DLN: 93493192005443

Department of the Treasury

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)

OMB No 1545-0047

Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection , 2012, and ending 08-31-2012 A For the 2012 calendar year, or tax year beginning 01-01-2012 Name of organization D Employer identification number B Check if applicable PLANNED PARENTHOOD OF THE TEXAS Address change CAPITAL REGION INC 74-1005756 Doing Business As Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number 201 EAST BEN WHITE BLVD BLDG B ▼ Terminated (512) 275-0171 City or town, state or country, and ZIP + 4 AUSTIN, TX 78704 Amended return Application pending **G** Gross receipts \$ 7,409,168 Name and address of principal officer Is this a group return for PAMELA SMALLWOOD ┌ Yes 🗸 No affiliates? 201 EAST BEN WHITE BLVD BLDG B AUSTIN, TX 78704 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) Tax-exempt status **▽** 501(c)(3) **□ H(c)** Group exemption number ▶ Website: ► WWW PPAUSTIN ORG **L** Year of formation 1938 **M** State of legal domicile TX Part I Summary Briefly describe the organization's mission or most significant activities TO HELP PEOPLE MAKE INFORMED, PRIVATE DECISIONS IN MATTERS OF SEXUALITY, REPRODUCTION & PARENTHOOD Activities & Governance 2 Check this box 🛏 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . 19 Number of independent voting members of the governing body (Part VI, line 1b) 4 19 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 84 6 121 Total number of volunteers (estimate if necessary) . . . 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 \boldsymbol{b} Net unrelated business taxable income from Form 990-T, line 34 $\,$ 7b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 4,536,654 1.746.053 255,471 256,974 Program service revenue (Part VIII, line 2g) . . 160,214 37,209 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 30,195 71,803 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 4,982,534 2,112,039 13 0 504,624 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . Salaries, other compensation, employee benefits (Part IX, column (A), lines **15 Expenses** 1,226,293 1,021,039 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 0 b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 235,763$ **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e). 971,043 1,177,939 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 2,197,336 2,703,602 18 19 Revenue less expenses Subtract line 18 from line 12 2,785,198 -591,563 t Assets or id Balances **Beginning of Current End of Year** Year 0 20 Total assets (Part X, line 16) . 12,656,547 0 21 Total liabilities (Part X, line 26) . . 287,766 0 22 Net assets or fund balances Subtract line 21 from line 20 12,368,781 Signature Block 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

2013-07-10 Signature of office Sign Here PAMELA SMALLWOOD CO-CEO Type or print name and title Print/Type preparer's name KAREN E ATCHLEY Preparer's signature Check Γ P00238005 self-employed Paid Firm's name ATCHLEY & ASSOCIATES LLP Firm's EIN F 74-2920819 Preparer Firm's address ► 6850 AUSTIN CENTER BLVD STE 180 Phone no (512) 346-2086 Use Only AUSTIN, TX 787313129 May the IRS discuss this return with the preparer shown above? (see instructions) ✓ Yes ☐ No

Form	990 (2012)					Page
Par		ent of Program Servi chedule O contains a resp				
1	Briefly describe t	the organization's mission				
<u>TO F</u>	IELP PEOPLE MAR	KE INFORMED, PRIVATE	DECISIONS IN	MATTERS OF SEXU	JALITY, REPRODUCTION AND	O PARENTHOOD
2		ion undertake any signific 0 or 990-EZ?				┌ Yes ┌ No
	If "Yes," describe	these new services on Sc	hedule O			
3	_	ion cease conducting, or r	_	_	nducts, any program	┌ Yes ┌ No
	If "Yes," describe	these changes on Schedu	ıle O			
4	expenses Sectio) organizations a	re required to report	ee largest program services, as the amount of grants and alloc	
4a	(Code) (Expenses \$	898,063 ıı	ncluding grants of \$	504,624) (Revenue \$	293,303)
		RAM SUPPORT SERVICES TO PLA USTIN FAMILY PLANNING, INC	NNED PARENTHOOD	OF AUSTIN SURGICAL AI	ND SEXUAL HEALTH SERVICES, INC AP	ND, SEPARATELY, TO PLANNE
4b	(Code) (Expenses \$	313,242 II	ncluding grants of \$) (Revenue \$)
					ARENTHOOD'S MISSION AND SERVICES REPRODUCTIVE HEALTHCARE AND ED	
4c	(Code) (Expenses \$	222,953 ıı	ncluding grants of \$) (Revenue \$)
	EDUCATION SERVICE PARENTS AND INDIV		AND ACCURATE INF	ORMATION ON REPRODU	JCTION, HEALTH AND SEXUALITY TO S	CHOOLS, CHURCH GROUPS,
4d	Other program s	services (Describe in Sche	 dule O)			
	(Expenses \$	ıncl	uding grants of \$) (Revenue \$)
4e	Total program s	ervice expenses 🗠	1,434,258			

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🐿	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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 "Yes," complete Schedule C, Part II	4	Yes	
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 "Yes," complete Schedule C, Part III	5		No
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 "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			No
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		No
	complete Schedule D, Part III 🕏	8		I NO
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 "Yes," complete Schedule D, Part IV^{\bullet}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
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 "Yes," complete Schedule D, Part VII	11b		No
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 "Yes," complete Schedule D, Part VIII	11c		No
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 "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part $X^{f E}$	11e		No
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 "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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 "Yes," complete Schedule F, Parts I and IV	14b		No
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 "Yes," complete Schedule F, Parts II and IV	15		No
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 "Yes," complete Schedule F, Parts III and IV	16		No
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 "Yes," complete Schedule G, Part I (see instructions)			No
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 "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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		No
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? <i>If</i> "Yes," complete Schedule J	23		No
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		No
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? <i>If</i> "Yes," complete Schedule L, Part I	25a		No
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		No
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		No
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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	.		
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	Yes	
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		No
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		No
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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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		No
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		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Par	Statements Regarding Other IRS Fillings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 8		103	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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)?	4 a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	טכ		
ď	11 165, to line 34 01 30, did the organization line rottli 0000-1 '	5c		
	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?	6a		Νo
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	7a	Yes	
	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?	7a 7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	70	res	
_	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
l2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
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			
С	Enter the amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	ection A. Governing body and management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax 19			
	year			
	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			
b	Enter the number of voting members included in line 1a, above, who are independent			
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?	2		No
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? .	3		Νo
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
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?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod Yes	e.) No
		evenu 10a		
10a	Did the organization have local chapters, branches, or affiliates?			No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? If "Yes," 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? If "Yes," 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available Check all that apply
 - ☐ Own website ☐ Another's website ☐ 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 ►MIMA QUEVEDO 201 EAST BEN WHITE BLVD BLDG B AUSTIN, TX (512)275-0171

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 $\,\cdot\,\,$. $\,\cdot\,\,$.

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

- 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, or 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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Kej emplojee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations	
(1) A ALBRIGHT	2 00	х		х				0	0	0	
VICE CHAIR (2) L CHO	2 00										
CHAIR		×		Х				0	0	0	
(3) J PINNELLI	2 00	х		х				0	0	0	
TREASURER				_^				ŭ	Ŭ		
(4) J GARZA	2 00	×		х				О	0	0	
SECRETARY (5) J BOHART	50										
` '	30	х						0	0	0	
BOARD MEMBER (6) M CARO	50										
BOARD MEMBER		×						0	0	0	
(7) P CAVAZOS	50	х						0	0	0	
BOARD MEMBER								Ů	Ŭ		
(8) W CRYER	50	×						0	0	C	
BOARD MEMBER											
(9) M DEALEY	50	×						0	0	C	
BOARD MEMBER (10) M EARLEY	50						-				
	30	х						0	0	C	
BOARD MEMBER (11) A FREEDMAN	50						\vdash				
BOARD MEMBER		X						0	0	C	
(12) D HISER	50	<u> </u>									
BOARD MEMBER		X					L	0	0	0	
(13) C KADISON	50	х						0	0	0	
BOARD MEMBER								l "	U	U	
(14) S LASTRAPES	50	×						0	0	0	
BOARD MEMBER											
(15) C MARTIN	50	×						0	0	C	
BOARD MEMBER (16) B MILLS	50						\vdash				
	50	x						0	0	C	
BOARD MEMBER (17) M MOORE	50										
BOARD MEMBER		x						0	0	(
DONNO PIEPIDEN		<u> </u>								Form 990 (2012	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (list any hours	A verage hours per more than one box, unless week (list person is both an officer any hours and a director/trustee) (W. 2.7)					(D) Reportable compensation from the organization	(E) Reportable compensatio from related organizations	n am co	(F) Estimate amount of o compensat from the		
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	a	rganiza and reli rganiza	ated
(18)	S THOMAS	50	х						0		0		(
	D MEMBER D ZAMORA										-		
		50	×						О		o		(
	D MEMBER P SMALLWOOD	40 00											
CO-C	EO				×				108,261	1,8	193		7,443
(21)	S WHEAT	40 00			х				80,291		0		8,358
CO-C	EO								33,232		1		
											+		
						_					+		
1b	Sub-Total												
с	Total from continuation sheets to P			•	•				100 553	1.00			15.00
d 	Total (add lines 1b and 1c)		· .	· ·	• •	hov	a) who	roc	188,552	1,893	1		15,80
2	\$100,000 of reportable compensation	-			eu a	DOV	e) WIIO	rec	erved more than				
						_						Yes	No
3	Did the organization list any former on line 1a? <i>If</i> "Yes," complete Schedu.						yee,o	r hig	ghest compensate	d employee	3		Νo
4	For any individual listed on line 1a, i									om the		\dashv	140
	organization and related organization individual	is greater than \$1		. 1T	r es	>, C •	ompie: •	.e 50	.neuure J FOF SUCN		4		No
5	Did any person listed on line 1a recesservices rendered to the organizatio								d organization or ir	ndividual for	_	\neg	
	Services remacrea to the organization	ii 17 res, compre	ie sene		3 101	54,	in pers	, , , ,		· · · L	5		No
Se	ection B. Independent Contra	ctors											
1	Complete this table for your five high compensation from the organization											vear	
		(A) nd business address					,			(B) on of services		(C)	
	ivallic di	Business dudiess							Description	or services		эттрепа	Jacon
											+		
	Total number of independent contract						linta	d = b					

