Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

▶ Do not

▶ Inform

| enter Social Security | numbers on this form as it may be made public. | Open to Public |
|-----------------------|---|----------------|
| ation about Form 990 | and its instructions is at www.irs.gov/form990. | Inspection |
| beginning | and ending | |

| A F | or th | e 202 | 2 calendar year, or tax year beginning a | nd ending | | |
|--------------------------------|------------|------------|---|-------------------|---|--------------------------------|
| _ | | | C Name of organization | | D Employer ide | entification number |
| Во | heck if ap | oplicable: | GUTTMACHER INSTITUTE, INC. | | | |
| | Addre | | Doing Business As | | 13- | -2890727 |
| | 7 | change | Number and street (or P.O. box if mail is not delivered to street address) | om/suite | E Telephone no | umber |
| | Initial | return | 125 MAIDEN LANE, 7TH FLOOR | | (2) | 12)248-1111 |
| | Term | inated | City or town, state or province, country, and ZIP or foreign postal code | | , | , - |
| | Amer | nded | NEW YORK, NY 10038 | | G Gross receipt | ts \$ 62,320,850. |
| | Applie | cation | F Name and address of principal officer: MAUREEN BURNLEY | | H(a) Is this a grou | up return for Yes X No |
| | pendi | ing | 125 MAIDEN LANE, 7TH FLOOR, NEW YORK, NY 1003 | 38 | subordinates H(b) Are all subord | |
| $\overline{}$ | Tax-ex | empt st | | 527 | | ch a list. (see instructions) |
| <u>.</u> | | | WWW.GUTTMACHER.ORG | 1 027 | H(c) Group exemp | |
| <u>к</u> | | | ization: X Corporation Trust Association Other | I Year of for | | State of legal domicile: NY |
| | art I | | mmary | L Toda of for | mation: 1977 III | otate of regal dofficile. 141 |
| | 1 | | / describe the organization's mission or most significant activities: THE INS | י ישיחוויים דיייב | TC A TEADIM | |
| a) | ' | | | | | J RESEARCH AND |
| Š | | | LICY ORGANIZATION COMMITTED TO ADVANCING SEXUAL | | KODOCIIVE | |
| rns | 2 | | ALTH AND RIGHTS IN THE UNITED STATES AND GLOBALI | | | |
| Governance | 2 | | this box if the organization discontinued its operations or disposed of | | | 1 1 |
| | 3 | | er of voting members of the governing body (Part VI, line 1a) | | | |
| es | 4 | | er of independent voting members of the governing body (Part VI, line 1b) | | | |
| ctivities & | 5 | | number of individuals employed in calendar year 2022 (Part V, line 2a) | | | 5 133 |
| Ç | 6 | Total | number of volunteers (estimate if necessary) | | | 6 19 |
| _ | | | unrelated business revenue from Part VIII, column (C), line 12 | | | 7a |
| | b | Net u | nrelated business taxable income from Form 990-T, line 34 | | | 7b |
| | _ | _ | | | Prior Year | Current Year |
| ne | 8 | | ibutions and grants (Part VIII, line 1h) | OR | 33,703,44 | |
| Revenue | 9 | | am service revenue (Part VIII, line 2g) | 1 1 | 29,72 | |
| Re | 10 | | ment income (Part VIII, column (A), lines 3, 4, and 7d) | | 3,693,59 | |
| | 11 | | revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 32,75 | |
| | 12 | | revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 37,459,52 | 23. 32,979,466. |
| | 13 | | s and similar amounts paid (Part IX, column (A), lines 1-3) | | NO | ONE NONE |
| | 14 | | its paid to or for members (Part IX, column (A), line 4) | | NO | ONE NONE |
| es | 15 | | es, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 17,819,55 | 59. 17,288,445. |
| Expenses | 16a | Profe | ssional fundraising fees (Part IX, column (A), line 11e) | 🖵 | NO | ONE NONE |
| ă | b | | fundraising expenses (Part IX, column (D), line 25) ▶ 1,772,001. | | | |
| ш | 17 | Other | expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 9,065,59 | 10,481,502. |
| | 18 | Total | expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | ∟ | 26,885,15 | 50. 27,769,947. |
| | 19 | Rever | nue less expenses. Subtract line 18 from line 12 | | 10,574,37 | 73. 5,209,519. |
| s or | | | | Ве | ginning of Current Y | ear End of Year |
| sets | 20 | Total | assets (Part X, line 16) | L | 76,905,67 | 75. 76,042,260. |
| Net Assets or Fund Balances | 21 | Total | liabilities (Part X, line 26) | L | 16,658,85 | 57. 14,963,109. |
| Fee | 22 | | ssets or fund balances. Subtract line 21 from line 20. | | 60,246,81 | 8. 61,079,151. |
| Pa | ırt II | Si | gnature Block | | | |
| | | | of perjury, I declare that I have examined this return, including accompanying schedules | | | my knowledge and belief, it is |
| true | e, corre | ect, and | complete. Declaration of preparer (other than officer) is based on all information of which p | preparer nas an | y knowleage. | |
| | | | | | | |
| Sig | | | Signature of officer | | Date | |
| He | re | | | | | |
| | | | Type or print name and title | | | |
| | _ | Print/ | Type preparer's name Preparer's signature | Date | Check | if PTIN |
| Paid | | AAR | ON SHAPIRO | 07/14/2 | l — | · |
| | parer | Firm's | sname ▶ FORVIS, LLP | . , = -, 2 | Firm's EIN | 44-0160260 |
| Use | Only | | saddress 1155 AVENUE OF THE AMERICAS #1200 NEW YORK, NY 10036 | | Phone no. | 212-867-4000 |
| May | the I | | cuss this return with the preparer shown above? (see instructions) | | 1 | X Yes No |
| | | | Reduction Act Notice, see the separate instructions. | | | Form 990 (2022) |

