Form **990** | Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2006

Open to Public Inspection

A For the 2006 calendar year, or tax year beginning , 2006, and ending

B Check if applicable: Address change; Name change; Initial return; Final return; Amended return; Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: GUTTMACHER INSTITUTE

Number and street (or P.O. box if mail is not delivered to street address): 120 WALL STREET | Room/suite:

City or town, state or country, and ZIP + 4: NEW YORK, NY 10005

D Employer identification number 13-2890727

E Telephone number (212)248-1111

F Accounting method: Cash [ ] Accrual [X] Other (specify) ▶

• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? Yes [ ] No [X]

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? Yes [ ] No [ ] (If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes [ ] No [X]

G Website: ▶ WWW.GUTTMACHER.ORG

J Organization type (check only one) ▶ [X] 501(c) (03) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

K Check here ▶ [ ] if the organization is not a 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

I Group Exemption Number ▶

M Check ▶ [ ] if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 16,883,294.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances *(See the instructions.)*

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
	a	Contributions to donor advised funds	1a			
	b	Direct public support (not included on line 1a)	1b	10,453,527.		
	c	Indirect public support (not included on line 1a)	1c			
	d	Government contributions (grants) (not included on line 1a)	1d	2,050,697.		
	e	Total (add lines 1a through 1d) (cash $ 11,840,727. noncash $ 663,497.)			1e	12,504,224.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	52,178.
	3	Membership dues and assessments			3	
	4	Interest on savings and temporary cash investments			4	235,199.
	5	Dividends and interest from securities			5	244,799.
	6a	Gross rents	6a			
	b	Less: rental expenses	6b			
	c	Net rental income or (loss). Subtract line 6b from line 6a			6c	
	7	Other investment income (describe ▶)			7	
	8a	Gross amount from sales of assets other than inventory	8a	(A) Securities: 3,804,684. (B) Other:		
	b	Less: cost or other basis and sales expenses	8b	(A) Securities: 4,145,488. (B) Other:		
	c	Gain or (loss) (attach schedule) STMT 5A	8c	(A) Securities: -340,804. (B) Other:		
	d	Net gain or (loss). Combine line 8c, columns (A) and (B)			8d	-340,804.
	9	Special events and activities (attach schedule). If any amount is from **gaming**, check here ▶ [ ]				
	a	Gross revenue (not including $ of contributions reported on line 1b)	9a			
	b	Less: direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events. Subtract line 9b from line 9a			9c	
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less: cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a			10c	
	11	Other revenue (from Part VII, line 103)			11	42,210.
	12	**Total revenue.** Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			12	12,737,806.
Expenses	13	Program services (from line 44, column (B))			13	7,436,200.
	14	Management and general (from line 44, column (C))			14	2,385,687.
	15	Fundraising (from line 44, column (D))			15	585,225.
	16	Payments to affiliates (attach schedule)			16	
	17	**Total expenses.** Add lines 16 and 44, column (A)			17	10,407,112.
Net Assets	18	Excess or (deficit) for the year. Subtract line 17 from line 12			18	2,330,694.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	15,582,710.
	20	Other changes in net assets or fund balances (attach explanation) STMT 6			20	640,770.
	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20			21	18,554,174.

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. *(See the instructions.)*

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash $ ______ noncash $ ______) If this amount includes foreign grants, check here ▶ ☐	22a				
22b Other grants and allocations (attach schedule) (cash $ ______ noncash $ ______) If this amount includes foreign grants, check here ▶ ☐	22b				
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)	25a	906,069.	636,987.	213,475.	55,607.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	25b	3,297.	3,297.		
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c				
26 Salaries and wages of employees not included on lines 25a, b, and c	26	3,952,787.	2,776,004.	933,594.	243,189.
27 Pension plan contributions not included on lines 25a, b, and c	27	394,260.	277,018.	93,013.	24,229.
28 Employee benefits not included on lines 25a - 27	28	480,963.	337,938.	113,469.	29,556.
29 Payroll taxes	29	343,391.	241,276.	81,012.	21,103.
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33	101,689.	71,891.	23,632.	6,166.
34 Telephone	34	113,591.	80,305.	26,398.	6,888.
35 Postage and shipping	35	252,357.	224,668.	8,902.	18,787.
36 Occupancy	36	735,717.	520,128.	170,979.	44,610.
37 Equipment rental and maintenance	37	69,154.	48,890.	16,071.	4,193.
38 Printing and publications	38	304,314.	259,278.	25,501.	19,535.
39 Travel	39	556,033.	311,769.	211,609.	32,655.
40 Conferences, conventions, and meetings	40	159,782.	89,590.	60,808.	9,384.
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule) STMT 8	42	220,954.	155,250.	52,126.	13,578.
43 Other expenses not covered above (itemize):					
a PROFESSIONAL FEES	43a	1,280,485.	1,060,064.	196,900.	23,521.
b DUES/SUBSCRIPTIONS/PUBLIC	43b	51,709.	36,910.	11,018.	3,781.
c DATA PROCESSING	43c	51,106.	37,266.	12,305.	1,535.
d INFORMATION TECHNOLOGY	43d	375,743.	266,488.	86,938.	22,317.
e MISCELLANEOUS	43e	53,711.	1,183.	47,937.	4,591.
f	43f				
g	43g				
44 **Total functional expenses.** Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	10,407,112.	7,436,200.	2,385,687.	585,225.