Form 99			_					Page 9
Part V	/ + + 1		o f Revenue ule O contains a respon	ise to any question i	n this Part VIII			
				are to any question.	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
<u> 2</u> 2	1a	Federated cam	paigns 1a					
ant	ь	Membership du	es 1b					
ភ្ន	c	Fundraising eve	ents 1c	235,843				
Ę, Ą	d	Related organiz	zations 1d					
≣a		Government grants						
ış,	e	Government grand	s (contributions) 1e					
Contributions, Giffs, Grants and Other Similar Amounts	f	sımılar amounts no		1,510,210				
ĕŏ	g	Noncash contribution 1a-1f \$	ons included in lines	2,875				
, E	h	Total. Add lines	s 1a-1f		1,746,053			
				Business Code				
∃e	2a	CLINIC FEES		621990	256,974	256,974		
e.ke	ь			021330	230,374	250,574		
or or	c							
Ģ.	d							
Ī								
Ē	e	A II - + h						
Program Service Revenue	f	All other progra	am service revenue					
	g	Total. Add lines	s 2a – 2f		256,974			
	3		ome (including dividend ar amounts)		37,296			37,296
	4		stment of tax-exempt bond p	L				
	5			· · · · · · · · · · · · · · · · · · ·				
		•	(ı) Real	(II) Personal				
	6a	Gross rents						
	ь	Less rental expenses						
	c	Rental income						
	d	or (loss) Net rental inco	me or (loss)					
	-		(ı) Securities	(II) O ther				
	7a	Gross amount						
		from sales of assets other	10,617	5,272,200				
	ь	than inventory Less cost or						
	້	other basis and sales expenses	11,005	5,271,899				
	c	Gain or (loss)	-388	301				
	d	Net gain or (los	s)		-87	301		-388
_	8a	Gross income f	=					
ĭ.		events (not inc \$ 235	luding ,843					
क >		of contributions	reported on line 1c)					
æ		See Part IV, lin						
Other Revenue	ь	less direct ov	penses b	50,000 14,225				
₹	ر ا		(loss) from fundraising (35,775			35,775
			rom gaming activities	-				
		See Part IV, lin	ne 19					
	١.		a					
	b		penses b (loss) from gaming activ	utios				
	10a	Gross sales of	r	/ities				
	-50	returns and allo						
			а					
			oods sold b					
	c		(loss) from sales of inve					
	44	Miscellaneous		Business Code 900099	21,005	21,005		
		RESEARCH ST	_	900099	13,023			
	b	MISCELLANEC	-	900099		13,023 2,000		
	C	TRAVEL REIM		900099	2,000	∠,000		
	d		ue	<u>.</u>				
	е	Total. Add lines		· · · •	36,028			
	12	Total revenue.	See Instructions	· · · · •	2,112,039	293,303	(72,683

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 (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 504,624 504,624 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and 204,296 136,842 67,454 key employees . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 648,268 162,993 340,925 144,350 Pension plan accruals and contributions (include section 401(k) 14,932 3,416 7,084 and 403(b) employer contributions) 4,432 96,620 Other employee benefits 32,804 43,166 20,650 10 56,923 21,900 23,506 11,517 11 Fees for services (non-employees) 6,587 8,333 1,676 70 Management 46,685 37,145 9,160 Legal 380 Accounting 6,525 5,192 1,280 53 Professional fundraising services See Part IV, line 17 Investment management fees 10,617 8,448 2,083 86 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 88,963 70,827 17,413 723 Schedule O) Advertising and promotion . . 63,931 46,634 1,500 15,797 12 13 Office expenses 59,103 31,578 19,157 8,368 175,357 139,524 34,405 14 Information technology . . 1,428 15 Royalties . 27,482 6,805 17,732 2,945 16 Occupancy **17** 48,432 14,878 29,814 3,740 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 20 Payments to affiliates 21 91,259 60,133 21,339 9,787 22 Depreciation, depletion, and amortization . 146,172 77,254 68,918 23 13,399 13,399 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 307,109 a AFFILIATE EXPENSE 307,109 0 0 CLINIC SUPPLY EXPENSE 50,136 49,625 315 196 MISCELLANEOUS 20,679 11,296 5,166 4,217 d BANK SERVICE CHARGES 6,675 36 44 6,595 7,082 5,717 936 429 e All other expenses Total functional expenses. Add lines 1 through 24e 1,033,581 25 2,703,602 1,434,258 235,763 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► T if following SOP 98-2 (ASC 958-720)

art X	Balance Sheet	
	Charles & Calcadada A	

				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		2,572,581	1	0
	2	Savings and temporary cash investments		1,191,457	2	0
	3	Pledges and grants receivable, net			3	0
	4	Accounts receivable, net		54,927	4	0
4ssets	5	Loans and other receivables from current and former officers, director employees, and highest compensated employees. Complete Part II Schedule L	ors, trustees, key		5	0
	6	Loans and other receivables from other disqualified persons (as defined 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributed and sponsoring organizations of section 501(c)(9) voluntary employ organizations (see instructions) Complete Part II of Schedule L	buting employers		6	0
Ž	7	Notes and loans receivable, net			7	0
1	8	Inventories for sale or use		88,957	8	0
	9	Prepaid expenses and deferred charges		62,020	9	0
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1 1			
	ь	Less accumulated depreciation	10b	5,410,227	10c	0
	11	Investments—publicly traded securities		3,276,378	11	0
	12	Investments—other securities See Part IV, line 11			12	0
	13	Investments—program-related See Part IV, line 11			13	0
	14	Intangible assets			14	0
	15	Other assets See Part IV, line 11			15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)		12,656,547	16	0
	17	Accounts payable and accrued expenses		287,766	17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
ς.	21	Escrow or custodial account liability Complete Part IV of Schedule	D		21	
<u>a</u>	22	Loans and other payables to current and former officers, directors, tr key employees, highest compensated employees, and disqualified				
Liabili		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties .			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related the and other liabilities not included on lines 17-24). Complete Part X or	f Schedule			
		D		207 700	25	
	26	Total liabilities. Add lines 17 through 25		287,766	26	0
ρ		Organizations that follow SFAS 117 (ASC 958), check here ► ▽ and lines 27 through 29, and lines 33 and 34.	u complete			
≟ 5	27	Unrestricted net assets		12,052,424	27	0
= 5	28	Temporarily restricted net assets		316,357	28	0
3	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here romplete lines 30 through 34.	and			
	30	Capital stock or trust principal, or current funds			30	
Š	31	Paid-in or capital surplus, or land, building or equipment fund			31	
î	32	Retained earnings, endowment, accumulated income, or other funds			32	
Į	33	Total net assets or fund balances		12,368,781	33	0
2	34	Total liabilities and net assets/fund balances		12,656,547	34	0

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,:	12,039
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,7	703,602
3	Revenue less expenses Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			
5	Net unrealized gains (losses) on investments	5			218,665
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-11,9	995,883
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		,	0
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. 区
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revious a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	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?	ne	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

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As Filed Data -

DLN: 93493192005443

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

PLANNED PARENTHOOD OF THE TEXAS

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

CALIT	AL IXLO	TON INC							74-10057	56	
Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All org	ganızatıons	must com	plete this p	oart.) See ir	ıstructior	ns.
The	rganı	zatıon ıs	not a priva	te foundation becaus	eitis (Forl	lınes 1 throu	igh 11, check	only one b	ox)		
1	Γ	A chur	ch, convent	ion of churches, or a	ssociation of	f churches d	escribed in s e	ection 170(b)(1)(A)(i).		
2	\sqcap	A scho	ol described	d in section 170(b)(1	L)(A)(ii). (At	tach Schedi	ule E)				
3	\sqcap	A hosp	ital or a cod	perative hospital se	rvice organiz	zatıon descri	ıbed ın sectio	n 170(b)(1)	(A)(iii).		
4	\sqcap	A medi	cal researc	h organization opera	ted ın conjun	iction with a	hospital des	cribed in se	ction 170(b)(1)(A)(iii)	. Enter the
				ity, and state							
5	Γ	Anorg	anızatıon op	erated for the benefi	t of a college	or universi	ty owned or o	perated by	a government	:al unit de	scribed in
		sect ior	170(b)(1)((A)(iv). (Complete P	art II)						
6	\sqcap	A feder	al, state, or	local government o	r government	tal unıt desc	rıbed ın secti	ion 170(b)(:	L)(A)(v).		
7		_		at normally receives		•	support from	a governme	ental unit or fi	om the ge	neral public
8	Г			on 170(b)(1)(A)(vi). : described in sectio i			nplete Part II	[)			
9	Ė		-	at normally receives			•	-	outions. mem	bership fe	es, and gross
	•	_		rities related to its e					•	-	· -
		· ·		oss investment inco	•	=			* *		
				ganızatıon after June						•	
10	Г	•		ganized and operate	•			•	•		
11		_		ganized and operate						o carry ou	t the purposes of
	•			ly supported organiz							
				bes the type of supp							
	_			b Type II c							
е	ı	•	_	ox, I certify that the	_				, ,		•
			nan roundat n 509(a)(2)	ion managers and ot	ner than one	or more pub	oncry support	ed organiza	tions describe	ad in Secti	1011 509(a)(1) 01
f				received a written d	etermination	from the IR	S that it is a	Type I, Typ	e II, or Type	III suppo	rtıng organızatıon,
			this box								Γ
g				2006, has the organ	ızatıon accep	oted any gift	or contributi	on from any	of the		
			ng persons? erson who d	rectly or indirectly o	controls eith	er alone or t	ogether with	nersons de	scribed in (ii)		Yes No
				governing body of th	•		_	persons ac	5 cm 5 cu m (m)	_	1g(i)
				er of a person descr		_					lg(ii)
				lled entity of a perso			above?				g(iii)
h		• •		ng information about							.5()
							(-)				
() Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did you	ı notıfy	(vi) Is	the	(vii) A mount of
	uppo			organization	organizati		the organi		organizati		monetary
OI	ganiz	ation		(described on lines 1- 9 above	col (i) lis your gove		ın col (i) o suppor	•	col (i) orgain the U		support
				or IRC section	docume	_	Suppor	('	lii tile 0	5 '	
				(see		=					
				instructions))	Yes	No	Yes	No	Yes	No	\dashv
					163	140	1 63	140	163	140	
	1					+			1		

