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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2004

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 2004 calendar year, or tax year beginning **OCT 1, 2004** and ending **SEP 30, 2005**

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	Please use IRS label or print or type. See Specific Instructions.	C Name of organization NARAL PRO-CHOICE AMERICA		D Employer identification number 13-2630359
		Number and street (or P O box if mail is not delivered to street address) Room/suite 1156 15TH STREET, NW 700		E Telephone number 202-973-3000
		City or town, state or country, and ZIP + 4 WASHINGTON, DC 20005		F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) <input type="checkbox"/>

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

G Website: **WWW.PRO-CHOICEAMERICA.ORG**

J Organization type (check only one) 501(c) (4) (insert no) 4947(a)(1) or 527

I Group Exemption Number

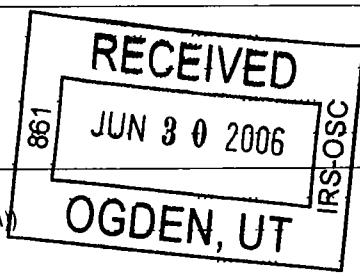
M Check if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

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 **14,127,014.**

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	12,981,008.		
	b Indirect public support	1b			
	c Government contributions (grants)	1c			
	d Total (add lines 1a through 1c) (cash \$ 12,981,008. noncash \$)	1d			12,981,008.
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			445,696.
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4			1.
	5 Dividends and interest from securities	5			39,598.
	6 a 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				
	8 a Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
	b Less cost or other basis and sales expenses	8a			
	c Gain or (loss) (attach schedule)	8b			
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	8c			
	9 Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
	a Gross revenue (not including \$ 165,465. of contributions reported on line 1a)	9a	458,026.		
	b Less direct expenses other than fundraising expenses	9b	163,682.		
	c Net income or (loss) from special events (subtract line 9b from line 9a)	SEE STATEMENT 1		9c	294,344.
	10 a 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			202,685.
	12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			13,963,332.
	13 Program services (from line 44, column (B))	13			6,759,797.
	14 Management and general (from line 44, column (C))	14			1,354,444.
	15 Fundraising (from line 44, column (D))	15			5,735,444.
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 16 and 44, column (A))	17			13,849,685.
	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18			113,647.
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19			361,895.
	20 Other changes in net assets or fund balances (attach explanation)	20			0.
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21			475,542.



ENVELOPE POSTMARK DATE JUN 29 2006

SPANNED AUG 03 2006

423001 01-13-05

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

Form 990 (2004)

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 Page 2

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 \$ <u>71,519.</u> noncash \$ _____)	71,519.	71,519.	STATEMENT 7	
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc	276,000.	115,148.	118,928.	41,924.
26	Other salaries and wages	2,247,064.	1,138,985.	659,052.	449,027.
27	Pension plan contributions	113,130.	36,930.	50,475.	25,725.
28	Other employee benefits	343,615.	79,235.	179,912.	84,468.
29	Payroll taxes	193,014.	95,941.	59,515.	37,558.
30	Professional fundraising fees	2,654,719.	926,516.	114,285.	1,613,918.
31	Accounting fees	122,239.	50,998.	52,673.	18,568.
32	Legal fees	119,390.	49,810.	51,445.	18,135.
33	Supplies	86,146.	47,399.	18,918.	19,829.
34	Telephone	639,591.	192,091.	33,631.	413,869.
35	Postage and shipping	1,275,507.	53,833.	6,319.	1,215,355.
36	Occupancy	309,654.	53,975.	251,052.	4,627.
37	Equipment rental and maintenance	124,097.	16,093.	95,263.	12,741.
38	Printing and publications	1,787,624.	216,770.	148.	1,570,706.
39	Travel	448,476.	239,746.	78,864.	129,866.
40	Conferences, conventions, and meetings	30,473.	18,267.	8,358.	3,848.
41	Interest				
42	Depreciation, depletion, etc (attach schedule)	105,263.		105,263.	
43	Other expenses not covered above (itemize)				
a	_____				
b	_____				
c	_____				
d	_____				
e	SEE STATEMENT 2	2,902,164.	3,356,541.	<529,657.>	75,280.
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	13,849,685.	6,759,797.	1,354,444.	5,735,444.

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 \$ 2,086,198. (ii) the amount allocated to Program services \$ 1,146,271.
 (iii) the amount allocated to Management and general \$ 0. and (iv) the amount allocated to Fundraising \$ 939,927.

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? <u>SEE STATEMENT 3</u>		Program Service Expenses
		(Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts, but optional for others)
a	SEE STATEMENT 4	
	(Grants and allocations \$ <u>71,519.</u>)	3,121,936.
b	SEE STATEMENT 5	
	(Grants and allocations \$ _____)	2,036,634.
c	THROUGH OUR GOVERNMENT RELATIONS DEPARTMENT, WE LOBBY ON PRO-CHOICE ISSUES AND EDUCATE POLICY MAKERS, THE MEDIA AND OTHER ACTIVISTS ON ISSUES PERTAINING TO CHOICE.	
	(Grants and allocations \$ _____)	1,230,157.
d	SEE STATEMENT 6	
	(Grants and allocations \$ _____)	325,219.
e	Other program services (attach schedule) <u>STATEMENT 8</u>	(Grants and allocations \$ _____) 45,851.
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	6,759,797.

