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

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

For the 2012 calendar year, or tax year beginning JUL 1, 2012 and ending JUN 30, 2013

**Name of organization:**

PLANNED PARENTHOOD
OF THE COLUMBIA/WILLAMETTE

**Address:**

3727 NE ML KING JR. BLVD.
PORTLAND, OR 97212-1112

**Employer identification number:**

93-6031270

**Telephone number:**

(503) 775-4931

**Gross receipts:**

23,596,757.

**H(a) Is this a group return for affiliates?**

Yes No

**H(b) Are all affiliates included?**

Yes No

**Website:**

WWW.PPCW.ORG

**Form of organization:**

Corporation

**Year of formation:**

1963

**State of legal domicile:**

OR

**Summary**

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
<th>2011</th>
<th>2012</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Net assets or fund balances. Subtract line 21 from line 20.</td>
<td>$37,150,659</td>
<td>$37,499,094</td>
<td>$3,348,435</td>
</tr>
<tr>
<td>11</td>
<td>Total revenue, add lines 8 through 11 to equal Part VIII, column (A), line 12</td>
<td>21,307,883</td>
<td>21,709,602</td>
<td>$4,691,729</td>
</tr>
<tr>
<td>6</td>
<td>Total number of volunteers (estimate if necessary).</td>
<td>306</td>
<td>306</td>
<td>0</td>
</tr>
<tr>
<td>5</td>
<td>Total number of individuals employed in calendar year 2012 (Part V, line 2a)</td>
<td>278</td>
<td>278</td>
<td>0</td>
</tr>
<tr>
<td>4</td>
<td>Number of independent voting members of the governing body (Part VI, line 1b)</td>
<td>18</td>
<td>18</td>
<td>0</td>
</tr>
<tr>
<td>3</td>
<td>Number of voting members of the governing body (Part VI, line 1a)</td>
<td>18</td>
<td>18</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>1</td>
<td>Briefly describe the organization’s mission or most significant activities.</td>
<td>THE ORGANIZATION PROVIDES, PROMOTES, AND PROTECTS ACCESS TO REPRODUCTIVE AND SEXUAL HEALTH CARE.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Revenue**

<table>
<thead>
<tr>
<th>Description</th>
<th>2011</th>
<th>2012</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td>
<td>$159,971</td>
<td>$518,881</td>
<td>$358,910</td>
</tr>
<tr>
<td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td>
<td>$174,777</td>
<td>$86,063</td>
<td>$-88,714</td>
</tr>
<tr>
<td>9 Program service revenue (Part VIII, line 2g)</td>
<td>$18,304,045</td>
<td>$18,723,319</td>
<td>$419,274</td>
</tr>
<tr>
<td>8 Contributions and grants (Part VIII, line 1h)</td>
<td>$2,629,090</td>
<td>$2,381,339</td>
<td>$-247,751</td>
</tr>
</tbody>
</table>

**Expenses**

<table>
<thead>
<tr>
<th>Description</th>
<th>2011</th>
<th>2012</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)</td>
<td>$5,800</td>
<td>$0</td>
<td>$-5,800</td>
</tr>
<tr>
<td>14 Benefits paid to or for members (Part IX, column (A), line 4)</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)</td>
<td>$10,084,397</td>
<td>$10,177,423</td>
<td>$93,026</td>
</tr>
<tr>
<td>11 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>10a Professional fundraising fees (Part IX, column (A), line 11e)</td>
<td>$721,919</td>
<td>$799,498</td>
<td>$77,581</td>
</tr>
<tr>
<td>9 Other expenses (Part IX, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>8b Total fundraising expenses (Part IX, column (D), line 25)</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>8a Contributions and grants (Part VIII, line 1h)</td>
<td>$2,629,090</td>
<td>$2,381,339</td>
<td>$-247,751</td>
</tr>
<tr>
<td>7d Net unrelated business taxable income from Form 990-T, line 34</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>7b Net unrelated business revenue from Part VIII, column (C), line 12</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>7a Total unrelated business revenue from Part VIII, column (O), line 12</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>6 Total number of volunteers (estimate if necessary)</td>
<td>306</td>
<td>306</td>
<td>0</td>
</tr>
<tr>
<td>5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)</td>
<td>278</td>
<td>278</td>
<td>0</td>
</tr>
<tr>
<td>4 Number of independent voting members of the governing body (Part VI, line 1b)</td>
<td>18</td>
<td>18</td>
<td>0</td>
</tr>
<tr>
<td>3 Number of voting members of the governing body (Part VI, line 1a)</td>
<td>18</td>
<td>18</td>
<td>0</td>
</tr>
<tr>
<td>2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

**Signature Block**

STACY CROSS, PRESIDENT

Signature of officer
date: 2012

**Preparer’s signature**

JASON HALL

Print/Type preparer’s name
date: 2012

Paid

Hoffman, Stewart & Schmidt, PC

Preparer’s EIN: 93-0743240

**Use Only**

4900 MEADOWS ROAD, STE. 200

Phone no. 503-220-5900

Form 990 (2012)
1 Briefly describe the organization’s mission:
THE MISSION OF PLANNED PARENTHOOD COLUMBIA WILLAMETTE (PPCW) IS TO PROVIDE, PROMOTE AND PROTECT ACCESS TO QUALITY REPRODUCTIVE AND SEXUAL HEALTH CARE IN OREGON AND SW WASHINGTON.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
Yes  No
If “Yes,” describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?
Yes  No
If “Yes,” describe these changes on Schedule O.

4 Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses $ 16,325,753. including grants of $ ) (Revenue $ 18,132,374.)
PATIENT SERVICES – ANNUALLY, MORE THAN 60,000 WOMEN, MEN AND TEENS VISIT ONE OF PPCW’S 10 HEALTH CENTERS IN OREGON AND SOUTHWEST WASHINGTON FOR COMPASSIONATE REPRODUCTIVE HEALTH CARE. PATIENTS RECEIVE AFFORDABLE CONTRACEPTIVES, EMERGENCY CONTRACEPTION, ANNUAL GYNECOLOGICAL CHECK-UPS, BREAST EXAMS, CERVICAL CANCER DETECTION AND TREATMENT, STD TESTING AND TREATMENT, VASECTOMY, FEMALE STERILIZATION, AND PREGNANCY TESTING AND OPTIONS COUNSELING AND PREVENTATIVE HEALTH COUNSELING. LESS THAN FIVE PERCENT OF PPCW’S SERVICES ARE FOR EARLY-ABORTION CARE.

4b (Code: ) (Expenses $ 761,607. including grants of $ ) (Revenue $ 681,760.)
THROUGH A CONTRACT WITH ANOTHER PLANNED PARENTHOOD AFFILIATE, PPCW PROVIDES WYMAN’S TEEN OUTREACH PROGRAM (TOP) WHICH IS A COMPREHENSIVE YOUTH DEVELOPMENT STRATEGY THAT PROMOTES THE POSITIVE DEVELOPMENT OF ADOLESCENTS THROUGH A COMBINATION OF CURRICULUM-GUIDED GROUP DISCUSSION AND COMMUNITY SERVICE LEARNING. THE PROGRAM PROVIDES TEENS WITH THE NECESSARY SUPPORT AND OPPORTUNITIES TO PREPARE FOR A SUCCESSFUL ADULTHOOD AND AVOID PROBLEM BEHAVIOR. PPCW ALSO PROVIDES PEER EDUCATION PROGRAMS IN PORTLAND AND WOODBURN. IN THESE PROGRAMS, SMALL GROUPS OF HIGHLY TRAINED AND MOTIVATED TEENS REACH OUT TO THEIR PEERS IN INFORMAL SETTINGS SPREADING KNOWLEDGE AND SKILLS TO HELP TEENS DEVELOP HEALTHY SEXUAL ATTITUDES AND BEHAVIORS.

