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Return of Organization Exempt From Income Tax

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

A For the **2001** calendar year, or tax year period beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization PLANNED PARENTHOOD OF SAN ANTONIO AND SOUTH CENTRAL TEXAS	D Employer identification number 74-1297211
	Number and street (or P O box if mail is not delivered to street address) Room/suite 104 BABCOCK	E Telephone number 210-736-2244
	City or town, state or country, and ZIP + 4 SAN ANTONIO, TX 78201	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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

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

H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list)

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

I Enter 4-digit GEN

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

G Web site **N/A**

J Organization type (check only one) 501(c)(3) (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 **4,119,160.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	418,120.		
	b	Indirect public support	1b	5,707.		
	c	Government contributions (grants)	1c	1,762,199.		
	d	Total (add lines 1a through 1c) (cash \$ 2,186,026. noncash \$ _____)	1d		2,186,026.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		1,758,105.	
	3	Membership dues and assessments	3			
	4	Interest on savings and temporary cash investments	4		8,248.	
	5	Dividends and interest from securities	5		16,789.	
	6	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				
Revenue	8	Gross amount from sale of assets other than inventory	(A) Securities	(B) Other		
	a		143,565.	710.	8a	
	b	Less cost or other basis and sales expenses	121,520.	7,702.	8b	
	c	Gain or (loss) (attach schedule)	22,045.	-6,992.	8c	
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	STMT 1	STMT 2	8d	15,053.	
Revenue	9	Special events and activities (attach schedule)				
	a	Gross revenue (not including \$ 0. of contributions reported on line 1a)	9a	1,845.		
	b	Less direct expenses other than fundraising expenses	9b	1,761.		
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	SEE STATEMENT 3	84.		
Revenue	10	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			
Expenses	11	Other revenue (from Part VII, line 103)	11		3,872.	
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		3,988,177.	
	13	Program services (from line 44, column (B))	13		3,278,051.	
	14	Management and general (from line 44, column (C))	14		505,481.	
	15	Fundraising (from line 44, column (D))	15		120,147.	
	16	Payments to affiliates (attach schedule)	16	SEE STATEMENT 4	36,633.	
	17	Total expenses (add lines 16 and 44, column (A))	17		3,940,312.	
	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18		47,865.	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		2,006,761.	
	20	Other changes in net assets or fund balances (attach explanation)	20	SEE STATEMENT 5	-66,074.	
Net Assets	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		1,988,552.	

FILMED OCT 28 2002

**PLANNED PARENTHOOD OF SAN ANTONIO
AND SOUTH CENTRAL TEXAS**

Form 990 (2001)

74-1297211 Page 2

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

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
22	Grants and allocations (attach schedule) cash \$ _____ noncash \$ _____				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc	68,112.	0.	68,112.	0.
26	Other salaries and wages	1,995,376.	1,667,761.	264,565.	63,050.
27	Pension plan contributions	67,036.	53,459.	11,794.	1,783.
28	Other employee benefits	134,019.	110,738.	18,296.	4,985.
29	Payroll taxes	155,702.	123,524.	28,034.	4,144.
30	Professional fundraising fees				
31	Accounting fees	10,600.	9,680.	671.	249.
32	Legal fees	4,453.		4,453.	
33	Supplies	452,159.	444,988.	4,986.	2,185.
34	Telephone	53,859.	42,875.	10,798.	186.
35	Postage and shipping	17,328.	4,087.	2,073.	11,168.
36	Occupancy	253,218.	242,987.	8,252.	1,979.
37	Equipment rental and maintenance	22,707.	15,396.	7,311.	
38	Printing and publications	19,800.	17,004.	213.	2,583.
39	Travel	42,812.	29,484.	12,009.	1,319.
40	Conferences, conventions, and meetings				
41	Interest				
42	Depreciation, depletion, etc (attach schedule)	121,704.	92,254.	24,584.	4,866.
43	Other expenses not covered above (itemize)				
a					
b					
c					
d					
e	SEE STATEMENT 6	484,794.	423,814.	39,330.	21,650.
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	3,903,679.	3,278,051.	505,481.	120,147.

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 \$ 9,325. (ii) the amount allocated to Program services \$ 6,217.
 (iii) the amount allocated to Management and general \$ _____ and (iv) the amount allocated to Fundraising \$ 3,108.

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? SEE STATEMENT 7		Program Service Expenses
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.)		(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts but optional for others)
a	COMMUNITY RELATIONS INCLUDING VALUES, SEX EDUCATION, AND BIRTH CONTROL OFFERED IN MOST SAN ANTONIO SCHOOLS	
	(Grants and allocations \$ _____)	387,637.
b	PATIENT SERVICES INCLUDING PHYSICAL EXAMS, VD SCREENING, AND BIRTH CONTROL FOR PRIMARILY POVERTY PATIENTS.	
	(Grants and allocations \$ _____)	2,890,414.
c		
	(Grants and allocations \$ _____)	
d		
	(Grants and allocations \$ _____)	
e	Other program services (attach schedule)	(Grants and allocations \$ _____)
f	Total of Program Service Expenses (should equal line 44 column (B) Program services)	3,278,051.

