

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

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service AccomplishmentsCheck 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 \$	28,100,497	including grants of \$	11,181,844) (Revenue \$	64,397)
See Additional Data					

4b	(Code) (Expenses \$	3,943,078	including grants of \$	1,266,571) (Revenue \$)
See Additional Data					























4c	(Code) (Expenses \$	80,225	including grants of \$	61,022) (Revenue \$)
See Additional Data					

(Code) (Expenses \$	68,251	including grants of \$	11,250) (Revenue \$)
DEPLOY 21ST CENTURY TECHNOLOGY - PROGRAMS DESIGNED TO EXPAND THE REACH OF REPRODUCTIVE HEALTH SERVICES AND ADVOCACY THROUGH THE DEPLOYMENT OF DIGITAL TOOLS				

4d	Other program services (Describe in Schedule O)				
(Expenses \$	68,251	including grants of \$	11,250) (Revenue \$)	

4e	Total program service expenses ▶	32,192,051			
-----------	---	------------	--	--	--

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3 Yes	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	5 Yes	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a	No
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 	14b 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? If "Yes," complete Schedule F, Parts II and IV 	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? If "Yes," complete Schedule F, Parts III and IV 	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17 Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No

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	1a77		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	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	2a0		
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	15	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent	15	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	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 ☐

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

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

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

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

[illegible]

[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 ▶ 5

Section B. Independent Contractors

(A) Name and business address	(B) Description of services	(C) Compensation
O'BRIEN GARRETT 1133 19TH ST NW SUITE 300 WASHINGTON, DC 20036	CONSULTING	2,865,959
GRASSROOTS CAMPAIGNS INC 1321 15TH ST SUITE 100 DENVER, CO 80202	CANVASSING	1,387,609
COMMUNITY OUTREACH GROUP INC 123 WILLIAM STREET NEW YORK, NY 10038	CANVASSING	1,070,522
MANATT PHELPS & PHILLIPS LLP 11355 W OLYMPIC BLVD LOS ANGELES, CA 90064	CONSULTING	571,762
RISING TIDE INTERACTIVE LLC 901 NEW YORK AVE STE 470E WASHINGTON, DC 20001	MARKETING	457,000

<p>2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 21</p>	
---	--

Part VIII Statement of RevenueCheck 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	1,833,210			
	c Fundraising events . . .	1c				
	d Related organizations	1d	1,200,000			
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	46,918,182			
	g Noncash contributions included in lines 1a-1f \$ _____					
	h Total. Add lines 1a-1f ▶		49,951,392			
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 ▶		46,124			46,124
			(i) Real	(ii) Personal		
	6a Gross rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) ▶					
			(i) Securities	(ii) Other		
	7a Gross amount from sales of assets other than inventory					
	b Less cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss) ▶					
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a					
	b Less direct expenses b					
	c Net income or (loss) from fundraising events . . . ▶					
	9a Gross income from gaming activities See Part IV, line 19 a					
	b Less direct expenses b					
	c Net income or (loss) from gaming activities . . . ▶					
	10a Gross sales of inventory, less returns and allowances . . . a					
	b Less cost of goods sold . . . b					
c Net income or (loss) from sales of inventory . . . ▶						
Miscellaneous Revenue		Business Code				
11a OVERHEAD COSTS FROM COG		561000	49,704	49,704		
b MISCELLANEOUS INCOME		900099	14,693	14,693		
c _____						
d All other revenue						
e Total. Add lines 11a-11d ▶			64,397			
12 Total revenue. See Instructions ▶			50,061,913	64,397	0	46,124

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.	12,472,816	12,472,816		
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.	47,871	47,871		
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	686,598	404,853	153,494	128,251
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	4,662,782	3,019,952	611,013	1,031,817
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	14,613	8,169	3,548	2,896
9 Other employee benefits.	930,951	607,673	118,847	204,431
10 Payroll taxes.	347,771	221,326	49,845	76,600
11 Fees for services (non-employees):				
a Management.				
b Legal.	19,334		19,334	
c Accounting.	56,968		56,968	
d Lobbying.	668,402	668,402		
e Professional fundraising services. See Part IV, line 17.	3,285,447			3,285,447
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).	5,800,189	5,516,477	155,316	128,396
12 Advertising and promotion.	3,459,124	3,049,118		410,006
13 Office expenses.	2,570,531	1,685,260	39,402	845,869
14 Information technology.	349,865	70,821	1,385	277,659
15 Royalties.				
16 Occupancy.	576,869	324,002	4,869	247,998
17 Travel.	1,331,466	1,282,548	22,479	26,439
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	770,127	660,439	45,811	63,877
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	224,908	125,970	1,905	97,033
23 Insurance.	83,134	46,563	704	35,867
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	2,615,816	1,235,976		1,379,840
b PRINTING & ARTWORK	643,240	632,045	2,867	8,328
c REIMBURSED EXPENSES	88,698	84,298	3,003	1,397
d REPAIRS & MAINTENANCE	33,235	17,564	2,141	13,530
e All other expenses	357,574	9,908	341,189	6,477
25 Total functional expenses. Add lines 1 through 24e.	42,098,329	32,192,051	1,634,120	8,272,158
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).	4,618,868	2,182,420	0	2,436,448