Joint Costs. Check ▶ ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ▶ ☐ Yes ☒ No

If "Yes," enter **(i)** the aggregate amount of these joint costs $ ______ ; **(ii)** the amount allocated to Program services $ ______ ;
(iii) the amount allocated to Management and general $ ______ ; and **(iv)** the amount allocated to Fundraising $ ______

Part III Statement of Program Service Accomplishments *(See the instructions.)*

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶ SEE STATEMENT 1 All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	**Program Service Expenses** (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a RESEARCH (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	3,256,289.
b PUBLIC EDUCATION (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	2,943,012.
c PUBLIC POLICY (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	1,236,899.
d (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
e Other program services (attach schedule) (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) . . . . ▶	7,436,200.

Part IV Balance Sheets *(See the instructions.)*

Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*

				(A) Beginning of year		(B) End of year
Assets	45	Cash - non-interest-bearing		416,078.	45	431,735.
	46	Savings and temporary cash investments		579,633.	46	3,298,320.
	47a	Accounts receivable	47a 63,847.			
	b	Less: allowance for doubtful accounts	47b NONE	188,729.	47c	63,847.
	48a	Pledges receivable	48a			
	b	Less: allowance for doubtful accounts	48b		48c	
	49	Grants receivable		2,905,887.	49	3,084,352.
	50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			50a	
	b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)			50b	
	51a	Other notes and loans receivable (attach schedule)	51a			
	b	Less: allowance for doubtful accounts	51b		51c	
	52	Inventories for sale or use			52	
	53	Prepaid expenses and deferred charges		46,135.	53	123,029.
	54a	Investments - publicly-traded securities STMT 7 ▶ ☐ Cost ☒ FMV		11,356,697.	54a	11,527,710.
	b	Investments - other securities (attach schedule) ▶ ☐ Cost ☐ FMV			54b	
	55a	Investments - land, buildings, and equipment: basis	55a			
	b	Less: accumulated depreciation (attach schedule)	55b		55c	
	56	Investments - other (attach schedule)			56	
	57a	Land, buildings, and equipment: basis STMT 8	57a 2,486,838.			
	b	Less: accumulated depreciation (attach schedule)	57b 1,970,139.	578,537.	57c	516,699.
	58	Other assets, including program-related investments (describe ▶ STMT 9)		82,386.	58	83,430.
	59	**Total assets** (must equal line 74). Add lines 45 through 58		16,154,082.	59	19,129,122.
Liabilities	60	Accounts payable and accrued expenses		417,835.	60	489,513.
	61	Grants payable			61	
	62	Deferred revenue STMT. 10		39,066.	62	16,752.
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			63	
	64a	Tax-exempt bond liabilities (attach schedule)			64a	
	b	Mortgages and other notes payable (attach schedule)			64b	
	65	Other liabilities (describe ▶ STMT 11)		114,471.	65	68,683.
	66	**Total liabilities.** Add lines 60 through 65		571,372.	66	574,948.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here** ▶ ☒ and complete lines 67 through 69 and lines 73 and 74.				
	67	Unrestricted		5,985,388.	67	6,707,806.
	68	Temporarily restricted		7,215,297.	68	8,224,293.
	69	Permanently restricted		2,382,025.	69	3,622,075.
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74.				
	70	Capital stock, trust principal, or current funds			70	
	71	Paid-in or capital surplus, or land, building, and equipment fund			71	
	72	Retained earnings, endowment, accumulated income, or other funds			72	
	73	**Total net assets or fund balances** (add lines 67 through 69 **or** lines 70 through 72. (Column (A) **must** equal line 19 and column (B) **must** equal line 21)		15,582,710.	73	18,554,174.
	74	**Total liabilities and net assets/fund balances.** Add lines 66 and 73		16,154,082.	74	19,129,122.

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return *(See the instructions.)*

a	Total revenue, gains, and other support per audited financial statements			a	13,378,576.
b	Amounts included on line **a** but not on Part I, line 12:				
1	Net unrealized gains on investments	b1	640,770.		
2	Donated services and use of facilities	b2			
3	Recoveries of prior year grants	b3			
4	Other (specify):	b4			
	Add lines **b1** through **b4**			b	640,770.
c	Subtract line **b** from line **a**			c	12,737,806.
d	Amounts included on Part I, line 12, but not on line **a:**				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify):	d2			
	Add lines **d1** and **d2**			d	
e	**Total revenue** (Part I, line 12). Add lines **c** and **d** ▶			e	12,737,806.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements			a	10,407,112.
b	Amounts included on line **a** but not on Part I, line 17:				
1	Donated services and use of facilities	b1			
2	Prior year adjustments reported on Part I, line 20	b2			
3	Losses reported on Part I, line 20	b3			
4	Other (specify):	b4			
	Add lines **b1** through **b4**			b	
c	Subtract line **b** from line **a**			c	10,407,112.
d	Amounts included on Part I, line 17, but not on line **a:**				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify):	d2			
	Add lines **d1** and **d2**			d	
e	**Total expenses** (Part I, line 17). Add lines **c** and **d** ▶			e	10,407,112.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) *(See the instructions.)*

(A) Name and address	**(B)** Title and average hours per week devoted to position	**(C)** Compensation **(If not paid, enter -0-.)**	**(D)** Contributions to employee benefit plans & deferred compensation plans	**(E)** Expense account and other allowances
SEE STATEMENTS 12-21		906,069.	227,662.	22,800.

Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

			Yes	No
75a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 42			
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b	X	
c	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." ▶ If "Yes," attach a statement that includes the information described in the instructions.	75c		X
d	Does the organization have a written conflict of interest policy?	75d	X	

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
SEE STATEMENT 22	NONE	3,297.	NONE	NONE

Part VI Other Information *(See the instructions.)*

			Yes	No
76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		X
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a	X	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b	X	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization ▶ and check whether it is ☐ exempt or ☐ nonexempt			
81a	Enter direct and indirect political expenditures. (See line 81 instructions.) 81a NONE			
b	Did the organization file **Form 1120-POL** for this year?	81b		X

Part VI Other Information *(continued)*

			Yes	No
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		82a		X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b N/A			
83a Did the organization comply with the public inspection requirements for returns and exemption applications?		83a	X	
b Did the organization comply with the disclosure requirements relating to *quid pro quo* contributions?		83b	X	
84a Did the organization solicit any contributions or gifts that were not tax deductible?		84a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		84b	N/A	
85 *501(c)(4), (5), or (6) organizations.* a Were substantially all dues nondeductible by members?		85a	N/A	
b Did the organization make only in-house lobbying expenditures of $2,000 or less?		85b	N/A	
If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.				
c Dues, assessments, and similar amounts from members	85c N/A			
d Section 162(e) lobbying and political expenditures	85d N/A			
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A			
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A			
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85g	N/A	
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		85h	N/A	
86 *501(c)(7) orgs.* Enter: **a** Initiation fees and capital contributions included on line 12	86a N/A			
b Gross receipts, included on line 12, for public use of club facilities	86b N/A			
87 *501(c)(12) orgs.* Enter: a Gross income from members or shareholders	87a N/A			
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b N/A			
88b At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		88a		X
b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI ▶		88b		X
89a *501(c)(3) organizations.* Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ NONE ; section 4912 ▶ NONE ; section 4955 ▶ NONE				
b *501(c)(3) and 501(c)(4) orgs.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		89b		X
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ NONE				
d Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ NONE				
e *All organizations.* At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		89e		X
f *All organizations.* Did the organization acquire a direct or indirect interest in any applicable insurance contract?		89f		X
g *For supporting organizations and sponsoring organizations maintaining donor advised funds.* Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		89g	N/A	

90a List the states with which a copy of this return is filed ▶ SEE STATEMENT 23

b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.) 90b 66

91a The books are in care of ▶ KENDELL BURROUGHS, CONTROLLER Telephone no. ▶ 212-248-1111

Located at ▶ 120 WALL STREET NEW YORK, NY ZIP + 4 ▶ 10005

		Yes	No
b 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)?	91b		X
If "Yes," enter the name of the foreign country ▶			
See the instructions for exceptions and filing requirements for **Form TD F 90-22.1,** Report of Foreign Bank and Financial Accounts.			

Part VI Other Information *(continued)*

		Yes	No
c At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶	91c		X

92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* **Form 1041** - Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92 N/A

Part VII Analysis of Income-Producing Activities *(See the instructions.)*

Note: *Enter gross amounts unless otherwise indicated.*	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
93 Program service revenue:	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
a PUBLICATIONS	541800	6,018.			46,160.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	235,199.	
96 Dividends and interest from securities			14	244,799.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-340,804.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b OTHER REVENUE					2,763.
c ROYALTIES			15	39,447.	
d					
e					
104 Subtotal (add columns (B), (D), and (E))		6,018.		178,641.	48,923.

105 **Total** (add line 104, columns (B), (D), and (E)) ▶ 233,582.

Note: *Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes *(See the instructions.)*

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
	STMT 24

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities *(See the instructions.)*

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts *(See the instructions.)*

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: *If "Yes" to* **(b)**, *file Form 8870* **and** *Form 4720 (see instructions).*

Part XI Information Regarding Transfers To and From Controlled Entities. *Complete only if the organization is a controlling organization as defined in section 512(b)(13).*

	Yes	No
106 Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	N/A	

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

	Yes	No
107 Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	N/A	

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

	Yes	No
108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?	N/A	

Please Sign Here

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

Signature of officer Date

Type or print name and title

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed ☐	Preparer's SSN or PTIN (See Gen. Inst. X)
Firm's name (or yours if self-employed), address, and ZIP + 4	EISNER LLP 750 THIRD AVENUE NEW YORK, NY 10017-2703		EIN Phone no.