Part IV Balance Sheets

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	79,198.	45	3,272.
	46 Savings and temporary cash investments	388,904.	46	165,917.
	47 a Accounts receivable	47a		
	b Less allowance for doubtful accounts	47b	47c	
	48 a Pledges receivable	48a		
	b Less allowance for doubtful accounts	48b	48c	
	49 Grants receivable	144,808.	49	594,754.
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable	51a		
	b Less allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use	225,608.	52	261,465.
	53 Prepaid expenses and deferred charges	31,278.	53	75,586.
	54 Investments - securities STMT 8 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	51,891.	54	26,110.
	55 a Investments - land, buildings, and equipment basis	55a		
b Less accumulated depreciation	55b	55c		
56 Investments - other SEE STATEMENT 9	740,874.	56	581,086.	
57 a Land, buildings, and equipment basis	57a 1,631,223.			
b Less accumulated depreciation STMT 10	57b 998,684.	57c	632,539.	
58 Other assets (describe <input type="checkbox"/>)		58		
59 Total assets (add lines 45 through 58) (must equal line 74)	2,308,566.	59	2,340,729.	
Liabilities	60 Accounts payable and accrued expenses	301,805.	60	352,177.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe <input type="checkbox"/>)		65	
66 Total liabilities (add lines 60 through 65)	301,805.	66	352,177.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	2,006,761.	67	1,963,542.
	68 Temporarily restricted		68	
	69 Permanently restricted		69	25,010.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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, column (B) must equal line 21)	2,006,761.	73	1,988,552.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	2,308,566.	74	2,340,729.

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.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

a	Total revenue, gains, and other support per audited financial statements	a	3,922,103.
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments \$ -66,074.		
(2)	Donated services and use of facilities \$		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify) \$		
	Add amounts on lines (1) through (4)	b	-66,074.
c	Line a minus line b	c	3,988,177.
d	Amounts included on line 12, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify) \$		
	Add amounts on lines (1) and (2)	d	0.
e	Total revenue per line 12, Form 990 (line c plus line d)	e	3,988,177.

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

a	Total expenses and losses per audited financial statements	a	3,940,312.
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities \$		
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 \$		
(4)	Other (specify) \$		
	Add amounts on lines (1) through (4)	b	0.
c	Line a minus line b	c	3,940,312.
d	Amounts included on line 17, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify) \$		
	Add amounts on lines (1) and (2)	d	0.
e	Total expenses per line 17, Form 990 (line c plus line d)	e	3,940,312.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated)

(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	(E) Expense account and other allowances
SEE STATEMENT 11		68,112.	6,472.	0.

12301 01-02-02

**PLANNED PARENTHOOD OF SAN ANTONIO
AND SOUTH CENTRAL TEXAS**

Form 990 (2001)

74-1297211

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Part VI Other Information

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		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	X	
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80 a	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?		X
b	If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
81 a	Enter direct or indirect political expenditures See line 81 instructions		0.
b	Did the organization file Form 1120-POL for this year?		X
82 a	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?	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)		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?		N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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		N/A
c	Dues, assessments, and similar amounts from members		N/A
d	Section 162(e) lobbying and political expenditures		N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?		N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		N/A
86 a	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12		N/A
b	Gross receipts, included on line 12, for public use of club facilities		N/A
87 a	501(c)(12) organizations Enter a Gross income from members or shareholders		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)		N/A
88	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		X
89 a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0.</u> , section 4912 <u>0.</u> , section 4955 <u>0.</u>		
b	501(c)(3) and 501(c)(4) organizations 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		X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter Amount of tax on line 89c, above, reimbursed by the organization		0.
90 a	List the states with which a copy of this return is filed <u>NONE</u>		
b	Number of employees employed in the pay period that includes March 12, 2001	90b	71

91 The books are in care of ROBERT PETIT Telephone no 210-736-2244
 Located at 104 BABCOCK ROAD, SAN ANTONIO, TX ZIP + 4 78201

92 Section 4947(e)(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 Specific Instructions on page 32)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a PATIENT FEES					1,758,105.
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	8,248.	
96 Dividends and interest from securities			14	16,789.	
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	15,053.	
101 Net income or (loss) from special events			01	84.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a MISCELLANEOUS			01	3,872.	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		44,046.	1,758,105.
105 Total (add line 104, columns (B), (D), and (E))					1,802,151.

