

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)

Department of the Treasury Internal Revenue Service

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

A For the 2005 calendar year, or tax year beginning, 2005, and ending

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

C Name of organization: GUTTMACHER INSTITUTE
Number and street (or P.O. box if mail is not delivered to street address): 120 WALL STREET
City or town, state or country, and ZIP + 4: NEW YORK, NY 10005

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

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

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates
H(c) Are all affiliates included? Yes No
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number
M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: WWW.GUTTMACHER.ORG

J Organization type (check only one) 501(c)(03) 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 chooses to file a return, be sure to file a complete return. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 12,725,307.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Table with columns for Revenue, Expenses, and Net Assets. Rows include: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue; 3 Membership dues and assessments; 4 Interest on savings and temporary cash investments; 5 Dividends and interest from securities; 6a Gross rents; 6b Less: rental expenses; 6c Net rental income or (loss); 7 Other investment income; 8a Gross amount from sales of assets other than inventory; 8b Less: cost or other basis and sales expenses; 8c Gain or (loss); 8d Net gain or (loss); 9 Special events and activities; 10a Gross sales of inventory; 10b Less: cost of goods sold; 10c Gross profit or (loss); 11 Other revenue; 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess or (deficit) for the year; 19 Net assets or fund balances at beginning of year; 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year.

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

**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 the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22</b> Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
<b>23</b> Specific assistance to individuals (attach schedule)				
<b>24</b> Benefits paid to or for members (attach schedule)				
<b>25</b> Compensation of officers, directors, etc.	823,196.	597,854.	164,937.	60,405.
<b>26</b> Other salaries and wages	3,544,823.	2,574,460.	710,247.	260,116.
<b>27</b> Pension plan contributions	369,974.	268,697.	74,128.	27,149.
<b>28</b> Other employee benefits	421,734.	306,288.	84,500.	30,946.
<b>29</b> Payroll taxes	311,853.	226,487.	62,483.	22,883.
<b>30</b> Professional fundraising fees				
<b>31</b> Accounting fees				
<b>32</b> Legal fees				
<b>33</b> Supplies	99,480.	72,584.	19,663.	7,233.
<b>34</b> Telephone	107,741.	78,610.	21,297.	7,834.
<b>35</b> Postage and shipping	192,189.	165,710.	14,411.	12,068.
<b>36</b> Occupancy	661,808.	482,875.	130,813.	48,120.
<b>37</b> Equipment rental and maintenance	48,979.	35,737.	9,681.	3,561.
<b>38</b> Printing and publications	266,270.	229,022.	24,150.	13,098.
<b>39</b> Travel	434,105.	246,428.	176,279.	11,398.
<b>40</b> Conferences, conventions, and meetings	125,018.	70,969.	50,767.	3,282.
<b>41</b> Interest				
<b>42</b> Depreciation, depletion, etc. (attach schedule)	212,047.	154,000.	42,487.	15,560.
<b>43</b> Other expenses not covered above (itemize):				
<b>a</b> PROFESSIONAL FEES	973,675.	816,332.	140,924.	16,419.
<b>b</b> DUES/SUBSCRIPTIONS/PUBLIC	45,346.	36,578.	6,477.	2,291.
<b>c</b> DATA PROCESSING	60,028.	46,416.	10,398.	3,214.
<b>d</b> INFORMATION TECHNOLOGY	335,080.	240,154.	66,293.	28,633.
<b>e</b> MISCELLANEOUS	113,995.	5,590.	103,304.	5,101.
<b>f</b> _____				
<b>g</b> _____				
<b>44</b> Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15).	9,147,341.	6,654,791.	1,913,239.	579,311.

**Joint Costs.** Check  if you are following SOP 98-2.

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

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_; (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments** (See the instructions.)

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.