4c (Code: ) (Expenses $ 205,470. including grants of $ ) (Revenue $ 32,000.)
PUBLIC AFFAIRS – THE PUBLIC AFFAIRS PROGRAM PROVIDES INFORMATION, SUPPORT, AND TRAINING THAT HELPS PPCW SUPPORTERS INFLUENCE PUBLIC POLICY AND THE LEGISLATIVE PROCESS. PPCW WORKS WITH LOCAL, STATE AND NATIONAL OFFICIALS AND THROUGH PUBLIC INFORMATION AND GRASSROOTS ORGANIZING TO MAKE SURE THAT REPRODUCTIVE HEALTH CARE IS RECOGNIZED AS A BASIC AND FUNDAMENTAL HEALTH-CARE SERVICE, TO IMPROVE ACCESS TO FAMILY PLANNING SERVICES, TO IMPROVE THE AVAILABILITY AND ACCURACY OF SEXUALITY EDUCATION IN PUBLIC SCHOOLS, TO KEEP ABORTION SAFE AND LEGAL, AND TO REDUCE TEEN PREGNANCY RATES IN OREGON AND SW WASHINGTON.

4d Other program services (Describe in Schedule O.)

4e Total program service expenses $ 17,292,830.
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Is the organization described in section 501(c)(3) or 4947(a)(1)?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>2 Is the organization required to complete Schedule B, Schedule of Contributors?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If &quot;Yes,&quot; complete Schedule C, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If &quot;Yes,&quot; complete Schedule C, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If &quot;Yes,&quot; complete Schedule C, Part III</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If &quot;Yes,&quot; complete Schedule D, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If &quot;Yes,&quot; complete Schedule D, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If &quot;Yes,&quot; complete Schedule D, Part III</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If &quot;Yes,&quot; complete Schedule D, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If &quot;Yes,&quot; complete Schedule D, Part V</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>11 If the organization's answer to any of the following questions is &quot;Yes,&quot; then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If &quot;Yes,&quot; complete Schedule D, Part VI</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If &quot;Yes,&quot; complete Schedule D, Part VII</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If &quot;Yes,&quot; complete Schedule D, Part VIII</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If &quot;Yes,&quot; complete Schedule D, Part IX</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>e Did the organization report an amount for other liabilities in Part X, line 25? If &quot;Yes,&quot; complete Schedule D, Part X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If &quot;Yes,&quot; complete Schedule D, Part X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>12a Did the organization obtain separate, independent audited financial statements for the tax year? If &quot;Yes,&quot; complete Schedule D, Parts XI and XII</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b Was the organization included in consolidated, independent audited financial statements for the tax year? If &quot;Yes,&quot; and if the organization answered &quot;No&quot; to line 12a, then completing Schedule D, Parts XI and XII is optional</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>13 Is the organization a school described in section 170(b)(1)(A)(ii)? If &quot;Yes,&quot; complete Schedule E</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>14a Did the organization maintain an office, employees, or agents outside of the United States?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? If &quot;Yes,&quot; complete Schedule F, Parts I and IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>15 Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? If &quot;Yes,&quot; complete Schedule F, Parts II and IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>16 Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? If &quot;Yes,&quot; complete Schedule F, Parts III and IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>17 Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If &quot;Yes,&quot; complete Schedule G, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>18 Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If &quot;Yes,&quot; complete Schedule G, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>19 Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? If &quot;Yes,&quot; complete Schedule G, Part III</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>20a Did the organization operate one or more hospital facilities? If &quot;Yes,&quot; complete Schedule H</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b If &quot;Yes&quot; to line 20a, did the organization attach a copy of its audited financial statements to this return?</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>
21 Did the organization report more than $5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II .............................................................. 21 X

22 Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III .............................................................. 22 X

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J .............................................................. 23 X

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 24a X

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d

25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization’s prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 25b X

26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 X

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applying filing thresholds, conditions, and exceptions):

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X

29 Did the organization receive more than $25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 X

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X

34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X

b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b X

36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X

37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 X

Note. All Form 990 filers are required to complete Schedule O.
### Part V Statements Regarding Other IRS Filings and Tax Compliance

**Check if Schedule O contains a response to any question in this Part V**

<table>
<thead>
<tr>
<th>Q.</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Enter the number reported in Box 3 of Form 1096. Enter 0 if not applicable</td>
<td>56</td>
<td></td>
</tr>
<tr>
<td>1b Enter the number of Forms W-2G included in line 1a. Enter 0 if not applicable</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return</td>
<td>278</td>
<td></td>
</tr>
<tr>
<td>2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td><strong>Note.</strong> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a Did the organization have unrelated business gross income of $1,000 or more during the year?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>3b If “Yes,” has it filed a Form 990-T for this year? If “No,” provide an explanation in Schedule O</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>4b If “Yes,” enter the name of the foreign country.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>5c If “Yes,” to line 5a or 5b, did the organization file Form 8886-T?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>6b If “Yes,” did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Organisations that may receive deductible contributions under section 170(c).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>7d If “Yes,” indicate the number of Forms 8282 filed during the year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Sponsoring organisations maintaining donor advised funds and section 509(a)(3) supporting organisations. Did the supporting organisation, or a donor advised fund maintained by a sponsoring organisation, have excess business holdings at any time during the year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Sponsoring organisations maintaining donor advised funds.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Did the organization make any taxable distributions under section 4966?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9b Did the organization make a distribution to a donor, donor advisor, or related person?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Section 501(c)(7) organisations. Enter:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Initiation fees and capital contributions included on Part VIII, line 12</td>
<td>10a</td>
<td></td>
</tr>
<tr>
<td>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</td>
<td>10b</td>
<td></td>
</tr>
<tr>
<td>11 Section 501(c)(12) organisations. Enter:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Gross income from members or shareholders</td>
<td>11a</td>
<td></td>
</tr>
<tr>
<td>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</td>
<td>11b</td>
<td></td>
</tr>
<tr>
<td>12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12b If “Yes,” enter the amount of tax-exempt interest received or accrued during the year</td>
<td>12b</td>
<td></td>
</tr>
<tr>
<td>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Is the organization licensed to issue qualified health plans in more than one state?</td>
<td>13a</td>
<td></td>
</tr>
<tr>
<td>Note. See the instructions for additional information the organization must report on Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans</td>
<td>13b</td>
<td></td>
</tr>
<tr>
<td>c Enter the amount of reserves on hand</td>
<td>13c</td>
<td></td>
</tr>
<tr>
<td>14a Did the organization receive any payments for indoor tanning services during the tax year?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>14b If “Yes,” has it filed a Form 720 to report these payments? If “No,” provide an explanation in Schedule O</td>
<td>14b</td>
<td></td>
</tr>
</tbody>
</table>
### Section A. Governing Body and Management

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Enter the number of voting members of the governing body at the end of the tax year</td>
<td>18</td>
<td></td>
</tr>
<tr>
<td>If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Enter the number of voting members included in line 1a, above, who are independent</td>
<td>18</td>
<td></td>
</tr>
<tr>
<td>2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>5 Did the organization become aware during the year of a significant diversion of the organization's assets?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>6 Did the organization have members or stockholders?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>a The governing body?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Each committee with authority to act on behalf of the governing body?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization’s mailing address?</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Policies