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32)

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)
93A	FEES FROM PROVIDING SERVICE TO PATIENTS INCLUDING PHYSICAL EXAMS, VD SCREENING, AND BIRTH CONTROL FOR PRIMARILY POOR PATIENTS ON A SLIDING SCALE, WHICH IS OUR PRIMARY PURPOSE.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33)

(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
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 33)

- (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)

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.

Please Sign Here	Signature of officer	Date	Type or print name and title
	<i>[Signature]</i>	9.30.02	Jeffrey Hons, CEO
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4	9/26/02	Preparer's SSN or PTIN
123181 01-02-02	CARNEIRO, CHUMNEY & CO., L.C. 40 NE LOOP 410, SUITE 200 SAN ANTONIO, TX 78216-5876	EIN	Phone no 210-342-8000

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No. 1545-0047

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

2001

Department of the Treasury
Internal Revenue Service

Supplementary Information-(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization **PLANNED PARENTHOOD OF SAN ANTONIO AND SOUTH CENTRAL TEXAS** Employer identification number **74 1297211**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 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
EARNIE LAKEY ----- 104 BABCOCK, SAN ANTONIO, TX	DIRECTOR OF PATIENT CARE 40	66,457.	3,919.	
MARGIT GERARDI ----- 104 BABCOCK, SAN ANTONIO, TX	NURSE PRAC. 40	61,531.	4,961.	
OFILIA CANALES ----- 104 BABCOCK, SAN ANTONIO, TX	NURSE PRAC. 40	59,333.	6,299.	
RACHEL GOERES ----- 104 BABCOCK, SAN ANTONIO, TX	VP-CLIENT SER 40	58,754.	5,129.	
ANTIONETTE CHAPMAN ----- 104 BABCOCK, SAN ANTONIO, TX	NURSE PRAC. 40	56,649.	3,279.	
Total number of other employees paid over \$50 000 ▶	4			

Part II 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
NONE ----- ----- ----- ----- ----- ----- ----- ----- ----- -----		
Total number of others receiving over \$50 000 for professional services ▶	0	

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 ▶ \$ _____ \$ <u>22,562</u> . (Must equal amounts on line 38, Part VI-A, or line I of Part VI-B)	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?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V, FORM 990	X	
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below)		X
4 Do you have a section 403(b) annuity plan for your employees?		X
Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.		

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

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 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 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 supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

PLANNED PARENTHOOD OF SAN ANTONIO

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) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants and contributions received (Do not include unusual grants. See line 28.)	1,815,534.	1,890,759.	2,064,353.	2,222,849.	7,993,495.
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	1,592,412.	1,468,816.	1,136,802.	1,080,580.	5,278,610.
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	35,694.	36,429.	29,923.	44,298.	146,344.
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.	5,356.	3,358.	5,007.	7,093.	20,814.
23 Total of lines 15 through 22	3,448,996.	3,399,362.	3,236,085.	3,354,820.	13,439,263.
24 Line 23 minus line 17	1,856,584.	1,930,546.	2,099,283.	2,274,240.	8,160,653.
25 Enter 1% of line 23	34,490.	33,994.	32,361.	33,548.	

26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24	26a	163,213.
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 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.		26b	0.
c Total support for section 509(a)(1) test. Enter line 24, column (e).		26c	8,160,653.
d Add: Amounts from column (e) for lines 18 <u>146,344.</u> 19 _____ 22 <u>20,814.</u> 26b _____		26d	167,158.
e Public support (line 26c minus line 26d total)		26e	7,993,495.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))		26f	97.9517%

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: N/A	(2000)	(1999)	(1998)	(1997)
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 11, 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: N/A	(2000)	(1999)	(1998)	(1997)	
c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____		27c	N/A		
d Add: Line 27a total _____ and line 27b total _____		27d	N/A		
e Public support (line 27c total minus line 27d total)		27e	N/A		
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e): N/A		27f	N/A		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))		27g	N/A %		
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))		27h	N/A %		

28 Unusual Grants: For an organization described in line 10, 11, or 12, that received any unusual grants during 1997 through 2000, 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.

NONE

PLANNED PARENTHOOD OF SAN ANTONIO

Part V Private School Questionnaire (See page 7 of the instructions)

N/A

(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?		
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?		
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? 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? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)	32d	

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? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	33h	

34 a	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	

PLANNED PARENTHOOD OF SAN ANTONIO

Schedule A (Form 990 or 990-EZ) 2001 AND SOUTH CENTRAL TEXAS

74-1297211 Page 5

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 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
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	14,863.
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	7,699.
38	Total lobbying expenditures (add lines 36 and 37)	38	22,562.
39	Other exempt purpose expenditures	39	3,881,117.
40	Total exempt purpose expenditures (add lines 38 and 39)	40	3,903,679.
41	Lobbying nontaxable amount Enter the amount from the following table - 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		
41		41	345,184.
42	Grassroots nontaxable amount (enter 25% of line 41)	42	86,296.
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	0.
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	0.