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	326,769.	45 679,917.
	46 Savings and temporary cash investments	1,093,036.	46 1,150,194.
	47 a Accounts receivable	47a 188,133.	
	b Less allowance for doubtful accounts	47b	47c 188,133.
	48 a Pledges receivable	48a	
	b Less allowance for doubtful accounts	48b	48c
	49 Grants receivable		49
	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		52
	53 Prepaid expenses and deferred charges	813,573.	53 653,917.
	54 Investments - securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54
	55 a Investments - land, buildings, and equipment basis	55a	
	b Less accumulated depreciation	55b	55c
56 Investments - other		56	
57 a Land, buildings, and equipment basis	57a 1,592,130.		
b Less accumulated depreciation	57b 749,046.	57c 843,084.	
58 Other assets (describe <input type="checkbox"/> SEE STATEMENT 9)	159,022.	58 143,973.	
59 Total assets (add lines 45 through 58) (must equal line 74)	3,394,549.	59 3,659,218.	
Liabilities	60 Accounts payable and accrued expenses	2,152,116.	60 1,752,234.
	61 Grants payable		61
	62 Deferred revenue	114,110.	62 160,609.
	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"/> SEE STATEMENT 10)	766,428.	65 1,270,833.	
66 Total liabilities (add lines 60 through 65)	3,032,654.	66 3,183,676.	
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	361,895.	67 475,542.
	68 Temporarily restricted		68
	69 Permanently restricted		69
	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)	361,895.	73 475,542.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	3,394,549.	74 3,659,218.	

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	14,127,014.
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments \$		
(2)	Donated services and use of facilities \$		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify) \$		
	Add amounts on lines (1) through (4)	b	0.
c	Line a minus line b	c	14,127,014.
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) STMT 12 \$ <163,682.>		
	Add amounts on lines (1) and (2)	d	<163,682.>
e	Total revenue per line 12, Form 990 (line c plus line d)	e	13,963,332.

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

a	Total expenses and losses per audited financial statements	a	14,013,367.
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) STMT 11 \$ 163,682.		
	Add amounts on lines (1) through (4)	b	163,682.
c	Line a minus line b	c	13,849,685.
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	13,849,685.

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
NANCY KEENAN 1156 15TH STREET, NW WASHINGTON, DC 20005	PRESIDENT 27 HOURS/WEEK	121,230.	15,460.	0.
JENNIFER RAY 1156 15TH STREET, NW WASHINGTON, DC 20005	COO 27 HOURS/WEEK	62,169.	1,894.	0.
JOHN BOTTS 1156 15TH STREET, NW WASHINGTON, DC 20005	CFO 27 HOURS/WEEK	92,601.	16,851.	0.
SEE ATTACHED LIST NON-COMPENSATED BOARD MEMBERS		0.	0.	0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule **STMT 13** Yes No

Part VI Other Information

Table with columns for question number, description, and Yes/No status. Includes questions 76 through 91 regarding organizational activities, financials, and reporting.

Located at 1156 15TH STREET, NW, SUITE 700, WASHINGTON, DC ZIP +4 20005

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

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions)

	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 LOBBYING SERVICE INCOME					443,196.
b ANNUAL SUMMIT					2,500.
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	1.	
96 Dividends and interest from securities			14	39,598.	
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					
101 Net income or (loss) from special events					294,344.
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a EXPLOITED ACTIVITY FROM					
b DUAL USE	900004	197,367.			
c MISCELLANEOUS INCOME					5,318.
d					
e					
104 Subtotal (add columns (B), (D), and (E))		197,367.		39,599.	745,358.
105 Total (add line 104, columns (B), (D), and (E))					982,324.

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 page 34 of 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)
93A	REIMBURSEMENT FROM RELATED ORGANIZATION FOR LOBBYING SERVICES CONSISTENT WITH EXEMPT PURPOSE PROVIDED UNDER CONTRACT.
93B& 103C	INCOME CHARGED AND EVENTS THAT EDUCATE MEMBERS AND THE PUBLIC ABOUT PRO-CHOICE ISSUES.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of 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
SEE STATEMENT 14	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of 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).

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: *John M. Botts* Date: *6/27/06* Type or print name and title: *JOHN M. BOTTS CFO*

Paid Preparer's Use Only: Preparer's signature: *Michael D. Hall* Date: *6/26/06* Check if self-employed: Preparer's SSN or PTIN: _____

Firm's name (or yours if self-employed), address, and ZIP + 4: **RAFFA, P.C.**
1899 L STREET, NW, SUITE 600
WASHINGTON, DC 20036

EIN: _____ Phone no: **(202) 822-5000**

FORM 199 CASH CONTRIBUTIONS OF \$5000 OR MORE INCLUDED ON PART I, LINE 3 STATEMENT 1

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
NARAL PRO-CHOICE AMERICA PAC	1156 15TH STREET, NW WASHINGTON, DC 20005		725,923.
SEE ATTACHED LIST OF CONTRIBUTORS GREATER THAN \$5,000			1,956,540.
TOTAL INCLUDED ON LINE 3			2,682,463.