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a Did the organization have local chapters, branches, or affiliates?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>10b If &quot;Yes,&quot; did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b Describe in Schedule O the process, if any, used by the organization to review this Form 990.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12a Did the organization have a written conflict of interest policy? If &quot;No,&quot; go to line 13</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>c Did the organization regularly and consistently monitor and enforce compliance with the policy? If &quot;Yes,&quot; describe in Schedule O how this was done</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>13 Did the organization have a written whistleblower policy?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>14 Did the organization have a written document retention and destruction policy?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a The organization's CEO, Executive Director, or top management official</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b Other officers or key employees of the organization</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Disclosure

| Question                                                                 | | |
|--------------------------------------------------------------------------|| |
| 17 List the states with which a copy of this Form 990 is required to be filed | WA, OR |
| 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. | | |
| Own website | X Other's website | X Upon request | Other (explain in Schedule O) |
| 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. | | |
| 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: | TOM MOTSIFF - (503) 775-4931 | |
|   3727 NE ML KING JR. BLVD., PORTLAND, OR 97212-1112 | | |
### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. CARA JACOBSEN</td>
<td>2.70 X X 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. KATHERINE MCDOWELL</td>
<td>1.20 X 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. JULIA HARPER</td>
<td>1.80 X X 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. DAVID ANGELI</td>
<td>1.40 X 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. MAUREEN FALLT</td>
<td>1.50 X 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. BARBARA FISHER</td>
<td>2.30 X 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. WILLIAM HADEN</td>
<td>1.80 X X 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. PETER HRUSER</td>
<td>1.50 X 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. MARDICA HICKS</td>
<td>0.10 X 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. LESLIE HOWELL</td>
<td>1.80 X X 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. BEVERLY PEARMAN</td>
<td>1.50 X 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. LAUREN WALLACE</td>
<td>2.00 X 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. ANN WITSIL</td>
<td>1.80 X 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. BRIAN SHIPLEY</td>
<td>1.80 X 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. SITA SYMONETTE</td>
<td>1.80 X 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. STEFFENI MENDOZA GRAY</td>
<td>1.80 X 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. SALLY BROWN</td>
<td>1.80 X 0. 0. 0. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part VII
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(18) WILLIAM DRUMMOND</td>
<td>1.80</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>BOARD MEMBER</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(19) DAVID GREENBERG</td>
<td>37.50</td>
<td>X</td>
<td>201,052.</td>
<td>0.</td>
<td>5,575.</td>
</tr>
<tr>
<td>PRESIDENT &amp; CEO</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(20) KATHLEEN ALTMAN</td>
<td>37.50</td>
<td>X</td>
<td>104,249.</td>
<td>0.</td>
<td>5,226.</td>
</tr>
<tr>
<td>CHIEF OPERATING OFFICER</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(21) LENICE SHAW</td>
<td>37.50</td>
<td>X</td>
<td>105,974.</td>
<td>0.</td>
<td>806.</td>
</tr>
<tr>
<td>CHIEF FINANCIAL OFFICER</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Sub-total | 411,275. | 0. | 11,607. |
| Total from continuation sheets to Part VII, Section A | | 0. | 0. | 0. |
| Total (add lines 1b and 1c) | 411,275. | 0. | 11,607. |

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization |

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization’s tax year.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>OHSU, 3181 SW SAM JACKSON PARK ROAD, PORTLAND, OR 97239</td>
<td>MEDICAL SUPPORT SERVICES</td>
<td>156,142.</td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization | 1 |
### Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

#### Contributions, Gifts, Grants and Other Similar Amounts

<table>
<thead>
<tr>
<th>Contribution, Gifts, Grants and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td></td>
<td>285,242.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>2,096,097.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1g Noncash contributions included in lines 1a-1f: $</td>
<td>152,707.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1h Total. Add lines 1a-1f</td>
<td>2,381,339.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Program Service Revenue

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a PATIENT SERVICES</td>
<td>621300</td>
</tr>
<tr>
<td>2b EDUCATION AND TRAINING</td>
<td>900099</td>
</tr>
<tr>
<td>2c NURSING CARE</td>
<td></td>
</tr>
<tr>
<td>2d MEDICAL SERVICES</td>
<td></td>
</tr>
<tr>
<td>2e OTHER SERVICES</td>
<td></td>
</tr>
<tr>
<td>2f All other program service revenue</td>
<td></td>
</tr>
<tr>
<td>2g Total. Add lines 2a-2f</td>
<td>18,723,319.</td>
</tr>
</tbody>
</table>

#### Investment income (including dividends, interest, and other similar amounts)

<table>
<thead>
<tr>
<th>Investment income</th>
<th>(A) Total revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>3a PATIENT SERVICES</td>
<td>18,041,559.</td>
</tr>
<tr>
<td>3b EDUCATION AND TRAINING</td>
<td>681,760.</td>
</tr>
<tr>
<td>3c NURSING CARE</td>
<td>681,760.</td>
</tr>
<tr>
<td>3d MEDICAL SERVICES</td>
<td>681,760.</td>
</tr>
<tr>
<td>3e OTHER SERVICES</td>
<td>681,760.</td>
</tr>
<tr>
<td>3f All other investment income (including dividends, interest, and other similar amounts)</td>
<td>204,091.</td>
</tr>
</tbody>
</table>

#### Royalties

<table>
<thead>
<tr>
<th>Royalties</th>
<th>(A) Total revenue</th>
<th>(B) Royalties Real</th>
<th>(C) Royalties Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>4a PATIENT SERVICES</td>
<td>85,285.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4b EDUCATION AND TRAINING</td>
<td>85,285.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4c NURSING CARE</td>
<td>85,285.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4d MEDICAL SERVICES</td>
<td>85,285.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4e OTHER SERVICES</td>
<td>85,285.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4f All other royalties</td>
<td>85,285.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Gross amount from sales of assets other than inventory

<table>
<thead>
<tr>
<th>Gross amount from sales of assets other than inventory</th>
<th>(A) Total revenue</th>
<th>(B) Sales of Securities</th>
<th>(C) Sales of Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>5a PATIENT SERVICES</td>
<td>2,069,118.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5b EDUCATION AND TRAINING</td>
<td>1,754,328.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5c NURSING CARE</td>
<td>314,790.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5d MEDICAL SERVICES</td>
<td>314,790.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5e OTHER SERVICES</td>
<td>314,790.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5f All other gross amount from sales of assets other than inventory</td>
<td>314,790.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Gross income from fundraising events (not including $285,242 of contributions reported on line 1c). See Part IV, line 18

<table>
<thead>
<tr>
<th>Gross income from fundraising events (not including $285,242 of contributions reported on line 1c). See Part IV, line 18</th>
<th>(A) Total revenue</th>
<th>(B) Less: direct expenses</th>
<th>(C) Net income or (loss) from fundraising events</th>
</tr>
</thead>
<tbody>
<tr>
<td>6a PATIENT SERVICES</td>
<td>10,790.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6b EDUCATION AND TRAINING</td>
<td>132,827.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6c NURSING CARE</td>
<td>-122,037.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6d MEDICAL SERVICES</td>
<td>-122,037.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6e OTHER SERVICES</td>
<td>-122,037.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6f All other gross income from fundraising events</td>
<td>-122,037.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Gross income from gaming activities. See Part IV, line 19

<table>
<thead>
<tr>
<th>Gross income from gaming activities. See Part IV, line 19</th>
<th>(A) Total revenue</th>
<th>(B) Less: direct expenses</th>
<th>(C) Net income or (loss) from gaming activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>7a PATIENT SERVICES</td>
<td>10,790.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b EDUCATION AND TRAINING</td>
<td>132,827.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c NURSING CARE</td>
<td>-122,037.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7d MEDICAL SERVICES</td>
<td>-122,037.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7e OTHER SERVICES</td>
<td>-122,037.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7f All other gross income from gaming activities</td>
<td>-122,037.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Gross sales of inventory, less returns and allowances