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 11 of the instructions)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45	345,184.	326,994.	310,732.	321,448.	1,304,358.
46					1,956,537.
47	22,562.	10,876.	10,380.	18,328.	62,146.
48	86,296.	81,749.	77,683.	80,362.	326,090.
49					489,135.
50	14,863.	10,313.	9,836.	17,276.	52,288.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

N/A

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

- 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)

Yes	No	Amount
		0.

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 12 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?

a Transfers from the reporting organization to a noncharitable exempt organization of

(i) Cash

(ii) Other assets

b Other transactions

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

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.

Table with 2 columns: Yes, No. Rows include 51a(i), a(ii), b(i), b(ii), b(iii), b(iv), b(v), b(vi), and c. All 'No' boxes are marked with an 'X'.

N/A

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. The table is currently empty.

52 a 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 (X) No

b If "Yes," complete the following schedule

N/A

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. The table is currently empty.

Schedule B
(Form 990, 990-EZ, or
990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary information for
line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No 1545-0047

2001

Name of organization

PLANNED PARENTHOOD OF SAN ANTONIO
AND SOUTH CENTRAL TEXAS

Employer identification number

74-1297211

Organization type (check one)

Filers of:

Section

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General rule** or a **Special rule** (Note: Only a section 501(c)(7), (8), or (10) organization can check box(es) for both the General rule and a Special rule-see instructions)

General Rule-

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II)

Special Rules-

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms (Complete Parts I and II)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals (Complete Parts I, II, and III)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose Do not complete any of the Parts unless the General rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year) ▶ \$ _____

Caution: Organizations that are not covered by the General rule and/or the Special rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2001)

Name of organization PLANNED PARENTHOOD OF SAN ANTONIO AND SOUTH CENTRAL TEXAS	Employer identification number 74-1297211
---	---

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II and check this box **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy.	
Type or print Name of Exempt Organization PLANNED PARENTHOOD OF SAN ANTONIO AND SOUTH CENTRAL TEXAS	Employer identification number 74-1297211
File by the extended due date for filing the return See instructions Number, street, and room or suite no. If a P O box, see instructions 104 BABCOCK	For IRS use only
City, town or post office, state, and ZIP code For a foreign address, see instructions SAN ANTONIO, TX 78201	

Check type of return to be filed (File a separate application for each return)

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 6069	

STOP Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the **whole group**, check this box If it is for **part of the group**, check this box and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until NOVEMBER 15, 2002

5 For calendar year 2001, or other tax year beginning _____ and ending _____

6 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION IN ORDER TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions \$ _____

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ _____

c **Balance Due** Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions \$ _____ **N/A**

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature *Joy L. Remm* Title *CPT* Date *8/14/02*

Notice to Applicant - To Be Completed by the IRS

- We have approved this application Please attach this form to the organization's return
- We have not approved this application However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions) This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return Please attach this form to the organization's return
- We have not approved this application After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file We are not granting the 10-day grace period
- We cannot consider this application because it was filed after the due date of the return for which an extension was requested
- Other _____

Director _____ By _____ Date _____

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above

Type or print Name CARNEIRO, CHUMNEY & CO., L.C.	AUG 28 2002
Number and street (include suite, room, or apt no) Or a P O. box number 40 NE LOOP 410, SUITE 200	
City or town, province or state, and country (including postal or ZIP code) SAN ANTONIO, TX 78216-5876	LINDA WEISKOPF, FIELD DIRECTOR, SUBMISSION PROCESSING, OGDEN

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
 - If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form).
- Note Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Note Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only
All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print	Name of Exempt Organization PLANNED PARENTHOOD OF SAN ANTONIO AND SOUTH CENTRAL TEXAS	Employer identification number 74-1297211
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P O box, see instructions 104 BABCOCK	
	City, town or post office, state, and ZIP code For a foreign address, see instructions SAN ANTONIO, TX 78201	

Check type of return to be filed (file a separate application for each return)

- | | | |
|--|--|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990 BL | <input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990 EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until AUGUST 15, 2002 to file the exempt organization return for the organization named above The extension is for the organization's return for calendar year 2001 or tax year beginning _____, and ending _____

2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990 BL, 990 PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions \$ _____

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit \$ _____

c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions \$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ▶ Joy L. Remi Title ▶ CPA Date ▶ 5/14/02
LHA For Paperwork Reduction Act Notice, see instruction Form 8868 (12-2000)

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 1

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
REDEMPTION OF PUBLICLY TRADED SECURITIES	124,693.	121,520.	0.	3,173.
CAPITAL GAIN DIVIDENDS	18,872.	0.	0.	18,872.
TO FORM 990, PART I, LINE 8	<u>143,565.</u>	<u>121,520.</u>	<u>0.</u>	<u>22,045.</u>

FORM 990 GAIN (LOSS) FROM SALE OF OTHER ASSETS STATEMENT 2

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED		
SOFTWARE - ABANDONED			PURCHASED		
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	0.	7,064.	0.	0.	-7,064.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED		
MISCELLANEOUS ASSETS			PURCHASED		
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	710.	638.	0.	0.	72.
TO FM 990, PART I, LN 8	710.	7,702.	0.	0.	-6,992.