FORM 199 OTHER INCOME STATEMENT 2

DESCRIPTION	AMOUNT
EXPLOITED ACTIVITY FROM DUAL USE	197,367.
MISCELLANEOUS INCOME	5,318.
LOBBYING SERVICE INCOME	443,196.
ANNUAL SUMMIT	2,500.
TOTAL TO FORM 199, PART II, LINE 7	648,381.

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 1

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
PENINSULA POWER OF CHOICE	63,470.	27,633.	35,837.	13,814.	22,023.
NEW YORK POWER OF CHOICE	188,830.	64,358.	124,472.	55,348.	69,124.
DC ROE V WADE	185,977.	35,178.	150,799.	61,614.	89,185.
SAN FRANCISCO POWER OF CHOICE	185,214.	38,296.	146,918.	32,906.	114,012.
TO FM 990, PART I, LINE 9	623,491.	165,465.	458,026.	163,682.	294,344.

FORM 990 OTHER EXPENSES STATEMENT 2

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
MEDIA LIST RENTAL AND EXCHANGE	1,760,507.	1,378,297.	2,261.	379,949.
LOCKBOX AND BANK FEES	401,186.	83,142.	0.	318,044.
TAXES AND LICENSES	374,328.	14,700.	146,074.	213,554.
MAILING SERVICES	251,559.	401.	231,673.	19,485.
MISCELLANEOUS	193,357.	15,553.	0.	177,804.
RECRUITMENT	8,248.	0.	7,125.	1,123.
INSURANCE	30,382.	26,135.	3,049.	1,198.
STORAGE	24,602.	2,803.	21,249.	550.
EMPLOYEE TRAINING	10,238.	539.	9,699.	0.
PROGRAM SUPPORT	1,961.	1,118.	633.	210.
ALLOCATION	0.	687,582.	<956,748.>	269,166.
SPECIAL EVENTS EXPENSE ALLOCATION	<163,682.>			<163,682.>
GRANTS AND HONORARIUM	9,478.		5,328.	4,150.
JOINT COST ALOCATION	0.	1,146,271.	0.	<1,146,271.>
TOTAL TO FM 990, LN 43	2,902,164.	3,356,541.	<529,657.>	75,280.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 5

DESCRIPTION OF PROGRAM SERVICE TWO

THE COMMUNICATIONS DEPARTMENT CRAFTS THE PRO-CHOICE MESSAGE AND ENSURES CONSISTENT AND EFFECTIVE PUBLIC ADVOCACY BY THE ORGANIZATION AND ITS AFFILIATES. WE CREATE AND LEVERAGE MEDIA OPPORTUNITIES AND ONLINE COMMUNICATIONS TO: EFFECT POLICY AND POLITICAL DEBATES; GROW AND MOBILIZE THE PRO-CHOICE MOVEMENT; REACH OUT TO TARGETED CONSTITUENCIES; AND ENSURE THAT NARAL PRO-CHOICE AMERICA MAINTAINS ITS LEADERSHIP AND VISIBILITY AS THE POLITICAL ARM OF THE PRO-CHOICE MOVEMENT.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE B		2,036,634.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 6

DESCRIPTION OF PROGRAM SERVICE FOUR

THE LEGAL AND POLICY RESEARCH DEPARTMENT TRACKS LEGISLATION, CASE LAW, AND REGULATIONS AT THE STATE AND FEDERAL LEVELS AND CONDUCTS A VARIETY OF PUBLIC POLICY AND PUBLIC HEALTH RESEARCH TO SUPPORT THE POLICY DEVELOPMENT, PUBLIC EDUCATION, COMMUNICATIONS, AND ADVOCACY EFFORTS OF NARAL PRO-CHOICE AMERICA AND ITS STATE AFFILIATES. THE LEGAL AND POLICY RESEARCH DEPARTMENT AUTHORS, WHO DECIDES? THE STATUS OF WOMENS REPRODUCTIVE RIGHTS IN THE UNITED STATES, WHICH IS PRODUCED ANNUALLY IN A PRINT VERSION AND IS CONTINUOUSLY UPDATED IN AN ONLINE VERSION. THE DEPARTMENT MAINTAINS AN ONLINE STATE LEGISLATION TRACKER, WHICH TRACKS ALL LEGISLATION INTRODUCED IN THE 50 STATES AND THE DISTRICT OF COLUMBIA RELATING TO REPRODUCTIVE RIGHTS. THE DEPARTMENT ALSO PRODUCES NUMEROUS FACT SHEETS AND REPORTS ON PUBLIC POLICY, LEGISLATION, CASE LAW, AND JUDICIAL NOMINATIONS.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE D		325,219.

FORM 990 CASH GRANTS AND ALLOCATIONS STATEMENT 7

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
GRANTS AND HONORARIUMS	SEE ATTACHED STATEMENT FOR DETAILS		NONE	71,519.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				71,519.

FORM 990 OTHER PROGRAM SERVICES STATEMENT 8

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
POLITICAL ACTION COMMITTEE ADMINISTRATIVE EXPENSE		45,851.
TOTAL TO FORM 990, PART III, LINE E		45,851.