<table>
<thead>
<tr>
<th>Gross sales of inventory, less returns and allowances</th>
<th>(A) Total revenue</th>
<th>(B) Less: cost of goods sold</th>
<th>(C) Net income or (loss) from sales of inventory</th>
</tr>
</thead>
<tbody>
<tr>
<td>8a PATIENT SERVICES</td>
<td>285,242.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8b EDUCATION AND TRAINING</td>
<td>152,707.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8c NURSING CARE</td>
<td>132,827.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8d MEDICAL SERVICES</td>
<td>10,790.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8e OTHER SERVICES</td>
<td>-122,037.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8f All other gross sales of inventory, less returns and allowances</td>
<td>-122,037.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Miscellaneous Revenue

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>9a PATIENT SERVICES</td>
<td>900099</td>
</tr>
<tr>
<td>9b EDUCATION AND TRAINING</td>
<td>900099</td>
</tr>
<tr>
<td>9c NURSING CARE</td>
<td>900099</td>
</tr>
<tr>
<td>9d MEDICAL SERVICES</td>
<td>900099</td>
</tr>
<tr>
<td>9e OTHER SERVICES</td>
<td>900099</td>
</tr>
<tr>
<td>9f All other miscellaneous revenue</td>
<td>900099</td>
</tr>
</tbody>
</table>

#### Total revenue. See instructions.

<table>
<thead>
<tr>
<th>Total revenue. See instructions.</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a PATIENT SERVICES</td>
<td>21,709,602.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b EDUCATION AND TRAINING</td>
<td>18,846,134.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c NURSING CARE</td>
<td>0.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10d MEDICAL SERVICES</td>
<td>482,129.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10e OTHER SERVICES</td>
<td>482,129.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10f All other miscellaneous revenue</td>
<td>482,129.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

PLANNED PARENTHOOD OF THE COLUMBIA/WILLAMETTE

93-6031270

Page 9

Form 990 (2012)
### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response to any question in this Part IX  

<table>
<thead>
<tr>
<th></th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to governments and organizations in the United States. See Part IV, line 21</td>
<td>446,839.</td>
<td>143,425.</td>
<td>227,646.</td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to individuals in the United States. See Part IV, line 22</td>
<td>8,007,859.</td>
<td>6,797,124.</td>
<td>996,791.</td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16</td>
<td>968,319.</td>
<td>798,304.</td>
<td>137,802.</td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td>754,406.</td>
<td>619,572.</td>
<td>109,061.</td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>666,647.</td>
<td>260,908.</td>
<td>258,993.</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td>19,106.</td>
<td>18,456.</td>
<td>650.</td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>111,166.</td>
<td>490,793.</td>
<td>43,232.</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>589,706.</td>
<td>556,101.</td>
<td>27,220.</td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>175,365.</td>
<td>116,998.</td>
<td>40,563.</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>379,384.</td>
<td>379,384.</td>
<td>198,744.</td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (non-employees):</td>
<td>940,438.</td>
<td>739,345.</td>
<td>167,744.</td>
</tr>
<tr>
<td></td>
<td>a Management</td>
<td>231,484.</td>
<td>215,731.</td>
<td>12,985.</td>
</tr>
<tr>
<td></td>
<td>b Legal</td>
<td>5,124,524.</td>
<td>5,123,638.</td>
<td>886.</td>
</tr>
<tr>
<td></td>
<td>c Accounting</td>
<td>855,967.</td>
<td>855,967.</td>
<td>62,817.</td>
</tr>
<tr>
<td></td>
<td>d Lobbying</td>
<td>340,675.</td>
<td>258,071.</td>
<td>198,744.</td>
</tr>
<tr>
<td></td>
<td>e Professional fundraising services. See Part IV, line 17</td>
<td>89,653.</td>
<td>35,563.</td>
<td>4,253.</td>
</tr>
<tr>
<td></td>
<td>f Investment management fees</td>
<td>98,700.</td>
<td>74,794.</td>
<td>5,562.</td>
</tr>
<tr>
<td></td>
<td>g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)</td>
<td>20,796,445.</td>
<td>17,292,830.</td>
<td>2,781,696.</td>
</tr>
</tbody>
</table>

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.
### Assets

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td><strong>Cash</strong> - non-interest-bearing</td>
<td>2,218,694</td>
<td>3,799,509</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>1,526,660</td>
<td>921,453</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>1,849,230</td>
<td>1,801,621</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from current and former officers, directors,</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>trustees, key employees, and highest compensated employees. Complete</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Loans and other receivables from other disqualified persons (as defined</td>
<td>100,000</td>
<td>100,000</td>
</tr>
<tr>
<td></td>
<td>under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>contributing employers and sponsoring organizations of section 501(c)(9)</td>
<td>267,933</td>
<td>313,903</td>
</tr>
<tr>
<td></td>
<td>voluntary employees’ beneficiary organizations (see instr). Complete Part</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>II of Sch L</td>
<td>657,740</td>
<td>501,709</td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td>16,349,207</td>
<td>16,008,965</td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td>4,434,420</td>
<td>4,507,208</td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>8,971,092</td>
<td>8,836,793</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of</td>
<td>4,100,000</td>
<td>4,100,000</td>
</tr>
<tr>
<td></td>
<td>Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>Less: accumulated depreciation</td>
<td>22,567,566</td>
<td>16,558,601</td>
</tr>
<tr>
<td>11</td>
<td>Investments - publicly traded securities</td>
<td>657,740</td>
<td>501,709</td>
</tr>
<tr>
<td>12</td>
<td>Investments - other securities. See Part IV, line 11</td>
<td>657,740</td>
<td>501,709</td>
</tr>
<tr>
<td>13</td>
<td>Investments - program-related. See Part IV, line 11</td>
<td>657,740</td>
<td>501,709</td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td>657,740</td>
<td>501,709</td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td>657,740</td>
<td>501,709</td>
</tr>
<tr>
<td>16</td>
<td><strong>Total assets.</strong> Add lines 1 through 15 (must equal line 34)</td>
<td>37,160,659</td>
<td>37,499,094</td>
</tr>
</tbody>
</table>

### Liabilities

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>2,048,569</td>
<td>1,939,532</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td>22,567,566</td>
<td>16,349,207</td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td>120,000</td>
<td>90,000</td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td>657,740</td>
<td>501,709</td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to current and former officers, directors,</td>
<td>7,275,000</td>
<td>7,275,000</td>
</tr>
<tr>
<td></td>
<td>trustees, key employees, highest compensated employees, and disqualified</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>persons. Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td>7,799,807</td>
<td>7,479,130</td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax, payables to related third</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>parties, and other liabilities not included on lines 17-24). Complete Part</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>X of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td><strong>Total liabilities.</strong> Add lines 17 through 26</td>
<td>17,123,376</td>
<td>16,693,662</td>
</tr>
</tbody>
</table>

Organizations that follow SFAS 117 (ASC 958), check here [ ] and complete lines 27 through 29, and lines 33 and 34.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Unrestricted net assets</td>
<td>17,944,310</td>
<td>18,725,679</td>
</tr>
<tr>
<td>28</td>
<td>Temporarily restricted net assets</td>
<td>1,737,579</td>
<td>1,722,609</td>
</tr>
<tr>
<td>29</td>
<td>Permanently restricted net assets</td>
<td>355,394</td>
<td>357,144</td>
</tr>
</tbody>
</table>

Organizations that do not follow SFAS 117 (ASC 958), check here [ ] and complete lines 30 through 34.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>Capital stock or trust principal, or current funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>Total net assets or fund balances</td>
<td>37,160,659</td>
<td>37,499,094</td>
</tr>
<tr>
<td>34</td>
<td>Total liabilities and net assets/fund balances</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>21,709,602</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>20,796,445</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>913,157</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
<td>20,037,283</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>-30,017</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
<td>-114,991</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))</td>
<td>20,805,432</td>
</tr>
</tbody>
</table>

### Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990: Cash ☐ Accrual ☒ Other ☐</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed its method of accounting from a prior year or checked “Other,” explain in Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization’s financial statements compiled or reviewed by an independent accountant?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If “Yes,” check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization’s financial statements audited by an independent accountant?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If “Yes,” check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>If “Yes” to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If “Yes,” did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ. See separate instructions.