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

S	ection A. Public Support	•	,		, <u>, , , , , , , , , , , , , , , , , , </u>	•		
	endar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f)	Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	899,345	714,990	1,104,081	4,536,654	1,549,	310	8,804,380
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge)						
4 5	Total. Add lines 1 through 3 The portion of total contributions	899,345	714,990	1,104,081	4,536,654	1,549,	310	8,804,380
	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							218,841
6	(f) Public support. Subtract line 5 from line 4	n						8,585,539
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012		Total
7	A mounts from line 4	899,345	714,990	1,104,081	4,536,654	1,549,	310	8,804,380
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	155,417	79,237	60,264	112,385	37,	296	444,599
9	Net income from unrelated business activities, whether or not the business is regularly carried on		78	13,049				13,127
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	2,877	23,978	37,285	63,391	36,	029	163,560
11	Total support (Add lines 7 through 10)							9,425,666
12	Gross receipts from related activit	ies, etc (see inst	ructions)			12		
13	First five years. If the Form 990 is this box and stop here	<u> </u>	<u> </u>				ganızatıon, (check
	ection C. Computation of Pul							
14	Public support percentage for 201			11, column (f))		14	91	L 090 %
15	Public support percentage for 201	1 Schedule A, Par	t II, line 14			15	89	9 490 %
16a	33 1/3% support test— 2012 . If the				ne 14 is 33 1/3%	or more, chec	k this box	.
	and stop here. The organization qual 33 1/3% support test—2011. If the box and stop here. The organizatio 10%-facts-and-circumstances test is 10% or more, and if the organization me	organization did in qualifies as a pu — 2012. If the organic meets the "fa	not check a box of a	on line 13 or 16a, organization check a box on lir stances" test, che	ne 13, 16a, or 16 eck this box and s	b, and line 14 stop here. Exp	olaın	▶ ┌
b 18	organization 10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part IV how the organiza supported organization Private foundation. If the organiza	nization meets the ation meets the "fa	e "facts-and-circ acts-and-circum	umstances" test, stances" test Tho	check this box a e organization qu	nd stop here. alıfıes as a pu	blicly	►□
	instructions			,,,,,,,,				▶ □

Schedule A (Form 990 or 990-EZ) 2012 Page 3 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 Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,	 	
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012	Schedule A (Form 550 of 550 EZ) Zotz
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Page 4

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10
	Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See
	instructions).

Facts And Circumstances Test

Explanation

SCHEDULE A, PART IV, SUPPLEMENTAL INFORMATION ON APRIL 18, 2012, THE BOARD OF DIRECTORS OF PLANNED PARENTHOOD OF TEXAS CAPITAL REGION, INC (PPTCR) APPROVED A PLAN OF MERGER WHEREBY PPTCR MERGED WITH PLANNED PARENTHOOD OF NORTH TEXAS, INC (PPNT) AND PLANNED PARENTHOOD OF CENTRAL TEXAS (PPCT) TO FORM PLANNED PARENTHOOD OF GREATER TEXAS, EFFECTIVE AUGUST 31, 2012 SEE ATTACHMENT FOR CERTIFICATE OF MERGER FILED WITH THE TEXAS SECRETARY OF STATE

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493192005443

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Inspection

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 the organization **Employer identification number** PLANNED PARENTHOOD OF THE TEXAS CAPITAL REGION INC 74-1005756 Complete if the organization is exempt under section 501(c) or is a section 527 organization. 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). 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 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 Was a correction made? ☐ 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). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 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 Did the filing organization file Form 1120-POL for this year? Yes 4 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 **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l .)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	.000		
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

chedule e (i	01111 330 01 330 EZ/2012		raye
Part II-B	Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	NOT	
		(2)	(h)

_			a <i>)</i>		(0)	
ror e activ	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying rity.	Yes	No	/	Amour	nt
1	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					
а	Volunteers?	Yes				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes				
С	Media advertisements?	Yes				92
d	Mailings to members, legislators, or the public?		Νo			
е	Publications, or published or broadcast statements?	Yes				400
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes				8,000
i	O ther activities?		No			
j	Total Add lines 1c through 1i					8,492
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?		Νo			
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5),	or s	ectio	n
1	Were substantially all (90% or more) dues received nondeductible by members?			1	Yes	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				

- **b** Carryover from last year
- **c** Total
- 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
- 4 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?
- Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier	Return Reference	Explanation
PART IV, SUPPLEMENTAL INFORMATION		PART II-B PLANNED PARENTHOOD OF THE TEXAS CAPITAL REGION INCURRED EXPENSES FOR FACEBOOK ADS AND EMAILS FOOD, POSTERS, STAFF TIME AND MILEAGE EXPENSES WERE ALSO INCURRED FOR RALLIES/DEMONSTRATIONS

2b

2c

3

4

5

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493192005443

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Supplemental Financial Statements

Open to Public

temai i vevent	F Attacil to For	m 990. F See separate instructions.		Inspection
PLANNED I	the organization PARENTHOOD OF THE TEXAS		Emp	oloyer identification number
	EGION INC			1005756
Part I	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990	, Part IV, line 6.		·
		(a) Donor advised funds		(b) Funds and other accounts
	I number at end of year			
	regate contributions to (during year)			
	regate grants from (during year)			
	regate value at end of year			
	the organization inform all donors and donor advisors are the organization's property, subject to the or		nor advi	rsed √Yes √N
use	the organization inform all grantees, donors, and d d only for charitable purposes and not for the bene ferring impermissible private benefit?			
	Conservation Easements. Complete If	the organization answered "Ves" t	o Forn	<u> </u>
	pose(s) of conservation easements held by the orgonose(s) of conservation easements held by the orgonose(s) of land for public use (e.g., recreation protection of natural habitat Preservation of open space Inplete lines 2a through 2d if the organization held a	or education) Preservation of ar Preservation of a	certifie	ically important land area d historic structure n of a conservation
ease	ement on the last day of the tax year			Held at the End of the Year
a Tota	al number of conservation easements		2a	Heid at the End of the Year
	al acreage restricted by conservation easements		2b	
	nber of conservation easements on a certified histo	oric structure included in (a)	2c	
_	nber of conservation easements included in (c) acc	. ,		
hist	oric structure listed in the National Register		2d	
	nber of conservation easements modified, transferi tax year 🛌	ed, released, extinguished, or terminate	ea by tr	ie organization during
Num	nber of states where property subject to conservat	ion easement is located ▶		
	s the organization have a written policy regarding recement of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of	f violations, and Yes N
Staf ▶	f and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments d	during the year
, Amo	ount of expenses incurred in monitoring, inspecting	a. and enforcing conservation easement	s durino	g the vear
▶ \$,	,, <u>.</u>		5 ,
	s each conservation easement reported on line 2(section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 17	70(h)(4)(B)(ı)
bala	art XIII, describe how the organization reports co nce sheet, and include, if applicable, the text of th organization's accounting for conservation easeme	e footnote to the organization's financia		
art III	Organizations Maintaining Collection Complete if the organization answered "Y		or Otl	her Similar Assets.
work	e organization elected, as permitted under SFAS 1 ks of art, historical treasures, or other similar asse vice, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or rese	earch in furtherance of public
work	e organization elected, as permitted under SFAS 1 ks of art, historical treasures, or other similar asse vice, provide the following amounts relating to thes	ts held for public exhibition, education,		
(i) _F	Revenues included in Form 990, Part VIII, line 1			► \$
(ii)	Assets included in Form 990, Part X			► \$
2 Ifth	e organization received or held works of art, histor wing amounts required to be reported under SFAS			' -
a Rev	enues included in Form 990, Part VIII, line 1			⊩ \$