FORM 990 OTHER ASSETS STATEMENT 9

DESCRIPTION	AMOUNT
LOANS TO STATE AFFILIATES	51,156.
DEPOSITS	92,817.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	143,973.

FORM 990 OTHER LIABILITIES STATEMENT 10

DESCRIPTION	AMOUNT
CAPITAL LEASES	242,216.
DEFERRED RENT	162,204.
DUE TO NARAL FDN	830,921.
DUE TO NARAL PAC	35,492.
TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B	1,270,833.

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	11
DESCRIPTION		AMOUNT	
SPECIAL EVENTS		163,682.	
TOTAL TO FORM 990, PART IV-B		163,682.	

FORM 990	OTHER REVENUE INCLUDED ON FORM 990	STATEMENT	12
DESCRIPTION		AMOUNT	
SPECIAL EVENTS		<163,682.>	
TOTAL TO FORM 990, PART IV-A		<163,682.>	

FORM 990	PART V - OFFICER COMPENSATION FROM RELATED ORGANIZATIONS	STATEMENT	13
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OFFICER'S NAME	NAME AND EIN OF RELATED ORGANIZATION	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
NANCY KEENAN	NARAL PRO-CHOICE AMERICA FOUNDATION	58,770.	7,494.	0.
JENNIFER RAY	NARAL PRO-CHOICE AMERICA FOUNDATION	30,139.	918.	0.
JOHN BOTTS	NARAL PRO-CHOICE AMERICA FOUNDATION	44,890.	8,169.	0.

FORM 990

PART IX - INFORMATION REGARDING TAXABLE
SUBSIDIARIES AND DISREGARDED ENTITIES

STATEMENT 14

NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

CHOICE CONTRIBUTORS, INC.

ADDRESS

1156 15TH STREET, NW, WASHINGTON, DC 20005

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
52-1400991	79.00%	LIST RENTAL BROKERAGE	0.	8,241.

**NARAL Pro-Choice America
Form 990, Line 22 – Grants and Allocations
For the Year Ended September 30, 2005**

13-2630359

<u>NAME</u>	<u>AMOUNT</u>	<u>DESCRIPTION</u>
ALLIANCE FOR JUSTICE 1 DUPONT CIRCLE, 2ND FLOOR WASHINGTON, DC 20036	2,500	JUSTICE LUNCHEON
HUMAN RIGHTS CAMPAIGN 1640 RHODE ISLAND AVENUE, NW WASHINGTON, DC 20036	1,575	DONATION
JESSICA SPOONER	140	GRANT
LARA SCHMIDT	140	GRANT
LAURA GOODMAN	140	GRANT
MICHAEL KRASNYKQED	150	HONORARIA
NARAL PRO-CHOICE COLORADO/FOUNDATION 1905 SHERMAN STREET, STE 800 DENVER, CO 80203	5,134	GRANT
NARAL PRO-CHOICE CONNECTICUT/FOUNDATION 135 BROAD STREET HARTFORD, CT 06105	5,672	GRANT
NARAL PRO-CHOICE GEORGIA/FOUNDATION P O.BOX 5589 ATLANTA, GA 31107	112	GRANT
NARAL PRO-CHOICE IOWA P O BOX 8027 DES MOINES, IA 50301	470	
NARAL PRO-CHOICE MARYLAND/EDUCATION FUND 8121 GEORGIA AVENUE, SUITE 501 SILVER SPRING, MD 20910	50	GRANT
NARAL PRO-CHOICE MICHIGAN/FOUNDATION 4515 W SAGINAW,SUITE 201 LANSING, MI 48917	672	GRANT

**NARAL Pro-Choice America
Form 990, Line 22 – Grants and Allocations
For the Year Ended September 30, 2005**

13-2630359

<u>NAME</u>	<u>AMOUNT</u>	<u>DESCRIPTION</u>
NARAL PRO-CHOICE MINNESOTA/FOUNDATION 550 RICE STREET ST PAUL, MN 55103	5,722	GRANT
NARAL PRO-CHOICE MISSOURI/FOUNDATION 4144 LINDELL BLVD, STE 505 ST. LOUIS, MO 63108	722	GRANT
NARAL PRO-CHOICE MONTANA/FOUNDATION P.O. BOX 279 HELENA, MT 59624	5,672	GRANT
NARAL PRO-CHOICE NEW HAMPSHIRE/FOUNDATION 18 LOW AVENUE CONCORD, NH 03301	28	GRANT
NARAL PRO-CHOICE NEW JERSEY/FOUNDATION 127 ROUTE 206, SUITE 25B HAMILTON, NJ 08610	722	GRANT
NARAL PRO-CHOICE NEW MEXICO P.O BOX 97 ALBURQUERQUE, NM 87103	5,000	GRANT
NARAL PRO-CHOICE NEW YORK/FOUNDATION 427 BROADWAY, 3RD FLOOR NEW YORK, NY 10013	722	GRANT
NARAL PRO-CHOICE NORTH CAROLINA/FOUNDATION 16 WEST MARTIN STREET,STE 401 RALEIGH, NC 27601	722	GRANT
NARAL PRO-CHOICE OREGON/FOUNDATION 310 SW 4TH STREET SUITE 430 PORTLAND, OR 97204	7,722	GRANT
NARAL PRO-CHOICE OHIO/EDUCATION FOUNDATION 12000 SHAKER BOULEVARD CLEVELAND, OH 44120	672	GRANT
NARAL-PRO-CHOICE PENNSYLVANIA/FOUNDATION 1616 WALNUT STREET, SUITE 606 PHILADELPHIA, PA 19103	112	GRANT

