

Form **990**

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2001

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2001 calendar year, or tax year beginning 10/01/01, and ending 9/30/02

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

C Name of organization
PLANNED PARENTHOOD CENTERS OF WEST MICHIGAN, INC.
 Number and street (or P O box if mail is not delivered to street address) Room/suite
425 CHERRY SE
 City or town, state or country, and ZIP + 4
GRAND RAPIDS MI 49503

D Employer ID number
38-1782520

E Telephone number
616-774-7005

F Accounting method Cash
 Accrual Other (specify)

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

G Web site

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

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

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 **4,453,425**

H and **I** are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes" enter no of affiliates N/A
H(c) Are all affiliates included? N/A Yes No (If "No," att a list. See instr.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Enter 4-digit GEN
M Check if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)

1	Contributions, gifts, grants, and similar amounts received				
a	Direct public support	1a	928,985		
b	Indirect public support	1b	63,530		
c	Government contributions (grants)	1c			
d	Total (add lines 1a through 1c) (cash \$ 992,515 noncash \$ _____)	1d		992,515	
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		3,170,145	
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4		36,403	
5	Dividends and interest from securities	5			
6a	Gross rents	6a			
b	Less rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe _____)	7			
8a	Gross amount from sales of assets other than inventory	(A) Securities	220,913	(B) Other	
b	Less cost or other basis and sales expenses	8a			
c	Gain or (loss) (attach schedule)	8b	233,920		
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	-13,007		
d		8d	See Stmt 1	-13,007	
9	Special events and activities (attach schedule)				
a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	34,022		
b	Less direct expenses other than fundraising expenses	9b	17,080		
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c		16,942	
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11		-573	
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		4,202,425	
13	Program services (from line 44, column (B))	13		3,003,935	
14	Management and general (from line 44, column (C))	14		565,073	
15	Fundraising (from line 44, column (D))	15		102,206	
16	Payments to affiliates (attach schedule)	16		73,158	
17	Total expenses (add lines 16 and 44 column (A))	17		3,744,372	
A	Excess or (deficit) for the year (subtract line 17 from line 12)	18		458,053	
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		1,383,518	
20	Other changes in net assets or fund balances (attach explanation)	20		138,508	
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		1,980,079	

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Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B) (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See Specific Instructions on page 21)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule non cash \$ _____ cash \$ _____)	22			
23	Specific assistance to individuals	23			
24	Benefits paid to or for members	24			
25	Compensation of officers, directors, etc	25	289,863	97,062	9,172
26	Other salaries and wages	26	1,844,819	175,363	59,451
27	Pension plan contributions	27			
28	Other employee benefits	28	340,119	52,175	11,010
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33	25,098	4,946	1,573
34	Telephone	34	20,113	4,091	
35	Postage and shipping	35	17,621	2,620	5,191
36	Occupancy	36	197,809	50,452	
37	Equipment rental and maintenance	37	68,862	14,131	5,023
38	Printing and publications	38	27,886	4,966	7,486
39	Travel	39	12,160	974	379
40	Conferences, conventions, and meetings	40			
41	Interest	41	592	64	
42	Depreciation, depletion, etc (att sch)	42	96,836	72,468	
43	Other expenses not covered above (itemize) - a	43a			
	b See Statement 4	43b	729,436	85,761	2,921
	c	43c			
	d	43d			
	e	43e			
44	Total functional expenses (add lines 22 - 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	3,671,214	565,073	102,206

Joint Costs Check if you are following SOP 98-2
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____,
 (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 24)

What is the organization's primary exempt purpose?	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts but optional for others)
▶ See Statement 5 All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)	
a MEDICAL SERVICES TO WOMEN AND MEN WITH EMPHASIS ON REPRODUCTIVE HEALTH - 24,915 CLIENTS SERVED (Grants and allocations \$ _____)	2,623,311
b See Statement 6 (Grants and allocations \$ _____)	285,531
c PUBLIC AFFAIRS AND LOBBYING - PRESENTING THE NEED FOR FAMILY PLANNING SERVICES TO LEGISLATORS AND THE GENERAL PUBLIC (Grants and allocations \$ _____)	40,531
d COMMUNITY SERVICES AND PUBLIC RELATIONS - PRESENTING THE GOALS AND OBJECTIVES OF THE ORGANIZATION TO THE COMMUNITY IN ORDER TO BUILD LONG-TERM SUPPORT FOR THESE GOALS (Grants and allocations \$ _____)	54,562
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	3,003,935