b Assets included in Form 990, Part X

Part	111 Organizations Maintaining Co	<u>llections of Art</u>	<u>:, His</u>	stori	<u>cal Tı</u>	<u>easur</u>	<u>es, or O</u>	<u>ther</u>	Similar As	ssets (c	ontinued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other recor	ds, cl	heck	any of	the follo	wing that a	ire a s	significant us	e of its	
а	Public exhibition		d	Γ	Loan	or excha	ange progr	ams			
b	Scholarly research		e	Г	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ıın hov	w the	y furthe	er the or	ganızatıon	's exe	empt purpose	ın	
5	During the year, did the organization solicit o	or receive donations	s of ar	rt, his	torical	treasure	es or othei	rsımı	lar		
	assets to be sold to raise funds rather than t									│ Yes	┌ No
Par	Part IV, line 9, or reported an an						answere	d "Ye	es" to Form	990, 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					itions or	other ass	ets n	ot	┌ Yes	┌ No
Ь	If "Yes," explain the arrangement in Part XII	I and complete the	follo	wing	table		_				
								_	Aı	mount	
с	Beginning balance							1c			
d	Additions during the year						<u> </u>	1d			
е	Distributions during the year						F	1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?	•						☐ Yes	☐ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has	been pro	vided in P	art X	III		Γ
Pa	tt V Endowment Funds. Complete										
4_	Degraping of week belongs	(a)Current year	(Ь)Prior	year	b (c) Two	o years back	(d)⊤	hree years back	(e) Four y	ears back
1a 	Beginning of year balance							<u> </u>			
b	Contributions							 		 	
С	Net investment earnings, gains, and losses							<u> </u>			
d	Grants or scholarships										
е	Other expenditures for facilities										
f	and programs										
g g	End of year balance							 		 	
_	Provide the estimated percentage of the curr	cont year and halan	co (lur	20.10	colum	n (a)) ho	old ac	<u> </u>			
2	Board designated or guasi-endowment	ent year end baran	ce (iii	ic ry	, coluii	iii (a)) iie	iu as				
a	•										
b	Permanent endowment ►										
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	atıon	that	are hel	d and ad	ministered	l for t	he	Yes	No
	(i) unrelated organizations								3a	(i) res	140
	(ii) related organizations									(ii)	
b	If "Yes" to 3a(II), are the related organization								3	ВЬ	
4	Describe in Part XIII the intended uses of th	ie organization's en	dowm	nent f	unds						
Par	t VI Land, Buildings, and Equipme	nt. See Form 99	0, Pa				14-26	1	(-) A		Dan Incombra
	Description of property				a) Cost (asis (inve	estment)	(b) Cost or basis (oth		(c) Accumula depreciatioi		Book value
1a	Land										
b	Buildings		•								
С	Leasehold improvements										
d	Equipment										
	Other										
Tota	l. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part .	X, colι	ımn (B), line	10(c).)					0

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1.	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		
	Form COO Dart V line	12
Part VIII Investments—Program Related. See		
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
	<u> </u>	
	+	
the contract of the contract o		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, line		
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
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Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
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Part IX Other Assets. See Form 990, Part X, lin (a) Descrip Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability	ne 15. ption .) c, line 25.	

	<u> </u>		
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	2,347,416
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	235,377
3	Subtract line 2e from line 1	3	2,112,039
4	Amounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)........... 4b		
С	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,112,039
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	2,171,623
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	16,712
3	Subtract line 2e from line 1	3	2,154,911
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	548,691
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	2,703,602

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		PLANNED PARENTHOOD ADOPTED FASB ASC 740-10, ACCOUNTING FOR UNCERTAINTY IN INCOME TAX THAT STANDARD PRESCRIBES A MINIMUM RECOGNITION THRESHOLD AND MEASUREMENT METHODOLOGY THAT A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN IS REQUIRED TO MEET BEFORE BEING RECOGNIZED IN THE FINANCIAL STATEMENTS IT ALSO PROVIDES GUIDANCE FOR DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURES, AND TRANSITION
PART XI, LINE 2D - OTHER ADJUSTMENTS		DIRECT EXPENSES OF FUNDRAISING EVENT 14,225
PART XII, LINE 2D - OTHER ADJUSTMENTS		DIRECT EXPENSES OF FUNDRAISING EVENT 14,225
PART XII, LINE 4B - OTHER ADJUSTMENTS		CLINIC FEES TO RELATED ORGANZIATION NOT INCLUDED IN CONSOLIDATED AUDIT 44,067 ASSISTANCE TO RELATED ORGANIZATIONS NOT INCLUDED IN CONSOLIDATED AUDIT 504,624

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DLN: 93493192005443

Employer identification number

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Open to Public Inspection

	NNED PARENTHOOD OF TH PITAL REGION INC	HE TEXAS				74-	-1005756	
Pa	rt I Fundraising Acti	i vities. Complete	ıf the or	ganızatı	on answered "Yes"	to Form 990	ງ, Part IV	, line 17.
a b c d	a						t grants nts trustees ervices?	F Yes F No ndraiser is
	(i) Name and address of ındıvıdual or entity (fundraıser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions?	(iv) Gross receipts from activity	(v) A mour (or retair fundraiser col	ned by) listed in	(vi) A mount paid to (or retained by) organization
ota	al			>				
3	List all states in which the o	organization is regist	ered or lid	censed to	solicit funds or has be	een notified it	is exempt	from registration or

Sche	dule	e G (Form 990 or 990-EZ) 2012				Page 2				
Pa	rt II	Fundraising Events. Commore than \$15,000 of fundraevents with gross receipts g	aising event contribution							
			(a) Event #1 PUBLIC AFFAIRS	(b) Event #2 COCKTAIL FOR A	(c) O ther events	(d) Total events (add col (a) through col (c))				
			DINNER (avent tune)	CAUSE	(total number)					
Ф			(event type)	(event type)						
E E	1	Gross receipts	226,743	59,100	1	285,843				
Revenue	2	Less Contributions	196,743	39,100	1	235,843				
	3	Gross income (line 1 minus line 2)	30,000	20,000		50,000				
	4	Cash prizes								
မှာ	5	Noncash prizes		106		106				
-ja	6	Rent/facility costs		3,425	;	3,425				
Expenses	7	Food and beverages .		5,393		5,393				
ŭ	8	Entertainment								
Direct	9	Other direct expenses .		5,301		5,301				
	10 Direct expense summary Add lines 4 through 9 in column (d)									
	10Direct expense summary Add lines 4 through 9 in column (d)									
Par	t II	I Gaming. Complete if the or	rganization answered "	'Yes" to Form 990. Pa	rt IV. line 19. or rep					
		\$15,000 on Form 990-EZ, lii	ne 6a.							
Revenue			(a) Bingo I	(b) Pull tabs/Instant pingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))				
<u>~</u>	1	Gross revenue								
enses	2	Cash prizes								
Xper .	3	Non-cash prizes								
Direct Exp	4	Rent/facility costs								
ă	5	Other direct expenses								
	6	Volunteer labor	Г Yes	Г Yes	┌ Yes	_				
	7	Direct expense summary Add line	s 2 through 5 in column (d	1)						
	8 Net gaming income summary Combine lines 1 and 7 in column (d)									
						•				
9 a		ter the state(s) in which the organiza the organization licensed to operate				. Fyes Fno				
b		'No," explain								
10a		re any of the organization's gaming								
		'Yes," explain			and survival 1 1 1	- I TES I NO				

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address 🟲			
.6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	\$ \$		
	Description of services provided	>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г _{Yes} Г _{No}
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
		activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

► Attach to Form 990

OMB No 1545-0047

DLN: 93493192005443

Inspection

Department of the Treasury Internal Revenue Service

PLANNED PARENTHOOD OF T	HE TEXAS					proyer recirc	
CAPITAL REGION INC						74-1005756	
Part I General Inform	nation on Grants	and Assistance					
Does the organization ma the selection criteria used	d to award the grants (orassıstance [,]					✓ Yes 「N
2 Describe in Part IV the or					Complete if the s	raanization answere	d "Voc" to
		Governments and receive					d res to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) PLANNED PARENTHOOD OF AUSTIN SURGICAL & SEXUAL HEALTH SRVCS INC 201 E BEN WHITE BLVD BLDG B AUSTIN,TX 78704	75-3192285	501(C)(3)	157,196				TO PROVIDE VARIOUS PROGRAM ASSISTANCE TO RELATED ORGANIZATION
(2) PLANNED PARENTHOOD OF AUSTIN FAMILY PLANNING INC 201 E BEN WHITE BLVD BLDG B AUSTIN,TX 78704	37-1515621	501(C)(3)	347,428				TO PROVIDE VARIOUS PROGRAM ASSISTANCE TO RELATED ORGANIZATION
2 Enter total number of sect	tion 501(c)(3) and go	vernment organizations	listed in the line 1 tabl	e		<u>.</u> ▶	2

Enter total number of other organizations listed in the line 1 table

Schedule I	(Form 990) 2012
	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 ALL DONATIONS WERE MADE TO RELATED ENTITIES IN SUPPORT OF THEIR MISSION

Schedule I (Form 990) 2012

DLN: 93493192005443

SCHEDULE N (Form 990 or 990-EZ)

Liquidation, Termination, Dissolution, or Significant Disposition of Assets

► Complete if the organization answered "Yes" to Form 990, Part IV, lines 31 or 32; or Form 990-EZ, line 36. ► Attach certified copies of any articles of dissolution, resolutions, or plans. ► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

PLANNED PARENTHOOD OF THE TEXAS CAPITAL REGION INC

Employer identification number

74-1005756

Part I Liquidation, Termination, or Dissolution. Complete this part if the organization answered "Yes" to Form 990, Part IV, line 31, or Form 990-EZ, line 36. Part I can be duplicated if additional space is needed.

