

Return of Organization Exempt From Income Tax

2001

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

The organization may have to use a separate form to report state reporting requirements

EXTENSION ATTACHED

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

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

C Name of organization: THE ALAN GUTTMACHER INSTITUTE. Address: 120 WALL STREET, NEW YORK, NY 10005.

D Employer identification number: 13-2890727. E Telephone number: (212) 248-1111. F Accounting method: Cash [X] Accrual [] Other (specify) []

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

H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? No [X]. H(b) If "Yes" enter number of affiliates. H(c) Are all affiliates included? No [X]. H(d) Is this a separate return filed by an organization covered by a group ruling? No [X].

G Web site WWW.GUTTMACHER.ORG

J Organization type (check only one) [X] 501(c)(03) (insert no) 4947(a)(1) or 527

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

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 19,753,510

I Enter 4-digit GEN. M Check [] if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

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

REVENUE AUG 14 '02

Table with 12 columns: Line number, Description, Sub-column (a, b, c), and Total. Rows include Contributions (1), Program service revenue (2), Membership dues (3), Interest on savings (4), Dividends (5), Gross rents (6a), Less rental expenses (6b), Net rental income (6c), Other investment income (7), Gross amount from sales of assets (8a, 8b, 8c), Net gain or loss (8d), Special events (9), Gross sales of inventory (10a, 10b), Gross profit (10c), Other revenue (11), Total revenue (12), Program services (13), Management and general (14), Fundraising (15), Payments to affiliates (16), Total expenses (17), Excess or deficit (18), Net assets at beginning (19), Other changes (20), Net assets at end (21).

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Paperwork Reduction Act Notice, see the separate instructions

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Part II Statement of Functional Expenses

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

Table with 5 columns: (A) Total, (B) Program services, (C) Management and general, (D) Fundraising. Rows include 22 Grants and allocations, 23 Specific assistance, 24 Benefits paid, 25 Compensation of officers, 26 Other salaries and wages, 27 Pension plan contributions, 28 Other employee benefits, 29 Payroll taxes, 30 Professional fundraising fees, 31 Accounting fees, 32 Legal fees, 33 Supplies, 34 Telephone, 35 Postage and shipping, 36 Occupancy, 37 Equipment rental and maintenance, 38 Printing and publications, 39 Travel, 40 Conferences, conventions, and meetings, 41 Interest, 42 Depreciation depletion, etc, 43 Other expenses not covered above, 44 Total functional expenses.

Joint Costs Check [] if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? [] Yes [X] No

If "Yes," enter (i) the aggregate amount of these joint costs \$, (ii) the amount allocated to Program services \$,

(iii) the amount allocated to Management and general \$, and (iv) the amount allocated to Fundraising \$

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

What is the organization's primary exempt purpose? [] STMT 3 AND 4A

All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

Table with 2 columns: Description of program service, Program Service Expenses. Rows include a POLICY - RELEVANT RESEARCH/ DOMESTIC - STATEMENT 4A, b POLICY RELEVANT RESEARCH/ INTERNATIONAL - STATEMENT 4A, c PROFESSIONAL AND PUBLIC EDUCATION/ DOMESTIC - STATEMENT 4A, d PROFESSIONAL AND PUBLIC EDUCATION/ INTERNATIONAL - STATEMENT 4A, e Other program services, f Total of Program Service Expenses.