Part IV Balance Sheets (See Specific Instructions on page 24)

Note	Where required, attached schedules and amounts within the description column should be for end-of-year amounts only	(A) Beginning of year		(B) End of year
45	Cash-non-interest-bearing		45	
46	Savings and temporary cash investments	508,503	46	986,043
47a	Accounts receivable	47a 53,154		
b	Less allowance for doubtful accounts	47b	47c	53,154
48a	Pledges receivable	48a 51,750		
b	Less allowance for doubtful accounts	48b	48c	51,750
49	Grants receivable	154,627	49	125,910
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
51a	Other notes and loans receivable (attach schedule)	51a		
b	Less allowance for doubtful accounts	51b	51c	
52	Inventories for sale or use	64,906	52	68,568
53	Prepaid expenses and deferred charges	25,890	53	44,671
54	Investments-securities See Stmt 7 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	82,643	54	41,213
55a	Investments-land, buildings, and equipment basis	55a		
b	Less accumulated depreciation (attach schedule)	55b	55c	
56	Investments-other (attach schedule)	See Stmt 8	56	401,281
57a	Land, buildings, and equipment basis	57a 949,416		
b	Less accumulated depreciation (attach schedule) See Stmt 9	57b 678,593	57c	270,823
58	Other assets (describe See Stmt 10)	326,880	58	399,457
59	Total assets (add lines 45 through 58) (must equal line 74)	1,865,293	59	2,442,870
60	Accounts payable and accrued expenses	176,741	60	150,612
61	Grants payable		61	
62	Deferred revenue	44,908	62	51,079
63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
64a	Tax-exempt bond liabilities (attach schedule)		64a	
b	Mortgages and other notes payable (attach schedule)		64b	
65	Other liabilities (describe See Stmt 11)	260,126	65	261,100
66	Total liabilities (add lines 60 through 65)	481,775	66	462,791
Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
67	Unrestricted	639,835	67	653,447
68	Temporarily restricted	135,753	68	128,089
69	Permanently restricted	607,930	69	1,198,543
Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
70	Capital stock, trust principal, or current funds		70	
71	Paid-in or capital surplus, or land, building, and equipment fund		71	
72	Retained earnings, endowment, accumulated income, or other funds		72	
73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	1,383,518	73	1,980,079
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	1,865,293	74	2,442,870

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 26)

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

a	Total revenue, gains, and other support per audited financial statements ▶	a	4,190,604
b	Amounts included on line a but not on line 12, Form 990		
	(1) Net unrealized gains on investments \$		
	(2) Donated services and use of facilities \$		
	(3) Recoveries of prior year grants \$		
	(4) Other (specify) See Stmt 12 \$ 17,080		
	Add amounts on lines (1) through (4) ▶	b	17,080
c	Line a minus line b ▶	c	4,173,524
d	Amounts included on line 12 Form 990 but not on line a		
	(1) Investment expenses not included on line 6b, Form 990 \$		
	(2) Other (specify) See Stmt 13 \$ 28,901		
	Add amounts on lines (1) and (2) ▶	d	28,901
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	4,202,425

a	Total expenses and losses per audited financial statements ▶	a	3,761,452
b	Amounts included on line a but not on line 17, Form 990		
	(1) Donated services and use of facilities \$		
	(2) Prior year adjustments reported on line 20, Form 990 \$		
	(3) Losses reported on line 20, Form 990 \$		
	(4) Other (specify) See Stmt 14 \$ 17,080		
	Add amounts on lines (1) through (4) ▶	b	17,080
c	Line a minus line b ▶	c	3,744,372
d	Amounts included on line 17, Form 990 but not on line a		
	(1) Investment expenses not included on line 6b, Form 990 \$		
	(2) Other (specify) \$		
	Add amounts on lines (1) and (2) ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	3,744,372

