	4,192,318
4	Did the filing organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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) PP VIRGINIA POLITICAL ACTION COMMITTEE	201 N HAMILTON ST RICHMOND, VA 23221	20-8710245	700,000	
(2) NIKEMA WILLIAMS FOR SENATE	PO BOX 92386 ATLANTA, GA 30314	82-2551554	3,300	
(3) PP ADVOCATES OF WISCONSIN POLITICAL FUND	302 NORTH JACKSON ST MILWAUKEE, WI 53202	27-3225544	964	
4				
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

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) 2014	(b) 2015	(c) 2016	(d) 2017	(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)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
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, INC (THE "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 REPRODUCTIVE HEALTH AND TO URGE THEM TO VOTE FOR CANDIDATES LIKELY TO ADVANCE THE ORGANIZATION'S MISSION. THE 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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As Filed Data -

DLN: 93493056008199

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

2017

Open to Public Inspection

Name of the organization
PLANNED PARENTHOOD ACTION FUND INC

Employer identification number
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.

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

(a) Donor advised funds

(b) Funds and other accounts

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

2a

Total number of conservation easements

2b

Total acreage restricted by conservation easements

2c

Number of conservation easements on a certified historic structure included in (a)

2d

Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

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

1b

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

► \$

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

Cat No 52283D

Schedule D (Form 990) 2017

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
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" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance				
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

(i)

unrelated organizations

(ii)

related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
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" on 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 _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
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)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

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	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
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
See Additional Data Table	

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

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

Supplemental 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 THE ACTION FUND BELIEVES IT HAS TAKEN NO SIGNIFICANT UNCERTAIN TAX POSITIONS

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990.

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

OMB No 1545-0047

2017

**Open to Public
Inspection**

Name of the organization

PLANNED PARENTHOOD ACTION FUND INC

Employer identification number

13-3539048

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

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

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	0			150,000
b Total from continuation sheets to Part I					0
c Totals (add lines 3a and 3b)	0	0			150,000

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			CENTRAL AMERICA AND THE CARIBBEAN	TO SUPPORT REPRODUCTIVE HEALTH PROGRAMS	50,000	WIRE TRANSFER			
(2)			SUB-SAHARAN AFRICA	TO SUPPORT REPRODUCTIVE HEALTH PROGRAMS	50,000	WIRE TRANSFER			
(3)			SUB-SAHARAN AFRICA	TO SUPPORT REPRODUCTIVE HEALTH PROGRAMS	50,000	WIRE TRANSFER			
(4)									

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

3 Enter total number of other organizations or entities **0**

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)* ☐ Yes ☒ No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
PART I, LINE 2	INTERNATIONAL GRANT PROCESS - AT THE DEVELOPMENT PHASE OF EACH PROJECT, THE ORGANIZATION'S STAFF AND THE GRANTEE ORGANIZATION DEVELOP AND DOCUMENT THE AGREED UPON PROJECT OBJECTIVES, OUTPUT AND KEY ACTIVITIES, WORK PLAN AND BUDGET THESE DOCUMENTS BECOME THE TOOLS THAT ARE USED TO MEASURE AND MONITOR THE PROGRESS OF THE PROJECT THE GRANTEE ORGANIZATION IS REQUIRED TO SUBMIT A PROGRESS AND FINANCIAL REPORT EVERY FOUR MONTHS EACH FINANCIAL REPORT IS REVIEWED TO DETERMINE THAT PROJECTS ARE CONDUCTED IN ACCORDANCE WITH THE WORK PLAN AND BUDGET IN ADDITION, ON-SITE MONITORING OF FINANCIAL AND PROGRAMMATIC ACTIVITIES IS PERFORMED MULTIPLE TIMES ANNUALLY

Return Reference	Explanation
PART I, LINE 3	EXPENDITURES ARE REPORTED ON THE ACCRUAL METHOD OF ACCOUNTING