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

2006

Name of the organization: GUTTMACHER INSTITUTE

Employer identification number: 13-2890727

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
SEE STATEMENT 25				
Total number of other employees paid over $50,000 . . ▶	29			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
SEE STATEMENT 26		
Total number of others receiving over $50,000 for professional services . . . . ▶ 2		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over $50,000 for other services . . . . ▶ NONE		

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ. **Schedule A (Form 990 or 990-EZ) 2006**

JSA
6E1210 2.000

Part III **Statements About Activities** (See page 2 of the instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ 84,403. (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1	X	
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)*			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities? STMT.27	2c	X	
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)? STMT.28	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a		X
b	Did the organization have a section 403(b) annuity plan for its employees?	3b	X	
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		X
b	Did the organization make any taxable distributions under section 4966?	4b	N/A	
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c	N/A	
d	Enter the total number or donor advised funds owned at the end of the tax year ▶			
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶			
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the rights to provide advice on the distribution or investment of amounts in such funds or accounts ▶			NONE
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶			NONE

Part IV **Reason for Non-Private Foundation Status** (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

5 [ ] A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 [ ] A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)

7 [ ] A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 [ ] A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 [ ] A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶________________

10 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)

11a [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

11b [ ] A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

12 [ ] An organization that normally receives: **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)

13 [ ] An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:

[ ] Type I [ ] Type II [ ] Type III - Functionally Integrated [ ] Type III - Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents? Yes	No	(e) Amount of support
Total . . . . . ▶					

14 [ ] An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.*

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	7,749,230.	7,048,419.	6,975,946.	7,921,052.	29,694,647.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	62,881.	67,479.	30,750.	38,282.	199,392.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	576,795.	679,910.	768,875.	168,927.	2,194,507.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	43,371.	49,374.	32,298.	50,784.	175,827.
23 Total of lines 15 through 22	8,432,277.	7,845,182.	7,807,869.	8,179,045.	32,264,373.
24 Line 23 minus line 17	8,369,396.	7,777,703.	7,777,119.	8,140,763.	32,064,981.
25 Enter 1% of line 23	84,323.	78,452.	78,079.	81,790.	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶ 26a 641,300.

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts ▶ 26b 7,926,100.

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ 26c 32,064,981.

d Add: Amounts from column (e) for lines: 18 2,194,507. 19 ______ 22 175,827. 26b 7,926,100. ▶ 26d 10,296,434.

e Public support (line 26c minus line 26d total) ▶ 26e 21,768,547.

f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶ 26f 67.8889 %

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return.** Enter the sum of such amounts for each year:

NOT APPLICABLE

(2005) ______ (2004) ______ (2003) ______ (2002) ______

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year:

(2005) ______ (2004) ______ (2003) ______ (2002) ______

c Add: Amounts from column (e) for lines: 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ▶ 27c

d Add: Line 27a total ______ and line 27b total ______ ▶ 27d

e Public support (line 27c total minus line 27d total) ▶ 27e

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶ 27f

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶ 27g %

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶ 27h %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

Part V **Private School Questionnaire** (See page 9 of the instructions.) NOT APPLICABLE
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 10 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check ▶ a [ ] if the organization belongs to an affiliated group. Check ▶ b [ ] if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		84,403.
38 Total lobbying expenditures (add lines 36 and 37)	38		84,403.
39 Other exempt purpose expenditures	39		10,337,709.
40 Total exempt purpose expenditures (add lines 38 and 39)	40		10,422,112.
41 Lobbying nontaxable amount. Enter the amount from the following table -	41		671,106.
42 Grassroots nontaxable amount (enter 25% of line 41)	42		167,777.
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

If the amount on line 40 is -	The lobbying nontaxable amount is -
Not over $500,000	20% of the amount on line 40
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

Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720.*

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	**(a)** 2006	**(b)** 2005	**(c)** 2004	**(d)** 2003	**(e)** Total
45 Lobbying nontaxable amount	671,106.	607,367.	664,965.	618,645.	2,562,083.
46 Lobbying ceiling amount (150% of line 45(e))					3,843,125.
47 Total lobbying expenditures	84,403.	71,973.	57,242.	95,256.	308,874.
48 Grassroots nontaxable amount	167,777.	151,842.	166,241.	154,661.	640,521.
49 Grassroots ceiling amount (150% of line 48(e))					960,782.
50 Grassroots lobbying expenditures					

Part VI-B **Lobbying Activity by Nonelecting Public Charities** NOT APPLICABLE
(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)			
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 other means			
i Total lobbying expenditures (Add lines **c** through **h**.)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 13 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions:			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment, or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

FORM 990 - GENERAL EXPLANATION ATTACHMENT

FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS ORGANIZATION'S PRIMARY EXEMPT PURPOSE

MISSION

GUTTMACHER INSTITUTE (THE "INSTITUTE") ADVANCES SEXUAL AND REPRODUCTIVE HEALTH THROUGH AN INTERRELATED PROGRAM OF SOCIAL SCIENCE RESEARCH, POLICY ANALYSIS AND PUBLIC EDUCATION, DESIGNED TO GENERATE NEW IDEAS, ENCOURAGE ENLIGHTENED PUBLIC DEBATE, PROMOTE SOUND POLICY AND PROGRAM DEVELOPMENT, AND, ULTIMATELY, INFORM INDIVIDUAL DECISION-MAKING.