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	6,153,995	1	12,168,563
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	1,224,648	3	6,726,767
	4	Accounts receivable, net	60,272	4	13,995
	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	491,255	9	205,557
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.		10c	
	b	Less: accumulated depreciation			
	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	893,882	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	8,824,052	16	19,114,882
Liabilities	17	Accounts payable and accrued expenses	1,644,219	17	2,983,013
	18	Grants payable	638,213	18	1,945,529
	19	Deferred revenue	1,667,834	19	1,264,438
	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.	0	25	86,861
	26	Total liabilities. Add lines 17 through 25	3,950,266	26	6,279,841
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	166,710	27	1,538,706
	28	Temporarily restricted net assets	4,707,076	28	11,296,335
	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	4,873,786	33	12,835,041
	34	Total liabilities and net assets/fund balances	8,824,052	34	19,114,882

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	50,061,913
2	Total expenses (must equal Part IX, column (A), line 25)	2	42,098,329
3	Revenue less expenses Subtract line 2 from line 1	3	7,963,584
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,873,786
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	-2,329
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	12,835,041

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 (2016)

Form 990, Part III, Line 4a:

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

Form 990, Part III, Line 4b:

PROMOTE HEALTH EQUITY - PROGRAMS DESIGNED TO IMPROVE AND PROTECT THE ABILITY TO PROVIDE HIGH-QUALITY REPRODUCTIVE HEALTHCARE FOR ALL

Form 990, Part III, Line 4c:

GLOBAL - PROGRAMS DESIGNED TO IMPROVE REPRODUCTIVE HEALTH OUTCOMES INTERNATIONALLY BY SUPPORTING THE ACTION FUND'S INTERNATIONAL PARTNERS IN
HEALTH CARE ADVOCACY, SERVICE DELIVERY AND SEX EDUCATION

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

(A)

(B)

(C)

(D)

(E)

(F)

Name and Title	Average hours per week (list any hours for related organizations below dotted line)	Position (do not check more than one box, unless person is both an officer and a director/trustee)						Reportable compensation from the organization (W- 2/1099-MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LAURA TUCKER CHAIR & DIR THRU 3/30/17	1 00	X		X				0	0	0
URVASHI VAID CHAIR STARTING 3/31/17	1 00	X		X				0	0	0
JENNIE ROSENTHAL BERLIANT VICE CHAIR STARTING 3/31/17	1 00	X		X				0	0	0
KIKI MCLEAN SECRETARY	1 00	X		X				0	0	0
JULIANNA SMOOT TREASURER THRU 3/30/17	1 00	X		X				0	0	0
GABRIEL STRICKER TREASURER STARTING 3/31/17	1 00	X		X				0	0	0
UMI SELAH FKA 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
GOV JIM DOYLE 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			
ALEXIS MCGILL JOHNSON DIRECTOR	1 00	X						0	0	0
KIM MOLSTRE DIRECTOR	1 00	X						0	0	0
DONYA NASSER DIRECTOR	1 00	X						0	0	0
TIMOTHY STANLEY DIRECTOR	1 00	X						0	0	0
JOE SOLMONESE STARTING 33117 DIRECTOR	1 00	X						0	0	0
LUZ TOWNS-MIRANDA DIRECTOR	1 00	X						0	0	0
CECILE RICHARDS PRESIDENT & CEO	5 00 30 00			X				93,827	531,687	119,319
WALLACE D'SOUZA CHIEF FINANCIAL OFFICER	3 00 32 00			X				21,846	251,238	52,868
DAWN LAGUENS EVP& CHIEF BRAND& EXPERIENCE OFFICER	26 00 9 00				X			375,581	138,914	124,037
JETHRO MILLER CHIEF DEVELOPMENT OFFICER	4 00 31 00				X			38,807	349,259	18,817

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			
MELVIN GALLOWAY EVP & CHIEF OPERATING OFFICER	2 00 33 00				X			15,800	300,181	26,120
DEBRA ALLIGOOD WHITE SR VP & GENERAL COUNSEL	4 00 31 00				X			33,149	298,351	39,751
TOM SUBAK CHIEF STRATEGY OFFICER &ASST TO PRESIDENT	1 00 34 00					X		7,455	365,295	41,178
JENNIE THOMPSON MANAGING DIRECTOR, DEVELOPMENT	4 00 31 00					X		27,300	245,704	26,664
ANN FOX NATIONAL DIR PRINCIPAL & MAJOR GIFTS	4 00 31 00					X		30,193	221,414	34,099
DANA SINGISER VP, PUBLIC POLICY & GOV AFFAIRS	8 00 27 00					X		58,623	185,642	29,502
ANN MCGUINNESS SR PHILANTHROPY ADVISOR	7 00 28 00					X		48,014	192,056	46,519

SCHEDULE C (Form 990 or 990-EZ)	Political Campaign and Lobbying Activities For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 .	OMB No 1545-0047
		2016 Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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	
2 Political expenditures	▶ \$ 10,352,511
3 Volunteer hours	

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

1 Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$	
2 Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$	
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?		<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	▶ \$	3,984,829
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$	4,773,358
3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$	8,758,187
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 See Additional Data Table				
2				
3				
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) 2013	(b) 2014	(c) 2015	(d) 2016	(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).