1	(a)Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c)Fair market value of asset(s) distributed or amount of transaction expenses		(e)EIN of recipient	(f)Name and address of recipient	(g)IRC section of recipient(s) (if tax-exempt) or type of entity
CASH		08-31-2012	3,637,884		52-1243220	PLANNED PARENTHOOD OF GREATER TEXAS	501(C)(3)
						7424 GREENVILLE AVENUESTE 206 DALLAS,TX 75231	
INVEST	MENTS	08-31-2012	3,519,891	NYSE	52-1243220	PLANNED PARENTHOOD OF GREATER TEXAS	501(C)(3)
						7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	
ACCOU	NTS RECEIVABLES	08-31-2012	183,711	BOOK VALUE	52-1243220	PLANNED PARENTHOOD OF GREATER TEXAS	501(C)(3)
						7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	
MEDICA	AL SUPPLY INVENTORY	08-31-2012	27,720	COMPARABLE SALES	52-1243220	PLANNED PARENTHOOD OF GREATER TEXAS	501(C)(3)
						7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	
PREPAI	D EXPENSES AND OTHER ASSETS	08-31-2012	110,974	BOOK VALUE	52-1243220	PLANNED PARENTHOOD OF GREATER TEXAS	501(C)(3)
						7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	
LAND		08-31-2012	561,241	BOOKVALUE	52-1243220	PLANNED PARENTHOOD OF GREATER TEXAS	501(C)(3)
						7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	
BUILDI	NG AND IMPROVEMENTS	08-31-2012	4,450,557	BOOKVALUE	52-1243220	PLANNED PARENTHOOD OF GREATER TEXAS	501(C)(3)
						7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	
LEASEH	OLD IMPROVEMENTS	08-31-2012	49,484	BOOKVALUE	52-1243220	PLANNED PARENTHOOD OF GREATER TEXAS	501(C)(3)
						7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	
	IENT, FURNITURE & FIXTURES, HER FIXED ASSETS	08-31-2012	213,228	BOOK VALUE	52-1243220	PLANNED PARENTHOOD OF GREATER TEXAS	501(C)(3)
						7424 GREENVILLE AVENUE STE 206	
						DALLAS,TX 75231	
						<u> </u>	Vos No

2	Did or will any	officer, director,	, trustee, or key	employee of the	organızatıon

- Become a director or trustee of a successor or transferee organization? Become an employee of, or independent contractor for, a successor or transferee organization?
- Become a direct or indirect owner of a successor or transferee organization?
- Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution?
- If the organization answered "Yes" to any of the questions in this line, provide the name of the person involved and explain in Part III 🕨

Pa	Note. If the organization distributed all of equal -0-			m 990, Part X, column (B), line 16 (Total asset	s), and line 26 (Total liabilities), shou	ld	Yes	No	
3	Did the organization distribute its assets	ın accordance	with its governing instrur	ment(s)? If "No," describ	e in Part III		3	Yes		
4a	Is the organization required to notify the	attorney genera	al or other appropriate sta	ate official of its intent to	o dissolve, liquidate, or	terminate?	4a	Yes		
b	If "Yes," did the organization provide suc	h notice? .					4b	Yes		
5	5 Did the organization discharge or pay all of its liabilities in accordance with state laws?									
6a	6a Did the organization have any tax-exempt bonds outstanding during the year?									
b	Did the organization discharge or defease	e all of its tax-e	xempt bond liabilities dui	ring the tax year in acco	rdance with the Interna	al Revenue Code and state laws? .	6b			
c	If "Yes" to line 6b, describe in Part III he	ow the organiza	tion defeased or otherwis	e settled these liabilitie	s If "No," explain in Pa	rt III				
Pa	"Yes" to Form 990, Part IV, lin					ts. Complete this part if the orgar is needed.	nization	answe	red	
1	(a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses			(f) Name and address of recipient	of reci	RC section ipient(s) mpt) or f f entity	(ıf	
_										
2 a	Did or will any officer, director, trustee, o Become a director or trustee of a succes		-				2a	Yes	No	
ь	Become an employee of, or independent		•	organization?			2b			
c	Become a direct or indirect owner of a su	· ·					. 2c			
d	Receive, or become entitled to, compens		-		significant disposition (ofassets?	. 2d			
е	If the organization answered "Yes" to any			-	=					

Supplemental Information. Complete to provide the information required by Part I, lines 2e and 6c, and Part II, line 2e. Also complete this part to provide any additional information.

	tare array and arrangement transcriber	
Identifier	Return Reference	Explanation
		PART I, LINE 2E BOARD MEMBERS J BOHAR, L CHO, M DEALEY, M EARLEY, A FREEDMAN, C MARTIN, AND B MILLSOFFICERS P SMALLWOOD AND S WHEAT
		PART I, LINE 2E THE ABOVE BOARD MEMBERS OF PLANNED PARENTHOOD OF TEXAS CAPITAL REGION BECAME BOARD MEMBERS OF PLANNED PARENTHOOD OF GREATER TEXAS AFTER THE MERGER THE ABOVE OFFICERS OF PLANNED PARENTHOOD OF TEXAS CAPITAL REGION BECAME EMPLOYEES OF PLANNED PARENTHOOD OF GREATER TEXAS AFTER THE MERGER

Schedule N (Form 990 or 990-EZ) (2012)

Software ID: Software Version:

EIN: 74-1005756

Name: PLANNED PARENTHOOD OF THE TEXAS

CAPITAL REGION INC

Form 990, Schedule N, Part I - Liquidation, Termination or Dissolution

Form 990, Schedule N, Part I - Liquit	Jacion, Term	illiation of Dissolu	1011			()TD 0 0 1
1 (a)Description of asset(s) distributedor transactional expenses paid	(b)Date of distribution			(e)Ein of recipient	(f)Name and address of recipient	(g)IRC Code section recipient(s) (if tax-exempt) or type of entity
CASH	08-31-2012	3,637,884		52-1243220	PLANNED PARENTHOOD OF GREATER TEXAS	501(C)(3)
					7424 GREENVILLE AVENUESTE 206 DALLAS,TX 75231	
INVESTMENTS	08-31-2012	3,519,891	NYSE	52-1243220		501(C)(3)
1					7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	
ACCOUNTS RECEIVABLES	08-31-2012	183,711	BOOK VALUE	52-1243220	PLANNED PARENTHOOD OF GREATER TEXAS	501(C)(3)
					7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	
MEDICAL SUPPLY INVENTORY	08-31-2012	27,720	COMPARABLE SALES	52-1243220	PLANNED PARENTHOOD OF GREATER TEXAS	501(C)(3)
					7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	
PREPAID EXPENSES AND OTHER ASSETS	08-31-2012	110,974	BOOK VALUE	52-1243220		501(C)(3)
					7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	
LAND	08-31-2012	561,241	BOOK VALUE	52-1243220	PLANNED PARENTHOOD OF GREATER TEXAS	501(C)(3)
					7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	
BUILDING AND IMPROVEMENTS	08-31-2012	4,450,557	BOOK VALUE	52-1243220		501(C)(3)
					7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	
LEASEHOLD IMPROVEMENTS	08-31-2012	49,484	BOOK VALUE	52-1243220		501(C)(3)
					7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	
EQUIPMENT, FURNITURE & FIXTURES, AND OTHER FIXED ASSETS	08-31-2012	213,228	BOOK VALUE	52-1243220		501(C)(3)
					7424 GREENVILLE AVENUE STE 206 DALLAS,TX 75231	

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

2012

Open to Public Inspection

Name of the organization PLANNED PARENTHOOD OF THE TEXAS CAPITAL REGION INC **Employer identification number**

74-1005756

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	DRAFT 990S ARE EMAILED TO ALL BOARD MEMBERS WITH A COMMENT PERIOD THE FINAL 990 IS EMAILED TO ALL BOARD MEMBERS IMMEDIATELY (WITHIN 24 HOURS) UPON RECEIPT FROM THE PREPARER
	FORM 990, PART VI, SECTION B, LINE 12C	ALL BOARD MEMBERS COMPLETE AN ANNUAL QUESTIONNAIRE INDICATING ANY BUSINESS RELATIONSHIPS WITH THE ORGANIZATION QUESTIONNAIRES ARE REVIEWED BY THE PRESIDENT AND CEO FOR COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY THE BOARD IS MADE AWARE THAT ANY CHANGES TO THEIR RESPONSES WITHIN THE YEAR SHOULD BE IMMEDIATELY BROUGHT TO THE ATTENTION OF THE PRESIDENT AND CEO
	FORM 990, PART VI, SECTION B, LINE 15	A THOROUGH CEO PERFORMANCE EVALUATION IS PREPARED BY THE EXECUTIVE COMMITTEE OF THE BOARD ANNUALLY AT THAT TIME, A SURVEY OF CEO COMPENSATION IS PERFORMED BY THE HUMAN RESOURCES DIRECTOR, USING DATA FROM THE PPFA SALARY SURVEY, LOCAL MARKET DATA AND NATIONWIDE NON-PROFIT DATA THIS DATA IS BROUGHT TO THE BOARD, CHANGES IN EXECUTIVE COMPENSATION ARE INFLUENCED BY THE ANNUAL PERFORMANCE EVALUATION, AND ARE KEPT IN RANGE OF MARKET COMPARISONS
	FORM 990, PART VI, SECTION C, LINE 19	CERTAIN DOCUMENTS ARE AVAILABLE UPON WRITTEN REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	TRANSFER OF NET ASSETS TO SURVIVING ORGANIZATION OF MERGER -11,995,883
AUDIT COMMITTEE	FORM 990, PART XII, LINE 2C	THE OVERSIGHT POLICIES AND SELECTION OF AN INDEPENDENT ACCOUNTANT BY THE AUDIT COMMITTEE HAS NOT CHANGED SINCE PRIOR YEAR
	FORM 990, PART XI, LINE 9	ASSETS TRANSFERRED TO PLANNED PARENTHOOD OF GREATER TEXAS (EIN 52-1243220) 12,754,690 LIABILITIES ASSUMED BY PLANNED PARENTHOOD OF GREATER TEXAS (EIN 52-1243220) \$758,807 NET ASSETS TRANSFERRED TO PLANNED PARENTHOOD OF GREATER TEXAS (EIN 52-1243220) \$11,995,883