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific Instructions on page 26)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contrib to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SUE KATHERINE HUMPHREY-VAUGHN GRAND RAPIDS, MI 49503	PRES/CEO 40 HRS/WK	91,720	15,626	0
SUZANNE REITER GRAND RAPIDS, MI 49503	VP-CLIENT SV 40 HRS/WK	71,859	4,857	0
DIANE BRADY GRAND RAPIDS, MI 49503	VP-FIN/ADMIN 40 HRS/WK	64,002	4,591	0
JANIS LUNQUIST GRAND RAPIDS, MI 49503	VP-EDUCATION 40 HRS/WK	62,292	4,530	0
SEE ATTACHED LISTING OF BOARD OF DIRECTORS, ALL OF WHOM ARE UNCOMPENSATED.		0	0	0
		0	0	0

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
If "Yes," attach schedule-see Specific Instructions on page 27

Part VI Other Information (See Specific Instructions on page 27)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
78a	Did the organization have unrelated business gross inc of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	X	
b	If "Yes," enter the name of the organization WEST MICHIGAN FACILITIES CORP. and check whether it is <input checked="" type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
81a	Enter direct or indirect political expenditures See line 81 instr	81a	
b	Did the organization file Form 1120-POL for this year?	81b	X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b	N/A
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs Enter a Gross income from members or shareholders	87a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0</u> , section 4912 <u>0</u> , section 4955 <u>0</u>		
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
d	Enter Amount of tax on line 89c, above, reimbursed by the organization		0
90a	List the states with which a copy of this return is filed <u>MI</u>		
b	Number of employees employed in the pay period that includes March 12, 2001 (See instructions)	90b	75
91	The books are in care of <u>DIANE BRADY</u> Located at <u>GRAND RAPIDS, MI</u>		
	Telephone no <u>616-774-7005</u> ZIP + 4 <u>49503</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year	92	

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32)

	Unrelated business income		Excluded by sec 512, 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
Note Enter gross amounts unless otherwise indicated					
93 Program service revenue					
a PROGRAM FEES					6,340
b FAMILY PLANNING CLINIC					1,001,726
c COMMUNITY SERVICE FEES					37,349
d _____					
e _____					
f Medicare/Medicaid payments					169,803
g Fees and contracts from government agencies					1,954,927
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	36,403	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-13,007	
101 Net income or (loss) from special events			1	16,942	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a _____					
b ABANDONMENT OF LEASEHOLD IMPR			1	-573	
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0		39,765	3,170,145
105 Total (add line 104, columns (B), (D), and (E))					3,209,910

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

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

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93a	CONFERENCE FEES AND SALES OF EDUCATIONAL MATERIALS RELATED TO PLANNED PARENTHOOD'S MISSION.
93b	FEES IN ACCORDANCE WITH ABILITY TO PAY ARE RECEIVED FOR See Statement 15

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

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

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

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

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

Please Sign Here

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

Signature of officer: Diane E. Brady Date: 2/14/03

Type or print name and title: DIANE E. BRADY V.P. of FINANCE

Paid Preparer's Use Only

Preparer's signature: Charles D. Oleginski CPA Date: 1/31/03 Check if self-employed:

Firm's name (or yours if self-employed): MEYAARD TOLMAN & VENLET P.C. Preparer's SSN or PTIN (See Gen. Instr. W): 363-56-0502

address, and ZIP + 4: ZEELAND, MI 49464 EIN: 38-2598193 Phone no: 616-772-1901

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)