Additional Data

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

Form 990, Schedule C, Part 1-C, Line 5

(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-
PP ACTION PAC NORTH CAROLINA	100 S BOYLAN AVE RALEIGH, NC 27603	813387952	1510000	
PP VOTES - ST LOUIS & SW MISSOURI	4251 FOREST PARK AVE ST LOUIS, MO 63108	912070134	195000	
PP GREAT PLAINS VOTES PAC	4401 W 109TH ST 200 OVERLAND PARK, KS 66211	813024710	156000	
DEMOCRATIC GOVERNORS ASSOCIATION	1225 EYE ST NW 1100 WASHINGTON, DC 20005	521304889	140000	
PP VOTES WASHINGTON PAC	PO BOX 21372 SEATTLE, WA 98111	201089684	75000	
NEVADA STATE DEMOCRATIC PARTY	409 HORN STREET LAS VEGAS, NV 89107	880189294	60000	
PP MAINE ACTION FUND PAC	443 CONGRESS ST FL 3 PORTLAND, ME 04101	841703435	25000	
DEMOCRATIC ATTORNEYS GENERAL ASSOCIATION	PO BOX 15776 WASHINGTON, DC 20003	134220019	10000	
LPAC	1001 G ST NW 800 WASHINGTON, DC 20001	454998863	5000	
YOUNG DEMOCRATS OF AMERICA	PO BOX 77496 WASHINGTON, DC 20013	311427385	1500	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493116004208

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

2016

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.

(a) Donor advised funds

(b) Funds and other accounts

1

Total number at end of year

2

Aggregate value of contributions to (during year)

3

Aggregate value of grants from (during year)

4

Aggregate value at end of year

5

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes

☐ No

6

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes

☐ No

Part II

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

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

2b

2c

2d

Held at the End of the Year

3

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

4

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

5

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

6

Number of states where property subject to conservation easement is located ►

7

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

8

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

9

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

10

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

11

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) 2016

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

Schedule D (Form 990) 2016

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.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
DUE TO PLANNED PARENTHOOD FEDERATION OF AMERICA, INC	86,861
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	86,861

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

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

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

OMB No 1545-0047

2016

**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) CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS	REPRODUCTIVE HEALTH	47,871
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	0			47,871
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			47,871

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	41,530	WIRE TRANSFER			
(2)			CENTRAL AMERICA AND THE CARIBBEAN	TO SUPPORT REPRODUCTIVE HEALTH PROGRAMS	6,341	WIRE TRANSFER			
(3)									
(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 **2**
- 3 Enter total number of other organizations or entities **2**

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)* ☐ 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)* ☐ 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

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493116004208

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

2016

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 1901 L STREET NW STE 800 WASHINGTON, DC 20036	CONSULTING		No	9,431,360	1,304,113	8,127,247
2 O'BRIEN GARRETT 1133 19TH STREET NW SUITE 300 WASHINGTON, DC 20036	CONSULTING		No	8,803,102	154,648	8,648,454
3 GRASSROOTS CAMPAIGNS INC 1321 15TH ST SUITE 100 DENVER, CO 80202	CANVASSING		No	742,134	1,297,170	-555,036
4 DONOR SERVICES GROUP 6715 SUNSET BLVD LOS ANGELES, CA 90028	TELEMARKETING		No	309,563	304,429	5,134
5 TELEFUND INC PO BOX 2366 DENVER, CO 80201	TELEMARKETING		No	140,101	157,869	-17,768
6 PUBLIC INTEREST COMMUNICATIONS 7700 LEESBURG PIKE SUITE 301N FALLS CHURCH, VA 22043	TELEMARKETING		No	58,332	18,433	39,899
7 INTEGRAL RESOURCES INC 1972 MASSACHUSETTS AVE CAMBRIDGE, MA 02140	TELEMARKETING		No	44,022	47,785	-3,763
8						
9						
10						
Total				19,528,614	3,284,447	16,244,167

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, WI, WV, 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) 2016

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.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))
		(event type)	(event type)	(total number)	
Direct Expenses	1 Gross receipts				
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)				
	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.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Direct Expenses	1 Gross revenue				
	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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No						
13 Indicate the percentage of gaming activity conducted in							
a The organization's facility	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 10%;">13a</td> <td style="width: 80%;"></td> <td style="width: 10%; text-align: right;">%</td> </tr> <tr> <td>13b</td> <td></td> <td style="text-align: right;">%</td> </tr> </table>	13a		%	13b		%
13a		%					
13b		%					
b An outside facility							
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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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 ▶							
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> 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?							
<input type="checkbox"/> Yes <input type="checkbox"/> No							
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$							