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 3

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
BUS TRIP TO AUSTIN THEATRE	1,845.	0.	1,845.	1,761.	84.
TO FM 990, PART I, LINE 9	1,845.	0.	1,845.	1,761.	84.

FORM 990	PAYMENTS TO AFFILIATES	STATEMENT	4
<u>AFFILIATE'S NAME</u>		<u>AFFILIATE'S ADDRESS</u>	
PLANNED PARENTHOOD FEDERATION OF AMERICA		801 SEVENTH AVENUE, NEW YORK, NY	
<u>PURPOSE OF PAYMENT</u>		<u>AMOUNT</u>	
HELP SUPPORT, AND IN RETURN, RECEIVE SERVICES FROM THE NATIONAL ORGANIZATION		36,633.	
TOTAL TO FORM 990, PART I, LINE 16		36,633.	

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	5
<u>DESCRIPTION</u>		<u>AMOUNT</u>	
UNREALIZED APPRECIATION ON INVESTMENTS		-66,074.	
TOTAL TO FORM 990, PART I, LINE 20		-66,074.	

FORM 990	OTHER EXPENSES				STATEMENT	6
<u>DESCRIPTION</u>	(A) <u>TOTAL</u>	(B) <u>PROGRAM SERVICES</u>	(C) <u>MANAGEMENT AND GENERAL</u>	(D) <u>FUNDRAISING</u>		
MEDICAL LICENSES & EXPENSES	5,109.	5,109.				
LIABILITY INSURANCE	53,021.	53,021.				
LAB FEES	156,610.	156,610.				
CONTRACT MEDICAL SERVICES	119,853.	119,853.				
COPIER/RISOGRAPH COSTS	10,468.	8,991.	1,165.	312.		
LIBRARY ACQUISITIONS	1,611.	1,553.	58.			
COMPUTER SOFTWARE/SERVICES	17,858.	10,302.	6,327.	1,229.		
CLERICAL SERVICES-TEMP	5,535.	5,535.				
ADVERTISING	41,649.	34,607.	5,857.	1,185.		
BANK CHARGES	6,234.		6,011.	223.		
PROFESSIONAL SERVICES	18,552.	410.	100.	18,042.		

STAFF ACTIVITIES	7,510.	1,756.	5,754.	
INTER-AGENCY RELATIONS	5,957.	5,553.	395.	9.
MISCELLANEOUS	8,021.	6,494.	1,527.	
SUBSCRIPTIONS	2,231.	1,523.	243.	465.
STAFF/BOARD DEVELOPMENT	19,287.	11,003.	8,099.	185.
DUES-DEPARTMENTAL	2,244.	1,494.	750.	
VAN-GAS & MAINTENANCE	3,044.		3,044.	
TOTAL TO FM 990, LN 43	484,794.	423,814.	39,330.	21,650.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 7
PART III

EXPLANATION

TO PROVIDE PATIENTS WITH SERVICES (INCLUDING PHYSICAL EXAMS, VD SCREENING AND BIRTH CONTROL) FOR PRIMARILY POOR PATIENTS, AND PROMOTE FAMILY PLANNING.

FORM 990 GOVERNMENT SECURITIES STATEMENT 8

DESCRIPTION	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES
TREASURY NOTES	26,110.		26,110.
TOTAL TO FORM 990, LINE 54, COL B	26,110.		26,110.

FORM 990 OTHER INVESTMENTS STATEMENT 9

DESCRIPTION	VALUATION METHOD	AMOUNT
MUTUAL FUNDS	MARKET VALUE	581,086.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		581,086.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 10

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
EQUIPMENT & SOFTWARE	727,691.	507,390.	220,301.
LEASEHOLD IMPROVEMENTS	126,929.	63,724.	63,205.
BUILDINGS & IMPROVEMENTS	696,603.	427,570.	269,033.
LAND	80,000.	0.	80,000.
TOTAL TO FORM 990, PART IV, LN 57	1,631,223.	998,684.	632,539.

FORM 990 PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 11

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
FRED CAMPBELL, JR. MD	CHAIRMAN AS NEEDED	0.	0.	0.
RABBI BARRY H. BLOCK	CHAIR-ELECT AS NEEDED	0.	0.	0.
PAT JASSO	TREASURER AS NEEDED	0.	0.	0.
LETICIA LUNA	IMMEDIATE PAST CHAIR AS NEEDED	0.	0.	0.
JANET ALYN	DIRECTOR AS NEEDED	0.	0.	0.
LYDIA M. ANDRADE, PHD.	DIRECTOR AS NEEDED	0.	0.	0.
JUDGE JUAN ANTONIO CHAVIRA	DIRECTOR AS NEEDED	0.	0.	0.