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| Pa | Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III |
|----|--|
| 1 | riefly describe the organization's mission: |
| | EE SCHEDULE O |
| | |
| 2 | id the organization undertake any significant program services during the year which were not listed on the rior Form 990 or 990-EZ? "Yes," describe these new services on Schedule O. |
| 3 | id the organization cease conducting, or make significant changes in how it conducts, any program ervices? |
| 4 | "Yes," describe these changes on Schedule O. escribe the organization's program service accomplishments for each of its three largest program services, as measured largeneses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other letotal expenses, and revenue, if any, for each program service reported. |
| 4a | Code:) (Expenses \$13,034,722 including grants of \$) (Revenue \$) EE SCHEDULE O |
| | |
| | |
| | |
| | |
| 4b | Code:) (Expenses \$5,653,768. including grants of \$) (Revenue \$) EE SCHEDULE O |
| | |
| | |
| | |
| 4- | Order \(\sum_{instants} \sum_{instants} \sum_{ |
| 4C | Code:) (Expenses \$2,342,494. including grants of \$) (Revenue \$) EE SCHEDULE O |
| | |
| | |
| | |
| | |
| 4d | ther program services (Describe on Schedule O.) Expenses \$ including grants of \$) (Revenue \$) |
| 4e | otal program service expenses 21,030,984. |

Form **990** (2022)

Form 990 (2022)
Part IV Page 3

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

Form 990 (2022)

Part IV Chocklist of Poquired Schodules (continued)