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

Note		(A)		(B)	
Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		Beginning of year		End of year	
Assets	45	Cash - non-interest-bearing	82,968	45	472,335
	46	Savings and temporary cash investments	2,431,407	46	5,061,683
	47a	Accounts receivable	154,422		
	b	Less allowance for doubtful accounts	NONE	47c	154,422
	48a	Pledges receivable		48c	
	b	Less allowance for doubtful accounts			
	49	Grants receivable	4,056,399	49	3,691,025
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a	Other notes and loans receivable (attach schedule)			
	b	Less allowance for doubtful accounts		51c	
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges	65,183	53	96,353
	54	Investments - securities (attach schedule) STMT 3A <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	4,056,156	54	11,535,029
	55a	Investments - land, buildings, and equipment basis			
	b	Less accumulated depreciation (attach schedule)		55c	
56	Investments - other (attach schedule)		56		
57a	Land, buildings, and equipment basis	1,513,598			
b	Less accumulated depreciation (attach schedule) STMT 2A	988,336	57c	525,262	
58	Other assets (describe STMT 4)	74,906	58	74,825	
59	Total assets (add lines 45 through 58) (must equal line 74)	11,526,915	59	21,610,934	
Liabilities	60	Accounts payable and accrued expenses	331,781	60	328,982
	61	Grants payable		61	
	62	Deferred revenue	71,443	62	65,200
	63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a	Tax-exempt bond liabilities (attach schedule)		64a	
	b	Mortgages and other notes payable (attach schedule)		64b	
	65	Other liabilities (describe STMT 4)	391,265	65	346,796
66	Total liabilities (add lines 60 through 65)	794,489	66	740,978	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67	Unrestricted	4,112,796	67	4,260,765
	68	Temporarily restricted	5,443,375	68	14,785,673
	69	Permanently restricted	1,176,255	69	1,823,518
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
	73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, and column (B) must equal line 21)	10,732,426	73	20,869,956
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)	11,526,915	74	21,610,934

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

Part VI Other Information (See Specific Instructions on page 27)

Table with columns for question number, description, and Yes/No boxes. Includes questions 76 through 92 regarding organizational activities, financials, and tax status.

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

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a PUBLICATIONS					111,576
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	2,748	
96 Dividends and interest from securities			14	197,915	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	98,446	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a					
b OTHER REVENUE					3,929
c ADVERTISING INCOME	541800	3,423			
d ROYALTIES			15	25,898	
e					
104 Subtotal (add columns (B), (D), and (E))		3,423		325,007	115,505
105 Total (add line 104, columns (B), (D), and (E))					443,935

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

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

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	STMT 13

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

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

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

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

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

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

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

Please [Signature] Date 1/7/8/02
President

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information - (See separate instructions)

OMB No 1545-0047

2001

Department of the Treasury
Internal Revenue Service

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

Name of the organization

THE ALAN GUTTMACHER INSTITUTE

Employer identification number

13-2890727

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
LINDA HARRIS 120 WALL STREET NEW YORK, NY 10005	HR MANAGER FULL-TIME	56,875	3,014	NONE
AKINRINOLA BANKOLE 120 WALL STREET NEW YORK, NY	SR RESEARCH ASSOC FULL-TIME	81,000	20,624	NONE
SUSAN COHEN 120 WALL STREET NEW YORK, NY 10005	DEPUTY DIRECTOR FULL-TIME	83,000	20,820	NONE
JENNIFER FROST 120 WALL STREET NEW YORK, NY 10005	SR RESEARCH ASSOC FULL-TIME	80,000	16,400	NONE
RACHEL GOLD 120 WALL STREET NEW YORK, NY 10005	ASST DIR/POLICY ANAL FULL-TIME	85,000	21,017	NONE
Total number of other employees paid over \$50,000	▶ 12			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
CONTINENTAL RESOURCES P.O. BOX 4196 BOSTON, MA 02211	MIS SUPPORT	205,919
Total number of others receiving over \$50,000 for professional services	▶ NONE	

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

Yes No

1 During the year, has the organization attempted to influence national, state or local legislation, including any attempt to influence public opinion on legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ 94,252 (Must equal amount on line 38, Part VI-A, or line I or Part VI-B)

1 X

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities

2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

- a Sale, exchange, or leasing of property? 2a X
b Lending of money or other extension of credit? 2b X
c Furnishing of goods services, or facilities? 2c X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? 2d X
e Transfer of any part of its income or assets? 2e X
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below) 3 X
4 Do you have a section 403(b) annuity plan for your employees? 4 X

Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments

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

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

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

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

Table with 2 columns: (a) Name(s) of supported organization(s), (b) Line number from above