SANDRA CISNEROS	DIRECTOR AS NEEDED	0.	0.	0.
LUCY HALL	DIRECTOR AS NEEDED	0.	0.	0.
MARILYN S. HARRINGTON, PHD	DIRECTOR AS NEEDED	0.	0.	0.
GLORIA HERNANDEZ	DIRECTOR AS NEEDED	0.	0.	0.
JAMES JAMISON	DIRECTOR AS NEEDED	0.	0.	0.
PATRICIA J. KELLY, PHD, RN	DIRECTOR AS NEEDED	0.	0.	0.
LOUIS KOWALSKI	DIRECTOR AS NEEDED	0.	0.	0.
MARGARET M. OSER	DIRECTOR AS NEEDED	0.	0.	0.
LUZ PRIETO	DIRECTOR AS NEEDED	0.	0.	0.
SONIA M. RODRIGUEZ	DIRECTOR AS NEEDED	0.	0.	0.
REV ELIZABETH MCGREGOR SIMMONS	DIRECTOR AS NEEDED	0.	0.	0.
YOLANDA M. TAYLOR	DIRECTOR AS NEEDED	0.	0.	0.
REV KAREN VANNOY	DIRECTOR AS NEEDED	0.	0.	0.


JEFFREY HONS	PRESIDENT/CEO/SECRETARY			
	40	68,112.	6,472.	0.

ALL MAY BE REACHED C/O:
 PLANNED PARENTHOOD OF SAN ANTONIO
 AND SOUTH CENTRAL TEXAS

TOTALS INCLUDED ON FORM 990, PART V	68,112.	6,472.	0.
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SCHEDULE A	OTHER INCOME			STATEMENT 12
DESCRIPTION	2000 AMOUNT	1999 AMOUNT	1998 AMOUNT	1997 AMOUNT
MISCELLANEOUS	5,356.	3,358.	5,007.	7,093.
TOTAL TO SCHEDULE A, LINE 22	5,356.	3,358.	5,007.	7,093.

I certify that the attached revised Bylaws of the Planned Parenthood of San Antonio and South Central Texas is a complete and accurate copy of the original.



Signature

**PLANNED PARENTHOOD
OF
SAN ANTONIO
AND
SOUTH CENTRAL TEXAS**

BYLAWS

Revised
1/10/2002

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**BYLAWS
OF
PLANNED PARENTHOOD OF SAN ANTONIO
AND SOUTH CENTRAL TEXAS, INC.**

**ARTICLE I
Name**

The name of this corporation is Planned Parenthood of San Antonio and South Central Texas, Inc. (PPSA&SCT), hereinafter referred to as "the Corporation." The Corporation is a Texas nonprofit corporation as described in section 501(c)3 of the Internal Revenue Code of 1986.

ARTICLE II

The purpose of the Corporation is to provide

- affordable and accessible comprehensive reproductive health care including family planning services,
- offer health care services according to the resources of the Corporation and to the needs of the population served,
- education to clients and the community at large about issues of human sexuality, and
- support for the goals of the Planned Parenthood Federation of American (PPFA) mission statement

**ARTICLE III
Board of Directors**

Section 1 Composition

- A The Board of Directors consists of 18-24 members including officers
- B The selection of Directors is made without discrimination based on gender, race/ethnicity, religion, income, marital status, physical disability, sexual orientation, age, or national origin. A prospective Board member's name is placed before the Board by the Board Development Committee. A majority vote denotes election.
- C No employee of PPSA&SCT, any other PPFA affiliate, or the national PPFA may serve as a member of the Board of Directors. The CEO of PPSA&SCT, which an ex-officio non-voting position, is an exception.

**BYLAWS
OF
PLANNED PARENTHOOD OF SAN ANTONIO
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- C No employee of PPSA&SCT, any other PPFA affiliate, or the national PPFA may serve as a member of the Board of Directors The CEO of PPSA&SCT, which an ex-officio non-voting position, is an exception

Section 2 Terms of Office

- A The term of office of a Director is three consecutive years. Directors may be reelected to one additional term of three years after which an absence from the Board of Directors of one calendar year is mandatory before reelection. The Vice Chair/Chair-Elect and Immediate Past Chair are excluded from this restriction to allow them to fulfill their terms of office.
- B One-third of the members of the Board of Directors is elected at each annual meeting and takes office at the January meeting.
- C When unable to serve out his or her term of office, a Director submits a letter of resignation to the Chair. The Chair presents the letter at the next Board meeting for action. The Board Development Committee nominates another person to serve out the remainder of the unexpired term. The Board elects this person by a majority vote.