OMB No 1545-0047

2001

Department of the Treasury
Internal Revenue Service

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

Name of the organization

**PLANNED PARENTHOOD CENTERS OF WEST
MICHIGAN, INC.**

Employer identification number

38-1782520

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

(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee ben plans & deferred compensation	(e) Expense account and other allowances
VALERIE LUCAS GRAND RAPIDS, MI 49503	AD PRAC NURS 40 HRS/WK	55,002	4,256	0
MARY GELDHOF GRAND RAPIDS, MI 49503	AD PRAC NURS 40 HRS/WK	54,416	4,235	0
CYNTHIA UTIC GRAND RAPIDS, MI 49503	AD PRAC NURS 40 HRS/WK	54,367	1,967	0
SHERRY WOOD-STIEG GRAND RAPIDS, MI 49503	AD PRAC NURS 40 HRS/WK	54,290	4,204	0
AMY BROWN GRAND RAPIDS, MI 49503	AD PRAC NURS 40 HRS/WK	51,048	3,456	0
Total number of other employees paid over \$50,000 ▶	0			

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

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

(a) Name and address of each independent contractor paid more than \$ 50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services ▶		

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

Schedule A (Form 990 or 990-EZ) 2001

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

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities 42,288 (Must equal amount on line 38, Part VI-A, or line 1 of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of exp if more than \$1,000)? SEE PART V, FORM 990	2d	X
e Transfer of any part of its income or assets?	2e	X
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below)	3	X
4 Do you have a section 403(b) annuity plan for your employees?	4	X
Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments		

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

The organization is not a private foundation because it is (Please check only ONE applicable box)

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
- 11b A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
- 12 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

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

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

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

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

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

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	825,033	2,121,199	2,019,324	2,355,412	7,320,968
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	3,053,894	1,210,857	1,234,624	1,308,250	6,807,625
18 Gross inc. from int., dividends, amounts received from pymt. on securities loans (section 512(a)(5)) rents, royalties & unrelated busn taxable inc. (less sec. 511 taxes) from businesses acquired by the organization after June 30, 1975	55,024	47,548	29,900	26,518	158,990
19 Net income from unrelated business activities not included in line 18					
20 Tax rev. levied for the organization's ben. & either paid to it or expended on its behalf					
21 The value of serv. or fac. furnished to the org. by a governmental unit without charge. Do not incl. the value of serv. or fac. generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of cap. assets.					
23 Total of lines 15 through 22	3,933,951	3,379,604	3,283,848	3,690,180	14,287,583
24 Line 23 minus line 17	880,057	2,168,747	2,049,224	2,381,930	7,479,958
25 Enter 1% of line 23	39,340	33,796	32,838	36,902	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a 149,599
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.					26b 73,770
c Total support for section 509(a)(1) test. Enter line 24, column (e).					26c 7,479,958
d Add: Amounts from column (e) for lines 18 158,990 19 19 22 73,770					26d 232,760
e Public support (line 26c minus line 26d total)					26e 7,247,198
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 96.8882%
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year.				N/A
(2000)	(1999)	(1998)	(1997)		
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year.					N/A
(2000)	(1999)	(1998)	(1997)		
c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c _____
d Add: Line 27a total _____ and line 27b total _____					27d _____
e Public support (line 27c total minus line 27d total)					27e _____
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e).					27f _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h %
28 Unusual Grants. For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	N/A	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?			
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?			
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)			
32 Does the organization maintain the following			
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)	32d		
33 Does the organization discriminate by race in any way with respect to			
a Students' rights or privileges?	33a		
b Admissions policies?	33b		
c Employment of faculty or administrative staff?	33c		
d Scholarships or other financial assistance?	33d		
e Educational policies?	33e		
f Use of facilities?	33f		
g Athletic programs?	33g		
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	33h		
34a Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b		
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)
 (To be completed ONLY by an eligible organization that filed Form 5768)