VALUES

THE INSTITUTE'S PROGRAM IS GUIDED BY SIX OVERARCHING INSTITUTIONAL VALUES:

- ATTENTION TO METHODOLOGICAL RIGOR AND ACCURACY AS FUNDAMENTAL TO THE INTEGRITY AND CREDIBILITY OF THE INSTITUTE'S RESEARCH;
- COMMITMENT TO PUBLISH AND DISSEMINATE RESULTS OF THE INSTITUTE'S RESEARCH REGARDLESS OF THE POLITICAL OR PROGRAM RAMIFICATIONS AND TO EVIDENCE-BASED PUBLIC EDUCATION AND ADVOCACY;
- OPENNESS TO MULTIPLE PERSPECTIVES OF OUTSIDE EXPERTS TO ENRICH THE INSTITUTE'S PROGRAM AND ENHANCE ITS UNDERSTANDING OF THE ISSUES;
- ANTICIPATION AND STUDY OF EMERGING ISSUES TO EQUIP THE INSTITUTE TO INFORM PUBLIC DEBATE WHEN SUCH ISSUES GAIN PROMINENCE;
- BALANCE BETWEEN NEW AND CONTINUING PRIORITIES TO ENSURE THAT THE INSTITUTE IS BOTH ON THE CUTTING EDGE OF SCHOLARLY AND POLITICAL THOUGHT AND FULLY COMMITTED TO CORE ISSUES OF ONGOING IMPORTANCE; AND,
- COLLABORATION WITH OTHERS TO EXPAND THE REACH AND SUSTAINABILITY OF THE INSTITUTE'S EFFORTS.

GUIDING PRINCIPLES

A VISION FOR THE FUTURE

THE INSTITUTE ENVISIONS A WORLD IN WHICH ALL WOMEN AND MEN HAVE THE ABILITY TO EXERCISE THEIR RIGHTS AND RESPONSIBILITIES-FREELY AND WITH DIGNITY-REGARDING SEXUAL BEHAVIOR, REPRODUCTION AND FAMILY FORMATION. ESSENTIAL TO THIS VISION ARE PUBLIC- AND PRIVATE-SECTOR HEALTH AND SOCIAL POLICIES THAT SUPPORT BOTH PERSONAL DECISIONS ABOUT WHETHER AND WHEN TO HAVE A CHILD AS WELL AS PARENTHOOD AND PARENTING. SO, TOO, IS THE ERADICATION OF PERSISTENT GENDER INEQUALITY THROUGHOUT THE WORLD AND THE ATTAINMENT OF EQUAL STATUS, RIGHTS AND RESPONSIBILITIES FOR WOMEN WITH SEXUAL, FAMILIAL AND SOCIAL RELATIONSHIPS, AND IN ALL ASPECTS OF PUBLIC

FORM 990 - GENERAL EXPLANATION ATTACHMENT (CONT'D)

LIFE.

AN INTEGRATED VIEW OF SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS
THE INSTITUTE REGARDS SEXUAL AND REPRODUCTIVE HEALTH, AND SEXUAL AND REPRODUCTIVE RIGHTS, AS CLOSELY RELATED AND INHERENTLY INTERDEPENDENT: SEXUAL HEALTH IS INTEGRAL TO REPRODUCTIVE HEALTH; SEXUAL AND REPRODUCTIVE RIGHTS ARE FUNDAMENTAL TO THE ACHIEVEMENT OF SEXUAL AND REPRODUCTIVE HEALTH. THEREFORE, RECOGNIZING THE RANGE OF INTERRELATED NEEDS PEOPLE HAVE OVER THE COURSE OF THEIR LIVES FROM ADOLESCENCE ONWARD, THE INSTITUTE WORKS TO PROTECT, EXPAND AND EQUALIZE ACCESS TO INFORMATION AND SERVICES THAT WILL ENABLE THEM TO:

-- AVOID UNPLANNED PREGNANCIES;
-- PREVENT AND TREAT SEXUALLY TRANSMITTED INFECTIONS, INCLUDING HIV;
-- EXERCISE THE RIGHT TO CHOOSE ABORTION;
-- ACHIEVE HEALTHY PREGNANCIES AND BIRTHS;
-- BALANCE PARENTING WITH OTHER ROLES; AND
-- HAVE HEALTHY SATISFYING SEXUAL RELATIONSHIPS.

PRIORITY ATTENTION TO THOSE IN GREATEST NEED

THE INSTITUTE PROMOTES THE SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS OF ALL PEOPLE, BUT GIVES PRIORITY ATTENTION TO ADDRESSING THE NEEDS AND CONCERNS OF THOSE WHOSE ACCESS TO INFORMATION, SERVICES OR OTHER SOCIETAL BENEFITS MAY BE IMPEDED BY THEIR AGE, MARITAL STATUS, GEOGRAPHY OR INCOME, OR BY VIRTUE OF GENDER, RACIAL, ETHNIC, RELIGIOUS OR CULTURAL DISCRIMINATION.