DLN: 93493192005443

OMB No 1545-0047

2012

Open to Public Inspection

SCHEDULE R (Form 990)

Department of the Treasury

Related Organizations and Unrelated Partnerships ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Internal Revenue Service Name of the organization PLANNED PARENTHOOD OF THE TEXAS CAPITAL REGION INC

Employer identification number

74-1005756

(a)	(b)	(c)	(d)	IV, line 33.)	(f)		
Name, address, and EIN (If applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income En	d-of-year assets	Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during		he organization ar	nswered "Yes" to	Form 990, P	Part IV, line 34 because	ıt had o	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sectio	n Public charity (if section 501	(f) Direct controlling (c)(3)) entity	Section (13) co	
(1) PLANNED PARENTHOOD OF AUSTIN SURGICAL & SEXUAL HEALTH SRVCS INC	REPRODUCTIVE HEALTHCARE SERVICES	TX	501(C)(3)	LINE 9		Yes Yes	No
201 E BEN WHITE BLVD BLDG B					N/A		
AUSTIN, TX 78704 75-3192285					N/A		
AUSTIN, TX 78704 75-3192285 (2) PLANNED PARENTHOOD OF AUSTIN FAMILY PLANNING INC	REPRODUCTIVE HEALTHCARE AND EDUCATION	TX	501(C)(3)	LINE 9	N/A	Yes	
AUSTIN, TX 78704 75-3192285 (2) PLANNED PARENTHOOD OF AUSTIN FAMILY PLANNING INC 201 E BEN WHITE BLVD BLDG B AUSTIN, TX 78704		TX	501(C)(3)	LINE 9	N/A	Yes	
AUSTIN, TX 78704 75-3192285 (2) PLANNED PARENTHOOD OF AUSTIN FAMILY PLANNING INC 201 E BEN WHITE BLVD BLDG B		TX	501(C)(3)	LINE 9		Yes	
AUSTIN, TX 78704 75-3192285 (2) PLANNED PARENTHOOD OF AUSTIN FAMILY PLANNING INC 201 E BEN WHITE BLVD BLDG B AUSTIN, TX 78704		TX	501(C)(3)	LINE 9		Yes	
AUSTIN, TX 78704 75-3192285 (2) PLANNED PARENTHOOD OF AUSTIN FAMILY PLANNING INC 201 E BEN WHITE BLVD BLDG B AUSTIN, TX 78704		TX	501(C)(3)	LINE 9		Yes	
AUSTIN, TX 78704 75-3192285 (2) PLANNED PARENTHOOD OF AUSTIN FAMILY PLANNING INC 201 E BEN WHITE BLVD BLDG B AUSTIN, TX 78704		TX	501(C)(3)	LINE 9		Yes	
AUSTIN, TX 78704 75-3192285 (2) PLANNED PARENTHOOD OF AUSTIN FAMILY PLANNING INC 201 E BEN WHITE BLVD BLDG B AUSTIN, TX 78704		TX	501(C)(3)	LINE 9		Yes	

(a) Name, address, and EIN of related organization		(b) Primary activity	domicile co	(d) Direct controlling entity	t Predominai ling income(relat	total income om r	(g) Share of e end-of-year assets	(h) Disproprtiona r allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	aging ner?	(k) Percentag ownershi	2.
					<u> </u>			Yes	No		Yes	No		
														-
														-
														_
														_
	d Organizations Taxable a or more related organization							swere	ed "Ye	s" to Form	990,	Part	IV,	•
(a) Name, address, and EIN of related organization	(b) Primary activity	(c Leg dom (state or coun	al Icile foreign	Dire	(d) ect controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of tota Income		(g) are of er of-year assets		ıtage		(i) Section 512 (b)(13) controlled entity?	_
(1) PLANNED PARENTHOOD OF THE TEXAS CAPITAL REGION ACTION FUND 201 E BEN WHITE BLVD BLDG B AUSTIN, TX 78704 74-2864272	PROMOTE SOCIAL WELFARE PURPOSES OF REPRODUCTIVE HEALTH CARE & CHOICE	Т	×			С							Yes No	_
														-
														-
					I			- 1						

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule						No	
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more rel	ated organizations li	sted in Parts II-IV?					
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No	
b	Gift, grant, or capital contribution to related organization(s)							
c	Gift, grant, or capital contribution from related organization(s)							
d	Loans or loan guarantees to or for related organization(s)							
е	e Loans or loan guarantees by related organization(s)							
f	Dividends from related organization(s)				1f		No	
g	Sale of assets to related organization(s)				1g		No	
h	Purchase of assets from related organization(s)				1h		No	
i	Exchange of assets with related organization(s)				1 i		No	
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	Yes		
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No	
1	Performance of services or membership or fundraising solicitations for related organization(s)				11		No	
m	m Performance of services or membership or fundraising solicitations by related organization(s)							
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No	
0	Sharing of paid employees with related organization(s)				10	Yes		
р	Reimbursement paid to related organization(s) for expenses				1 p		No	
q	Reimbursement paid by related organization(s) for expenses				1q	Yes		
r	Other transfer of cash or property to related organization(s)				1r		No	
s	Other transfer of cash or property from related organization(s)				1s		No	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete							
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount ir	nvolved		
ee A	Iditional Data Table							

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

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or	(d) Predominant income (related, unrelated, excluded from tax under section 512-	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
]	
										I.	ı		

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Software ID: Software Version:

EIN: 74-1005756

Name: PLANNED PARENTHOOD OF THE TEXAS

CAPITAL REGION INC

--> Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-s)	(c) A mount I nvolved	(d) Method of determining amount involved
PLANNED PARENTHOOD OF AUSTIN FAMILY PLANNING INC	В	347,428	FMV
PLANNED PARENTHOOD OF AUSTIN FAMILY PLANNING INC	J	11,675	FMV
PLANNED PARENTHOOD OF AUSTIN FAMILY PLANNING INC	М	7,474	FMV
PLANNED PARENTHOOD OF AUSTIN SURGICAL & SEXUAL HEALTH SERVICES INC	М	36,593	FMV
PLANNED PARENTHOOD OF AUSTIN SURGICAL & SEXUAL HEALTH SERVICES INC	В	157,196	FMV
PLANNED PARENTHOOD OF AUSTIN SURGICAL & SEXUAL HEALTH SERVICES INC	J	75,200	FMV
PLANNED PARENTHOOD OF AUSTIN SURGICAL & SEXUAL HEALTH SERVICES INC	0	1,363,884	FMV
PLANNED PARENTHOOD OF AUSTIN SURGICAL & SEXUAL HEALTH SERVICES INC	Q	122,174	FMV



Office of the Secretary of State

CERTIFICATE OF FILING OF

Planned Parenthood of Greater Texas 58507801

[formerly: PLANNED PARENTHOOD OF NORTH TEXAS, INC.]

The undersigned, as Secretary of State of Texas, hereby certifies that a Restated Certificate of Formation for the above named domestic nonprofit corporation has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

Dated: 07/20/2012

Effective: 08/31/2012

Phone: (512) 463-5555

Prepared by: Lisa Sartin

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Hope Andrade Secretary of State

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101 2 0 2012

Corporations Section

RESTATED CERTIFICATE OF FORMATION WITH NEW AMENDMENTS

OF

PLANNED PARENTHOOD OF NORTH TEXAS, INC.

I, the undersigned officer of Planned Parenthood of North Texas, Inc. (the "Corporation"), acting pursuant to the Texas Business Organizations Code (the "TBOC"), hereby adopt the following Restated Certificate of Formation with New Amendments for the Corporation to be effective as of August 31, 2012.

ARTICLE I ENTITY INFORMATION

The name of the Corporation is Planned Parenthood of North Texas, Inc. The Corporation is a Texas nonprofit corporation. The filing number for the Corporation is 58507801. The date of formation of the Corporation is November 10, 1981.

ARTICLE II AMENDMENTS TO CERTIFICATE

This restated certificate of formation makes new amendments to the certificate of formation. Provided below is an identification by reference or description of each of the added, altered or deleted provisions.

The name of the Corporation has been amended to "Planned Parenthood of Greater Texas,"

Former Article Seven (stating that the Corporation has no members) has been renumbered as Article Four.

Former Article Four(1) (regarding the purpose of the Corporation) has been renumbered as Article Five, and has been amended to make clear that the Corporation's maintenance and application of certain funds was an example rather than a limitation on its permitted purposes.

Article Six(1) has been added.

A portion of former Article Four(2) (regarding private inurement) has been carried over into the new Article Six(2), and has been expanded. The remainder of former Article Four(2) (regarding lobbying) has been carried over into the new Article Six(3)(c) and (3)(d).

Former Article Four(3) (regarding generally prohibited activities) has been carried over into the new Article Six(3).

Article Seven has been added.

Former Article Five (regarding registered office and agent) has been renumbered as Article Eight, and has been amended to update the Corporation's registered office and agent.

Former Article Six (regarding the Board of Directors of the Corporation) has been renumbered as Article Nine, and has been amended to update information on the Board of Directors.

Former Article Eight (regarding bylaws) has been renumbered as Article Ten and has been amended to reflect that bylaws for the Corporation previously have been adopted.

Former Article Nine (regarding dissolution) has been renumbered as Article Eleven and has been amended to provide for the distribution of assets on dissolution in the event there are no suitable organizations engaged in activities substantially similar to the Corporation to which the Corporation's assets can be contributed.