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

Limits on Lobbying Expenditures		(a) Affiliated group totals See Stmt 16	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	40,888	40,888
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	1,400	1,400
38	Total lobbying expenditures (add lines 36 and 37)	42,288	42,288
39	Other exempt purpose expenditures	3,831,948	3,702,084
40	Total exempt purpose expenditures (add lines 38 and 39)	3,874,236	3,744,372
41	Lobbying nontaxable amount Enter the amount from the following table-		
	If the amount on line 40 is-		
	Not over \$500,000		
	Over \$500,000 but not over \$1,000,000		
	Over \$1,000,000 but not over \$1,500,000		
	Over \$1,500,000 but not over \$17,000,000		
	Over \$17,000,000		
	The lobbying nontaxable amount is-		
	20% of the amount on line 40		
	\$100,000 plus 15% of the excess over \$500,000		
	\$175,000 plus 10% of the excess over \$1,000,000		
	\$225,000 plus 5% of the excess over \$1,500,000		
	\$1,000,000		
41		343,712	337,219
42	Grassroots nontaxable amount (enter 25% of line 41)	85,928	84,305
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	0	0
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	0	0

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below)

See the instructions for lines 45 through 50 on page 11 of the instructions

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45	343,712	334,195	328,343	315,571	1,321,821
46					1,982,732
47	42,288	18,991	13,354	11,110	85,743
48	85,928	83,549	82,086	78,893	330,456
49					495,684
50	40,888	17,602	12,860	10,038	81,388

Part VI-B Lobbying Activity by Nonelecting Public Charities

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

N/A

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

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

Yes	No	Amount

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions)

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

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

- (i) Cash
- (ii) Other assets

b Other transactions

- (i) Sales or exchanges of assets with a noncharitable exempt organization
- (ii) Purchases of assets from a noncharitable exempt organization
- (iii) Rental of facilities, equipment, or other assets
- (iv) Reimbursement arrangements
- (v) Loans or loan guarantees
- (vi) Performance of services or membership or fundraising solicitations

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

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

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)	X	
b(iv)		X
b(v)		X
b(vi)		X
c		X

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
b(111)	120,012	WEST MI FACILITIES CORP	ALLOCATION OF BUILDING OCCUPANCY COSTS

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

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
WEST MI FACILITIES CORP 38-2707219	PROPERTY HOLDING CORP 501(C)(2)	ESTABLISHED BY PLANNED PARENTHOOD TO HOLD TITLE TO AND OPERATE FACILITIES USED IN THE PROGRAMS OF PLANNED PARENTHOOD

Federal Statements**Statement 1 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Securities**

Desc			How Rec'd		Whom Sold	
	Date Acquired	Date Sold	Sale Price	Cost & Expense	Deprec	Gain/-Loss
\$20,000 FORD MOTOR CO	4/23/01	9/10/02	\$ 20,000	\$ 20,517		\$ -517
4076 SHS MERRILL LYNCH BASIC VAL FD	Various	9/15/02	94,955	105,345		-10,390
\$10,000 FORD MOTOR CO	5/21/01	9/10/02	10,000	10,345		-345
\$10,000 GMAC	5/21/01	2/07/02	10,000	10,088		-88
\$35,000 HOUSEHOLD BANK	8/05/99	8/12/02	35,000	35,785		-785
\$50,000 FIRST USA BANK	3/20/00	4/01/02	50,000	50,769		-769
15 SHS WASH MUTUAL	9/01/02	9/15/02	482	564		-82
10 SHS COCA COLA	9/01/02	9/15/02	476	507		-31
Total			\$ 220,913	\$ 233,920	\$ 0	\$ -13,007

Statement 2 - Form 990, Part I, Line 16 - Payments to Affiliates

Name	Address	Amount	Purpose
PLANNED PARENTHOOD FED OF AMER	NEW YORK, NEW YORK	\$ 36,442	ANNUAL DUES
PLANNED PARENTHOOD AFF OF MICH	LANSING, MICHIGAN	36,716	ANNUAL DUES
Total		\$ 73,158	

Statement 3 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
GAIN ON REVALUATION OF SPLIT INTEREST AGREEMENT	\$ 167,409
UNREALIZED LOSSES ON INVESTMENTS	-28,901
Total	\$ 138,508

Federal Statements**Statement 4 - Form 990, Part II, Line 43 - Other Functional Expenses**