**NARAL Pro-Choice America
Form 990, Line 22 – Grants and Allocations
For the Year Ended September 30, 2005**

13-2630359

<u>NAME</u>	<u>AMOUNT</u>	<u>DESCRIPTION</u>
NARAL PRO-CHOICE SOUTH DAKOTA 401 E 8TH STREET,SUITE 330G SIOUX FALLS, SD 57103-7009	5,000	GRANT
NARAL PRO-CHOICE TEXAS/EDUCATION FUND P.O BOX 684605 P O BOX 684602 AUSTIN, TX 78768 AUSTIN, TX 78768	610	GRANT
NARAL PRO-CHOICE WASHINGTON/FOUNDATION 811 FIRST AVE., SUITE 456 SEATTLE, WA 98104-1408	526	GRANT
NARAL PRO-CHOICE WISCONSIN/FOUNDATION 122 STATE STREET, SUITE 201 MADISON, WI 53703	5,672	GRANT
PEOPLE FOR THE AMERICAN WAY 2000 M STREET NW, SUITE 400 WASHINGTON, DC 20036	10,000	DONATION
REBECCA BLAINE GSS 3728 UNIVERSITY OF NEW HAMPSHIRE DURHAM, NH 03824	140	GRANT
THE MATSUI FOUNDATION FOR PUBLIC SERVICE P O BOX 1347 SACRAMENTO, CA 95812	500	DONATION
THE SPIELER AGENCY 154 WEST 57th STREET, ROOM 135 NEW YORK, NY 10019	4,000	HONORARIA
WOMEN'S INFORMATION NETWORK 2850 CONNECTICUT AVE , NW, SUITE 100 WASHINGTON, DC 20008	500	12th ANNUAL AWARDS
TOTAL	71,519	

NARAL Pro-Choice America
 Form 990, Part II, Line 42 - Depreciation
 Form 990, Part IV, Line 57 - Land, Buildings, and Equipment
 Year Ended September 30, 2005

13-2630359

ASSETS

	<u>Beginning of Year</u>	<u>Additions</u>	<u>Disposals</u>	<u>End of Year</u>
Furniture and Equipment	\$ 1,271,683	\$ 97,084	\$ (124,090)	\$ 1,244,677
Leasehold improvements	341,139	6,314		347,453
Total	<u>\$ 1,612,822</u>	<u>\$ 103,398</u>	<u>\$ (124,090)</u>	<u>\$ 1,592,130</u>

ACCUMULATED
DEPRECIATION

	<u>Beginning of Year</u>	<u>Current Year Depreciation</u>	<u>Disposals</u>	<u>End of Year</u>
Depreciation	762,842	105,263	(119,059)	749,046
Total	<u>\$ 762,842</u>	<u>\$ 105,263</u>	<u>\$ (119,059)</u>	<u>\$ 749,046</u>
Net	\$ 849,980			\$ 843,084

Note Furniture and equipment are recorded at cost and depreciated using the straight-line method over estimated useful life of five years Leasehold improvements are amortized using a straight-line basis over the term of the lease Expenditures for major repairs or improvements are capitalized, expenditures for minor repairs and maintenance are expensed when incurred Upon the retirement or disposal of assets, the cost and the accumulated depreciation and amortization are eliminated from the accounts and the resulting gain or loss is charged to expenses

NARAL PRO-CHOICE AMERICA ein 13-2630359
Form 990 fye 9-30-2005
Attachment Part V

Rosalyn Levy Jonas

Chair

Lisa Lindelef

Vice Chair

Janet L. Denlinger

Secretary

Marcie Love

Treasurer

Angela Walker Reimer

Barbara Silby

Jill Swid

Rev. Dr. Katherine H. Ragsdale

Helen Rosenthal

Tim Stanley

Coni Battle

Suone Cotner

Board Chair, NARAL Pro-Choice Washington

Betsy Cohn

Diane Dillingham

Liz Hager

Richard A. Gross

NARAL Pro-Choice America Foundation

Board Chair

Edward Howard

Ruth J. Katz, JD, MPH

Amy Madigan

Amy B. Harris

Susan M. Hyatt

Richard Licht

Sally J. Patterson

Note: Board members are not compensated and devote more than 5 hours per week to their position. All can be reached in care of the organization.