Former Article Ten (regarding incorporators) has been deleted.

Provisions regarding action by written consent, limitation of liability of Directors, and indemnification of Directors and officers have been added as new Articles Twelve, Thirteen and Fourteen.

ARTICLE III STATEMENT OF APPROVAL

Each new amendment has been made in accordance with the provisions of the TBOC. The amendments to the certificate of formation and the restated certificate of formation have been approved in the manner required by the TBOC and by the governing documents of the Corporation.

ARTICLE IV REQUIRED STATEMENTS

The restated certificate of formation, which is attached hereto as <u>Exhibit A</u>, accurately states the text of the certificate of formation being restated and each amendment to the certificate of formation being restated that is in effect, and as further amended by the restated certificate of formation. The attached restated certificate of formation does not contain any other change in the certificate of formation being restated except for the information permitted to be omitted by the provisions of the TBOC applicable to the Corporation.

IN WITNESS WHEREOF, I have executed this Restated Certificate of Formation July 17, 2012.

Name: Leslie MacLean

Title: Chair, Board of Directors

EXHIBIT A

AMENDED AND RESTATED CERTIFICATE OF FORMATION

OF

PLANNED PARENTHOOD OF GREATER TEXAS, INC.

ARTICLE ONE NAME

The name of the filing entity being formed is: Planned Parenthood of Greater Texas (the "Corporation").

ARTICLE TWO TYPE OF ENTITY

The Corporation is a non-profit corporation.

ARTICLE THREE DURATION

The period of the Corporation's duration is perpetual.

ARTICLE FOUR MEMBERSHIP

The Corporation shall not have members.

ARTICLE FIVE PURPOSES

The Corporation is organized exclusively for religious, charitable, scientific, literary or educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code"), including without limitation to receive and maintain a fund or funds of real or personal property, or both, and, subject to the restrictions and limitations hereinafter set forth, to use and apply the whole or any part of the income therefrom and the principal thereof exclusively for religious, charitable, scientific, literary or educational purposes either directly or by contributions to or organizations that qualify as exempt organizations under Section 501(c)(3) of the Code and the related regulations, rulings, and procedures promulgated thereunder as may be in effect from time to time, and that are exempt from taxation under Section 501(a) of the Code.

ARTICLE SIX RESTRICTIONS AND REQUIREMENTS

1. <u>General Restriction</u>. Notwithstanding any other statements to the contrary, the Corporation shall not engage in any activities or exercise any powers that are not in furtherance of its primary purposes as set forth in this Certificate of Formation (this "Certificate"). The

Corporation may not take any action prohibited to be taken by a Texas nonprofit corporation under the Texas Business Organizations Code, as amended (the "TBOC").

- 2. No Private Inurement. The Corporation is not organized nor shall it be operated for the primary purpose of generating pecuniary gain or profit. The Corporation may not pay dividends or other corporate income to its Directors or officers, or otherwise accrue distributable profits, or permit the realization of private gain. No part of the net earnings of the Corporation shall inure to the benefit of any Director of the Corporation, officer of the Corporation, or any private individual, (except that reasonable compensation may be paid for services rendered to or for the Corporation effecting one or more of its purposes), and no Director or officer of the Corporation, or any private individual, shall be entitled to share in the distribution of any of the corporate assets on dissolution of the Corporation.
- 3. <u>501(c)(3) Limitations</u>. Notwithstanding any other provision of this Certificate, the Corporation may not take action that would be inconsistent with the requirements for tax exemption under Section 501(c)(3) of the Code and related regulations, rulings, and procedures promulgated thereunder an in effect from time to time. Regardless of any other provision in this Certificate or state law, the Corporation may not:
- (a) engage in activities or use its assets in manners that do not further one or more exempt purposes, as set forth in this Certificate and defined by the Code, except to an insubstantial degree;
- (b) service a private interest other than one clearly incidental to an overriding public interest;
- (c) devote more than an insubstantial part of its activities to attempting to influence legislation by propaganda or otherwise, except as provided by the Code and related regulations, rulings, and procedures;
- (d) participate in or intervene in (including publishing or distributing statements and any other direct or indirect campaign activities) any political campaign on behalf of any candidate for public office;
- (e) have objectives characterizing it as an "action organization" as defined by the Code and related regulations, rulings, and procedures; or
- (f) distribute its assets on dissolution other than for one or more exempt purposes.

ARTICLE SEVEN POWERS

Except as this Certificate otherwise provides, the Corporation has all the powers provided in the TBOC for Texas nonprofit corporations. Moreover, the Corporation has all implied powers necessary and proper to carry out its express powers. The Corporation may reasonably compensate Directors or officers for services rendered to or for the Corporation in furtherance of one or more of its purposes.

ARTICLE EIGHT REGISTERED OFFICE AND AGENT FOR PROCESS

The street address of the Corporation's current registered office is 7424 Greenville Avenue, Suite 206, Dallas, Texas 75231 and the name of its registered agent at such address is Kenneth S. Lambrecht.

ARTICLE NINE BOARD OF DIRECTORS

The direction and management of the affairs of the Corporation and the control and disposition of its properties and funds shall be vested in a Board of Directors (the "Directors") composed of such number of persons (not less than three) as may be fixed by the bylaws. Until changed by the bylaws the original number of Directors shall be thirteen. The Directors shall continue to serve until their successors are selected in the manner provided in the bylaws of the Corporation. The names and addresses of the persons who shall serve as the initial Directors of the Corporation until their successors are duly elected and qualified are as follows:

-	
<u>NAME</u>	ADDRESS
Alex Albright	7424 Greenville Avenue, Suite 206 Dallas, Texas 75231
Laura Scanlan Cho	7424 Greenville Avenue, Suite 206 Dallas, Texas 75231
Leslie MacLean	7424 Greenville Avenue, Suite 206 Dallas, Texas 75231
Michele Valdez	7424 Greenville Avenue, Suite 206 Dallas, Texas 75231
Lisa Kraus	7424 Greenville Avenue, Suite 206 Dallas, Texas 75231
Kris Olson	7424 Greenville Avenue, Suite 206 Dallas, Texas 75231

LaRaine Dupuy

ARTICLE TEN BYLAWS

7424 Greenville Avenue, Suite 206

Dallas, Texas 75231

Bylaws for the Corporation previously were adopted by the Board of Directors. The power to alter, amend or repeal the bylaws or adopt new bylaws shall be vested in the Board of Directors.

ARTICLE ELEVEN DISSOLUTION

In the event of the dissolution of the Corporation or the winding up of its affairs, the assets of the Corporation and rights thereto shall not be transferred to private ownership, but shall be distributed exclusively to religious, charitable, scientific, literary or educational organizations in the State of Texas which would then qualify under the provisions of Section 501(c)(3) of the Code, which are exempt from federal income taxation under Section 50l(a) of the Code or corresponding provisions hereafter in effect, and which are engaged in activities substantially similar to those of the Corporation carried out in furtherance of the purposes specified in Article Five hereof.

Any such assets not so disposed of shall be disposed of by the District Court of the county in which the principal office of the Corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

ARTICLE TWELVE ACTION BY LESS THAN UNANIMOUS WRITTEN CONSENT

An action required to be taken at a meeting of the Corporation's Directors or an action that may be taken at a meeting of the Board of Directors or a committee may be taken without a meeting if a written consent, stating the action to be taken, is signed by the number of Directors or committee members necessary to take that action at a meeting at which all of the Directors or committee members are present and voting. The consent must state the date of each Director's or committee member's signature.

ARTICLE THIRTEEN INDEMNIFICATION

To the extent permitted by the Texas Business Organizations Code, the Corporation shall authorize the Corporation to indemnify any present or former Director or officer of the Corporation against judgments, penalties (including excise and similar taxes), fines, settlements and reasonable expenses actually incurred by the person in connection with a proceeding in which the person was, is or is threatened to be made a named defendant or respondent because the person is or was a Director or officer of the Corporation.

ARTICLE FOURTEEN EXEMPTION OF DIRECTORS FROM LIABILITY

A Director of the Corporation shall not be personally liable to the Corporation for monetary damages for an act or omission in the Director's capacity as a Director, except to the extent that any applicable law may prevent such Director from being relieved of such personal liability. Any repeal or modification of this Article shall be prospective only and shall not adversely affect any limitation of the personal liability of a Director of the Corporation existing at the time of such repeal or modification.

IN WITNESS WHEREOF, I have executed this Amended and Restated Certificate of Formation to be effective as of August 31, 2012.

Name: Leslie MacLean

Title: Chair, Board of Directors



Office of the Secretary of State

CERTIFICATE OF MERGER

The undersigned, as Secretary of State of Texas, hereby certifies that a filing instrument merging

PLANNED PARENTHOOD OF THE TEXAS CAPITAL REGION, INC. Domestic Nonprofit Corporation

[File Number: 7357501]

PLANNED PARENTHOOD OF CENTRAL TEXAS

Domestic Nonprofit Corporation [File Number: 7957501]

Into

PLANNED PARENTHOOD OF NORTH TEXAS, INC.

Domestic Nonprofit Corporation [File Number: 58507801]

has been received in this office and has been found to conform to law.

Accordingly, the undersigned, as Secretary of State, and by the virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing the acceptance and filing of the merger on the date shown below.