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Mgt & General</u>	<u>Fund-Raising</u>
	\$	\$	\$	\$
Expenses				
PHARMACEUTICALS	250,496	250,496		
LAB FEES	124,603	124,603		
CONTRACT LABOR	38,682	38,682		
INSURANCE	48,142	42,174	5,968	
MDCH CONSULTATION	14,384	14,384		
UTILITIES	5,472	3,500	1,972	
AUDIT AND PROFESSIONAL FEES	35,245	7,195	27,222	828
NONPHARMACEUTICAL SUPPLIES	41,029	41,029		
TRAINING AND DEVELOPMENT	50,009	18,246	30,920	843
MARKETING	49,539	49,539		
ADVERTISING AND RECRUITING	8,232	7,786	446	
COMPUTER EXPENSE	31,619	25,427	6,192	
EQUIPMENT LEASING	12,782	5,397	7,385	
MISCELLANEOUS	8,202	2,988	3,964	1,250
DUES	1,962	270	1,692	
MICROFILMING	9,038	9,038		
Total	<u>\$ 729,436</u>	<u>\$ 640,754</u>	<u>\$ 85,761</u>	<u>\$ 2,921</u>

Statement 5 - Form 990, Part III - Organization's Primary Exempt Purpose

TO PROVIDE COMPREHENSIVE REPRODUCTIVE HEALTH SERVICES,
EDUCATION AND TRAINING SERVICES WHICH PROMOTE HEALTHY
HUMAN SEXUALITY.

Statement 6 - Form 990, Part III, Line b - Statement of Program Service Accomplishments

EDUCATIONAL SERVICES TO THE GENERAL PUBLIC INCLUDING
PRESENTATIONS ON FAMILY PLANNING OPTIONS, PEER EDUCATION,
PARENT EDUCATION, AND SEXUAL HEALTH - APPROX 9,000
CLIENTS SERVED

Federal Statements

Statement 7 - Form 990, Part IV, Line 54 - Investments in Securities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Basis of Valuation</u>
Corporate Bonds			
FORD MOTOR CREDIT	20,518		Market
FORD MOTOR CREDIT	10,345		Market
GMAC	10,088		Market
JP MORGAN CHASE & CO	10,362	10,167	Market
MBNA CORP	10,237	10,256	Market
SALOMON INC.	10,668	10,640	Market
TIME WARNER	10,425	10,150	Market
	<u>82,643</u>	<u>41,213</u>	

Statement 8 - Form 990, Part IV, Line 56 - Other Investments

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Basis of Valuation</u>
MERRILL LYNCH BASIC VALUE FUND	\$ 102,313	\$	Market
CERTIFICATES OF DEPOSIT	190,736	102,094	Market
PUBLICLY TRADED CORPORATE STOCKS		299,187	Market
Total	<u>\$ 293,049</u>	<u>\$ 401,281</u>	

Statement 9 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

<u>Description</u>	<u>Beginning of Year</u>	<u>Accum Deprec</u>	<u>End of Year</u>	<u>Accum Deprec</u>
FURNITURE & FIXTURES	\$ 716,251	\$ 463,020	\$ 741,341	\$ 539,833
BLDG IMPROVEMENTS	201,428	119,438	208,075	138,760
Total	<u>\$ 917,679</u>	<u>\$ 582,458</u>	<u>\$ 949,416</u>	<u>\$ 678,593</u>

Statement 10 - Form 990, Part IV, Line 58 - Other Assets

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
BENEFICIAL INTEREST-SPLIT INT AGREE	\$ 326,588	\$ 398,960
OTHER CURRENT ASSETS	292	497
Total	<u>\$ 326,880</u>	<u>\$ 399,457</u>

Federal Statements**Statement 11 - Form 990, Part IV, Line 65 - Other Liabilities**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
ADVANCE FROM MDCH	\$ 20,883	\$ 14,702
PAYABLE TO WEST MI FACILITIES CORP	123,090	246,398
LINE OF CREDIT - SMITH BARNEY	116,153	
Total	<u>\$ 260,126</u>	<u>\$ 261,100</u>