Additional Data

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

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS	REPRODUCTIVE HEALTH	50,000
SUB-SAHARAN AFRICA	0	0	GRANTS	REPRODUCTIVE HEALTH	100,000

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As Filed Data -

DLN: 93493056008199

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

2017

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

e

☒ Solicitation of non-government grants

b

☒ Internet and email solicitations

f

☐ Solicitation of government grants

c

☒ Phone solicitations

g

☐ Special fundraising events

d

☒ In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes

☐ No

b

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 MR STRATEGIC SERVICES INC 1101 CONNECTICUT AVE NW 7TH FL WASHINGTON, DC 20036	CONSULTING		No	10,555,655	1,002,193	9,553,462
2 O'BRIEN GARRETT 1133 19TH STREET NW SUITE 300 WASHINGTON, DC 20036	CONSULTING		No	7,701,119	132,640	7,568,479
3 GRASSROOTS CAMPAIGNS INC PO BOX 120557 BOSTON, MA 02112	CANVASSING		No	479,431	1,168,298	-688,867
4 DONOR SERVICES GROUP 6715 SUNSET BLVD LOS ANGELES, CA 90028	TELEMARKETING		No	274,659	424,808	-150,149
5 TELEFUND INC PO BOX 2366 DENVER, CO 80201	TELEMARKETING		No	201,960	179,428	22,532
6 PUBLIC INTEREST COMMUNICATIONS 7700 LEESBURG PIKE SUITE 301N FALLS CHURCH, VA 22043	TELEMARKETING		No	28,357	18,670	9,687
7 YOUR VOICE MEDIA 1111 BROADWAY SUITE 2040 OAKLAND, CA 94607	TELEMARKETING		No	22,358	38,578	-16,220
8 SD&A TELESERVICES 5757 W CENTURY BLVD LOS ANGELES, CA 90045	TELEMARKETING		No	15,817	22,212	-6,395
9 INTEGRAL RESOURCES INC 1972 MASSACHUSETTS AVE CAMBRIDGE, MA 02140	TELEMARKETING		No	13,437	25,823	-12,386
10						
Total				19,292,793	3,012,650	16,280,143

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

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

Cat No 50083H

Schedule G (Form 990 or 990-EZ) 2017

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	(b) Event #2	(c) Other events	(d)
		(event type)	(event type)	(total number)	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	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> 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 provide any additional information (see instructions).

Return Reference	Explanation
PART 1, LINE 2B, COLUMN (V) & FORM 990, PART IX, LINE 24A	IN ADDITION TO PROFESSIONAL FUNDRAISER EXPENSES INCLUDED IN LINE 11E, \$2,362,071 OF OTHER REIMBURSED EXPENSES WERE PAID DIRECTLY TO PROFESSIONAL FUNDRAISERS FOR POSTAGE (\$1,094,544), PRINTING (\$623,302), MAILHOUSE COSTS (\$389,723) AND LIST USAGE (\$254,502) THE PROFESSIONAL FUNDRAISER CONTRACTS AND THE INVOICES PAID DISTINGUISH BETWEEN PAYMENT FOR SERVICES AND PAYMENT FOR THESE EXPENSES
PART 1, LINE 2B, COLUMN (V)	AMOUNTS PAID TO CERTAIN FUNDRAISERS RESULTED IN A CURRENT YEAR LOSS BUT SECURED FUTURE DONORS

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As Filed Data -

DLN: 93493056008199

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
PLANNED PARENTHOOD ACTION FUND INC

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

2017

Open to Public Inspection

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 noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