### Part I  Reason for Public Charity Status

(All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1. [ ] A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2. [ ] A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
3. [ ] A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4. [ ] A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital’s name, city, and state:

5. [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
6. [ ] A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7. [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v).

8. [ ] A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9. [ ] 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 exempt 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). (Complete Part III.)

10. [ ] An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

11. [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.

   - [a] Type I
   - [b] Type II
   - [c] Type III - Functionally integrated
   - [d] Type III - Non-functionally integrated

   e. [ ] By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(2). (Complete Part III.)

f. [ ] If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box.

### g. Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

   - [i] A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii), the governing body of the supported organization.
   - [ii] A family member of a person described in (i) above?
   - [iii] A 35% controlled entity of a person described in (i) or (ii) above?

h. Provide the following information about the supported organization(s).

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))</th>
<th>(iv) Is the organization in col. (i) listed in your governing document?</th>
<th>(v) Did you notify the organization in col. (i) of your support?</th>
<th>(vi) Is the organization in col. (i) organized in the U.S.?</th>
<th>(vii) Amount of monetary support</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
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</tr>
</tbody>
</table>

Total

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**Form 990 or 990-EZ**
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2008</th>
<th>(b) 2009</th>
<th>(c) 2010</th>
<th>(d) 2011</th>
<th>(e) 2012</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>2798487</td>
<td>2449971</td>
<td>3359485</td>
<td>2629090</td>
<td>2381339</td>
<td>13618372</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td>2798487</td>
<td>2449971</td>
<td>3359485</td>
<td>2629090</td>
<td>2381339</td>
<td>13618372</td>
</tr>
<tr>
<td>5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1056392</td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12561980</td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2008</th>
<th>(b) 2009</th>
<th>(c) 2010</th>
<th>(d) 2011</th>
<th>(e) 2012</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>2798487</td>
<td>2449971</td>
<td>3359485</td>
<td>2629090</td>
<td>2381339</td>
<td>13618372</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td>209,665</td>
<td>117,549</td>
<td>154,404</td>
<td>208,776</td>
<td>289,376</td>
<td>979,770</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)</td>
<td>39,769</td>
<td>83,161</td>
<td>117,046</td>
<td>147,156</td>
<td>122,815</td>
<td>509,947</td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td>325,460</td>
<td>340,710</td>
<td>471,490</td>
<td>555,932</td>
<td>452,191</td>
<td>1,785,821</td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>84,869,707</td>
</tr>
<tr>
<td>13 First five years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

| Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f) | 14 | 83.15 % |
| 15 Public support percentage from 2011 Schedule A, Part II, line 14 | 15 | 84.22 % |

16a **33 1/3% support test - 2012.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization **X**

16b **33 1/3% support test - 2011.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization **X**

17a **10% -facts-and-circumstances test - 2012.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization **X**

17b **10% -facts-and-circumstances test - 2011.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization **X**

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions **X**
### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2008</th>
<th>(b) 2009</th>
<th>(c) 2010</th>
<th>(d) 2011</th>
<th>(e) 2012</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Gifts, grants, contributions, and membership fees received. (Do not include any “unusual grants.”)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose</td>
<td></td>
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</tr>
<tr>
<td>3. Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>4. Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
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</tr>
<tr>
<td>6. Total. Add lines 1 through 5</td>
<td></td>
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</tr>
<tr>
<td>7a. Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>7b. Amounts included on lines 1, 2, and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year</td>
<td></td>
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</tr>
<tr>
<td>8. Public support</td>
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<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2008</th>
<th>(b) 2009</th>
<th>(c) 2010</th>
<th>(d) 2011</th>
<th>(e) 2012</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9. Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>10b. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>11. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>12. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>13. Total support. (Add lines 9, 10a, 11, and 12.)</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>14. First five years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
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</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2008</th>
<th>(b) 2009</th>
<th>(c) 2010</th>
<th>(d) 2011</th>
<th>(e) 2012</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15. Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Public support percentage from 2011 Schedule A, Part III, line 15</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

#### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2008</th>
<th>(b) 2009</th>
<th>(c) 2010</th>
<th>(d) 2011</th>
<th>(e) 2012</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>17. Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>18. Investment income percentage from 2011 Schedule A, Part III, line 17</td>
<td></td>
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</tr>
<tr>
<td>19a. 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
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</tr>
<tr>
<td>19b. 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
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</tr>
<tr>
<td>20. Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions</td>
<td></td>
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</tbody>
</table>
Schedule B
(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

2012

OMB No. 1545-0047

Name of the organization
PLANNED PARENTHOOD
OF THE COLUMBIA/WILLAMETTE

Employer identification number
93-6031270

Organization type (check one):
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 boxes for both the General Rule and a Special Rule. See instructions.

General Rule
☐ For an organization 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 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) $5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions 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 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total 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. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer “No” on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)
**Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.  Attach to Form 990 or Form 990-EZ.

See separate instructions.

If the organization answered “Yes,” to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered “Yes,” to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered “Yes,” to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

### Name of organization

**PLANNED PARENTHOOD OF THE COLUMBIA/WILLAMETTE**

**Employer identification number**

93-6031270

#### Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1. Provide a description of the organization’s direct and indirect political campaign activities in Part IV.
2. Political expenditures
3. Volunteer hours

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

1. Enter the amount of any excise tax incurred by the organization under section 4955
2. Enter the amount of any excise tax incurred by organization managers under section 4955
3. If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
   - [ ] Yes
   - [ ] No
   - [ ] If “Yes,” describe in Part IV.

#### Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1. Enter the amount directly expended by the filing organization for section 527 exempt function activities
2. Enter the amount of the filing organization’s funds contributed to other organizations for section 527 exempt function activities
3. Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b
4. Did the filing organization file Form 1120-POL for this year?
   - [ ] Yes
   - [ ] No
5. Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization’s funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

<table>
<thead>
<tr>
<th>(a) Name</th>
<th>(b) Address</th>
<th>(c) EIN</th>
<th>(d) Amount paid from filing organization’s funds. If none, enter 0-</th>
<th>(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter 0-</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

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

Schedule C (Form 990 or 990-EZ) 2012

LHA

232041
01-07-13
PLANNED PARENTHOOD
OF THE COLUMBIA/WILLAMETTE 93-6031270

Schedule C (Form 990 or 990-EZ) 2012
Page 2

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A  Check □ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B  Check □ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