NARAL Pro-Choice America
Form 990, Part VI, Line 90a - List of States Receiving a Copy of the Return
Year Ended September 30, 2005
List of States

13-2630359

Arizona
Arkansas
California
Connecticut
District of Columbia
Florida
Georgia
Illinois
Kansas
Maine
Maryland
Massachusetts
Michigan
Minnesota
Mississippi
Missouri
Nebraska
New Hampshire
New Jersey
New York
North Carolina
Ohio
Oregon
Pennsylvania
Rhode Island
South Carolina
Tennessee
Texas
Virginia
Washington
West Virginia
Wisconsin

**NARAL Pro-Choice America
Form 990, Sch. B - List of Donors Greater than \$5,000
Year End September 31, 2005**

Name	Add1	Add2	City	St	Zip	Summary Amount
1345 Cleaning Service Co , LLP	299 Park Avenue		New York	NY	10171	\$10,000 00
Abraham Krasnoff	3 Valley Road		Glen Cove	NY	11542-1426	\$10,000 00
Alan Sagner	The Sagner Companies	293 Eisenhower Parkway, #260	Livingston	NJ	07039	\$25,000 00
Albert Dwoskin	A.J Dwoskin & Associates	9302 Lee Highway, Ste 300	Fairfax	VA	22031-1214	\$5,000 00
Alice D Wallace	4875 Sioux Drive, Apt. 201		Boulder	CO	80303-3833	\$5,000 00
Alta Barer	3048 E. Laurelhurst Dr NE		Seattle	WA	98105	\$5,000 00
Amy Madigan	22031 Carbon Mesa Road		Malibu	CA	90265-5008	\$10,818 00
Andrew Farkas	230 West 56th Street, Apt. 58A		New York	NY	10019	\$10,000 00
Anna M Timmons	1150 S W Chapman Way	Apt 305	Palm City	FL	34990-2468	\$8,000 00
Annette P Cumming	Cumming Foundation	165 Huckleberry Drive	Jackson	WY	83001	\$5,000 00
Anonymous, c/o Bank of America	100 Four Falls Corporate Center, Suite 500		West Conshohocken	PA	19428	\$10,000 00
Ariene D Staley	229 E. Lake Shore Drive, #9-E		Chicago	IL	60611-1340	\$10,000 00
Barbara R Palmer	425 Windmere Drive		State College	PA	16801	\$5,000 00
Barry R Lipman	3320 Jackson Street		San Francisco	CA	94118	\$5,000 00
Bayard T Storey	1919 Brandywine Street		Philadelphia	PA	19130-3202	\$5,000 00
Beverly Sommer	810 Seventh Ave , 29th Floor		New York	NY	10019	\$5,000 00
Brooke G Neidich	120 East End Avenue, #7A		New York	NY	10028-7552	\$25,000 00
Carrie D Rhodes	5600 NE Windemere Rd		Seattle	WA	98105	\$11,000 00
Catherine Skove	P O Box 8		Gilsum	NH	03448	\$5,000 00
Celia D Rumsey Chantable Lead Annuity Trust	1200 Camino Delora		Santa Fe	NM	87501	\$8,564 00
Celia Gilbert	15 Gray Gardens West		Cambridge	MA	02138-2311	\$5,000 00
Christine E Lamond	167 Isabella Avenue		Atherton	CA	94027-4044	\$7,000 00
Claire L Rolfs	P O Box 7		Sherwood	OR	97140-0007	\$6,000 00
Clay K Kirk	320 East 72nd Street, #5C		New York	NY	10021-4769	\$5,000 00
Connie L Lune	181 Selby Lane		Atherton	CA	94027	\$5,000 00
Cosmopolitan Bank and Trust	801 North Clark Street		Chicago	IL	60610	\$5,000 00
Crawford S Gordon	1742 Mayoworth Road		Kaycee	WY	82639-9706	\$8,000 00
David B Bingham	50 White Birch Road		Salem	CT	06420-3918	\$5,000 00
Deborah B Seymour	8314 Greenwood Ave North #3400		Seattle	WA	98103-4235	\$5,500 00
Deborah J Autzen	2820 Pacific Avenue		San Francisco	CA	94115	\$10,000 00
Deborah Z Robbins	32 Calhoun		Greenwich	CT	06831	\$7,500 00
Diana M Rauner	720 Rosewood Avenue		Winnetka	IL	60093-2031	\$10,000 00
Douglas H Wolf	2233 Lyon Street		San Francisco	CA	94115	\$10,000 00