What is the organization's primary exempt purpose? ►SEE STATEMENT 2	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
<p><b>a</b> RESEARCH</p> <p>----- ----- ----- ----- -----</p> <p>(Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	2,925,572.
<p><b>b</b> PUBLIC EDUCATION</p> <p>----- ----- ----- ----- -----</p> <p>(Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	2,579,461.
<p><b>c</b> PUBLIC POLICY</p> <p>----- ----- ----- ----- -----</p> <p>(Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	1,149,758.
<p><b>d</b></p> <p>----- ----- ----- ----- -----</p> <p>(Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
<p><b>e</b> Other program services (attach schedule) (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
<p><b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services). . . . . ► <b>STMT 2A</b></p>	<b>6,654,791.</b>

**Part IV Balance Sheets** (See the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>45</b> Cash - non-interest-bearing	113,384.	<b>45</b>	416,078.
	<b>46</b> Savings and temporary cash investments	424,672.	<b>46</b>	636,153.
	<b>47a</b> Accounts receivable	188,729.		
	<b>b</b> Less: allowance for doubtful accounts	NONE	184,476.	<b>47c</b> 188,729.
	<b>48a</b> Pledges receivable			
	<b>b</b> Less: allowance for doubtful accounts			<b>48c</b>
	<b>49</b> Grants receivable	3,361,794.	<b>49</b>	2,905,887.
	<b>50</b> Receivables from officers, directors, trustees, and key employees (attach schedule)		<b>50</b>	
	<b>51a</b> Other notes and loans receivable (attach schedule)			
	<b>b</b> Less: allowance for doubtful accounts			<b>51c</b>
	<b>52</b> Inventories for sale or use		<b>52</b>	
	<b>53</b> Prepaid expenses and deferred charges	54,301.	<b>53</b>	46,135.
	<b>54</b> Investments - securities (attach schedule) <i>STMT 3</i> <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	12,504,478.	<b>54</b>	11,300,177.
	<b>55a</b> Investments - land, buildings, and equipment: basis			
<b>b</b> Less: accumulated depreciation (attach schedule)			<b>55c</b>	
<b>56</b> Investments - other (attach schedule)		<b>56</b>		
<b>57a</b> Land, buildings, and equipment: basis	2,327,722.			
<b>b</b> Less: accumulated depreciation (attach schedule) <i>STMT 3A</i>	1,749,185.	717,311.	<b>57c</b> 578,537.	
<b>58</b> Other assets (describe <i>STMT 4</i> )	88,502.	<b>58</b>	82,386.	
<b>59 Total assets</b> (must equal line 74). Add lines 45 through 58.	17,448,918.	<b>59</b>	16,154,082.	
<b>Liabilities</b>	<b>60</b> Accounts payable and accrued expenses	394,553.	<b>60</b>	417,835.
	<b>61</b> Grants payable		<b>61</b>	
	<b>62</b> Deferred revenue <i>STMT 5</i>	42,373.	<b>62</b>	39,066.
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule)		<b>63</b>	
	<b>64a</b> Tax-exempt bond liabilities (attach schedule)		<b>64a</b>	
	<b>b</b> Mortgages and other notes payable (attach schedule)		<b>64b</b>	
	<b>65</b> Other liabilities (describe <i>STMT 6</i> )	160,259.	<b>65</b>	114,471.
<b>66 Total liabilities.</b> Add lines 60 through 65	597,185.	<b>66</b>	571,372.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	<b>67</b> Unrestricted	5,815,837.	<b>67</b>	5,985,388.
	<b>68</b> Temporarily restricted	8,745,959.	<b>68</b>	7,215,297.
	<b>69</b> Permanently restricted	2,289,937.	<b>69</b>	2,382,025.
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> and complete lines 70 through 74.			
	<b>70</b> Capital stock, trust principal, or current funds		<b>70</b>	
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund		<b>71</b>	
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds		<b>72</b>	
	<b>73 Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	16,851,733.	<b>73</b>	15,582,710.
	<b>74 Total liabilities and net assets/fund balances.</b> Add lines 66 and 73.	17,448,918.	<b>74</b>	16,154,082.

**Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** (See the instructions.)

<b>a</b> Total revenue, gains, and other support per audited financial statements . . . . .				<b>a</b>	7,899,605.
<b>b</b> Amounts included on line a but not on Part I, line 12:					
<b>1</b> Net unrealized gains on investments . . . . .	<b>b1</b>	58,969.			
<b>2</b> Donated services and use of facilities . . . . .	<b>b2</b>	21,287.			
<b>3</b> Recoveries of prior year grants . . . . .	<b>b3</b>				
<b>4</b> Other (specify): _____	<b>b4</b>				
Add lines <b>b1</b> through <b>b4</b> . . . . .				<b>b</b>	80,256.
<b>c</b> Subtract line <b>b</b> from line <b>a</b> . . . . .				<b>c</b>	7,819,349.
<b>d</b> Amounts included on Part I, line 12, but not on line <b>a</b> :					
<b>1</b> Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>				
<b>2</b> Other (specify): _____	<b>d2</b>				
Add lines <b>d1</b> and <b>d2</b> . . . . .				<b>d</b>	
<b>e</b> Total revenue (Part I, line 12). Add lines <b>c</b> and <b>d</b> . . . . .				<b>e</b>	7,819,349.

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

<b>a</b> Total expenses and losses per audited financial statements . . . . .				<b>a</b>	9,168,628.
<b>b</b> Amounts included on line a but not on Part I, line 17:					
<b>1</b> Donated services and use of facilities . . . . .	<b>b1</b>	21,287.			
<b>2</b> Prior year adjustments reported on Part I, line 20 . . . . .	<b>b2</b>				
<b>3</b> Losses reported on Part I, line 20 . . . . .	<b>b3</b>				
<b>4</b> Other (specify): _____	<b>b4</b>				
Add lines <b>b1</b> through <b>b4</b> . . . . .				<b>b</b>	21,287.
<b>c</b> Subtract line <b>b</b> from line <b>a</b> . . . . .				<b>c</b>	9,147,341.
<b>d</b> Amounts included on Part I, line 17, but not on line <b>a</b> :					
<b>1</b> Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>				
<b>2</b> Other (specify): _____	<b>d2</b>				
Add lines <b>d1</b> and <b>d2</b> . . . . .				<b>d</b>	
<b>e</b> Total expenses (Part I, line 17). Add lines <b>c</b> and <b>d</b> . . . . .				<b>e</b>	9,147,341.

**Part V Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
SEE STATEMENTS 7-14		823,196.	117,328.	NONE

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 42

b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)

75b X

c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? Note. Related organizations include section 509(a)(3) supporting organizations.

75c X

If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization.

d Does the organization have a written conflict of interest policy?

75d X

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits

(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation, (D) Contributions to employee benefit plans & deferred compensation plans, (E) Expense account and other allowances. All entries are NONE.

Part VI Other Information (See the instructions.)

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.

76 X

77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.

77 X

78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?

78a X

b If "Yes," has it filed a tax return on Form 990-T for this year?

78b X

79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement.

79 X

80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?

80a X

b If "Yes," enter the name of the organization PLANNED PARENTHOOD FEDERATION OF AMERICA and check whether it is X exempt or nonexempt

81a Enter direct and indirect political expenditures. (See line 81 instructions.) NONE

81a NONE

b Did the organization file Form 1120-POL for this year?