<table>
<thead>
<tr>
<th>(a) Filing organization's totals</th>
<th>(b) Affiliated group totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Total lobbying expenditures to influence public opinion (grass roots lobbying)</td>
<td>10,094.</td>
</tr>
<tr>
<td>1b Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
<td>26,424.</td>
</tr>
<tr>
<td>1c Total lobbying expenditures (add lines 1a and 1b)</td>
<td>36,518.</td>
</tr>
<tr>
<td>1d Other exempt purpose expenditures</td>
<td>20,759,927.</td>
</tr>
<tr>
<td>1e Total exempt purpose expenditures (add lines 1c and 1d)</td>
<td>20,796,445.</td>
</tr>
<tr>
<td>1f Lobbying nontaxable amount. Enter the amount from the following table in both columns.</td>
<td>1,000,000.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If the amount on line 1e, column (a) or (b) is:</th>
<th>The lobbying nontaxable amount is:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not over $500,000</td>
<td>20% of the amount on line 1e.</td>
</tr>
<tr>
<td>Over $500,000 but not over $1,000,000</td>
<td>$100,000 plus 15% of the excess over $500,000.</td>
</tr>
<tr>
<td>Over $1,000,000 but not over $1,500,000</td>
<td>$175,000 plus 10% of the excess over $1,000,000.</td>
</tr>
<tr>
<td>Over $1,500,000 but not over $17,000,000</td>
<td>$225,000 plus 5% of the excess over $1,500,000.</td>
</tr>
<tr>
<td>Over $17,000,000</td>
<td>$1,000,000.</td>
</tr>
</tbody>
</table>

| g Grassroots nontaxable amount (enter 25% of line 1f) | 250,000. |
| h Subtract line 1g from line 1a. If zero or less, enter -0-. | 0. |
| i Subtract line 1f from line 1c. If zero or less, enter -0-. | 0. |

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? □ Yes □ No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

| Lobbying Expenditures During 4-Year Averaging Period |
|---------------------------------|-----------------------------|
| Calendar year (or fiscal year beginning in) | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) Total |
| 2a Lobbying nontaxable amount | 1,000,000. | 1,000,000. | 1,000,000. | 1,000,000. | 4,000,000. |
| 2b Lobbying ceiling amount (150% of line 2a, column (e)) | | | | | 6,000,000. |
| 2c Total lobbying expenditures | 59,735. | 143,974. | 36,518. | 240,227. |
| 2d Grassroots nontaxable amount | 250,000. | 250,000. | 250,000. | 250,000. | 1,000,000. |
| 2e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 1,500,000. |
| 2f Grassroots lobbying expenditures | 34,686. | 28,874. | 10,094. | 73,654. |
For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a Volunteers?
- b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?
- c Media advertisements?
- d Mailings to members, legislators, or the public?
- e Publications, or published or broadcast statements?
- f Grants to other organizations for lobbying purposes?
- g Direct contact with legislators, their staffs, government officials, or a legislative body?
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?
- i Other activities?
- j Total. Add lines 1c through 1i

Did the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Were substantially all (90% or more) dues received nondeductible by members?

Did the organization make only in-house lobbying expenditures of $2,000 or less?

Did the organization agree to carry over lobbying and political expenditures from the prior year?

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?
### Part I: Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate contributions to (during year)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate grants from (during year)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization’s property, subject to the organization’s exclusive legal control?</td>
<td>☐ Yes ☐ No</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?</td>
<td>☐ Yes ☐ No</td>
<td></td>
</tr>
</tbody>
</table>

### Part II: Conservation Easements.

Complete if the organization answered “Yes” to Form 990, Part IV, line 7.

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Held at the End of the Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Purpose(s) of conservation easements held by the organization (check all that apply).</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Preservation of land for public use (e.g., recreation or education)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Protection of natural habitat</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Preservation of open space</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Total number of conservation easements</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Total acreage restricted by conservation easements</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Number of conservation easements on a certified historic structure included in (a)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Number of states where property subject to conservation easement is located</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>6</td>
<td>Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year</td>
<td>$</td>
</tr>
<tr>
<td>8</td>
<td>Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>9</td>
<td>In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization’s financial statements that describes the organization’s accounting for conservation easements.</td>
<td></td>
</tr>
</tbody>
</table>

### Part III: Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered “Yes” to Form 990, Part IV, line 8.

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.</td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, the following amounts relating to these items:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(i) Revenues included in Form 990, Part VIII, line 1</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>(ii) Assets included in Form 990, Part X</td>
<td>$</td>
</tr>
<tr>
<td>2</td>
<td>If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Revenues included in Form 990, Part VIII, line 1</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>b Assets included in Form 990, Part X</td>
<td>$</td>
</tr>
</tbody>
</table>
3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
   a Public exhibition
   b Scholarly research
   c Preservation for future generations
   d Loan or exchange programs
   e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? 
   Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered “Yes” to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 
   Yes No

c Beginning balance ...........................................

d Additions during the year ....................................

e Distributions during the year ................................

2a Did the organization include an amount on Form 990, Part X, line 21? 
   Yes No

Part V Endowment Funds. Complete if the organization answered “Yes” to Form 990, Part IV, line 10.

1a Beginning of year balance ..................................

1b Contributions ..............................................

1c Net investment earnings, gains, and losses ..............

1d Grants or scholarships ....................................

1e Other expenditures for facilities and programs ........

1f Administrative expenses ...................................

1g End of year balance ......................................

 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment 91.70 %

b Permanent endowment 6.80 %

c Temporarily restricted endowment 1.50 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

   (i) unrelated organizations

   (ii) related organizations

   Yes No

3a(i) X

3a(ii) X

b If “Yes” to 3a(ii), are the related organizations listed as required on Schedule R? 

3b

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td>2,427,889</td>
<td></td>
<td>2,427,889</td>
<td></td>
</tr>
<tr>
<td>1b Buildings</td>
<td>14,844,227</td>
<td>2,567,571</td>
<td>12,276,656</td>
<td></td>
</tr>
<tr>
<td>1c Leasehold improvements</td>
<td>926,698</td>
<td>549,770</td>
<td>376,928</td>
<td></td>
</tr>
<tr>
<td>1d Equipment</td>
<td>4,190,576</td>
<td>3,441,260</td>
<td>749,316</td>
<td></td>
</tr>
<tr>
<td>1e Other</td>
<td>178,176</td>
<td></td>
<td>178,176</td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 16,008,965.
**Part VII** Investments - Other Securities. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(F)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(I)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)

**Part VIII** Investments - Program Related. See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>Description of investment type</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) INVESTMENT IN BEECH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) STREET PARTNERS, LLC</td>
<td>3,529,013.</td>
<td>COST</td>
</tr>
<tr>
<td>(3) INVESTMENT IN RSC LENDER</td>
<td>5,307,780.</td>
<td>COST</td>
</tr>
<tr>
<td>(4) LLC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

**Part IX** Other Assets. See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)

**Part X** Other Liabilities. See Form 990, Part X, line 25.

1. | (a) Description | (b) Book value |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2) CAPITAL LEASE OBLIGATION</td>
<td>7,479,130.</td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. [X]
### Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Net unrealized gains on investments</td>
<td>2a</td>
</tr>
<tr>
<td>b</td>
<td>Donated services and use of facilities</td>
<td>2b</td>
</tr>
<tr>
<td>c</td>
<td>Recoveries of prior year grants</td>
<td>2c</td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIII.)</td>
<td>2d</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
<td>2e</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td>b</td>
<td>Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td>c</td>
<td>Add lines 4a and 4b</td>
<td>4c</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)</td>
<td>5</td>
</tr>
</tbody>
</table>

### Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Donated services and use of facilities</td>
<td>2a</td>
</tr>
<tr>
<td>b</td>
<td>Prior year adjustments</td>
<td>2b</td>
</tr>
<tr>
<td>c</td>
<td>Other losses</td>
<td>2c</td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIII.)</td>
<td>2d</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
<td>2e</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td>b</td>
<td>Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td>c</td>
<td>Add lines 4a and 4b</td>
<td>4c</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)</td>
<td>5</td>
</tr>
</tbody>
</table>

### Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART V, LINE 4: THE PURPOSE OF THE BOARD DESIGNATED ENDOWMENT (THE "ENDOWMENT") IS TO ADVANCE THE MISSION OF PPCW AND TO PROTECT THE LONG-TERM VIABILITY OF THE ORGANIZATION. EARNINGS ON THE ENDOWMENT MAY BE USED TO FUND OPERATIONS. FROM TIME TO TIME, AND WITH CAREFUL CONSIDERATION, THE BOARD MAY USE THE CORPUS OF THE ENDOWMENT FOR MISSION-RELATED INVESTMENTS. OTHER ENDOWMENT FUNDS GENERATE EARNINGS TO SUPPORT EDUCATION PROGRAMS.**
PART X, LINE 2: PLANNED PARENTHOOD OF THE COLUMBIA/WILLAMETTE HAS NO UNCERTAIN TAX POSITIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

- CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS: 68,180.
- LOSS FROM SUBSIDIARIES: -113,182.

TOTAL TO SCHEDULE D, PART XI, LINE 2D: -45,002.
## Fundraising Activities

Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

<table>
<thead>
<tr>
<th>(i) Name and address of individual or entity (fundraiser)</th>
<th>(ii) Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col. (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
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</tbody>
</table>

**Total**

List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

---

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

Schedule G (Form 990 or 990-EZ) 2012
### Part II Fundraising Events

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Event #1</th>
<th>(b) Event #2</th>
<th>(c) Other events</th>
<th>(d) Total events</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross receipts</td>
<td>177,583</td>
<td>83,893</td>
<td>34,556</td>
<td>296,032</td>
</tr>
<tr>
<td>2 Less: Contributions</td>
<td>177,583</td>
<td>83,893</td>
<td>23,766</td>
<td>285,242</td>
</tr>
<tr>
<td>3 Gross income (line 1 minus line 2)</td>
<td>10,790</td>
<td>10,790</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Direct Expenses

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/instant bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Volunteer labor</td>
<td>Yes</td>
<td>%</td>
<td>Yes</td>
<td>%</td>
</tr>
<tr>
<td>7 Direct expense summary. Add lines 2 through 5 in column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Net gaming income summary. Combine line 1, column (d), and line 7</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part III Gaming

Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/instant bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Volunteer labor</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>7 Direct expense summary. Add lines 2 through 5 in column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Net gaming income summary. Combine line 1, column (d), and line 7</td>
<td></td>
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</tr>
</tbody>
</table>

9 Enter the state(s) in which the organization operates gaming activities:
   a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No
   b If "No," explain: ________________________

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No
   b If "Yes," explain: ________________________
Does the organization operate gaming activities with nonmembers? 

Yes  ☐  No ☐

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

Yes  ☐  No ☐

Indicate the percentage of gaming activity operated in:

<table>
<thead>
<tr>
<th>The organization’s facility</th>
<th>% 13a</th>
<th>An outside facility</th>
<th>% 13b</th>
</tr>
</thead>
</table>

Enter the name and address of the person who prepares the organization’s gaming/special events books and records:

Name ▶

Address ▶

Does the organization have a contract with a third party from whom the organization receives gaming revenue?  ☐ Yes  ☐ No

a If “Yes,” enter the amount of gaming revenue received by the organization ▶ $ __________ and the amount of gaming revenue retained by the third party ▶ $ __________.

b If “Yes,” enter name and address of the third party:

Name ▶

Address ▶

Gaming manager information:

Name ▶

Gaming manager compensation ▶ $ __________

Description of services provided ▶

☐ Director/officer  ☐ Employee  ☐ Independent contractor

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  ☐ Yes  ☐ No

Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization’s own exempt activities during the tax year ▶ $.

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

1a. Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- [ ] First-class or charter travel
- [ ] Travel for companions
- [ ] Tax indemnification and gross-up payments
- [ ] Discretionary spending account

If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

**1b**

2. Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**2**

3. Indicate which, if any, of the following the filing organization used to establish the compensation of the organization’s CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- [X] Compensation committee
- [X] Form 990 of other organizations
- [X] Written employment contract
- [X] Compensation survey or study
- [X] Approval by the board or compensation committee

4. During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:
   - [ ] Receive a severance payment or change-of-control payment?
   - [X] Participate in, or receive payment from, a supplemental nonqualified retirement plan?
   - [X] Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**4a**

**4b**

**4c**

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
   - [X] The organization?
   - [X] Any related organization?

If "Yes" to line 5a or 5b, describe in Part III.

**5a**

**5b**

6. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
   - [X] The organization?
   - [X] Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

**6a**

**6b**

7. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**7**

8. Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4956-4(a)(3)? If "Yes," describe in Part III

**8**

9. If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4956-6(c)?

**9**

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 2012
Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation reported as deferred in prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) DAVID GREENBERG</td>
<td>(i) 201,052.</td>
<td>0.</td>
<td>0.</td>
<td>5,575.</td>
<td>206,627.</td>
</tr>
<tr>
<td>PRESIDENT &amp; CEO</td>
<td>(ii) 0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>

Schedule J (Form 990) 2012
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

<table>
<thead>
<tr>
<th>Line 1a</th>
<th>Line 1b</th>
<th>Line 3</th>
<th>Line 4a</th>
<th>Line 4b</th>
<th>Line 4c</th>
<th>Line 5a</th>
<th>Line 5b</th>
<th>Line 6a</th>
<th>Line 6b</th>
<th>Line 7</th>
<th>Line 8</th>
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</tbody>
</table>
## Noncash Contributions

**Part I - Types of Property**

<table>
<thead>
<tr>
<th>(a) Check if applicable</th>
<th>(b) Number of contributions or items contributed</th>
<th>(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g</th>
<th>(d) Method of determining noncash contribution amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Art - Works of art</td>
<td>X</td>
<td>1</td>
<td>7,000. FAIR MARKET VALUE</td>
</tr>
<tr>
<td>Art - Historical treasures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Art - Fractional interests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Books and publications</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clothing and household goods</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cars and other vehicles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boats and planes</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Intellectual property</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Securities - Publicly traded</td>
<td>X</td>
<td>23</td>
<td>130,661. AVERAGE DAILY FMV</td>
</tr>
<tr>
<td>Securities - Closely held stock</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Securities - Partnership, LLC, or trust interests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Securities - Miscellaneous</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Qualified conservation contribution - Historic structures</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Qualified conservation contribution - Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Real estate - Residential</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Real estate - Commercial</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Real estate - Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Collectibles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drugs and medical supplies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Taxidermy</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Historical artifacts</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Scientific specimens</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Archeological artifacts</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Other ( )</td>
<td>( OTHER MISCELL )</td>
<td>X</td>
<td>104</td>
</tr>
<tr>
<td>Other ( )</td>
<td>( )</td>
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<td>Other ( )</td>
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<tr>
<td>Other ( )</td>
<td>( )</td>
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</tr>
</tbody>
</table>

**29** Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 823, Part IV, Donee Acknowledgement .......... 29

**30a** During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? ... [ ] Yes [ ] No 30a X

**b** If "Yes," describe the arrangement in Part II.

**31** Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? .......... [ ] Yes [ ] No 31 X

**32a** Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .......... [ ] Yes [ ] No 32a X

**b** If "Yes," describe in Part II.

**33** If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

---

**Employer identification number**: 93-6031270

**Name of the organization**: PLANNED PARENTHOOD OF THE COLUMBIA/WILLAMETTE

---

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

**Schedule M (Form 990) (2012)"**
Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
FORM 990, PART I, DOING BUSINESS AS:

PLANNED PARENTHOOD COLUMBIA WILLAMETTE

FORM 990, PART VI, SECTION B, LINE 11: EACH YEAR, PRIOR TO FILING THE FORM 990 WITH THE INTERNAL REVENUE SERVICE, MANAGEMENT PROVIDES A COPY OF THE 990 TO ALL BOARD MEMBERS, REVIEWS THE DOCUMENT WITH THE BOARD AT A FULL MEETING OF THE BOARD, AND PROVIDES THE BOARD AN OPPORTUNITY TO ASK QUESTIONS OF MANAGEMENT.