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

Return Reference	Explanation
PART 1, LINE 2B, COLUMN (V) & FORM 990, PART IX, LINE 24A	IN ADDITION TO PROFESSIONAL FUNDRAISER EXPENSES INCLUDED IN LINE 11E, \$2,615,816 OF OTHER REIMBURSED EXPENSES WERE PAID DIRECTLY TO PROFESSIONAL FUNDRAISERS FOR POSTAGE (\$1,197,005), PRINTING (\$675,337), MAILHOUSE COSTS (\$494,832) AND LIST USAGE (\$248,642) THE PROFESSIONAL FUNDRAISER CONTRACTS AND THE INVOICES PAID DISTINGUISH BETWEEN PAYMENT FOR SERVICES AND PAYMENT FOR THESE EXPENSES
PART 1, LINE 2B, COLUMN (VI)	AMOUNTS PAID TO SELECT FUNDRAISERS, SUCH AS GRASSROOTS CAMPAIGNS, INC RESULTED IN A CURRENT YEAR LOSS BUT SECURED FUTURE DONORS

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493116004208

Schedule I
(Form 990)

OMB No 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization
PLANNED PARENTHOOD ACTION FUND INC

Employer identification number
13-3539048

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							
(1)							
(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 30

3 Enter total number of other organizations listed in the line 1 table 58

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(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
ADVOCATES OF PP OF THE ST LOUIS REGION & SW MO 4251 FOREST PARK AVE ST LOUIS, MO 63108	43-1699908	501(C)(4)	65,541				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
AMERICA VOTES 1155 CONNECTICUT AVE NW STE 600 WASHINGTON, DC 20036	26-4568349	501(C)(4)	17,500				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BUS FEDERATION CIVIC FUND 333 SE 2ND AVE PORTLAND, OR 97214	46-2465621	501(C)(3)	25,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
CALIFORNIA LATINAS FOR REPRODUCTIVE JUSTICE 244 S SAN PEDRO ST LOS ANGELES, CA 90012	26-2213868	501(C)(3)	30,000				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
CALIFORNIA PP EDUCATION FUND INC 555 CAPITOL MALL STE 510 SACRAMENTO, CA 95814	68-0358026	501(C)(3)	46,775				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
DEMOCRATIC ATTORNEYS GENERAL ASSOCIATION PO BOX 15776 WASHINGTON, DC 20003	13-4220019	527	10,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DEMOCRATIC GOVERNORS ASSOCIATION 1225 EYE ST NW STE 1100 WASHINGTON, DC 20005	52-1304889	527	140,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
FLORIDA ALLIANCE OF PP AFFILIATES INC 736 CENTRAL AVE 100 SARASOTA, FL 34236	59-3142119	501(C)(4)	263,116				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
INTERMOUNTAIN PP 1116 GRAND AVE STE 101 201 BILLINGS, MT 59102	81-0307201	501(C)(3)	35,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
LPAC 1001 G ST NW STE 800 WASHINGTON, DC 20001	45-4998863	527	5,000				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
NARAL PRO-CHOICE OHIO FOUNDATION 12000 SHAKER BLVD CLEVELAND, OH 44120	31-1212322	501(C)(3)	5,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
NATIONAL ASSOCIATION OF BLACK JOURNALISTS 1100 KNIGHT HALL STE 3100 COLLEGE PARK, MD 20742	52-1266959	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
NEVADA STATE DEMOCRATIC PARTY 409 HORN STREET LAS VEGAS, NV 89107	88-0189294	527	60,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ACTION COUNCIL OF UTAH INC 654 SOUTH 900 EAST SALT LAKE CTY, UT 84102	87-0489105	501(C)(4)	36,663				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 NEW JERSEY INC 196 SPEEDWELL AVE MORRISTOWN, NJ 07960	22-3243732	501(C)(4)	209,925				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ACTION FUND OF THE PACIFIC SOUTHWEST 1075 CAMINO DEL RIO SOUTH SAN DIEGO, CA 92108	33-0476427	501(C)(4)	112,292				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 PAC NORTH CAROLINA 100 S BOYLAN AVE RALEIGH, NC 27603	81-3387952	527	1,510,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCACY FUND INC 1055 COMMONWEALTH AVE BOSTON, MA 02215	22-2517673	501(C)(4)	324,790				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 DELAWARE INC 625 N SHIPLEY ST WILMINGTON, DE 19801	51-0329430	501(C)(4)	39,787				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES MAR MONTE 1691 THE ALAMEDA SAN JOSE, CA 95126	77-0261817	501(C)(4)	456,737				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 ARIZONA 7451 N 15TH ST PHOENIX, AZ 85014	86-0701472	501(C)(4)	258,552				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF INDIANA & KENTUCKY INC 200 SOUTH MERIDIAN ST INDIANAPOLIS, IN 46225	35-1959672	501(C)(4)	147,431				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)	281,614				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF MONTANA 