- 2

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

15
- 3

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

54

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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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
ACRONYM 611 PENNSYLVANIA AVE SE 143 WASHINGTON, DC 20003	82-1630469	501(C)(3)	50,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
ADVOCATES OF PP OF THE ST LOUIS REGION & SW MISSOURI 4251 FOREST PARK AVE SAINT LOUIS, MO 63108	43-1699908	501(C)(4)	51,935				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
AMERICA VOTES 1155 CONNECTICUT AVE NW STE 600 WASHINGTON, DC 20036	26-4568349	501(C)(4)	17,750				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
COMMUNITY ACTION FUND OF PP ORANGE & SAN BERN COUNTIES 700 S TUSTIN ST ORANGE, CA 92866	33-0468988	501(C)(4)	17,980				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
COMMUNITY CATALYST INC 30 WINTER ST FL 10 BOSTON, MA 02108	04-3355127	501(C)(3)	10,525				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
FLORIDA ALLIANCE OF PP AFFILIATES INC 736 CENTRAL AVE SARASOTA, FL 34236	59-3142119	501(C)(4)	164,845				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
FUND FOR THE CITY OF NEW YORK W 39TH ST FL 14 NEW YORK, NY 10018	13-2612524	501(C)(3)	25,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
GREATER WISCONSIN COMMITTEE INC PO BOX 861 MADISON, WI 53701	20-0938084	501(C)(4)	100,000				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
NEVADA ADVOCATES FOR PP AFFILIATES INC 550 W PLUMB LN STE B-104 RENO, NV 89509	74-3234716	501(C)(4)	33,647				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ACTION COUNCIL OF UTAH 654 S 900 E SALT LAKE CITY, UT 84102	87-0489105	501(C)(4)	65,789				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 NEW YORK INC 114 UNIVERSITY AVE ROCHESTER, NY 14605	45-4269785	501(C)(4)	30,881				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ACTION FUND OF NEW JERSEY INC 1150 DICKINSON ST ELIZABETH, NJ 07201	22-3243732	501(C)(4)	181,443				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 THE PACIFIC SOUTHWEST 1075 CAMINO DEL RIO S SAN DIEGO, CA 92108	33-0476427	501(C)(4)	114,759				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCACY FUND OF DELAWARE INC 625 N SHIPLEY ST WILMINGTON, DE 19801	51-0329430	501(C)(4)	37,763				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 ADVOCACY FUND OF MASSACHUSETTS INC 1055 COMMONWEALTH AVE BOSTON, MA 02215	22-2517673	501(C)(4)	337,185				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCACY PROJECT LOS ANGELES COUNTY 400 W 30TH ST LOS ANGELES, CA 90007	95-4292938	501(C)(4)	225,482				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 1746 THE ALAMEDA SAN JOSE, CA 95126	77-0261817	501(C)(4)	421,457				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF ARIZONA 4751 N 15TH ST PHOENIX, AZ 85014	86-0701472	501(C)(4)	148,860				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 GREATER WASHINGTON & NORTH IDAHO 1117 TETON DRIVE YAKIMA, WA 98902	82-4404205	501(C)(4)	29,143				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF INDIANA & KENTUCKY INC 200 S MERIDIAN ST STE 400 INDIANAPOLIS, IN 46225	35-1959672	501(C)(4)	174,988				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 15041 LANSING, MI 48901	38-2765858	501(C)(4)	453,456				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF MONTANA 1116 GRAND AVE STE 1 BILLINGS, MT 59102	81-0467220	501(C)(4)	29,511				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 E STATE ST COLUMBUS, OH 43215	31-0937837	501(C)(4)	