81b X

Part VI Other Information (continued)

		Yes	No
<b>82 a</b>	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
<b>b</b>	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
<b>82b</b>	21,287.		
<b>83 a</b>	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
<b>b</b>	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
<b>84 a</b>	Did the organization solicit any contributions or gifts that were not tax deductible?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
<b>85</b>	<b>501(c)(4), (5), or (6) organizations.</b> a Were substantially all dues nondeductible by members?	N/A	
<b>b</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	N/A	
<b>c</b>	Dues, assessments, and similar amounts from members	N/A	
<b>d</b>	Section 162(e) lobbying and political expenditures	N/A	
<b>e</b>	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	N/A	
<b>f</b>	Taxable amount of lobbying and political expenditures (line 85d less 85e)	N/A	
<b>g</b>	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	
<b>h</b>	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	
<b>86</b>	<b>501(c)(7) orgs.</b> Enter: a Initiation fees and capital contributions included on line 12	N/A	
<b>b</b>	Gross receipts, included on line 12, for public use of club facilities	N/A	
<b>87</b>	<b>501(c)(12) orgs.</b> Enter: a Gross income from members or shareholders	N/A	
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	N/A	
<b>88</b>	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
<b>89 a</b>	<b>501(c)(3) organizations.</b> Enter: Amount of tax imposed on the organization during the year under: section 4911 NONE ; section 4912 NONE ; section 4955 NONE		
<b>b</b>	<b>501(c)(3) and 501(c)(4) orgs.</b> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
<b>c</b>	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		NONE
<b>d</b>	Enter: Amount of tax on line 89c, above, reimbursed by the organization		NONE
<b>90 a</b>	List the states with which a copy of this return is filed	SEE STATEMENT 15	
<b>b</b>	Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)	90b	63
<b>91 a</b>	The books are in care of	KENDELL BURROUGHS, CONTROLLER	
	Located at	120 WALL STREET NEW YORK, NY	
	Telephone no.	212-248-1111	
	ZIP + 4	10005	
<b>b</b>	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)? If "Yes," enter the name of the foreign country	91b	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>c</b>	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country	91c	X
<b>92</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

**Part VII Analysis of Income-Producing Activities (See the instructions.)**

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					66,548.
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	191,345.	
96 Dividends and interest from securities . . . . .			14	388,761.	
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	-163,999.	
101 Net income or (loss) from special events . . . . .					
102 Gross profit or (loss) from sales of inventory . . . . .					
103 Other revenue: a					
b OTHER REVENUE					12,020.
c ROYALTIES			15	31,351.	
d					
e					
104 Subtotal (add columns (B), (D), and (E)) . . . . .				447,458.	78,568.
105 Total (add line 104, columns (B), (D), and (E)) . . . . .					526,026.

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 the instructions.)**

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	STMT 16

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)**

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

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)**

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

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

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

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 Sign Here**

Signature of officer \_\_\_\_\_ Date \_\_\_\_\_

Type or print name and title. \_\_\_\_\_

**Paid Preparer's Use Only**

Preparer's signature \_\_\_\_\_ Date \_\_\_\_\_ Check if self-employed  Preparer's SSN or PTIN (See Gen. Inst. W)

Firm's name (or yours if self-employed), address, and ZIP + 4: EISNER LLP  
750 THIRD AVENUE  
NEW YORK, NY 10017-2703

EIN \_\_\_\_\_ Phone no. \_\_\_\_\_



**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

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

**Supplementary Information - (See separate instructions.)**

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

OMB No. 1545-0047

**2005**

Name of the organization

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
SEE STATEMENT 17				
Total number of other employees paid over \$50,000 . . ▶		37		

**Part II-A 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
AFRICAN POPULATION & HEALTH RESEARCH CTR SHELTER AFRIUE CENTER, NAIROBI, KENYA	RESEARCH	123,950.
CONTINENTAL RESOURCES, INC. PO BOX 4196; BOSTON, MA 02211	MIS CONSULTING	236,336.
ELENA PRADA CARRERA 9 #97-06, BOGOTA, COLOMBIA S. A.	RESEARCHER	52,588.
Total number of others receiving over \$50,000 for professional services . . . . . ▶		NONE

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**  
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

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

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

Schedule A (Form 990 or 990-EZ) 2005

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

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>71,973.</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) . . . . .	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? . . . . .		X
b Lending of money or other extension of credit? . . . . .		X
c Furnishing of goods, services, or facilities? . . . . .		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? . . . . . STMT 18	X	
e Transfer of any part of its income or assets? . . . . .		X
3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) . . . . .		X
b Do you have a section 403(b) annuity plan for your employees? . . . . .	X	
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)? . . . . .		X
4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds? . . . . .		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services? . . . . .		X

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

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

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

Provide the following information about the supported organizations. (See page 6 of the instructions.)