1116 GRAND AVE STE 1 201 BILLINGS, MT 59102	81-0467220	501(C)(4)	37,336				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 NEW YORK INC 194 WASHINGTON AVE SUITE 620 ALBANY, NY 12210	14-1748419	501(C)(4)	19,749				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF OHIO 206 EAST STATE ST COLUMBUS, OH 43215	31-0937837	501(C)(4)	100,671				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 OREGON PO BOX 12267 PORTLAND, OR 97212	93-1040482	501(C)(4)	14,213				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES OF VIRGINIA INC 201 N HAMILTON ST RICHMOND, VA 23221	54-1186756	501(C)(4)	163,848				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 WISCONSIN 302 N JACKSON ST MILWAUKEE, WI 53202	39-1678012	501(C)(4)	226,347				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ADVOCATES PASADENA & SAN GABRIEL VALLEY 2333 LAKE AVE FL 2 ALTADENA, CA 91001	47-5501097	501(C)(4)	44,015				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 AFFILIATES OF CALIFORNIA INC 555 CAPITOL MALL STE 510 SACRAMENTO, CA 95814	94-2236102	501(C)(4)	10,681				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP ARIZONA INC 4751 N 15TH ST PHOENIX, AZ 85014	86-0146520	501(C)(3)	28,950				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 ASSOCIATION OF PENNSYLVANIA 1514 N 2ND ST HARRISBURG, PA 17102	23-1989400	501(C)(3)	26,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP CENTRAL COAST ACTION FUND 518 GARDEN ST SANTA BARBARA, CA 93101	77-0304037	501(C)(4)	54,012				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 EMPIRE STATE ACTS INC 194 WASHINGTON AVE SUITE 620 ALBANY, NY 12210	14-1593876	501(C)(4)	16,412				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP GREAT PLAINS 4401 WEST 109TH ST OVERLAND PARK, KS 66211	44-0565390	501(C)(3)	31,500				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PP GREAT PLAINS VOTES 4401 W 109TH ST STE 200 OVERLAND PARK, KS 66211	43-1621500	501(C)(4)	142,035				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP GREAT PLAINS VOTES PAC 4401 W 109TH ST STE 200 OVERLAND PARK, KS 66211	81-3024710	527	156,000				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 GULF COAST INC 4600 GULF FREEWAY HOUSTON, TX 77023	74-1100163	501(C)(3)	55,970				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP HUDSON PECONIC ACTION FUND INC 4 SKYLINE DR HAWTHORNE, NY 10532	13-4133042	501(C)(4)	107,675				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 KEYSTONE 5920 HAMILTON BLVD ALLENTOWN, PA 18106	23-2450112	501(C)(3)	25,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP LEAGUE OF MASSACHUSETTS INC 1055 COMMONWEALTH AVE BOSTON, MA 02215	04-2698497	501(C)(3)	20,000				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 MAINE ACTION FUND INC 784 HERCULES DR SUITE 110 COLCHESTER, VT 05446	46-5689688	501(C)(4)	255,746				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP MAINE ACTION FUND PAC 443 CONGRESS ST FL 3 PORTLAND, ME 04101	84-1703435	527	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 MINNESOTA NORTH DAKOTA SOUTH DAKOTA 671 VANDALIA ST SAINT PAUL, MN 55114	41-0948382	501(C)(3)	55,150				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP MOHAWK HUDSON INC 1040 STATE ST SCHENECTADY, NY 12307	14-6004167	501(C)(3)	30,150				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 NEW HAMPSHIRE ACTION FUND 784 HERCULES DR SUITE 110 COLCHESTER, VT 05446	46-5554692	501(C)(4)	68,741				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP NORTHERN CALIFORNIA ACTION FUND PO BOX 1116 CONCORD, CA 94522	20-1489361	501(C)(4)	327,675				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 CENTRAL & WESTERN NY ACTION FUND INC 114 UNIVERSITY AVE ROCHESTER, NY 14605	45-4269785	501(C)(4)	40,914				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF DELAWARE INC 625 SHIPLEY ST WILMINGTON, DE 19801	51-0066725	501(C)(3)	35,150				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 GREATER OHIO 206 EAST STATE ST COLUMBUS, OH 43215	34-1015976	501(C)(3)	30,500				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF ILLINOIS ACTION 18 SOUTH MICHIGAN AVE 6TH FLOOR CHICAGO, IL 60603	37-1021751	501(C)(4)	261,977				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 INDIANA & KENTUCKY INC 200 SOUTH MERIDIAN ST NO 400 INDIANAPOLIS, IN 46225	35-0874276	501(C)(3)	54,650				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF MARYLAND INC 330 NORTH HOWARD STREET BALTIMORE, MD 21201	52-0607930	501(C)(3)	12,650				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)	198,618				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF MICHIGAN 950 VICTORS WAY ANN ARBOR, MI 48108	38-1707521	501(C)(3)	20,471				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PP OF MINNESOTA ND SD ACTION FUND INC 671 VANDALIA ST ST PAUL, MN 55114	41-1709702	501(C)(4)	271,651				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF NASSAU COUNTY ACTION FUND INC 540 FULTON AVENUE HEMPSTEAD, NY 11550	38-3649080	501(C)(4)	61,083				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 NEW YORK CITY INC 26 BLEECKER ST NEW YORK, NY 10012	13-2621497	501(C)(3)	30,150				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF SOUTH EAST AND NORTH FLORIDA 2300 N FLORIDA MANGO RD WEST PALM BEACH, FL 33409	59-1391115	501(C)(3)	58,425				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)	105,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF THE HEARTLAND INC 818 5TH AVE NO 200 DES MOINES, IA 50309	42-0727488	501(C)(3)	6,000				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)	26,450				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP OF THE ROCKY MOUNTAINS ACTION FUND 7155 E 38TH AVE DENVER, CO 80207	84-1191279	501(C)(4)	242,268				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 PENNSYLVANIA ADVOCATES 1514 N 2ND ST HARRISBURG, PA 17102	23-2208281	501(C)(4)	746,361				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP SOUTH ATLANTIC 100 S BOYLAN AVE RALEIGH, NC 27603	56-1282557	501(C)(3)	57,025				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 ADVOCATES 241 PEACHTREE ST NE STE 400 ATLANTA, GA 30303	58-1899303	501(C)(4)	199,317				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP SOUTHEAST INC 241 PEACHTREE ST NE STE 400 ATLANTA, GA 30303	58-6045874	501(C)(3)	60,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PP TEXAS VOTES 2708S LANAR BLVD STE 200A AUSTIN, TX 78704	46-5305326	501(C)(4)	458,612				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP VERMONT ACTION FUND 784 HERCULES DR SUITE 110 COLCHESTER, VT 05446	03-0326364	501(C)(4)	32,616				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 NO 200 DES MOINES, IA 50309	42-1357011	501(C)(4)	226,562				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP VOTERS OF NEBRASKA 3105 N 93RD ST OMAHA, NE 68134	47-0762497	501(C)(4)	12,248				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
PPVOTES - ST LOUIS & SW MO 4251 FOREST PARK AVE ST LOUIS, MO 63108	91-2070134	527	195,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP VOTES NORTHWEST AND HAWAII 2001 E MADISON ST SEATTLE, WA 98122	94-3168114	501(C)(4)	541,575				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 WASHINGTON PAC PO BOX 21372 SEATTLE, WA 98111	20-1089684	527	75,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP VOTES CONNECTICUT 345 WHITNEY AVE NEW HAVEN, CT 06511	06-1309773	501(C)(4)	99,999				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 RHODE ISLAND 345 WHITNEY AVE NEW HAVEN, CT 06511	05-0499804	501(C)(4)	87,384				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PP VOTES SOUTH ATLANTIC 100 S BOYLAN AVE RALEIGH, NC 27603	56-2208857	501(C)(4)	250,188				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
PROGRESSIVE STATE LEADERS COMMITTEE 1875 K STREET NW 4TH FLOOR WASHINGTON, DC 20036	05-0623909	501(C)(4)	50,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
PROGRESSIVE THOUGHTS MATTER INC 7453 QUINCY CT INDIANAPOLIS, IN 46254	47-5035236	501(C)(4)	50,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROCKY MOUNTAIN PP INC 7155 EAST 38TH AVE DENVER, CO 80207	84-0404253	501(C)(3)	88,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
SISTER SONG INC 1237 RALPH D ABERNATHY BLVD SW ATLANTA, GA 30310	51-0544927	501(C)(3)	50,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SISTERREACH 1750 MADISON AVE SUITE 600 MEMPHIS, TN 38104	45-4013343	501(C)(3)	30,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
TENNESSEE ADVOCATES FOR PP 50 VANTAGE WAY STE 102 NASHVILLE, TN 37228	46-2511274	501(C)(4)	203,364				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
THE ADVOCACY FUND PO BOX 29229 SAN FRANCISCO, CA 94129	94-3153687	501(C)(4)	705,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
THE EDUCATION FUND OF FAMILY PLANNING ADVOCATES OF NYS 194 WASHINGTON AVE ALBANY, NY 12210	22-2757367	501(C)(3)	20,000				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
US CONFERENCE OF MAYORS 1620 EYE STREET NW WASHINGTON, DC 20006	53-0196642	501(C)(3)	10,000				TO SUPPORT PUBLIC AFFAIRS PROGRAMS
VOICE FOR CHOICEPP OF NEW YORK CITY ACTION FUND 26 BLEECKER ST NEW YORK, NY 10012	13-3731867	501(C)(4)	584,574				TO SUPPORT PUBLIC AFFAIRS PROGRAMS