153,351				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF OREGON PO BOX 12267 PORTLAND, OR 97212	93-1040482	501(C)(4)	155,921				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 VIRGINIA INC 201 N HAMILTON ST RICHMOND, VA 23221	54-1186756	501(C)(4)	174,417				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF WISCONSIN 302 N JACKSON ST MILWAUKEE, WI 53202	39-1678012	501(C)(4)	115,440				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 PASADENA & SAN GABRIEL VALLEY 2333 LAKE AVE FL 2 ALTADENA, CA 91001	47-5501097	501(C)(4)	48,763				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP AFFILIATES OF CALIFORNIA INC 555 CAPITOL MALL STE 510 SACRAMENTO, CA 958144502	94-2236102	501(C)(4)	11,750				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 4751 N 15TH ST PHOENIX, AZ 85014	86-0146520	501(C)(3)	7,457				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ASSOCIATION OF UTAH 654 S 900 E SALT LAKE CITY, UT 84102	87-0288909	501(C)(3)	9,084				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 CENTRAL COAST ACTION FUND 518 GARDEN ST SANTA BARBARA, CA 93101	95-2319356	501(C)(4)	79,200				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP EMPIRE STATE ACTS INC 194 WASHINGTON AVE STE 620 ALBANY, NY 12210	14-1593876	501(C)(4)	90,683				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 GREAT PLAINS VOTES 4401 W 109TH ST STE 200 OVERLAND PARK, KS 66211	81-3024710	501(C)(4)	99,508				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP GULF COAST ACTION FUND INC 4600 GULF FREEWAY HOUSTON, TX 77023	76-0369997	501(C)(4)	52,704				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 GULF COAST INC 4600 GULF FREEWAY HOUSTON, TX 77023	74-1100163	501(C)(3)	5,223				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP HUDSON PECONIC ACTION FUND INC 4 SKYLINE DR HAWTHORNE, NY 10532	13-4133042	501(C)(4)	102,266				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 MAINE ACTION FUND 784 HERCULES DR STE 110 COLCHESTER, VT 05446	46-5689688	501(C)(4)	51,596				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP NEW HAMPSHIRE ACTION FUND 18 LOW AVE CONCORD, NH 03301	46-5554692	501(C)(4)	24,576				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 NORTHERN CALIFORNIA ACTION FUND 2185 PACHECO ST CONCORD, CA 94520	20-1489361	501(C)(4)	290,820				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF CENTRAL & WESTERN NEW YORK INC 114 UNIVERSITY AVE ROCHESTER, NY 14605	16-0746860	501(C)(3)	5,825				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 ILLINOIS ACTION 18 S MICHIGAN AVE FL 6 CHICAGO, IL 60603	37-1021751	501(C)(4)	254,703				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF INDIANA & KENTUCKY INC 200 S MERIDIAN ST STE 400 INDIANAPOLIS, IN 46225	35-0874276	501(C)(3)	13,988				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 METROPOLITAN WASHINGTON DC ACTION FUND INC 1225 4TH ST NE WASHINGTON, DC 20002	52-1687743	501(C)(4)	200,127				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF MINNESOTA ND SD ACTION FUND INC 671 VANDALIA ST ST PAUL, MN 55114	41-1709702	501(C)(4)	122,685				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 NASSAU COUNTY ACTION FUND INC 540 FULTON AVE HEMPSTEAD, NY 11550	38-3649080	501(C)(4)	56,492				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF NASSAU COUNTY INC 540 FULTON AVE HEMPSTEAD, NY 11550	11-1776035	501(C)(3)	7,152				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 ORANGE & SAN BERNARDINO COUNTIES INC 700 S TUSTIN ST ORANGE, CA 92866	95-6152773	501(C)(3)	48,387				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF SOUTH EAST & NORTH FLORIDA 2300 N FLORIDA MANGO RD WEST PALM BEACH, FL 33409	59-1391115	501(C)(3)	88,457				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)	6,086				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF SOUTHWESTERN OREGON 3579 FRANKLIN BLVD EUGENE, OR 97403	93-0573822	501(C)(3)	25,000				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 OF THE MID-HUDSON VALLEY ACTION FUND INC 178 CHURCH ST POUGHKEEPSIE, NY 12601	14-1772752	501(C)(4)	52,894				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP PENNSYLVANIA ADVOCATES 1514 N 2ND ST HARRISBURG, PA 17102	23-2208281	501(C)(4)	208,744				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 SOUTH ATLANTIC 100 S BOYLAN AVE RALEIGH, NC 27603	56-1282557	501(C)(3)	15,370				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP SOUTHEAST ADVOCATES 241 PEACHTREE ST NE ATLANTA, GA 30303	58-1899303	501(C)(4)	140,161				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 SOUTHEAST INC 241 PEACHTREE ST NE STE 400 ATLANTA, GA 30303	58-6045874	501(C)(3)	16,193				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP TEXAS VOTES PO BOX 41646 AUSTIN, TX 78704	46-5305326	501(C)(4)	361,509				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 VERMONT ACTION FUND 784 HERCULES DR STE 110 COLCHESTER, VT 05446	03-0326364	501(C)(4)	165,054				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP VIRGINIA POLITICAL ACTION COMMITTEE 201 N HAMILTON ST RICHMOND, VA 23221	20-8710245	527	700,000				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 VOTERS OF IOWA 818 5TH AVE STE 200 DES MOINES, IA 50309	42-1357011	501(C)(4)	86,464				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP VOTERS OF NEBRASKA 818 5TH AVE STE 200 DES MOINES, IA 50309	47-0762497	501(C)(4)	76,990				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 COLORADO 7155 E 38TH AVE DENVER, CO 80207	84-1191279	501(C)(4)	365,435				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP VOTES NORTHWEST & HAWAII 2001 E MADISON SEATTLE, WA 98122	94-3168114	501(C)(4)	510,653				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 CONNECTICUT 345 WHITNEY AVE NEW HAVEN, CT 06511	06-1309773	501(C)(4)	92,028				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP VOTES RHODE ISLAND 345 WHITNEY AVE NEW HAVEN, CT 06511	05-0499804	501(C)(4)	46,913				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 S BOYLAN AVE CHAPEL HILL, NC 27603	56-2208857	501(C)(4)	181,477				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PROGRESSIVE STATE LEADERS COMMITTEE 1875 K STREET NW 4TH FL WASHINGTON, DC 20036	05-0623909	501(C)(4)	150,000				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
SIXTEEN THIRTY FUND 1201 CONNECTICUT AVE NW STE 300 WASHINGTON, DC 20005	26-4486735	501(C)(4)	250,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
TENNESSEE ADVOCATES FOR PP 50 VANTAGE WAY STE 102 NASHVILLE, TN 37228	46-2511274	501(C)(4)	137,632				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
VOICE FOR CHOICEPP OF NEW YORK CITY ACTION FUND 26 BLEECKER ST NEW YORK, NY 10012	13-3731867	501(C)(4)	496,197				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Schedule J (Form 990)	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.	OMB No 1545-0047 <div style="font-size: 2em; font-weight: bold; text-align: center;">2017</div> <div style="background-color: black; color: white; text-align: center; padding: 5px;"> Open to Public Inspection </div>
Department of the Treasury Internal Revenue Service		
Name of the organization PLANNED PARENTHOOD ACTION FUND INC		Employer identification number 13-3539048