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

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

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

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	5,396,949	7,881,185	6,355,211	6,104,988	25,738,333
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc. purpose	17,109	137,016	180,636	240,144	574,905
18 Gross income from interest, dividends amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	424,407	421,130	401,868	243,905	1,491,310
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	19,348	33,323			52,671
23 Total of lines 15 through 22	5,857,813	8,472,654	6,937,715	6,589,037	27,857,219
24 Line 23 minus line 17	5,840,704	8,335,638	6,757,079	6,348,893	27,282,314
25 Enter 1% of line 23	58,578	84,727	69,377	65,890	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a 545,646
	b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a Do not file this list with your return Enter the total of all these excess amounts				26b 8,974,178
	c Total support for section 509(a)(1) test Enter line 24, column (e)				26c 27,282,314
	d Add Amounts from column (e) for lines 18 1,491,310 19 22 52,671 26b 8,974,178				26d 10,518,159
	e Public support (line 26c minus line 26d total)				26e 16,764,155
	f Public support percentage (line 26e (numerator) divided by line 26c (denominator))				26f 61.4470%
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return Enter the sum of such amounts for each year				
	(2000)	(1999)	(1998)	(1997)	
			NOT APPLICABLE		
	b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year				
	(2000)	(1999)	(1998)	(1997)	
	c Add Amounts from column (e) for lines 15 16 17 20 21				27c
	d Add Line 27a total and line 27b total				27d
	e Public support (line 27c total minus line 27d total)				27e
	f Total support for section 509(a)(2) test Enter amount on line 23, column (e)				27f
	g Public support percentage (line 27e (numerator) divided by line 27f (denominator))				27g %
	h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				27h %

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return Do not include these grants in line 15

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

Table with 3 columns: Question, Yes, No. Rows include questions 29-35 regarding racial nondiscrimination policies, scholarships, and financial aid.

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

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

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying) . . .	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying) . . .	37	84,252.
38	Total lobbying expenditures (add lines 36 and 37)	38	84,252.
39	Other exempt purpose expenditures	39	7,207,654.
40	Total exempt purpose expenditures (add lines 38 and 39)	40	7,291,906.
41	Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 . . . \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 . . \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 . \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000	41	514,595.
42	Grassroots nontaxable amount (enter 25% of line 41)	42	128,649.
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
 See the instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period					
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total	
45	Lobbying nontaxable amount	514,595.	483,226.	500,149.	478,939.	1,976,909.
46	Lobbying ceiling amount (150% of line 45(e))					2,965,364.
47	Total lobbying expenditures	84,252.	57,017.	57,192.	43,179.	241,640.
48	Grassroots nontaxable amount	128,649.	120,807.	125,037.	119,735.	494,228.
49	Grassroots ceiling amount (150% of line 48(e))					741,342.
50	Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities NOT APPLICABLE
 (For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (include compensation in expenses reported on lines c through h)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h)			

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

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

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

Table with columns for categories (a-f), sub-items (i-v), and Yes/No checkboxes. Includes rows for Cash, Other assets, Other transactions, and Sharing of facilities.

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

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. First row contains 'N/A'.

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

b If "Yes," complete the following schedule

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. First row contains 'N/A'.

Schedule of Contributors

2001

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

Name of organization

Employer identification number

THE ALAN GUTTMACHER INSTITUTE

13-2890727

Organization type (check one)

Filers of

Section

Form 990 or 990-EZ

501(c)(03) (enter number) organization

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

General Rule -

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

Special Rules -

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

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

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

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

Name of organization

Employer identification number

THE ALAN GUTTMACHER INSTITUTE

13-2890727

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>		<u>1,935,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>2</u>		<u>644,704</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>3</u>		<u>1,500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>4</u>		<u>420,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>5</u>		<u>1,400,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>6</u>		<u>798,194</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

THE ALAN GUTTMACHER INSTITUTE

13-2890727

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>7</u>		<u>372,120.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>8</u>		<u>7,500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>9</u>		<u>485,769</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>10</u>		<u>1,927,485</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>11</u>		<u>87,218.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>12</u>		<u>9,313</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

THE ALAN GUTTMACHER INSTITUTE

13-2890727

Part II. Noncash Property (See Specific Instructions)

(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
11	<u>STOCK DONATIONS</u> _____ _____	87,218.	_____
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
12	<u>EMPLOYEE UNREIMBURSED TRAVEL AND</u> <u>UNREIMBURSED FUNDRAISING COSTS.</u> _____ _____	9,313	_____
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____	_____
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____	_____
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____	_____
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____	_____

FORM 990, PART I - OTHER DECREASES IN FUND BALANCES

DESCRIPTION	AMOUNT
-----	-----
UNREALIZED LOSS ON INVESTMENTS	94,302.