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

OMB No 1545-0047

2015
Open to Public Inspection

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.

Name of the organization
PLANNED PARENTHOOD ACTION FUND INC

Employer identification number
13-3539048

Part I

Questions Regarding Compensation

	Yes	No
<div>1a</div> <div>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> <div><div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div><div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</div></div></div>		
<div>b</div> <div>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.</div>	1b	
<div>2</div> <div>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?</div>	2	
<div>3</div> <div>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> <div><div><div><input type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div></div><div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Approval by the board or compensation committee</div></div></div>		
<div>4</div> <div>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:</div>		
<div>a</div> <div>Receive a severance payment or change-of-control payment?</div>	4a	No
<div>b</div> <div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div>	4b	Yes
<div>c</div> <div>Participate in, or receive payment from, an equity-based compensation arrangement?</div>	4c	No
<div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</div>		
<div>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</div>		
<div>5</div> <div>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:</div>		
<div>a</div> <div>The organization?</div>	5a	No
<div>b</div> <div>Any related organization?</div>	5b	No
<div>If "Yes," on line 5a or 5b, describe in Part III.</div>		
<div>6</div> <div>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:</div>		
<div>a</div> <div>The organization?</div>	6a	No
<div>b</div> <div>Any related organization?</div>	6b	No
<div>If "Yes," on line 6a or 6b, describe in Part III.</div>		
<div>7</div> <div>For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</div>	7	No
<div>8</div> <div>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.</div>	8	No
<div>9</div> <div>If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</div>	9	

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

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

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

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

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 4B	THE PRESIDENT AND CEO, CECILE RICHARDS, PARTICIPATED IN A NONQUALIFIED DEFERRED COMPENSATION PLAN ("457(F) PLAN") BEGINNING IN CALENDAR YEAR 2011. THE TOTAL AMOUNT DEFERRED TO THIS PLAN FOR CALENDAR YEAR 2016 AMOUNTED TO \$106,575. THE EVP AND CHIEF BRAND AND EXPERIENCE OFFICER, DAWN LAGUENS, PARTICIPATED IN A 457(F) PLAN BEGINNING IN CALENDAR YEAR 2014. THE TOTAL AMOUNT DEFERRED TO THIS PLAN FOR THE CALENDAR YEAR 2016 AMOUNTED TO \$75,000.
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.

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	(i)	78,711	15,000	116	17,603	296	111,726	0
	(ii)	446,029	85,000	658	99,747	-	-	0
						1,673	633,107	
1WALLACE D'SOUZA CHIEF FINANCIAL OFFICER	(i)	20,211	1,600	35	1,264	2,966	26,076	0
	(ii)	232,443	18,400	395	14,532	-	-	0
						34,106	299,876	
2DAWN LAGUENS EVP& CHIEF BRAND& EXPERIENCE OFFICER	(i)	346,079	29,200	302	64,181	26,366	466,128	0
	(ii)	128,002	10,800	112	23,738	-	-	0
						9,752	172,404	
3JETHRO MILLER CHIEF DEVELOPMENT OFFICER	(i)	33,780	5,000	27	1,495	387	40,689	0
	(ii)	304,016	45,000	243	13,455	-	-	0
						3,480	366,194	
4MELVIN GALLOWAY EVP & CHIEF OPERATING OFFICER	(i)	15,291	500	9	452	853	17,105	0
	(ii)	290,527	9,500	154	8,597	-	-	0
						16,218	324,996	
5DEBRA ALLIGOOD WHITE SR VP & GENERAL COUNSEL	(i)	30,572	2,500	77	1,564	2,411	37,124	0
	(ii)	275,154	22,500	697	14,079	-	-	0
						21,697	334,127	
6TOM SUBAK CHIEF STRATEGY OFFICER &ASST TO PRES	(i)	6,846	600	9	152	671	8,278	0
	(ii)	335,474	29,400	421	7,452	-	-	0
						32,903	405,650	
7JENNIE THOMPSON MANAGING DIRECTOR, DEVELOPMENT	(i)	27,063	0	237	1,212	1,454	29,966	0
	(ii)	243,568	0	2,136	10,908	-	-	0
						13,090	269,702	
8ANN FOX NATIONAL DIR PRINCIPAL & MAJOR GIFTS	(i)	30,096	0	97	756	3,336	34,285	0
	(ii)	220,706	0	708	5,543	-	-	0
						24,464	251,421	
9DANA SINGISER VP, PUBLIC POLICY & GOV AFFAIRS	(i)	58,556	0	67	3,531	3,550	65,704	0
	(ii)	185,429	0	213	11,181	-	-	0
						11,240	208,063	
10ANN MCGUINESS SR PHILANTHROPY ADVISOR	(i)	48,014	0	0	2,933	6,371	57,318	0
	(ii)	192,056	0	0	11,730	-	-	0
						25,485	229,271	

SCHEDULE O (Form 990 or 990-EZ) <small>Department of the Treasury Internal Revenue Service</small>	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
		2016 Open to Public Inspection
Name of the organization PLANNED PARENTHOOD ACTION FUND INC	Employer identification number 13-3539048	