A RESPONSIBILITY TO THE UNITED STATES AND THE WORLD

AS A U.S. ORGANIZATION, THE INSTITUTE IS ACUTELY AWARE OF THE PRESSING NEED, AND UNDERTAKES AS ITS FIRST RESPONSIBILITY, TO IMPROVE THE QUALITY OF POLICY AND PROGRAM CONCERNING SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS IN THE UNITED STATES. UNDERSTANDING FURTHER THAT THE POLITICAL, CULTURAL AND FINANCIAL POWER OF THE UNITED STATES CAN HAVE CONSIDERABLE IMPACT ON SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS THROUGHOUT THE WORLD, THE INSTITUTE PLACES A SIMILARLY HIGH PRIORITY ON MONITORING AND ANALYSIS OF U.S. POLICY AS IT AFFECTS WOMEN AND MEN IN OTHER COUNTRIES. IN ITS INTERNATIONAL EFFORTS, THE INSTITUTE IS MINDFUL OF THE UNDERLYING COMMONALITIES ACROSS AND WITHIN COUNTRIES UNDER WHICH SEXUALITY IS EXPRESSED, FAMILIES OR UNIONS ARE FORMED, AND CHILDREN ARE CONCEIVED AND BORN. THE INSTITUTE EMPHASIZES THE DEVELOPMENT AND DISSEMINATION OF THEMATIC COMPARATIVE ANALYSES THAT ARE GLOBAL OR REGIONAL IN SCOPE AND ON

FORM 990 - GENERAL EXPLANATION ATTACHMENT (CONT'D)

COUNTRY-SPECIFIC WORK THAT WILL HAVE THE GREATEST RELEVANCE IN OTHER PARTS OF THE WORLD.

FORM 990 - GENERAL EXPLANATION ATTACHMENT

FORM 990, PART III - STATEMENT OF PROGRAM ACCOMPLISHMENTS
PROGRAMS AND ACHIEVEMENTS

TO FULFILL ITS MISSION, GUTTMACHER INSTITUTE (THE "INSTITUTE") USED ITS ANNUAL BUDGET OF $10,407,112 OF WHICH $7,436,200 WAS USED IN PROGRAM SERVICES TO SUPPORT ITS NATIONAL AND INTERNATIONAL RESEARCH AND PUBLIC EDUCATION ACTIVITIES, BASED IN NEW YORK, AND ITS PUBLIC POLICY WORK, BASED IN WASHINGTON, DC.

IN DETERMINING ITS PRIORITIES, THE INSTITUTE ANTICIPATES SOCIAL, POLITICAL AND LEGAL CONDITIONS THAT WILL PROPEL ISSUES TO THE FOREFRONT OF PUBLIC ATTENTION. EACH CURRENT EFFORT BUILDS ON THOSE OF THE PAST. THE PROCESS IS A CYCLICAL ONE, IN WHICH PUBLIC POLICY DEVELOPMENTS LEAD TO RESEARCH AND THEN TO COMMUNICATION OF FINDINGS, RECOMMENDATIONS AND IDEAS. THE INSTITUTE STRIVES TO PROVIDE INFORMATION THAT WILL HAVE MULTIPLE USES AT THE NATIONAL, STATE, LOCAL - AND INTERNATIONAL - LEVELS. BY ACTIVELY SEEKING THE COOPERATION AND ADVICE OF OTHER ORGANIZATIONS AND RESEARCHERS, THE INSTITUTE ENCOURAGES COLLABORATIVE ENDEAVORS THAT WILL SERVE ITS MISSION, INCREASE ITS EFFECTIVENESS AND AVOID DUPLICATION OF EFFORT.

THE INSTITUTE INFORMS ITS VARIOUS AUDIENCES - POLICYMAKERS, ACTIVISTS, HEALTH PROFESSIONALS, RESEARCHERS, THE MEDIA AND THE PUBLIC THROUGH THE FOLLOWING:

- PERSPECTIVES ON SEXUAL AND REPRODUCTIVE HEALTH - A PEER-REVIEWED, QUARTERLY JOURNAL OF ORIGINAL, POLICY-RELEVANT, WIDELY REFERENCED RESEARCH AND ANALYSIS ON SEXUAL AND REPRODUCTIVE HEALTH IN THE UNITED STATES AND OTHER DEVELOPED COUNTRIES.

- INTERNATIONAL FAMILY PLANNING PERSPECTIVES - A PEER-REVIEWED QUARTERLY JOURNAL OF RESEARCH ARTICLES FOR USE BY THOSE CONCERNED WITH FERTILITY, FAMILY PLANNING, MATERNAL AND CHILD HEALTH, AND POPULATION POLICY.

- THE GUTTMACHER POLICY REVIEW FORMERLY THE GUTTMACHER REPORT ON PUBLIC POLICY - A BIMONTHLY REVIEW THAT ANALYZES SEXUAL AND REPRODUCTIVE HEALTH POLICYMAKING IN WASHINGTON AND IN STATE CAPITALS ACROSS THE COUNTRY - INFORMATION CRITICAL TO UNDERSTANDING, ANTICIPATING AND EFFECTING CHANGE.