TOTAL	94,302.
	=====

The Alan Guttamacher Institute
December 31, 2001
EIN #13-2890727

PART I - Revenue, Expenses and Changes in Net Assets

	INVESTMENTS		INVESTMENT
	PROCEEDS	COST	REALIZED GAIN
Investments in Equities and Mutual Funds	2,328,218	2,229,772	98,446

Detail backup schedules are available upon request

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
PROFESSIONAL FEES	517,371.	203,080.	258,715.	55,576.
MISCELLANEOUS	37,719.	1,323.	32,624.	3,772.
DUES, SUBSCRIPTIONS AND PUBLIC	78,103.	60,252.	10,035.	7,816.
DATA PROCESSING	85,316.	69,776.	8,390.	7,150.
INFORMATION TECHNOLOGY	348,238.	264,716.	63,927.	19,595.
TOTALS	1,066,747.	599,147.	373,691.	93,909.

The Alan Guttmacher Institute
Depreciation
December 31, 2001
EIN #13-2890727

	<u>December 31, 2001</u>
Property and Equipment at cost:	
Furniture and equipment	\$ 1,033,566
Leasehold improvements	<u>480,032</u>
	1,513,598
Accumulated depreciation and amortization	<u>988,336</u>
Total	<u>\$ 525,262</u>

Depreciation and Amortization:

Opening accumulated depreciation and amortization at January 1, 2001	\$ 1,757,146
Write-off of fully depreciated fixed assets	\$ (997,053)
2000 Depreciation expense	<u>228,243</u>
Ending accumulated depreciation and amortization at December 31, 2001	<u>\$ 988,336</u>

The Alan Guttmacher Institute
Employer Identification Tax Number 13-2890727
December 31, 2001
Part III – Statement of Program Service Accomplishments

PROGRAM SERVICE ACCOMPLISHMENTS

To fulfill its mission, The Alan Guttmacher Institute (AGI) used its annual budget of \$7,291,906 -- **\$5,320,494 in Program Services** – to support its national and international research, publishing and information outreach activities, based in New York, and its public policy work, based in Washington, DC.

In determining its priorities, The Alan Guttmacher Institute (AGI) anticipates social, political and legal conditions that will propel issues to the forefront of public attention. Each current effort builds on those of the past. The process is a cyclical one, in which public policy developments lead to research and then to communication of findings, recommendations and ideas. The Institute strives to provide information that will have multiple uses at the national, state, local – and international – levels. By actively seeking the cooperation and advice of other organizations and researchers, AGI encourages collaborative endeavors that will serve its mission, increase its effectiveness and avoid duplication of effort.

The Alan Guttmacher Institute informs its various audiences – policymakers, activists, health care professionals, researchers, the media and the public through the following:

- *Perspectives on Sexual and Reproductive Health (formerly Family Planning Perspectives)* – a peer-reviewed, bimonthly journal of original, policy-relevant, widely referenced research and analysis on reproductive health in the United States and other developed countries
- *International Family Planning Perspectives* – a peer-reviewed quarterly journal of research articles for use by those concerned with fertility, family planning, maternal and child health, and population policy, with summaries in Spanish and French
- *The Guttmacher Report on Public Policy* -- a bimonthly review that analyzes reproductive health – policymaking in Washington and in state capitals across the country – information critical to understanding, anticipating and effecting change
- Web site (www.guttmacher.org)
- Special reports, news releases, electronic list serve announcements, fact sheets, policy papers, and slide series.