Section 3 Functions

- A In general, the Board of Directors:
 - 1 Sets policy for the Corporation.
 - 2 Raises funds for the Corporation.
 - 3 Hires, evaluates, and terminates the employment of the President/CEO
- B Specific duties of individual members of the Board include
 - 1 Attending all regular and special meetings
 - 2 Adhering to the bylaws of the affiliate
 - 3 Accepting responsibility for setting policy and making long-range plans for the Corporation
 - 4 Demonstrating commitment to achieving the Corporation's mission and goals by working on committees, promoting public awareness, participating in fund raising, and contributing financially
 - 5 Advocating for the public policy agenda of Planned Parenthood
 - 6 Participating in discussions and votes
 - 7 Submitting letters of resignation to the Board Chair if they are unable to complete their terms of office

Section 4 Grounds for Dismissal of Board Members

- A The use of the Director's position with the affiliate to further the manufacture, distribution, promotion, or sale of any materials, products, or

services in which the Director has either a direct or indirect financial interest (Conflict of Interest/Gratuities)

- B Malfesance deemed detrimental to the Board or the Corporation as determined by a two-thirds vote of the Directors present
- C Absence from three meetings in one year without prior notice
- D. Either A, B, or C is sufficient grounds for dismissal upon notification of the Chair

Section 5 Advisory Directors

- A Are appointed by the Chair for a one-year term
- B Number no more than 20
- C May attend Board of Directors meetings
- D Have voice participation but may not vote

ARTICLE IV Officers and Duties

Section 1 Officers

The officers of the Corporation are a Chair, Vice Chair or Chair-Elect, Treasurer, and Secretary (ex-officio, non voting)

Section 2 Duties

These officers perform the duties prescribed in these bylaws and by the parliamentary authority adopted by the Corporation

- A The Chair
 1. Presides at all meetings of the Board of Directors and the Executive Committee
 - 2 Generates yearly goals consistent with the Corporation's mission
 - 3 Appoints the chairs and committee members of all standing committees except the Board Development Committee
 - 4 Nominates the Board Development Committee Chair and members to be elected by the full Board
 - 5 Appoints special ad hoc committees as needed
 - 6 Is an ex officio member of all committees except the Board Development Committee
 - 7 Represents the Corporation at appropriate occasions

8. Serves on the Executive Committee.

B Vice Chair or Chair-Elect

- 1 Assumes the responsibility of the Chair in cases of the Chair's absence or resignation
- 2 Plans and coordinates the annual Board Development Day
- 3 Serves as Vice Chair during the first year of the Chair's term. The person elected Vice-Chair for the Chair's second year in office also serves as Chair-Elect
4. Serves (when Chair-Elect) as an ex officio member of all committees except the Board Development Committee
- 5 Serves on the Executive Committee

C The Treasurer

- 1 Maintains custody of all funds and securities of the Corporation
2. Disburses funds in the name of the Corporation by, for example, the payment of money
3. presents a monthly financial statement to the Board of Directors
4. Presents a monthly financial statement to the Board of Directors.
- 5 Initiates an annual audit by a certified public accountant, approved by the Board, submits a copy of said audit to the Board, PPFA regional office, and PPFA national headquarters, and places a copy in the Corporation files
- 5 Presents to the Board for approval a budget for the fiscal year
6. Chairs the Finance Committee
7. Serves on the Executive Committee
- 8 In the absence of the Chair and Vice Chair, the Treasurer chairs the Board meetings

D The Secretary (Board designated responsibility to the CEO as an ex-officio non-voting member)

- 1 Keeps the minutes of the meetings of the Board of Directors and the Executive Committee
- 2 Distributes copies of all minutes to the members of the Board of Directors and the Advisory Board
- 3 Serves on the Executive Committee

Section 3 Elections

A Elections of officers (with exception of the Secretary) occur at the annual meeting unless a vacancy occurs in mid-term. The Chair is elected to a two-year term while all other officers are elected to one-year terms

B Terms of office begin at the January meeting

- C No person shall hold more than one office at a time.
- D Vacancies are filled by the Board of Directors from a slate submitted by the Board Development Committee at the next Board meeting after the vacancy occurs

ARTICLE V Meetings

Section 1.

Regular meetings of the Board of Directors are held at least six times a year

Section 2

The annual meeting is held in November to elect officers and new directors for the following year, to hear the annual reports of officers and committees, and to conduct any other business

Section 3

Special meetings may be called at the request of the Chair or five (5) Members of the Board

Section 4:

The Secretary notifies each Board member of all meetings and their purposes(s) at least five days before the meetings

Section 5

A quorum consists of one-half of the filled Board positions

ARTICLE VI Committees

Section 1 The Executive Committee

- A The Officers of the Board, the Immediate Past Chair, and Committee Chairs constitute the Executive Committee
- B. The Executive Committee has the powers of the Board of Directors between Board meetings. Actions of the Executive Committee are submitted for ratification at the next Board meeting

- C The Executive Committee functions to:
1. Review the short-term and long-term goals of the affiliates on a yearly basis
 2. Review the bylaws for consistency with the PPFA bylaws
 3. Authorize the Secretary to initiate ballots by mail.
 4. Present to the Board recommendations for delegates and alternates to the National PPFA Conference and other conferences as necessary.
 5. Select Board members to serve on any delegation that represents the Board in any way other than those ways specified elsewhere in these bylaws.