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

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

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

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

Table with columns: Calendar year (or fiscal year beginning in), (a) 2004, (b) 2003, (c) 2002, (d) 2001, (e) Total. Rows include: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions, merchandise sold or services performed; 18 Gross income from interest, dividends; 19 Net income from unrelated business activities; 20 Tax revenues levied; 21 Value of services or facilities furnished; 22 Other income; 23 Total of lines 15 through 22; 24 Line 23 minus line 17; 25 Enter 1% of line 23; 26 Organizations described on lines 10 or 11; 27 Organizations described on line 12.

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

**Part V Private School Questionnaire** (See page 7 of the instructions.) NOT APPLICABLE  
**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
<b>29</b>	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? . . . . .	<b>29</b>	
<b>30</b>	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? . . . . .	<b>30</b>	
<b>31</b>	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? . . . . . If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ----- ----- -----	<b>31</b>	
<b>32</b>	Does the organization maintain the following:		
<b>a</b>	Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . .	<b>32a</b>	
<b>b</b>	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .	<b>32b</b>	
<b>c</b>	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .	<b>32c</b>	
<b>d</b>	Copies of all material used by the organization or on its behalf to solicit contributions? . . . . .  If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----	<b>32d</b>	
<b>33</b>	Does the organization discriminate by race in any way with respect to:		
<b>a</b>	Students' rights or privileges? . . . . .	<b>33a</b>	
<b>b</b>	Admissions policies? . . . . .	<b>33b</b>	
<b>c</b>	Employment of faculty or administrative staff? . . . . .	<b>33c</b>	
<b>d</b>	Scholarships or other financial assistance? . . . . .	<b>33d</b>	
<b>e</b>	Educational policies? . . . . .	<b>33e</b>	
<b>f</b>	Use of facilities? . . . . .	<b>33f</b>	
<b>g</b>	Athletic programs? . . . . .	<b>33g</b>	
<b>h</b>	Other extracurricular activities? . . . . .  If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- ----- -----	<b>33h</b>	
<b>34 a</b>	Does the organization receive any financial aid or assistance from a governmental agency? . . . . .	<b>34a</b>	
<b>b</b>	Has the organization's right to such aid ever been revoked or suspended? . . . . . If you answered "Yes" to either 34a or b, please explain using an attached statement.	<b>34b</b>	
<b>35</b>	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation . . . . .	<b>35</b>	

**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**

(The term "expenditures" means amounts paid or incurred.)

	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .	<b>36</b>	
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	<b>37</b>	71,973.
<b>38</b> Total lobbying expenditures (add lines 36 and 37) . . . . .	<b>38</b>	71,973.
<b>39</b> Other exempt purpose expenditures . . . . .	<b>39</b>	9,075,368.
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39) . . . . .	<b>40</b>	9,147,341.
<b>41</b> Lobbying nontaxable amount. Enter the amount from the following table - <b>If the amount on line 40 is - The lobbying nontaxable amount is -</b>		
Not over \$500,000 . . . . . 20% of the amount on line 40 . . . . .	}	607,367.
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 . . . . .		
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41) . . . . .	<b>42</b>	151,842.
<b>43</b> Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 . . . . .	<b>43</b>	
<b>44</b> Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 . . . . .	<b>44</b>	