TOTAL PROGRAM SERVICE EXPENSES

\$5,320,494

The Alan Guttmacher Institute
Investments
December 31, 2001
EIN #13-2890727

PART IV - Balance Sheets

	December 31	
	<u>2001</u>	<u>2000</u>
U S government obligations	\$ 8,892,650	\$ 1,536,197
Certificates of deposit	1,410,820	1,405,739
Mutual Funds	1,031,659	1,087,220
Common stock	<u>199,900</u>	<u>27,000</u>
Total Investments	<u>\$ 11,535,029</u>	<u>\$ 4,056,156</u>

FORM 990, PART IV - OTHER LIABILITIES

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
-----	-----	-----
DEFERRED LEASE INCENTIVES	391,265.	346,796.
	-----	-----
TOTALS	391,265.	346,796.
	=====	=====

The Alan Guttmacher Institute
Employer Identification Tax Number 13-2890727
December 31, 2001

Part III – Statement of Program Service Accomplishments

Organization's Primary Exempt Purpose

Mission

The Alan Guttmacher Institute (AGI) advances sexual and reproductive health and rights in the United States and worldwide through an interrelated program of social science research, policy analysis and public education to encourage enlightened public debate, promote sound policy and program development, and inform individual decision-making

Values

The Institute's program is guided by six overarching institutional values

- Attention to methodological rigor and accuracy as fundamental to the integrity and credibility of the Institute's research,
- Commitment to publish and disseminate results of the Institute's research regardless of the political or program ramifications and to evidence-based public education and advocacy,
- Openness to multiple perspectives of outside experts to enrich the Institute's program and enhance its understanding of the issues,
- Anticipation and study of emerging issues to equip the Institute to inform public debate when such issues gain prominence,
- Balance between new and continuing priorities to ensure that the Institute is both on the cutting edge of scholarly and political thought and fully committed to core issues of ongoing importance, and
- Collaboration with others to expand the reach and sustainability of the Institute's efforts

Guiding Principles

A Vision for the Future

The Institute envisions a world in which all women and men have the ability to exercise their rights and responsibilities-freely and with dignity-regarding sexual behavior, reproduction and family formation. Essential to this vision are public- and private-sector health and social policies that support both personal decisions about whether and when to have a child as well as parenthood and parenting. So, too, is the eradication of persistent gender inequality throughout the world and the attainment of equal status, rights and responsibilities for women within sexual, familial and social relationships, and in all aspects of public life.

An Integrated View of Sexual and Reproductive Health and Rights

The Institute regards sexual and reproductive health, and sexual and reproductive rights, as closely related and inherently interdependent. Sexual health is integral to reproductive health, sexual and reproductive rights are fundamental to the achievement of sexual and reproductive health. Therefore, recognizing the range of interrelated needs people have over the course of their lives from adolescence onward, the Institute works to protect, expand and equalize access to information and services that will enable them to

- Avoid unplanned pregnancies,
- Prevent and treat sexually transmitted infections, including HIV,
- Exercise the right to choose abortion,
- Achieve healthy pregnancies and births,
- Balance parenting with other roles, and
- Have healthy satisfying sexual relationships

Priority Attention to Those In Greatest Need

The Institute promotes the sexual and reproductive health and rights of all people, but gives priority attention to addressing the needs and concerns of those whose access to information, services or other societal benefits may be impeded by their age, marital status, geography or income, or by virtue of gender, racial, ethnic, religious or cultural discrimination

A Responsibility to the United States and the World

As a U S organization, the Institute is acutely aware of the pressing need, and undertakes as its first responsibility, to improve the quality of policy and program concerning sexual and reproductive health and rights in the United States. Understanding further that the political, cultural and financial power of the United States can have considerable impact on sexual and reproductive health and rights throughout the world, the Institute places a similarly high priority on monitoring and analysis of U S policy as it affects women and men in other countries. In its international efforts, mindful of the underlying commonalities across and within countries under which sexuality is expressed, families or unions are formed, and children are conceived and born, the Institute emphasizes the development and dissemination of thematic comparative analyses that are global or regional in scope and on country-specific work that will have the greatest relevance in other parts of the world