Part I Questions Regarding Compensation		Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account </div> <div style="width: 48%;"> <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </div> </div>			
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.			
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations </div> <div style="width: 48%;"> <input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input type="checkbox"/> Approval by the board or compensation committee </div> </div>			
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 nonfixed 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 accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8		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		

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.

See Additional Data Table**Schedule J (Form 990) 2017**

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	<p>SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN RE CECILE RICHARDS THE BASE COMPENSATION OF THE PRESIDENT AND CEO IN 2017 WAS \$524,740. IN ADDITION TO COMPENSATION, PPFA MAINTAINS A NON-QUALIFIED DEFERRED COMPENSATION PLAN (457(F) PLAN) FOR CERTAIN KEY EMPLOYEES. UNDER THIS PLAN, AT THE DIRECTION OF THE BOARD OF DIRECTORS, THE PRESIDENT'S TOTAL OF \$321,354 WAS CONTRIBUTED BY PPFA BETWEEN 2014-2016 AND REPORTED AS DEFERRED COMPENSATION ON THE FORM 990 OVER THESE PREVIOUS THREE YEARS. THE PLAN REQUIRES VESTING EVERY THREE YEARS. IN 2017, \$361,507 (WHICH CONSISTS OF THE PAYMENTS TO THE PLAN OF \$108,204 IN 2014 AND \$106,575 IN BOTH 2015 AND 2016 PLUS INVESTMENT EARNINGS) VESTED AND WAS PAID OUT, WHICH IS REPORTED ON THE 2017 FORM 990. BECAUSE OF THE REQUIREMENTS OF THE FORM 990, \$321,354 OF THIS COMPENSATION WAS DEFERRED AND REPORTED ON THE FORM 990 IN PRIOR YEARS BUT IS ALSO DISCLOSED ON THE 2017 FORM 990 BECAUSE IT VESTED AND WAS PAID OUT DURING THIS TIME. IN ADDITION, THE TOTAL AMOUNT DEFERRED TO THIS PLAN FOR CALENDAR YEAR 2017 AMOUNTED TO \$106,575.</p> <p>SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN RE DAWN LAGUENS THE BASE COMPENSATION OF THE EXECUTIVE VICE PRESIDENT AND CHIEF BRAND AND EXPERIENCE OFFICER (EVP) IN 2017 WAS \$470,190. UNDER THE 457(F) PLAN, AT THE DIRECTION OF THE BOARD OF DIRECTORS, THE EVP'S TOTAL OF \$229,016 WAS CONTRIBUTED BY PPFA BETWEEN 2014-2016 AND REPORTED AS DEFERRED COMPENSATION ON THE FORM 990 OVER THESE PREVIOUS THREE YEARS. IN 2017, \$251,127 (WHICH CONSISTS OF THE PAYMENTS TO THE PLAN OF \$76,174 IN 2014, \$77,842 IN 2015 AND \$75,000 IN 2016 PLUS INVESTMENT EARNINGS) VESTED AND WAS PAID OUT, WHICH IS REPORTED AS OTHER REPORTABLE COMPENSATION ON THE 2017 FORM 990. BECAUSE OF THE REQUIREMENTS OF THE FORM 990, \$229,016 OF THIS COMPENSATION WAS DEFERRED AND REPORTED ON THE FORM 990 IN PRIOR YEARS BUT IS ALSO DISCLOSED ON THE 2017 FORM 990 BECAUSE IT WAS PAID OUT DURING THIS TIME. IN ADDITION, THE TOTAL AMOUNT DEFERRED TO THIS PLAN FOR CALENDAR YEAR 2017 AMOUNTED TO \$75,000.</p>
PART 1, LINE 3	PLANNED PARENTHOOD FEDERATION OF AMERICA, INC., A RELATED ORGANIZATION, USED THE FOLLOWING METHODS TO ESTABLISH THE COMPENSATION OF THE ORGANIZATION'S PRESIDENT: COMPENSATION COMMITTEE, INDEPENDENT COMPENSATION CONSULTANT, FORM 990 OF OTHER ORGANIZATIONS, COMPENSATION SURVEY/STUDY AND APPROVAL BY THE BOARD OR COMPENSATION COMMITTEE.
FORM 990, PART VII	CECILE RICHARDS, PRESIDENT AND CEO OF PLANNED PARENTHOOD ACTION FUND, INC. RESIGNED EFFECTIVE MAY 2, 2018. BOARD MEMBER JOE SOLMONESE RESIGNED FROM THE BOARD OF DIRECTORS ON MAY 1, 2018 AND BECAME THE TRANSITION CHAIR ON MAY 3, 2018 UNTIL A NEW PRESIDENT STARTED ON NOVEMBER 12, 2018.