**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) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
<b>45</b> Lobbying nontaxable amount . . . . .	607,367.	664,965.	618,645.	555,670.	2,446,647.
<b>46</b> Lobbying ceiling amount (150% of line 45(e)) . . . . .					3,669,971.
<b>47</b> Total lobbying expenditures	71,973.	57,242.	95,256.	61,675.	286,146.
<b>48</b> Grassroots nontaxable amount . . . . .	151,842.	166,241.	154,661.	138,918.	611,662.
<b>49</b> Grassroots ceiling amount (150% of line 48(e)) . . . . .					917,493.
<b>50</b> 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 11 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
<b>a</b> Volunteers . . . . .			
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h.) . . . . .			
<b>c</b> Media advertisements . . . . .			
<b>d</b> Mailings to members, legislators, or the public . . . . .			
<b>e</b> Publications, or published or broadcast statements . . . . .			
<b>f</b> Grants to other organizations for lobbying purposes . . . . .			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body . . . . .			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means . . . . .			
<b>i</b> 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?

	Yes	No
<b>a</b> Transfers from the reporting organization to a noncharitable exempt organization of:		
(i) Cash	<b>51a(i)</b>	X
(ii) Other assets	<b>a(ii)</b>	X
<b>b</b> Other transactions:		
(i) Sales or exchanges of assets with a noncharitable exempt organization	<b>b(i)</b>	X
(ii) Purchases of assets from a noncharitable exempt organization	<b>b(ii)</b>	X
(iii) Rental of facilities, equipment, or other assets	<b>b(iii)</b>	X
(iv) Reimbursement arrangements	<b>b(iv)</b>	X
(v) Loans or loan guarantees	<b>b(v)</b>	X
(vi) Performance of services or membership or fundraising solicitations	<b>b(vi)</b>	X
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees	<b>c</b>	X

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

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
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  No

**b** If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES  
=====

DESCRIPTION -----	AMOUNT -----
UNREALIZED GAIN ON INVESTMENTS	58,969.
TOTAL	----- 58,969. =====

## FORM 990, PART I, LINE 8d - NET GAIN OR (LOSS)

=====

DESCRIPTION	DATE AQUIRED	DATE SOLD	GROSS SALES PRICE	COST OR OTHER BASIS	GAIN/LOSS
-----	-----	-----	-----	-----	-----
SECURITIES*	VARIOUS	VARIOUS	4,741,959.	4,905,958.	-163,999.

\* A DETAILED LIST IS AVAILABLE UPON REQUEST.



FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTSORGANIZATION'S PRIMARY EXEMPT PURPOSEMISSION

GUTTMACHER INSTITUTE (THE "INSTITUTE") ADVANCES SEXUAL AND REPRODUCTIVE HEALTH THROUGH AN INTERRELATED PROGRAM OF SOCIAL SCIENCE RESEARCH, POLICY ANALYSIS AND PUBLIC EDUCATION, DESIGNED TO GENERATE NEW IDEAS, ENCOURAGE ENLIGHTENED PUBLIC DEBATE, PROMOTE SOUND POLICY AND PROGRAM DEVELOPMENT, AND, ULTIMATELY, 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 PRINCIPLESA 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 WITH 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, THE INSTITUTE IS 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 III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

TO FULFILL ITS MISSION, GUTTMACHER INSTITUTE (THE "INSTITUTE") USED ITS ANNUAL BUDGET OF \$9,168,628 of which \$6,654,791 was used IN PROGRAM SERVICES TO SUPPORT ITS NATIONAL AND INTERNATIONAL RESEARCH AND PUBLIC EDUCATION ACTIVITIES, BASED IN NEW YORK, AND ITS PUBLIC POLICY WORK, BASED IN WASHINGTON, DC.

IN DETERMINING ITS PRIORITIES, THE INSTITUTE 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, THE INSTITUTE ENCOURAGES COLLABORATIVE ENDEAVORS THAT WILL SERVE ITS MISSION, INCREASE ITS EFFECTIVENESS AND AVOID DUPLICATION OF EFFORT.