Elaine M Schuster	132 Yarmouth Road		Chestnut Hill	MA	02467-2800	\$5,000 00
Elizabeth G Beinecke	21 East 79th Street, Penthouse		New York	NY	10021-0125	\$7,000 00
Elizabeth H Scheuer	c/o TAG	75 Rockefeller Plaza, Suite 900	New York	NY	10019-0000	\$5,000 00
Elsie H Hillman	123 Holyrood Road	Morewood Heights	Pittsburgh	PA	15213	\$15,000 00
Fiona Druckenmiller	117 East 72nd Street, #16		New York	NY	10021-4249	\$10,000 00
First American Trust	2100 Fifth Avenue		San Diego	CA	92101	\$350,523 32
Francene S Rodgers	100 Belvidere Street, #8G		Boston	MA	02199	\$10,000 00
Fred A Berry	P O Box 648		Yellville	AR	72687-0648	\$6,500 00
George W Krumme	2300 Riverside Drive Unit 16-E		Tulsa	OK	74114-2401	\$5,500 00
Gern Kay	5821 Ferree Street		Pittsburgh	PA	15217-1451	\$5,000 00
Gregory L Shaw	220 1st Street #403		Kirkland	WA	98033	\$40,000 00
Harle G Montgomery	2150 Lincoln Park West, Apt 406		Chicago	IL	60614	\$5,000 00
Hathaway Barry	P O Box 157		Point Reyes Station	CA	94956-0157	\$5,000 00
Helga Tarver	6610 Western Avenue		Chevy Chase	MD	20815-3211	\$11,050 00
Hilary Bates	2629 Pierce Street		San Francisco	CA	94123-4630	\$5,000 00
Hugh Westbrook	158 South Prospect Drive		Coral Gables	FL	33133-7006	\$5,000 00
J S Yake	347 Loudon Road		Loudonville	NY	12211	\$6,000 00
Jacqueline Shear	23 E. 83rd St		New York	NY	10028-0401	\$20,000 00
JaMel S Perkins	3565 Washington St		San Francisco	CA	94118	\$7,500 00
James C Hommel	19 Sutter Street		San Francisco	CA	94104-4901	\$5,000 00
Janet L Denlinger	1040 Arcadian Way		Fort Lee	NJ	07024	\$28,124 13
Jennifer L Brorsen	8 Elm Rock Road		Bronxville	NY	10708-4203	\$21,500 00
Jill C Preotie	27 Commonwealth Avenue		Boston	MA	02116-2102	\$5,000 00
Jill E Brauffman	10 Gracie Square	#4A	New York	NY	10028	\$5,000 00
Jill H Swid	20 Fifth Avenue	#17B	New York	NY	10011	\$5,000 00
Jill S Slater	15 West 72nd Street, #37B		New York	NY	10023	\$5,000 00
Jo Ann B Kaplan	1022 Palisades Beach Road		Santa Monica	CA	90403	\$7,500 00
Joan Amow	14 Butler Road		Scarsdale	NY	10583	\$100,000 00
Joan H Tisch	Regency Hotel	540 Park Avenue	New York	NY	10021	\$50,000 00
Joan M Dukes	2934 Horizon Hills Dr		Prescott	AZ	86305-7111	\$5,000 00
Joanie Bronfman	1731 Beacon St, #517		Brookline	MA	02445	\$5,000 00
John A Harris	2035 Twinbrook Road		Berwyn	PA	19312-1941	\$10,000 00
John L Holland	111 Saint Albans Way		Baltimore	MD	21212-3332	\$5,000 00
Judith E Zann	2211 Broadway Apt 5E		New York	NY	10024	\$7,500 00
Karen A Rosmarin	1612 Acton Street		Berkeley	CA	94702-1215	\$9,000 00
Katharine E Merck	1010 Waltham Street, #F19		Lexington	MA	02421	\$7,500 00
Kathenne B Mountcastle	37 Oenoke Lane		New Canaan	CT	06840-4516	\$5,000 00
Kathryn Green	190 East 72nd Street, Apt 33C		New York	NY	10021	\$6,000 00
Laura DeBonis	12 Marlborough Street		Boston	MA	02116	\$7,000 00
Laune G Campbell	235 W 48th Street, Apt. 11C		New York	NY	10036	\$5,000 00
Leah R Fned	146 N Union Street		Alexandria	VA	22314	\$10,000 00
Leonard N Block	535 Park Avenue		New York	NY	10021	\$10,000 00
Lewis B Cullman	555 Park Avenue, Apt. 12W		New York	NY	10021-8166	\$50,000 00
Linda Pritzker	3555 Timmons Lane, Suite 800		Houston	TX	77027	\$11,000 00