D Meets as needed Any member may call a meeting

E A quorum of the Executive Committee consists of a majority

Section 2 Standing Committees

A. The Board Development Committee

1. Functions to
 - a Assess board composition and priorities for identifying new board members
 - b Identify a pool of potential Board Members
 - c Meet with prospective board members to explain the mission statement and obligation of board members.
 - d. Propose a slate of candidates for Directorship to be mailed out at least one week prior to the annual meeting
 - e Propose candidates to fill the unexpired term of any officers or director
 - f Propose a slate of officers and board members at the annual meeting
 - g Propose a slate of members for the Board development Committee at the odd year annual meeting
 - h Oversee the updating of the board handbook
 - i Plan and evaluate new board member orientation
 - j Coordinate a mentor program for new board members
 - k Administer a board evaluation in October for report at the annual meeting in November
- 2 Consists of the Immediate Past Chair and at least four (4) other members elected by the board to serve a two year term

B The Finance Committee

- 1 Functions to
 - a. Ensure the soundness of financial planning and investing for the organization
 - b. Present the annual budget for approval by the Board
 - c. Help ensure the Corporation's compliance with PPFA requirements for a cash reserve
 - d. Present for board approval recommendations regarding the investment of the funds of the organization
 - e. Regularly review the investment performance of the PPSA&SCT Long Term Reserve (LTR) and make recommendations
- 2 Is required to present to the board any proposal to invade the principal or dissolve the LTR. A three-fourths vote of the board membership is required to invade the LTR principal or dissolve the LTR.
- 3 Consists of the current Chair, Treasurer, Immediate Past Chair, and at least two other members appointed by the Chair to assure professional competence in fiscal management and investments. The Treasurer chairs this committee.
4. Meets at least quarterly.

Section 3 Operating Committees

Operating Committees are appointed by the Chair whenever the Board, Executive Committee, or Chair considers them necessary

**ARTICLE VII
President/CEO**

Section 1 The relationship between the President/CEO and the Board

The President/CEO is the sole employee of the Board of Directors. Accordingly, the Board determines the President/CEO's compensation.

Section 2 The President/CEO

- A. Carries out the Corporation's policies determined by the Board
- B. Serves as the Administrative Officer of the Corporation
- C. Manages all operations of the Corporation

- D Employs or terminates the employment of staff members in the best interests of the Corporation
- E Reports to the Board and makes recommendations about the policies of the corporation
- F Functions as Secretary and services on the Executive Committee as an ex-officio non-voting member

ARTICLE VIII Legal Counsel

Section 1.

The CEO recommends legal counsel for the Corporation. Upon confirmation via Board vote, the legal counsel's name is reported to PPFA.

Section 2

The CEO accesses legal counsel at the discretion of the CEO. Additionally, the Board Chair may access legal counsel.

ARTICLE IX Indemnification of Directors and Officers

The Corporation indemnifies and holds harmless any current or former Director or Officers of the Corporation from any loss of damage arising out of any claim or legal proceeding brought or threatened against them incident to their service as Directors or Officers of the Corporation, including reasonable attorney's fees incurred investigating such claims. This is the broadest indemnity allowed by law.

ARTICLE X Dissolution

If the Corporation is terminated for any cause, all assets not required for the payment of debts and obligations shall be distributed to the Board of Directors to a charitable organization under section 501(c)(3), Internal Revenue Code of 1986 as amended or corresponding provision of any subsequent Federal Tax law. Recipients of these assets will be other Planned Parenthood affiliates, the PPFA, or other nonprofit organizations which have missions similar to PPSA&SCT.

ARTICLE XI
Termination of Affiliation

If the Corporation's affiliation with PPFA ends, the Board of Directors may choose either to reorganize as another provider organization or to discontinue use of the name "Planned Parenthood," notify PPSA&SCT clients, and dispose of their medical records according to the standards of affiliation

ARTICLE XII
Parliamentary Authority

In all cases where parliamentary procedure of the Corporation is not provided by these bylaws, Robert's Rules of Order, Newly Revised will prevail

ARTICLE XIII
Amendment of Bylaws

These bylaws may be amended at any regular or special meeting of the Board of Directors by a two-thirds vote of members present and voting provided that the amendment has been mailed to all members of the Board of Directors at least seven (7) days before such a meeting.

2/95

Revised 4/95

Revised 10/96

Revised 5/98

Revised 2/2000

Revised 1/2002

Revised 1/2002