THE INSTITUTE INFORMS ITS VARIOUS AUDIENCES - POLICYMAKERS, ACTIVISTS, HEALTH PROFESSIONALS, RESEARCHERS, THE MEDIA AND THE PUBLIC THROUGH THE FOLLOWING:

- *PERSPECTIVES ON SEXUAL AND REPRODUCTIVE HEALTH* - A PEER-REVIEWED, QUARTERLY JOURNAL OF ORIGINAL, POLICY-RELEVANT, WIDELY REFERENCED RESEARCH AND ANALYSIS ON SEXUAL AND 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.
- *THE GUTTMACHER REPORT ON PUBLIC POLICY* - A BIMONTHLY REVIEW THAT ANALYZES SEXUAL AND 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](http://WWW.GUTTMACHER.ORG))
- SPECIAL REPORTS, NEWS RELEASES, ELECTRONIC LIST SERVE ANNOUNCEMENTS, FACT SHEETS, POLICY PAPERS, AND SLIDE SERIES.

TOTAL PROGRAM SERVICE EXPENSES

\$6,654,791

## FORM 990, PART IV - INVESTMENTS - SECURITIES

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
U.S. GOVERNMENT OBLIGATIONS	9,761,992.	8,728,123.
MUTUAL FUNDS	1,842,486.	2,572,054.
COMMON STOCK	900,000.	
	-----	-----
TOTALS	12,504,478.	11,300,177.
	=====	=====

FORM 990, PART II, LINE 42 AND PART IV, LINE 57  
=====

DESCRIPTION -----	AMOUNT -----
FURNITURE AND EQUIPMENT	\$ 1,594,064
LEASEHOLD IMPROVEMENTS	733,658.
	-----
TOTAL FIXED ASSETS	2,327,722.
	=====
ACCUMMULATED DEPRECIATION AND AMORTIZATION BEGINNING OF YEAR	-1,537,138.
DEPRECIATION AND AMORTIZATION EXPENSE	-212,047.
	-----
ACCUMMULATED DEPRECIATION AND AMORTIZATION END OF YEAR	-1,749,185.
	=====

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
-----	-----	-----
SECURITY DEPOSITS	88,502.	82,386.
TOTALS	88,502.	82,386.
	=====	=====

FORM 990, PART IV - DEFERRED REVENUE

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
DEFERRED REVENUE	42,373.	39,066.
TOTALS	42,373.	39,066.

FORM 990, PART IV - OTHER LIABILITIES  
=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
DEFERRED LEASE INCENTIVE	160,259.	114,471.
TOTALS	----- 160,259. =====	----- 114,471. =====



FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JAMES MCCARTHY C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	CHAIR 2 HRS	NONE	NONE	NONE
RENEE JENKINS C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	SENIOR VICE CHAIR 2 HRS	NONE	NONE	NONE
LINDA DOMINGUEZ C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	VICE CHAIR 2 HRS	NONE	NONE	NONE
AMY ALLINA C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	SECRETARY 2 HRS	NONE	NONE	NONE
JAMES TRUSSELL C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	TREASURER 2 HRS	NONE	NONE	NONE
R. LUCIA RIDDLE C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
JUDY TABB		NONE	NONE	NONE

## FORM 990, PART V-A - CURRENT 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 GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
JOHN ROMO C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
DAVID L. BELL C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
SETH F. BERKLEY C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
R. ALTA CHARO C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
WARD CATES C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
DARLEE CROCKETT C/O GUTTMACHER INSTITUTE 120 WALL STREET	DIRECTOR 2 HRS	NONE	NONE	NONE

## FORM 990, PART V-A - CURRENT 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				
PEGGY DANZIGER C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
CLINTON E. DEVEAUX C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
LINDA JACOBS C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
ROBIN CHANDLER DUKE C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
M. JOYCELYN ELDERS C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
PARFAIT M. ELOUNDOU-ENYEGUE C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE

## FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ABIGAIL ENGLISH C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
DON WINEBERG C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
BEATRIZ SOLIS C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
MELISSA LYNN GILLIAM C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
CYNTHIA A. GOMEZ C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
LINDA GORDON C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
SILVIA HENRIQUEZ		NONE	NONE	NONE

## FORM 990, PART V-A - CURRENT 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 GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
DAVID S.P. HOPKINS C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
CAROLYN WESTHOFF C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
KATARINA LINDAHL C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
DANIEL LICHTER C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
FREDERICK A.B. MEYERSON C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
TINA RAINE C/O GUTTMACHER INSTITUTE 120 WALL STREET	DIRECTOR 2 HRS	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT 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				
DALE ANNE REISS C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
KATHY HUDSON C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
MARGIE FITES SEIGLE C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
MARY SHALLENBERGER C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
ALFREDO VIGIL C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
SCOTT SPEAR C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
DAVIKA SINGH C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
CAROLYN WESTHOFF C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
MICHAEL RESNICK C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIRECTOR 2 HRS	NONE	NONE	NONE
SHARON CAMP C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	PRESIDENT & CEO 40	210,000.	26,237.	NONE
CORY L. RICHARDS C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	SR VP/VP OF PUB POL 40	167,270.	21,889.	NONE
BETH FREDRICK C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	COO/SR.VICE PRESIDENT 40 <i>Service ended October 2005</i>	141,926.	19,350.	NONE
SUSHEELA SINGH		152,000.	27,760.	NONE

FORM 990, PART V-A - CURRENT 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 GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	VICE PRES. OF RESEAR 40	152,000.	22,092.	NONE
PATRICIA DONOVAN C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	VICE PRES. OF PUB ED 40			
GRAND TOTALS		823,196.	117,328.	NONE



FORM 990, PART VI, LINE 90A - STATES

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AL, AK, AZ, AR, CA, CO, CT, FL, GA,  
IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM,  
NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI,

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 I - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES
 

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NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCOUNT
RACHEL GOLD C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIR POLICY ANALYSIS 40	110,000.	23,312.	NONE
AKINRINOLA BANKOLE C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIR OF INTL RESEARCH 40	116,000.	24,098.	NONE
SUSAN COHEN C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIR GOV'T AFFAIRS 40	107,000.	13,291.	NONE
KENDELL BURROUGHS C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	CONTROLLER 40	100,917.	18,681.	NONE
LARRY FINER C/O GUTTMACHER INSTITUTE 120 WALL STREET NEW YORK, NY 10005	DIR DOM RESEARCH 40	100,000.	15,045.	NONE
TOTAL COMPENSATION		533,917.	94,427.	NONE

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

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SEE 990 PART V.  
ADDITIONALLY, TRUSTEES OF THE ORGANIZATION ARE REIMBURSED FOR OUT-OF-POCKET  
EXPENSES INCURRED IN CONJUNCTION WITH SERVICES PERFORMED FOR THE  
ORGANIZATION.

SCH. A, PART IV-A - ORGANIZATIONS DESCRIBED IN PART IV, BOX 10 OR 11  
 (NOT OPEN TO PUBLIC INSPECTION)

CONTRIBUTOR NAME	TOTAL CONTRIBUTION	MINUS 2% OF LINE 24	EXCESS CONTRIBUTION AMOUNT
THE DAVID & LUCILLE PACKARD FOUNDATION	2,439,506.	827,494.	1,612,012.
THE FORD FOUNDATION	1,121,506.	827,494.	294,012.
THE WILLIAM H. GATES FOUNDATION	6,747,506.	827,494.	5,920,012.
THE WILLIAM & FLORA HEWLETT FOUNDATION	3,572,506.	827,494.	2,745,012.
THE ANDREW W. MELLON FOUNDATION	852,506.	827,494.	25,012.
TOTAL	14,733,530.		10,596,060.