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			(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				
1CECILE RICHARDS PRESIDENT & CEO THRU 5/2/18	(i)	36,732	1,750	30,641	8,321	138	77,582	27,164
	(ii)	488,008	23,250	332,054	110,549	1,831	955,692	294,190
1WALLACE D'SOUZA CFO THRU 10/20/17	(i)	21,332	0	34	1,305	3,140	25,811	0
	(ii)	215,695	0	340	13,194	31,746	260,975	0
2ABIGAIL SMITH INTERIM CFO (10/20/17-3/5/18)	(i)	17,488	0	115	1,126	4,182	22,911	0
	(ii)	176,820	0	1,166	11,383	42,288	231,657	0
3DAWN LAGUENS EVP & CHIEF BRAND & CXO	(i)	65,827	5,600	71,444	12,343	5,768	160,982	65,101
	(ii)	404,363	34,400	180,097	75,820	35,430	730,110	163,915
4JETHRO MILLER CHIEF DEVELOPMENT OFFICER	(i)	52,873	9,300	42	2,236	613	65,064	0
	(ii)	299,613	52,700	238	12,669	3,475	368,695	0
5MELVIN GALLOWAY EVP & COO	(i)	36,256	1,939	18	1,027	1,697	40,937	0
	(ii)	366,587	19,611	179	10,381	17,161	413,919	0
6DEBRA ALLIGOOD WHITE SR VP & GENERAL COUNSEL	(i)	30,236	3,208	72	1,368	2,023	36,907	0
	(ii)	305,718	32,442	732	13,831	20,455	373,178	0
7TOM SUBAK CHIEF STRATEGY OFFICER	(i)	7,735	331	9	162	784	9,021	0
	(ii)	378,994	16,219	452	7,938	38,430	442,033	0
8DANA SINGISER VP PUB POLICY & GOVT AFFAIRS	(i)	4,955	0	5	299	340	5,599	0
	(ii)	242,765	0	270	14,639	16,648	274,322	0
9DEIRDRE SCHIFELING VP ORGANIZING, ELECTORAL & CAMPAIGN	(i)	96,104	0	79	5,766	423	102,372	0
	(ii)	127,394	0	104	7,644	560	135,702	0
10REBECCA EPSTEIN VP OPERATIONS & STRATEGIC INITIATIVE	(i)	2,213	0	2	114	366	2,695	0
	(ii)	219,092	0	185	11,312	36,212	266,801	0
11EMILY STEWART VP PUBLIC POLICY	(i)	21,531	1,650	21	766	3,126	27,094	0
	(ii)	174,201	13,350	168	6,199	25,295	219,213	0

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization
PLANNED PARENTHOOD ACTION FUND INC

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

2017

Open to Public Inspection

Employer identification number

13-3539048

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	LINE #3 - DURING THE YEAR, THE ORGANIZATION DID NOT CEASE CONDUCTING OR MAKE SIGNIFICANT CHANGES IN HOW IT CONDUCTS ANY PROGRAM SERVICES THE ORGANIZATION CONSIDERS PRIOR YEAR'S PROGRAMS SERVICES TO ALL BE A PART OF ADVOCACY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE 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

990 Schedule O, Supplemental Information

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 PPFA 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

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	BOARD REVIEW OF FORM 990 THE ACTION FUND USES THE SERVICES OF THE EMPLOYEES OF PPFA, A RELATED ORGANIZATION THE ACTION FUND'S 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

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST POLICY THE ACTION FUND USES THE SERVICES OF THE EMPLOYEES OF PPFA, A RELATED ORGANIZATION ANNUALLY, PPFA ASKS ITS KEY EMPLOYEES, 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 BE PRESENT AT, OR PARTICIPATE IN DELIBERATION, OR VOTE ON THE MATTER GIVING RISE TO THE CONFLICT

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION REVIEW PROCESS THE ACTION FUND USES THE SERVICES OF THE EMPLOYEES OF 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 AND CEO, CHIEF FINANCIAL OFFICER, EVP AND 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

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	TRANSFER OF NET ASSETS TO COG -800,000