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 4	THE ACTION FUND BYLAWS WERE AMENDED AS OF JULY 1, 2016 TO PROVIDE FOR VARIOUS CHANGES IN THE GOVERNANCE OF THE ORGANIZATION, INCLUDING, AMONG OTHER THINGS TO INCLUDE THE ACTION FUND DIRECTORS AS VOTING MEMBERS OF THE ORGANIZATION, TO ADJUST THE TERMS FOR DIRECTORS AND OFFICERS, AND TO CREATE A STAGGERED BOARD THE AMENDMENTS TO THE BYLAWS WERE APPROVED BY A VOTE OF THE MEMBERSHIP AT THE ANNUAL MEETING HELD ON JUNE 9, 2016

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 (INTERIM) 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, AS WELL AS ALL OTHER EMPLOYEES, AND OFFICERS TO REVIEW AND SIGN A CONFLICT OF INTEREST POLICY IN ADDITION, THE ACTION FUND HAS ITS BOARD MEMBERS SIGN A CONFLICT OF INTEREST POLICY ANNUALLY THE ACTION FUND'S LEGAL COUNSEL FOLLOWS UP TO RESOLVE ANY DISCLOSED CONFLICTS IF A CONFLICT IS IDENTIFIED, THE INTERESTED INDIVIDUAL MAY NOT PARTICIPATE IN DELIBERATIONS OR DISCUSSIONS, BE PRESENT FOR A VOTE, OR VOTE ON THE MATTER

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 IX, LINE 11G	OTHER FEES FOR SERVICES PROGRAM SERVICE EXPENSES 5,516,477 MANAGEMENT AND GENERAL EXPENSES 155,316 FUNDRAISING EXPENSES 128,396 TOTAL EXPENSES 5,800,189

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G, COL A	OTHER FEES FOR SERVICES - \$5,800,189 CONSISTS OF CONSULTANT FEES (\$3,566,576), DATABASE FEES (\$97,739), TEMPORARY HELP FROM EXTERNAL AGENCIES (\$84,082), SECURITY SERVICES (\$83,505), DIRECT MAIL PROCESSING (\$57,208), LIST USAGE (\$54,134)AND OTHER PROFESSIONAL FEES (\$1,856,945)

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	LOSS ON CONTRIBUTION RECEIVABLE -2,329

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

2016

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	500,000	61,344	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	13,030,522	605,599	100.000 %	Yes	

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

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

No

c Gift, grant, or capital contribution from related organization(s)

1c

Yes

d Loans or loan guarantees to or for related organization(s)

1d

No

e Loans or loan guarantees by related organization(s)

1e

No

f Dividends from related organization(s)

1f

No

g Sale of assets to related organization(s)

1g

No

h Purchase of assets from related organization(s)

1h

No

i Exchange of assets with related organization(s)

1i

No

j Lease of facilities, equipment, or other assets to related organization(s)

1j

No

k Lease of facilities, equipment, or other assets from related organization(s)

1k

No

l Performance of services or membership or fundraising solicitations for related organization(s)

1l

Yes

m Performance of services or membership or fundraising solicitations by related organization(s)

1m

Yes

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

1n

Yes

o Sharing of paid employees with related organization(s)

1o

Yes

p Reimbursement paid to related organization(s) for expenses

1p

Yes

q Reimbursement paid by related organization(s) for expenses

1q

Yes

r Other transfer of cash or property to related organization(s)

1r

Yes

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
(1) 123 WILLIAM STREET NEW YORK, NY 10038 13-1644147	SEXUAL HEALTH	NY	501(C)(3)	LINE 7	N/A		No
(1) 123 WILLIAM STREET NEW YORK, NY 10038 13-3885199	POLITICAL ACTIVITY	NY	527		PLANNED PARENTHOOD ACTION FUND INC	Yes	
(2) 123 WILLIAM STREET NEW YORK, NY 10038 13-4128897	POLITICAL ACTIVITY	NY	527		PLANNED PARENTHOOD ACTION FUND INC	Yes	
(3) 123 WILLIAM STREET NEW YORK, NY 10038 47-5312115	GLOBAL SEXUAL HEALTH	DE	501(C)(3)	LINE 7	PPFA	Yes	
(4) ARGWINGS KODHEK RD CHAKA PL PO BO NAIROBI KE	CHARITABLE OPERATIONS	KE	501(C)(3)	LINE 7	PLANNED PARENTHOOD GLOBAL INC	Yes	
(5) 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
(1)	PLANNED PARENTHOOD ACTION FUND INC PAC	L	129,009	ACTUAL PAYMENTS
(1)	PLANNED PARENTHOOD VOTES	L	515,499	ESTIMATE BASED ON USAGE
(2)	COMMUNITY OUTREACH GROUP LLC	M	1,173,279	ACTUAL PAYMENTS
(3)	PLANNED PARENTHOOD VOTES	N	63,205	ESTIMATE BASED ON USAGE
(4)	PLANNED PARENTHOOD VOTES	O	1,347,538	ESTIMATE BASED ON USAGE
(5)	PLANNED PARENTHOOD VOTES	Q	1,926,242	ACTUAL PAYMENTS
(6)	PLANNED PARENTHOOD VOTES	S	530,933	ACTUAL PAYMENTS
(7)	PLANNED PARENTHOOD ACTION FUND INC PAC	S	72,500	ACTUAL PAYMENTS