FORM 990, PART VI, SECTION B, LINE 12C: EACH BOARD MEMBER ANNUALLY REVIEWS AND CONFIRMS THEIR UNDERSTANDING OF THE PPCW CONFLICT OF INTEREST POLICY. IN ADDITION, AT LEAST ONCE EACH YEAR, BOARD MEMBERS AND EMPLOYEE-OFFICERS OF THE ORGANIZATION COMPLETE A QUESTIONNAIRE, INTENDED TO IDENTIFY POTENTIAL CONFLICTS OF INTERESTS, SO THAT THE ORGANIZATION CAN EFFECTIVELY MONITOR COMPLIANCE WITH THE POLICY. ALL STAFF MEMBERS ARE INFORMED OF PPCW'S CONFLICT OF INTEREST POLICY WHEN THEY ARE HIRED AND ARE EXPECTED TO ADHERE TO THAT POLICY.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS REVIEWS TOTAL COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER IN COMPARISON TO CEOS OF OTHER COMPARABLE PORTLAND, OREGON-BASED NOT-FOR-PROFIT ORGANIZATIONS AND TO OTHER PLANNED PARENTHOOD AFFILIATES NATION-WIDE. MINUTES OF THE BOARDS DELIBERATIONS ARE TAKEN AND SUPPORTING DOCUMENTATION USED IN THE BOARDS ANALYSIS AND REVIEW IS RETAINED BY THE BOARD SECRETARY. COMPENSATION FOR OTHER OFFICERS AND KEY EMPLOYEES IS DETERMINED BY THE CEO THROUGH CONSULTATION WITH THE VICE PRESIDENT OF HUMAN RESOURCES AND REVIEW OF
COMPARABLE DATA.

FORM 990, PART VI, SECTION C, LINE 19: A COMPLETE COPY OF THE ORGANIZATION'S FORM 990 AND OTHER GOVERNING DOCUMENTS CAN BE OBTAINED FROM THE ORGANIZATION UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 68,180.

EQUITY IN INCOME OF RSC LENDER LLC 50,877.

EQUITY IN LOSS OF BEECH STREET PARTNERS, LLC -234,048.

TOTAL TO FORM 990, PART XI, LINE 9 -114,991.

FORM 990, PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.
### Part I  Identification of Disregarded Entities
(Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN (if applicable) of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>RSC HOLDING LLC - 26-4828894</td>
<td>TO DEVELOP AND OPERATE</td>
<td></td>
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<tr>
<td>3727 NE MARTIN LUTHER KING BLVD.</td>
<td>OFFICE BUILDING AND MEDICAL</td>
<td></td>
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</tr>
<tr>
<td>PORTLAND, OR 97212</td>
<td>FACILITY AT 3727 NE MLK. OREGON</td>
<td></td>
<td>135,</td>
<td>14,889,457</td>
<td>PLANNED PARENTHOOD OF THE COLUMBIA/WILLAMETTE</td>
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</table>

### Part II  Identification of Related Tax-Exempt Organizations
(Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
</tr>
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</table>
### Part III  
**Identification of Related Organizations Taxable as a Partnership**

(Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>RSC LENDER LLC - 26-4828939</td>
<td>ACT AS A</td>
<td>PLANNED</td>
<td></td>
<td>(c)</td>
<td></td>
<td></td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>99.99%</td>
</tr>
<tr>
<td>3727 NE MARTIN LUTHER KING JR. BLVD., PORTLAND, OR</td>
<td>LEVERAGE LENDER</td>
<td>PLANNED</td>
<td></td>
<td>(c)</td>
<td></td>
<td></td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>100%</td>
</tr>
<tr>
<td>97212</td>
<td>NEW MARKETS TAX</td>
<td>RSC LENDER LLC - 26-4828939</td>
<td></td>
<td>(c)</td>
<td></td>
<td></td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>100%</td>
</tr>
<tr>
<td>BEECH STREET PARTNERS LLC - 20-3837663, PO BOX 820135, PORTLAND, OR</td>
<td>PROPERTY THAT OWNS THE</td>
<td></td>
<td></td>
<td>(c)</td>
<td></td>
<td></td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>100%</td>
</tr>
</tbody>
</table>

### Part IV  
**Identification of Related Organizations Taxable as a Corporation or Trust**

(Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
<th>(i) Section 512(b)(13) controlled entity?</th>
</tr>
</thead>
</table>

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**SEE PART VII FOR CONTINUATIONS**
Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

| (a) Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity | Yes | No |
| (b) Gift, grant, or capital contribution to related organization(s) | Yes |
| (c) Gift, grant, or capital contribution from related organization(s) | X |
| (d) Loans or loan guarantees to or for related organization(s) | Yes |
| (e) Loans or loan guarantees by related organization(s) | X |
| (f) Dividends from related organization(s) | X |
| (g) Sale of assets to related organization(s) | X |
| (h) Purchase of assets from related organization(s) | X |
| (i) Exchange of assets with related organization(s) | X |
| (j) Lease of facilities, equipment, or other assets to related organization(s) | X |
| (k) Lease of facilities, equipment, or other assets from related organization(s) | X |
| (l) Performance of services or membership or fundraising solicitations for related organization(s) | X |
| (m) Performance of services or membership or fundraising solicitations by related organization(s) | X |
| (n) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | X |
| (o) Sharing of paid employees with related organization(s) | X |
| (p) Reimbursement paid to related organization(s) for expenses | X |
| (q) Reimbursement paid by related organization(s) for expenses | X |
| (r) Other transfer of cash or property to related organization(s) | X |
| (s) Other transfer of cash or property from related organization(s) | X |

2. If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

<table>
<thead>
<tr>
<th>(a) Name of other organization</th>
<th>(b) Transaction type (a-s)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) BEECH STREET PARTNERS, LLC</td>
<td>R</td>
<td>336,834</td>
<td>FAIR VALUE</td>
</tr>
<tr>
<td>(2) BEECH STREET PARTNERS, LLC</td>
<td>K</td>
<td>320,860</td>
<td>FAIR VALUE</td>
</tr>
<tr>
<td>(3) BEECH STREET PARTNERS, LLC</td>
<td>B</td>
<td>247,000</td>
<td>FAIR VALUE</td>
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<tr>
<td>(4)</td>
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<td>(6)</td>
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</tr>
<tr>
<td>Name, address, and EIN of entity</td>
<td>Primary activity</td>
<td>Legal domicile (state or foreign country)</td>
<td>Predominant income (related, unrelated, excluded from tax under section 512-514)</td>
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Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.
<table>
<thead>
<tr>
<th>Name of Related Organization</th>
<th>Primary Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>RSC Lender LLC</td>
<td>Act as a leverage lender with respect to New Markets Tax Credit Transaction</td>
</tr>
<tr>
<td>BEECH STREET PARTNERS LLC</td>
<td>Owns the property that is leased to RSC Holding, LLC</td>
</tr>
</tbody>
</table>