- WEB SITE (WWW.GUTTMACHER.ORG)

- SPECIAL REPORTS, NEWS RELEASES, ELECTRONIC LIST SERVE ANNOUNCEMENTS, FACT SHEETS, POLICY PAPERS, AND SLIDE SERIES.

FORM 990 - GENERAL EXPLANATION ATTACHMENT

RELATED CURRENT OFFICERS, DIRECTOR, TRUSTESS & KEY EMPLOYEES
PART V-A 75B

FIVE MEMBERS OF THE INSTITUTE'S BOARD OF DIRECTORS ARE ALSO MEMBERS OF THE BOARD OF DIRECTORS OF PLANNED PARENTHOOD FEDERATION OF AMERICA.

GUTTMACHER INSTITUTE 13-2890727

Detail of Long-term Capital Gains and Losses

Description	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Long-term Gain/Loss
SECURITIES - DETAIL AVAILABLE UPON REQUEST			3,804,684.	4,145,488.	-340,804.
Totals					-340,804.

JSA
6F0970 2.000

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES

DESCRIPTION		AMOUNT
UNREALIZED GAIN ON INVESTMENTS		640,770.
	TOTAL	640,770.

FORM 990, PART IV - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
MONEY-MARKET FUNDS	56,520.	2,949,567.
U.S. GOVERNMENT OBLIGATIONS	8,728,123.	5,604,046.
MUTUAL FUNDS	2,572,054.	2,974,097.
TOTALS	11,356,697.	11,527,710.

LAND, BUILDINGS, EQUIPMENT NOT HELD FOR INVESTMENT

		FIXED ASSET DETAIL				ACCUMULATED DEPRECIATION DETAIL			
ASSET DESCRIPTION	METHOD/ CLASS	BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE	BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE
FURNITURE & EQUIPM		1,731,981.			1,731,981.	1,280,110.	127,680.		1,407,790.
LEASEHOLD IMPROV		754,857.			754,857.	469,075.	93,274.		562,349.
TOTALS		2,486,838.			2,486,838.	1,749,185.			1,970,139.

FORM 990, PART IV - OTHER ASSETS

DESCRIPTION		BEGINNING BOOK VALUE	ENDING BOOK VALUE
SECURITY DEPOSITS		82,386.	83,430.
	TOTALS	82,386.	83,430.

FORM 990, PART IV - DEFERRED REVENUE

DESCRIPTION		BEGINNING BOOK VALUE	ENDING BOOK VALUE
DEFERRED REVENUE		39,066.	16,752.
	TOTALS	39,066.	16,752.

FORM 990, PART IV - OTHER LIABILITIES

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
DEFERRED LEASE INCENTIVE	114,471.	68,683.
TOTALS	114,471.	68,683.

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
RENEE JENKINS C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	CHAIR 2.00	NONE	NONE	NONE
MELISSA GILLIAM C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	SENIOR VICE CHAIR 2.00	250.	NONE	NONE

THIS BOARD MEMBER WAS PAID A STIPEND FOR THEIR WORK ON THE INTERNAL REVIEW BOARD PANEL OF THE INSTITUTE. NO OTHER COMPENSATION WAS PAID.

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
BOB DIAMOND C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	VICE CHAIR 2.00	NONE	NONE	NONE
PAUL SPERRY C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	TREASURER 2.00	NONE	NONE	NONE
AMY ALLINA C/O GUTTMACHER INSTITUTE 120 WALL STREET	SECRETARY 2.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
NEW YORK, NY 10005				
R LUCIA RIDDLE C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
JUDY TABB C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
JOHN ROMO C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
DAVID BELL C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR	NONE	NONE	NONE
TINA RAINE BENNETT C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
R ALTA CHARO C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
WILLARD CATES JR C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
DARLEE CROCKETT C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
PEGGY DANZIGER C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
CLINTON DEVEAUX C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
LINDA JACOBS C/O GUTTMACHER INSTITUTE	DIRECTOR 2.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
120 WALL STREET NEW YORK, NY 10005				
ROBIN CHANDLER DUKE C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
M JOYCELYN ELDERS C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
PARFAIT M ELOUNDOU-ENYEGUE C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
ABIGAIL ENGLISH C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	700.	NONE	NONE

THIS BOARD MEMBER WAS PAID A STIPEND FOR THEIR WORK ON THE INTERNAL REVIEW BOARD PANEL OF THE INSTITUTE. NO OTHER COMPENSATION WAS PAID.

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
DON WINEBERG C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
BEATRIZ SOLIS C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
ANNETTE P CUMMING C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
DEBORAH DE WITT C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
LINDA GORDON C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
SILVIA HENRIQUEZ	DIRECTOR 2.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005				
DAVID HOPKINS C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
CAROLYN WESTHOFF C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
TERESA DEPINERES C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
DANIEL LICHTER C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
JAMES MCCARTHY C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
NADINE PEACOCK C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	250.	NONE	NONE

THIS BOARD MEMBER WAS PAID A STIPEND FOR THEIR WORK ON THE INTERNAL REVIEW BOARD PANEL OF THE INSTITUTE. NO OTHER COMPENSATION WAS PAID.