Federal Statements**Statement 12 - Form 990, Part IV-A - Other Revenue Included in Financial Statements**

Description	Amount
SPECIAL EVENTS EXPENSE	\$ 17,080
Total	\$ <u>17,080</u>

Statement 13 - Form 990, Part IV-A - Other Revenue Included on Return

Description	Amount
UNREALIZED HOLDING LOSSES ON INVESTMENTS	\$ 28,901
Total	\$ <u>28,901</u>

Statement 14 - Form 990, Part IV-B - Other Expenses Included in Financial Statements

Description	Amount
SPECIAL EVENTS EXPENSES	\$ 17,080
Total	\$ <u>17,080</u>

Federal Statements**Statement 15 - Form 990, Part VIII - Relationship of Activities**

<u>Line No</u>	<u>Description</u>
	CLINIC SERVICES, INCLUDING FAMILY PLANNING, PREGNANCY TESTING, AIDS TESTING AND REPRODUCTIVE HEALTH PROBLEM SERVICES.
93c	OCCASIONAL SPEAKERS' FEES, CONFERENCE FEES - PRESENTATIONS TO THE COMMUNITY ABOUT PLANNED PARENTHOOD'S MAJOR SERVICES - FAMILY PLANNING, REPRODUCTIVE SYSTEM HEALTH SERVICES.
93f	MEDICAID PAYMENTS RECEIVED FROM THE STATE FOR SERVICES (FAMILY PLANNING, ETC)TO CERTAIN ELIGIBLE CLIENTS.
93g	PLANNED PARENTHOOD IS PAID BY THE STATE OF MICHIGAN DEPARTMENT OF COMMUNITY HEALTH (AND OTHER PASS - THROUGH AGENCIES) UNDER CAPITATED RATE CONTRACTS, FOR PROVIDING FAMILY PLANNING, PREGNANCY TESTING, AIDS TESTING, AND REPRODUCTIVE HEALTH PROBLEM SERVICES. THESE SERVICES ARE PROVIDED TO THE GENERAL PUBLIC, WITH PARTICULAR FOCUS ON THOSE SEGMENTS OF THE POPULATION THAT ARE OTHERWISE UNDERSERVED.

Federal Statements**Statement 16 - Schedule A, Part VI-A - Affiliated Group Information**

Name	Address				
	EIN	'X'if Electing	Grassroots Lobbying	Direct Lobbying	Other Expenditures
WEST MICHIGAN FACILITIES CORP		GRAND RAPIDS, MI			
	38-2707219	\$		\$	\$ 129,864
PLANNED PARENTHOOD CENTERS OF W MI		GRAND RAPIDS, MI			
	38-1782520 X		40,888	1,400	3,702,084
Total		\$	<u>40,888</u>	<u>\$ 1,400</u>	<u>\$ 3,831,948</u>

PLANNED PARENTHOOD CENTERS OF WEST MICHIGAN

425 Cherry St , S E , Grand Rapids, MI 49503

Tele 774-7005 Fax 774-0516

2002/03 BOARD OF DIRECTORS

11/04/02

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Glon White Gardner E-Mail: MsPrez7131@aol.com	*3742 Fairway Drive Muskegon, MI 49441 (231) 780-2849 Cell #231-557-2498	GWGardner & Associates, ICPS 3742 Fairway Drive Muskegon, MI 49441 (231) 780-0401 FAX (231) 780-0401 #2	President/CEO
Michael Williams E-Mail: willimic@aquinas.edu	*338 Auburn, SE Grand Rapids, MI 49506 774-2803	Aquinas College 1607 Robinson Rd SE Grand Rapids, MI 49506 459-8281 Ext 4495	Professor
<u>MEDICAL DIRECTOR</u>			
Earl Williams, M D	*3315 Oak Hollow, S E Grand Rapids, MI 49506 949-4294		Physician
Peter Lundeen, M D E-Mail: plund45709@aol.com	*7169 Loma Linda Rockford, MI 49341 874-2862	Wyoming Family Medicine 950 36th Street, SW Grand Rapids, MI 49509 534-1640 pvt #534-8222 FAX 534-4370	Physician
<u>HONORARY MEMBER</u>			
Peggy Jensen	*1710 Beach St Muskegon, MI 49444 755-3800	FAX 755-4700	
<u>LEGAL COUNSEL</u>			
Martha W Atwater E-Mail: matwater@wnj.com	5388 Effingham Dr SE Kentwood, MI 49508 455-8964	*Warner, Norcross & Judd 111 Lyon St , NW #900 Grand Rapids MI 49503 752-2172 FAX 752-2500	Attorney
H Rhett Pinsky	2106 Shiawassee, S E Grand Rapids, MI 49506 243-9488	*146 Monroe Center Grand Rapids, MI 49503 451-8496	Attorney