| Par | Checklist of Required Schedules (continued) | | V | Na |
|--------------|---|------|-----|-----|
| 00 | Did the approximation property areas then OF 000 of greater or other positions to be for demostic individuals and | | Yes | No |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | 37 |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the | 22 | | X |
| 23 | organization's current and former officers, directors, trustees, key employees, and highest compensated | | | |
| | employees? If "Yes," complete Schedule J | 23 | Х | |
| 24.5 | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than | 23 | | |
| 24 a | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b | | | |
| | | 24a | | Х |
| h | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| | Did the organization maintain an escrow account other than a refunding escrow at any time during the year | 240 | | |
| · | to defease any tax-exempt bonds? | 24c | | |
| Ч | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | | | |
| | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | | | |
| 2 5 a | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | Х |
| h | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior | | | |
| ~ | year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? | | | |
| | If "Yes," complete Schedule L, Part I | 25b | | Х |
| 26 | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current | | | |
| | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| | controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II.</i> | 26 | | Х |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key | | | |
| | employee, creator or founder, substantial contributor or employee thereof, a grant selection committee | | | |
| | member, or to a 35% controlled entity (including an employee thereof) or family member of any of these | | | |
| | persons? If "Yes," complete Schedule L, Part III | 27 | | Х |
| 28 | Was the organization a party to a business transaction with one of the following parties (see the Schedule L, | | | |
| | Part IV, instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| а | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If | | | |
| | "Yes," complete Schedule L, Part IV | 28a | | X |
| b | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | 28b | | X |
| С | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If | | | |
| | "Yes," complete Schedule L, Part IV | 28c | | X |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | Χ | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | |
| | conservation contributions? If "Yes," complete Schedule M | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," | | | |
| | complete Schedule N, Part II | 32 | | _X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, | | | |
| | or IV, and Part V, line 1 | 34 | | X |
| | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a | | | |
| | controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable | | | |
| | related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | _X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | 27 | | 3.5 |
| 20 | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | X |
| 38 | Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note : All Form 990 filers are required to complete Schedule O | 38 | Х | |
| Part | | _ 30 | Λ | |
| ાલા | Check if Schedule O contains a response or note to any line in this Part V | | | |
| | Shook in Conducto C Contains a response of note to dry line in the fact v | | Yes | No |
| 1 a | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable | | | |
| | Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable | | | |
| | Did the organization comply with backup withholding rules for reportable payments to vendors and | | | |
| J | reportable gaming (gambling) winnings to prize winners? | 1c | | |
| | | | | |

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| Par | Statements Regarding Other IRS Filings and Tax Compliance (continued) | | Yes | No | | | | |
|------|--|-----|-----|----|--|--|--|--|
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | | | | | | | |
| | Statements, filed for the calendar year ending with or within the year covered by this return. 2a 133 | | | | | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | Х | | | | | |
| | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | X | | | | |
| | b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O | | | | | | | |
| | 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)? | 4a | | X | | | | |
| b | If "Yes," enter the name of the foreign country | | | | | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | X | | | | |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | Х | | | | |
| | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | | | | | |
| | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | | | | | |
| | organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | X | | | | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or | | | | | | | |
| | gifts were not tax deductible? | 6b | | | | | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | | | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods | | | | | | | |
| | and services provided to the payor? | 7a | | Х | | | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | | | | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | | | | | | | |
| | required to file Form 8282? | 7c | | Х | | | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | | | | | |
| | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | X | | | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | X | | | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | | | | | |
| h | h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | | | | | | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | | | | | |
| | sponsoring organization have excess business holdings at any time during the year? | 8 | | | | | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | | | | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | | | | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | | | | | |
| | Initiation fees and capital contributions included on Part VIII, line 12 | | | | | | | |
| | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | | | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | | | | | |
| | Gross income from members or shareholders | | | | | | | |
| b | Gross income from other sources. (Do not net amounts due or paid to other sources | | | | | | | |
| 40 - | against amounts due or received from them.) | 12a | | | | | | |
| | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | | | | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | 13a | | | | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 154 | | | | | | |
| h | Enter the amount of reserves the organization is required to maintain by the states in which | | | | | | | |
| D | the organization is licensed to issue qualified health plans | | | | | | | |
| _ | Enter the amount of reserves on hand | | | | | | | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | X | | | | |
| | If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> · · · · · · | 14b | | | | | | |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or | | | | | | | |
| | excess parachute payment(s) during the year? | 15 | | Х | | | | |
| | If "Yes," see the instructions and file Form 4720, Schedule N. | | | | | | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | 16 | | Х | | | | |
| . • | If "Yes," complete Form 4720, Schedule O. | | | | | | | |
| 17 | Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities | | | | | | | |
| | that would result in the imposition of an excise tax under section 4951, 4952, or 4953? | 17 | | | | | | |
| | If "Yes," complete Form 6069. | | | | | | | |