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

2017

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
(1) CANCER SURVIVORS NETWORK FOR PLANNED PARENTHOOD LLC 123 WILLIAM STREET NEW YORK, NY 10038 82-0713524	ORGANIZATION FOR PLANNED PARENTHOOD CANCER PATIENTS	DE	0	61,044	PLANNED PARENTHOOD ACTION FUND INC

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 INC	Yes	
(3) PLANNED PARENTHOOD VOTES 123 WILLIAM STREET NEW YORK, NY 10038 13-4128897	POLITICAL ACTIVITY	NY	527		PLANNED PARENTHOOD ACTION FUND INC	Yes	
(4) PLANNED PARENTHOOD GLOBAL INC 123 WILLIAM STREET NEW YORK, NY 10038 47-5312115	GLOBAL SEXUAL HEALTH	DE	501(C)(3)	LINE 7	PPFA	Yes	
(5) PP FEDERATION OF AMERICA INTERNATIONAL AFRICA REGIONAL OFFICE ARGWINGS KODHEK RD CHAKA PL PO BOX NAIROBI KE	CHARITABLE OPERATIONS	KE	501(C)(3)	LINE 7	PLANNED PARENTHOOD GLOBAL INC	Yes	
(6) PLANNED PARENTHOOD GLOBAL - UGANDA LIMITED BANK BLDG PLOT 4 NILE AVE PO BOX KAMPALA UG	CHARITABLE OPERATIONS	UG	501(C)(3)	LINE 7	PLANNED PARENTHOOD GLOBAL INC	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) Disproportionate 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	

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	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 PARENTHOOD ACTION FUND INC	C	2,726,480	745,480	100 000 %	Yes	
(2) PPGLOBAL SA C/O PPFA 123 WILLIAM ST NEW YORK, NY 10038	CHARITABLE OPERATIONS	EC	PLANNED PARENTHOOD GLOBAL INC	C					No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

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		No
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

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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.

[illegible]

Part VII **Supplemental Information**

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

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
123 WILLIAM STREET NEW YORK, NY 10038 13-1644147	SEXUAL HEALTH	NY	501(C)(3)	LINE 7	N/A		No
123 WILLIAM STREET NEW YORK, NY 10038 13-3885199	POLITICAL ACTIVITY	NY	527		PLANNED PARENTHOOD ACTION FUND INC	Yes	
123 WILLIAM STREET NEW YORK, NY 10038 13-4128897	POLITICAL ACTIVITY	NY	527		PLANNED PARENTHOOD ACTION FUND INC	Yes	
123 WILLIAM STREET NEW YORK, NY 10038 47-5312115	GLOBAL SEXUAL HEALTH	DE	501(C)(3)	LINE 7	PPFA	Yes	
ARGWINGS KODHEK RD CHAKA PL PO BO NAIROBI KE	CHARITABLE OPERATIONS	KE	501(C)(3)	LINE 7	PLANNED PARENTHOOD GLOBAL INC	Yes	
BANK BLDG PLOT 4 NILE AVE PO BOX KAMPALA UG	CHARITABLE OPERATIONS	UG	501(C)(3)	LINE 7	PLANNED PARENTHOOD GLOBAL INC	Yes	

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
COMMUNITY OUTREACH GROUP LLC	B	800,000	ACTUAL PAYMENTS
PLANNED PARENTHOOD ACTION FUND INC PAC	L	92,346	ACTUAL PAYMENTS
PLANNED PARENTHOOD VOTES	L	569,272	ESTIMATE BASED ON USAGE
COMMUNITY OUTREACH GROUP LLC	M	513,058	ACTUAL PAYMENTS
COMMUNITY OUTREACH GROUP LLC	N	73,729	ESTIMATE BASED ON USAGE
PLANNED PARENTHOOD VOTES	O	703,054	ESTIMATE BASED ON USAGE
PLANNED PARENTHOOD VOTES	Q	1,320,450	ACTUAL PAYMENTS
PLANNED PARENTHOOD VOTES	S	717,083	ACTUAL PAYMENTS