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
DALE ANNE REISS C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
KATHY HUDSON C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
MARGIE FITES SEIGLE C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
MARY SHALLENBERGER C/O GUTTMACHER INSTITUTE 120 WALL STREET	DIRECTOR 2.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
NEW YORK, NY 10005				
ALLAN ROSENFELD C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
SCOTT SPEAR C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
DAVIKA SINGH C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
JAMES TRUSSEL C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
MICHAEL RESNICK C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
CHARLES F WESTOFF	DIRECTOR 2.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005				
ANN SVENSEN C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
LAURIE SCHWAB ZABIN C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2.00	NONE	NONE	NONE
SHARON CAMP C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	PRESIDENT & CEO 40.00	224,350.	58,443.	NONE
CORY L RICHARDS C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	SR VP & VP PUBLIC POLICY 40.00	180,200.	48,445.	NONE
ROBERT ROSENDALE C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	VP ADMINISTRATION & FINANCE 40.00	171,519.	19,191.	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SUSHEELA SINGH C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	VP RESEARCH 40.00	164,400.	54,754.	NONE
PATRICIA DONOVAN C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	VP PUBLIC EDUCATION 40.00	164,400.	46,829.	22,800.
	GRAND TOTALS	906,069.	227,662.	22,800.

FORM 990, PART V-B - FORMER OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	LOANS AND ADVANCES	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JACQUELINE E DARROCH C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	NONE	3,297.	NONE	NONE

THE FORMER SR VP FOR RESEARCH IS CURRENTLY CONSULTING ON RESEARCH AND DEVELOPING NEW PROJECTS FOR THE INSTITUTE.

GRAND TOTALS	NONE	3,297.	NONE	NONE

FORM 990, PART VI, LINE 90A - STATES

AL,AK,AZ,AR,CA,CO,CT,FL,GA,
IL,KS,KY,ME,MD,MA,MI,MN,MS,NH,NJ,NM,
NY,NC,ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI,

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE NO.	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
93A	PUBLICATIONS INCREASE THE PUBLIC'S AWARENESS OF INFORMATION CONCERNING REPRODUCTIVE HEALTH ISSUES AND REPORTS ON RESEARCH, CONDUCTED BY THE INSTITUTE IN ACCORDANCE WITH THE INSTITUTES EXEMPT PURPOSE.
103B	OTHER INCOME GENERATED THROUGH EXEMPT ACTIVITIES CONDUCTED BY THE INSTITUTE.

SCHEDULE A, PART I - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCOUNT
RACHEL GOLD C/O GUTTMACHER INSTITUTE NEW YORK, NY 10005	DIR POLICY ANALYSIS 40.00	119,000.	43,693.	NONE
AKINRINOLA BANKOLE C/O GUTTMACHER INSTITUTE NEW YORK, NY 10005	DIR OF INTL RESEARCH 40.00	124,300.	46,386.	NONE
SUSAN COHEN C/O GUTTMACHER INSTITUTE NEW YORK, NY 10005	DIR GOV'T AFFAIRS 40.00	115,000.	44,082.	NONE
KENDELL BURROUGHS C/O GUTTMACHER INSTITUTE NEW YORK, NY 10005	CONTROLLER 40.00	114,000.	39,170.	NONE
ERIC MUSCATELL C/O GUTTMACHER INSTITUTE NEW YORK, NY 10005	DIR OF DEVELOPMENT 40.00	119,000.	29,791.	NONE
	TOTAL COMPENSATION	591,300.	203,122.	NONE

SCH. A, PART II-A COMPENSATION OF THE 5 HIGHEST PAID FOR PROF. SERV.

AFRICAN POP HLTH RESEARCH CTR UPPER HILL ROAD 2ND FLOOR PO BOX 10787 NAIROBI KENYA	RESEARCH	120,379.
CONTINENTAL RESOURCES INC PO BOX 4196 BOSTON, MA 02211	MIS CONSULTING	128,806.
ELENA PRADA CARRERA 9#97-06 BOGATA COLOMBIA	RESEARCHER	63,487.
DR FATIMA JUAREZ YACATAS 3551 COL. NAVARTE 03020 MEXICO	RESEARCH CONSULTANT	121,330.
INITIATIVE PRIVEE ET COMMUNAUT 06 BP 10220 OUAGADOUGOU KENYA	RESEARCH CONSULTANT	76,557.
	TOTAL COMPENSATION	510,559.

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SCHEDULE A, PART III - EXPLANATION FOR LINE 2C

THE INSTITUTE LEASES AN APARTMENT IN NEW YORK CITY WHERE STAFF OR CONSULTANTS MAY STAY WHEN CONDUCTING BUSINESS IN NEW YORK. THIS ARRANGEMENT IS IN LIEU OF PROVIDING HOTEL ACCOMODATIONS ON APPROVED BUSINESS TRAVEL.

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

SEE 990 PART V.
ADDITIONALY, TRUSTEES OF THE ORGANIZATION ARE REIMBURSED FOR OUT-OF-POCKET EXPENSES INCURRED IN CONJUNCTION WITH SERVICES PERFORMED FOR THE ORGANIZATION.