Dated: 07/20/2012

Phone: (512) 463-5555

Prepared by Lisa Sartin

Effective: 08/31/2012



Hope Andrade Secretary of State

on Amil

FILED
In the Office of the
Secretary of State of Texas

CERTIFICATE OF MERGER OF

PLANNED PARENTHOOD OF CENTRAL TEXAS,

a Texas nonprofit corporation

Corporations Section

JUL 2 0 2012

AND

PLANNED PARENTHOOD OF THE TEXAS CAPITAL REGION, INC.,

a Texas nonprofit corporation

WITH AND INTO

PLANNED PARENTHOOD OF NORTH TEXAS, INC.,

a Texas nonprofit corporation

Pursuant to the provisions of Chapter 10 of the Texas Business Organizations Code ("TBOC"), the undersigned entities, Planned Parenthood of Central Texas, a Texas nonprofit corporation ("PP-CT"), Planned Parenthood of the Texas Capital Region, Inc., a Texas nonprofit corporation ("PP-TCR"), and Planned Parenthood of North Texas, Inc., a Texas nonprofit corporation ("PP-NT"), adopt the following Certificate of Merger (the "Certificate") for the purpose of effecting a merger of PP-CT and PP-TCR with and into PP-NT in accordance with the provisions of Chapter 10 of the TBOC.

1. Parties to the Merger.

- (a) <u>PP-CT</u>. PP-CT is a Texas nonprofit corporation. The file number for PP-CT is 7957501. PP-CT's principal place of business is 1121 Ross Avenue, Waco, Texas 76703. PP-CT will not survive the merger.
- (b) <u>PP-TCR</u>. PP-TCR is a Texas nonprofit corporation. The file number for PP-TCR is 7357501. PP-TCR's principal place of business is 201 East Ben White Boulevard, Building B, Austin, Texas 78704. PP-TCR will not survive the merger.
- (c) <u>PP-NT</u>. PP-NT is a Texas nonprofit corporation. The file number for PP-NT is 58507801. PP-NT principal place of business is 7424 Greenville Avenue, Suite 206, Dallas, Texas 75231. PP-NT will survive the merger.
- 2. <u>Plan of Merger</u>. The Plan of Merger adopted in accordance with the provisions of Section 10.001 of the TBOC providing for the merger of PP-CT and PP-TCR with and into PP-NT, resulting in the PP-NT being the surviving entity in the merger, is attached hereto as <u>Exhibit</u> <u>A</u> and is hereby incorporated herein by reference (the "Plan of Merger").

3. Approval of Plan of Merger.

(a) <u>Member Approval Not Required</u>. Each of PP-CT and PP-NT has no members. Consequently, the Plan of Merger was approved by the boards of directors or trustees of each of them, and the approval of the members of each of them was not required.

- Member Approval. PP-TCR has members with voting rights. The Plan of Merger was approved by the board of directors of PP-TCR and by the members of PP-TCR by the vote required by Section 22.164 of the TBOC.
- Approved in Accordance with Law and Governing Documents. The Plan (c) of Merger has been approved as required by Sections 10.001 and 22.251(b) of the TBOC and by the governing documents of each of PP-CT, PP-TCR and PP-NT.
- Effectiveness of Filing. This document becomes effective on a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is August 31, 2012.

IN WITNESS WHEREOF, this Certif 2012.	icate of Merger has been executed as of July
PP-CT	PP-NT
Planned Parenthood of Central Texas	Planned Parenthood of North Texas, Inc.
By:	By: Wilhel
Name: David Dickson	Name: Leslie MacLean
Title: Chair, Board of Directors	Title: Chair, Board of Directors
PP-TCR	
Planned Parenthood of the Texas Capital Region, Inc.	
Ву:	
Name: Laura Scanlan Cho	
Title: Chair, Board of Directors	

- (b) <u>Member Approval</u>. PP-TCR has members with voting rights Th Merger was approved by the board of directors of PP-TCR and by the members of PP the vote required by Section 22.164 of the TBOC.
- (c) <u>Approved in Accordance with Law and Governing Documents.</u> of Merger has been approved as required by Sections 10 001 and 22.251(b) of the TBO the governing documents of each of PP-CT, PP-TCR and PP-NT.
- 4. <u>Effectiveness of Filing.</u> This document becomes effective on a later da is not more than ninety (90) days from the date of signing. The delayed effective date 31, 2012.

IN WITNESS WHEREOF, this Certificate of Merger has been executed as of 2012.

PP-CT	PP-NT
Planned Parenthood of Central Texas	Planned Parenthood of North Texas
Ву:	By:
Name: David Dickson	Name. Leslie MacLean
Title: Chair, Board of Directors	Title: Chair, Board of Directors

PP-TCR

Planned Parenthood of the Texas Capital Region, Inc.

By: Mame: Laura Scanlan Cho

Title: Chair, Board of Directors

- Member Approval. PP-TCR has members with voting rights. The Plan of (b) Merger was approved by the board of directors of PP-TCR and by the members of PP-TCR by the vote required by Section 22.164 of the TBOC.
- Approved in Accordance with Law and Governing Documents. The Plan of Merger has been approved as required by Sections 10.001 and 22.251(b) of the TBOC and by the governing documents of each of PP-CT, PP-TCR and PP-NT.
- Effectiveness of Filing. This document becomes effective on a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is August 31, 2012.

IN WITNESS WHEREOF this Certificate of Merger has been executed as of July 17,

2012.	icate of Merger has been executed as of July
PP-CT	PP-NT
Planned Parenthood of Central Texas	Planned Parenthood of North Texas, Inc.
Name:/David Dickson	By: Name: Leslie MacLean
Title: Chair, Board of Directors	Title: Chair, Board of Directors
PP-TCR	
Planned Parenthood of the Texas Capital Region, Inc.	
Ву:	
Name: Laura Scanlan Cho	
Title: Chair, Board of Directors	

EXHIBIT A PLAN OF MERGER

PLAN OF MERGER

THIS PLAN OF MERGER (this "Plan"), dated as of August 31, 2012 (the "Effective Date"), is entered into by Planned Parenthood of Central Texas, a Texas nonprofit corporation ("PP-CT"), Planned Parenthood of the Texas Capital Region, Inc., a Texas nonprofit corporation ("PP-TCR"), and Planned Parenthood of North Texas, Inc., a Texas nonprofit corporation ("PP-NT").

RECITAL

The parties hereto have determined that the merger of PP-CT and PP-TCR with and into PP-NT is desirable and in their mutual best interests.

AGREEMENT

NOW, THEREFORE, in consideration of the foregoing Recital and the mutual covenants, agreements, representations and warranties herein contained, and intending to be legally bound hereby, the PP-CT, PPTCR and PPNT hereby agree as follows:

- 1. <u>The Merger</u>. On acceptance of the Certificate of Merger (the "Certificate") by the Texas Secretary of State, and on the terms and subject to the conditions set forth in this Plan, PP-CT and PP-TCR shall be merged with and into PP-NT (the "Merger"), PP-NT shall continue its nonprofit corporation existence under the Texas Business Organizations Code (such Code and any successor thereto, as amended, the "TBOC") as the surviving entity in the Merger, and the separate existence of PP-CT and PP-TCR shall cease.
- 2. <u>Effects of the Merger</u>. The Merger shall have the effects set forth in the applicable provisions of the TBOC. Without limiting the generality of the foregoing, and subject thereto, at the time of the Merger, all the real estate and other properties, rights, privileges, powers, and franchises of PP-CT and PP-TCR shall vest in PP-NT, without any transfer or assignment having occurred, and all debts, liabilities, obligations and duties of PP-CT and PP-TCR shall become the debts, liabilities, obligations and duties of PP-NT.
- 3. <u>Conversion of Ownership Interests</u>. PP-CT is a non-member nonprofit corporation. The members of PP-TCR are the same individuals that serve as the board of directors of PP-TCR. Consequently, such membership interests shall be cancelled by operation of the Merger, and there are no remaining membership or ownership interests required to be converted as part of the Merger.
- 4. <u>Agreement Regarding Restricted Gifts</u>. PP-NT agrees that any restricted gifts held by or for the benefit of PP-NT, PP-CT or PPTCR prior to the Merger shall continue to be held subsequent to the Merger subject to the pre-existing restrictions, and PP-NT agrees to use such restricted gifts strictly in accordance with such restrictions.
- 5. <u>Taking of Necessary Action</u>. Each of the parties hereto shall use its best efforts to take all such action as may be necessary or appropriate in order to effectuate the Merger under the TBOC.

EXECUTED to be effective as of the Effective Date.

PP-CT	PP-NT
Planned Parenthood of Central Texas	Planned Parenthood of North Texas, Inc.
By: Name: David Dickson Title: Chair, Board of Directors PP-TCR Planned Parenthood of the Texas Capital Region, Inc.	By: Name: Leslie MacLean Title: Chair, Board of Directors
By: Name: Laura Scanlan Cho Title: Chair, Board of Directors	

EXECUTED to be effective as of the Effective Date.

PP-CT	PP-NT
Planned Parenthood of Central Texas	Planned Parenthood of North Texas, Inc.
By: Name: David Dickson Title: Chair, Board of Directors	By: Name: Leslie MacLean Title: Chair, Board of Directors
PP-TCR	
Planned Parenthood of the Texas Capital Region, Inc.	
Ву:	
Name: Laura Scanlan Cho	
Fitle: Chair Board of Directors	

EXECUTED to be effective as of the Effective Date.

PP-CT	PP-NT
Planned Parenthood of Central Texas	Planned Parenthood of North Texas,
By: Name: David Dickson Title: Chair, Board of Directors	By: Name: Leslic MacLean Title: Chair, Board of Directors
PP-TCR	
Planned Parenthood of the Texas Capital Region, Inc.	
By: Mame: Laura Scanlan Cho	

Title: Chair, Board of Directors