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT. AND OTHER ALLOWANCES
SHARON W. ALLISON C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY, 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
SETH FRANKLIN BERKELEY, MD C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
ROBERT WM. BLUM, M.D., M.P.H., PH.D C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	VICE-CHAIRMAN AS NEEDED	NONE	NONE	NONE
SARAH S. BROWN C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
PIERRE BUEKENS, M.D., M.P.H., PH.D C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
MARY CHUNG C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
MATTHEW COLES, ESQ.	DIRECTOR AS NEEDED	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
ELIZABETH CROW C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	VICE-CHAIRMAN AS NEEDED	NONE	NONE	NONE
CLINTON E. DEVEAUX, J.D. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
LEE LEE DOYLE, PH.D. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
HENRY W. FOSTER, JR., M.D. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
VANESSA NORTHINGTON GAMBLE, MD. PHD C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET	DIRECTOR AS NEEDED	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
NEW YORK, NY 10005				
CYNTHIA A. GOMEZ, PH.D., ED.M. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
ANN O. HAMILTON, M.SC., J.D. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
JUDITH E. JONES, M.SC. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	SECRETARY AS NEEDED	NONE	NONE	NONE
IVAN J. JUZANG, M.B.A. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
EDWARD M. KAPLAN, LL.B. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
FRANCES KISSLING C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCÉS
LUELLA KLEIN, M.D. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
VIVIAN O. LEE, M.P.A. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
DOROTHY MANN C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
JAMES MCCARTHY, PH.D. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
C. ARDEN MILLER, M.D. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
RAMIRO MOLINA CARTES, MD, MPH, PH.D. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
MARK T. MUNGER	DIRECTOR AS NEEDED	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
NADINE PEACOCK, PH.D. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
J. TYLER PUGH C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
ANNA QUINDLEN C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
R. LUCIA RIDDLE C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	TREASURER AS NEEDED	NONE	NONE	NONE
ALLAN ROSENFELD, M.D. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
FRED T. SAI, M.D. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET	DIRECTOR AS NEEDED	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
NEW YORK, NY 10005				
PAUL SCOTT SPERRY C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
JAMES TRUSSELL, PH.D. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
PETERS D. WILLSON, M.P.P.M. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
ALMA T. YOUNG, M.S.W., ED.D. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	CHAIR AS NEEDED	NONE	NONE	NONE
LAURIE SCHWAB ZABIN, PH.D. C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
VANESSA ELAINE CULLINS C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
LINDA DOMINQUEZ C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
ALFRED VIGIL, MD C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
CHARLES F. WESTOFF PH.D C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR AS NEEDED	NONE	NONE	NONE
SARA SEIMS C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	PRESIDENT FULL-TIME	172,000.	24,418.	NONE
JACQUELINE E. DARROCH C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	SR.VICE PRESIDENT FULL-TIME	133,099.	18,777.	NONE
CORY L. RICHARDS C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	SR.VICE PRESIDENT FULL-TIME	126,984.	18,190.	NONE
BETH FREDRICK	VICE-PRESIDENT FULL-TIME	119,548.	17,658.	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005				
SUSHEELA SINGH	DIRECTOR/RESEARCH FULL-TIME	110,635.	23,533.	NONE
C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005				
PATRICIA DONOVAN	DIR/PUBLICATIONS FULL-TIME	109,555.	21,186.	NONE
C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005				
KENDELL BURROUGHS	CONTROLLER FULL-TIME	80,000.	16,048.	NONE
C/O ALAN GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005				
GRAND TOTALS		851,821.	139,810.	NONE

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE NO.	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
93A	PUBLICATIONS INCREASE THE PUBLIC'S AWARENESS OF INFORMATION CONCERNING REPRODUCTIVE HEALTH ISSUES AND REPORTS ON RESEARCH CONDUCTED BY THE INSTITUTE IN ACCORDANCE WITH THE INSTITUTES EXEMPT PURPOSE.
103B	OTHER INCOME GENERATED THROUGH EXEMPT ACTIVITIES CONDUCTED BY THE INSTITUTE.

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

SEE FORM 990 PART V

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

▶ File a separate application for each return

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
- If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Note Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

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

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

Type or print <small>File by the due date for filing your return. See instructions</small>	Name of Exempt Organization THE ALAN GUTTMACHER INSTITUTE	Employer identification number 13-2890727
	Number, street, and room or suite no. If a P O box, see instructions 120 WALL STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions NEW YORK, NY 10005	

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

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

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

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until 08/15, 2002, to file the exempt organization return for the organization named above. The extension is for the organization's return for
▶ calendar year 2001 or
▶ tax year beginning _____, _____, and ending _____, _____

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

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

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

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

Signature and Verification

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

Signature ▶ _____ Title ▶ CPA Date ▶ _____

For Paperwork Reduction Act Notice, see Instruction

Form **8868** (12-2000)