NOT SUBJECT TO PUBLIC INSPECTION

NARAL Pro-Choice America
Form 990, Sch. B - List of Donors Greater than \$5,000
Year End September 31, 2005

13-2630359

Name	Add1	Add2	City	St	Zip	Summary Amount
Lisa P Lindelef	2727 Union Street		San Francisco	CA	94123-3807	\$51,363 54
Lorna B Howard	80 Irving Place		New York	NY	10003	\$30,000 00
Lucy J Hadac	5536 28th Avenue, NE		Seattle	WA	98105-5516	\$20,000 00
Marcena W Love	1175 Pelham Road		Winnetka	IL	60093-2017	\$15,966 99
Mana T Vullo	40 West 77th Street, #16-A		New York	NY	10024	\$10,636 00
Marjone M Findlay	245 Rockland Road		Carlisle	MA	01741	\$7,500 00
Martha L Melman	20 Locust Road		Winnetka	IL	60093	\$6,000 00
Mary Ellen Moschetti	3612 Courtside Circle		Huntington Beach	CA	92649	\$5,000 00
Mary Lee Dayton	540 Indian Mound Street, Apt. 4B		Wayzata	MN	55391-1745	\$25,000 00
Mary M Morrison	20 Puako Beach Drive		Kamuela	HI	96743-9707	\$10,000 00
Matthew Bergman	27514 97th Ave SW		Vashon	WA	98070	\$10,000 00
McDonald Financial Group	127 Public Square, 17th Floor		Cleveland	OH	44114-1306	\$100,000 00
Nancy D Alvord	5601 NE Ambleside Road		Seattle	WA	98105	\$45,000 00
Naomi C Pitcairn	650 Greenwich Lane		Foster City	CA	94404	\$5,000 00
Nicola M Miner	2835 Broadway		San Francisco	CA	94115-0000	\$10,000 00
Peggy Danziger	155 East 69th Street		New York	NY	10021-5108	\$11,000 00
People for the American Way	2000 M Street, NW	Suite 400	Washington	DC	20036	\$20,000 00
Rosalyn L Jonas	6716 Melody Lane		Bethesda	MD	20817	\$5,130 24
Ruth M Bowers	202 Bushnell Avenue		San Antonio	TX	78212	\$25,000 00
Sarah M Coulson Latham	Skunkhollow Road, #3		Huntington	NY	11743	\$5,073 00
Stainman Family Foundation	320 East 72nd Street		New York	NY	10021-4769	\$25,000 00
Steven Rattner & P Maureen White Foundation	c/o Lazard Freres & Co., LLP	30 Rockefeller Plaza	New York	NY	10020	\$5,000 00
Sue Ruggie Trust	C/O Joanne Casey	653-11th Street	Oakland	CA	94607	\$39,885 10
Sunita Leeds	3205 R Street, NW		Washington	DC	20007	\$9,000 00
Susan B Stearns	7373 Mandann Drive		Boca Raton	FL	33433	\$5,000 00
Susan G Delaney	17 Locust Lane		Bronxville	NY	10708	\$7,500 00
Susan Hunter	6 Wampatuck Road		Dedham	MA	02026-4211	\$10,020 00
Susan P Orr	669 Mirada Avenue		Stanford	CA	94305	\$5,000 00
Susan Pritzker	1518 North Astor Street		Chicago	IL	60610-1610	\$20,000 00
The Esther Clemence Trust	Harris Private Bank	111 West Monroe Street	Chicago	IL	60603	\$10,885 24
The Irving Harris Foundation	191 N Wacker Drive, Suite 1500		Chicago	IL	60606-1899	\$10,000 00
The Philanthropic Collaborative	437 Madison Avenue, 37th Floor		New York	NY	10022	\$75,000 00
The San Francisco Foundation	225 Bush Street, Suite 500		San Francisco	CA	94104-4224	\$15,000 00
The Tides Foundation	PO Box 29903		San Francisco	CA	94929	\$15,000 00
Tom W Lyons	5408 Navajo Road		Louisville	KY	40207	\$5,000 00
Veronique Pittman	150 Columbus Ave, Apt. 17C		New York	NY	10023	\$15,000 00
Vicki B Cox	1200 California St, Apt. 22C		San Francisco	CA	94109	\$5,000 00
Vicki R Gross	930 Park Avenue, #13		New York	NY	10028-0319	\$5,000 00
Wendy B Flom	146 Central Park West, Apt. 2E		New York	NY	10023	\$5,000 00
Wendy Mackenzie	829 Park Avenue		New York	NY	10021	\$15,000 00
Wendy S Raether	56 Harbor Drive, Belle Haven		Greenwich	CT	06830	\$5,000 00
William Fisher	3828 Jackson Street		San Francisco	CA	94118	\$20,000 00
Williard A Hoffman	PMB #44	5403 Everhart Road	Corpus Christi	TX	78411-4805	\$20,000 00
Yvonne S Quinn	10 Gracie Square		New York	NY	10028	\$10,000 00
		TOTAL				<u>\$ 1,956,539 56</u>

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)
- 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)

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.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile.

Type or print	Name of Exempt Organization NARAL PRO-CHOICE AMERICA	Employer identification number 13-2630359
File by the top date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1156 15TH STREET, NW, NO. 700	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20005	

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 |

• The books are in the care of ▶ **THE ORGANIZATION**

Telephone No ▶ **202-973-3000** FAX No ▶ _____

- 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 months for a Form 990-T corporation) extension of time until **MAY 15, 2006** to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **OCT 1, 2004** and ending **SEP 30, 2005**

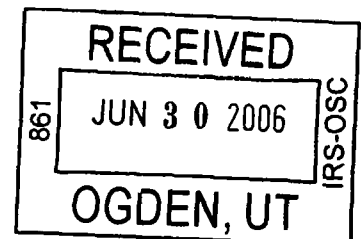
2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less an 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

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453 EO and Form 6879 EO for payment instructions.



- 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 File by the extended due date for filing the return See instructions	Name of Exempt Organization		Employer identification number
	1156 15TH STREET, NW, NO. 700		13-2630359
	WASHINGTON, DC 20005		For IRS use only

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

Form 990
 Form 990-EZ
 Form 990-T (sec 401(a) or 408(a) trust)
 Form 1041-A
 Form 5227
 Form 8870
 Form 990-BL
 Form 990-PF
 Form 990-T (trust other than above)
 Form 4720
 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

- The books are in the care of **THE ORGANIZATION**
 Telephone No **202-973-3000** FAX No _____
- 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 **AUGUST 15, 2006**

5 For calendar year _____, or other tax year beginning **OCT 1, 2004** and ending **SEP 30, 2005**

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 REQUIRED TO PREPARE 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 *[Handwritten Signature]* Title *CFO* Date *5/4/2006*

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 a 10-day grace period
- We **cannot** consider this application because it was filed after the extended 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
	Number and street (include suite, room, or apt no.) or a P.O. box number
	City or town, province or state, and country (including postal or ZIP code)