Depreciation and Amortization

OMB No 1545-0172

Form **4562**
(Rev March 2002)
Department of the Treasury
Internal Revenue Service

(Including Information on Listed Property)

2001

▶ See separate instructions ▶ Attach to your tax return

Attachment
Sequence No **67**

Name(s) shown on return **PLANNED PARENTHOOD CENTERS OF WEST MICHIGAN, INC.** Identifying number **38-1782520**

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Tangible Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I

1	Maximum amount See page 2 of the instructions for a higher limit for certain businesses	1	\$24,000																											
2	Total cost of section 179 property placed in service (see page 3 of the instructions)	2																												
3	Threshold cost of section 179 property before reduction in limitation	3	\$200,000																											
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4																												
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less enter -0- If married filing separately see pg 3 of the instr	5																												
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">(a) Description of property</th> <th style="width: 25%;">(b) Cost (business use only)</th> <th style="width: 25%;">(c) Elected cost</th> </tr> <tr> <td>6</td> <td></td> <td></td> </tr> <tr> <td>7</td> <td>Listed property Enter the amount from line 29</td> <td style="text-align: center;">7</td> </tr> <tr> <td>8</td> <td>Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7</td> <td style="text-align: center;">8</td> </tr> <tr> <td>9</td> <td>Tentative deduction Enter the smaller of line 5 or line 8</td> <td style="text-align: center;">9</td> </tr> <tr> <td>10</td> <td>Carryover of disallowed deduction from line 13 of your 2000 Form 4562</td> <td style="text-align: center;">10</td> </tr> <tr> <td>11</td> <td>Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)</td> <td style="text-align: center;">11</td> </tr> <tr> <td>12</td> <td>Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11</td> <td style="text-align: center;">12</td> </tr> <tr> <td>13</td> <td>Carryover of disallowed deduction to 2002 Add lines 9 and 10, less line 12</td> <td style="text-align: center;">13</td> </tr> </table>				(a) Description of property	(b) Cost (business use only)	(c) Elected cost	6			7	Listed property Enter the amount from line 29	7	8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	9	Tentative deduction Enter the smaller of line 5 or line 8	9	10	Carryover of disallowed deduction from line 13 of your 2000 Form 4562	10	11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	13	Carryover of disallowed deduction to 2002 Add lines 9 and 10, less line 12	13
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13	Carryover of disallowed deduction to 2002 Add lines 9 and 10, less line 12	13																												

Note Do not use Part II or Part III below for listed property Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)

14	Special depreciation allowance for certain property (other than listed property) acquired after Sept 10 2001 (see pg 3 of the instr)	14	
15	Property subject to section 168(f)(1) election (see page 4 of the instructions)	15	
16	Other depreciation (including ACRS) (see page 4 of the instructions)	16	96,836

Part III MACRS Depreciation (Do not include listed property) (See page 4 of the instructions)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2001	17	
18	If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

Section B-Assets Placed in Service During 2001 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C-Assets Placed in Service During 2001 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs		S/L	
c	40-year		40 yrs	MM	S/L	

Part IV Summary (See page 6 of the instructions)

21	Listed property Enter amount from line 28	21	
22	Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations-see instr	22	96,836
23	For assets shown above and placed in service during the current year enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions

Form **4562** (2001) (Rev 3 2002)