13-2890727

Form 990 (2022) Part VI

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

| Sect | ion A. Governing Body and Management | • • • | | • • • | | 21 |
|-------|--|---------|------------|---------|------------------|--------|
| | | | | | Yes | No |
| 10 | Enter the number of veting members of the governing hady at the and of the toy year | 1a | 19 | | | |
| ıa | Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or | | | 1 | | |
| | if the governing body delegated broad authority to an executive committee or similar | | | | | |
| | committee, explain on Schedule O. | 1b | 19 | | | |
| | Enter the number of voting members included on line 1a, above, who are independent | | | 1 | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business re | | - | 2 | | Х |
| _ | any other officer, director, trustee, or key employee? | | | | | |
| 3 | Did the organization delegate control over management duties customarily performed by or un | | | , | | 77 |
| | supervision of officers, directors, trustees, or key employees to a management company or other p | | | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was fi | | | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's | | | 5 | | X |
| 6 | Did the organization have members or stockholders? | | | 6 | | X |
| 7a | Did the organization have members, stockholders, or other persons who had the power to el | | | | | |
| | one or more members of the governing body? | | | 7a | | X |
| b | Are any governance decisions of the organization reserved to (or subject to approval | | | l | | |
| | stockholders, or persons other than the governing body? | | | 7b | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions under | ertake | n during | | | |
| | the year by the following: | | | | | |
| а | The governing body? | | | 8a | X | |
| b | Each committee with authority to act on behalf of the governing body? | | | 8b | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot | | | | | |
| | the organization's mailing address? If "Yes," provide the names and addresses on Schedule O. | | | 9 / | , | X |
| Secti | on B. Policies (This Section B requests information about policies not required by the Inte | ernai | Revenue | Code | <i>.)</i> Yes | |
| | | | | | res | No |
| | Did the organization have local chapters, branches, or affiliates? | | | 10a | | X |
| b | If "Yes," did the organization have written policies and procedures governing the activities of | such | chapters, | | | |
| | affiliates, and branches to ensure their operations are consistent with the organization's exempt p | • | | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before fi | ling th | e form? . | 11a | X | |
| b | Describe on Schedule O the process, if any, used by the organization to review this Form 990. | | | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | | | 12a | X | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests | hat c | ould give | | | |
| | rise to conflicts? | | | 12b | X | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the p | olicy? | If "Yes," | | | |
| | describe on Schedule O how this was done | | | 12c | X | |
| 13 | Did the organization have a written whistleblower policy? | | | 13 | X | |
| 14 | Did the organization have a written document retention and destruction policy? | | | 14 | X | |
| 15 | Did the process for determining compensation of the following persons include a review ar | nd app | oroval by | | | |
| | independent persons, comparability data, and contemporaneous substantiation of the deliberation | and | decision? | | | |
| а | The organization's CEO, Executive Director, or top management official | | | 15a | X | |
| b | Other officers or key employees of the organization | | | 15b | X | |
| | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. | | | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar | r arra | ingement | | | |
| | with a taxable entity during the year? | | | 16a | | X |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization | | | | | |
| | participation in joint venture arrangements under applicable federal tax law, and take steps to | | | | | |
| | organization's exempt status with respect to such arrangements? | | | 16b | | |
| Secti | on C. Disclosure | | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O | | | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), | | and 990-1 | Γ (sec | tion 5 | 01(c) |
| | (3)s only) available for public inspection. Indicate how you made these available. Check all that ap | | 6) | | | |
| | Own website Another's website X Upon request Other (explain on Sc | | , | | | |
| 19 | Describe on Schedule O whether (and if so, how) the organization made its governing documents of the control of | nents, | conflict o | f inter | est p | olicy, |
| | and financial statements available to the public during the tax year. | | | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's I MAUREEN BURNLEY 125 MAIDEN LANE, 7TH FLOOR NEW YORK, NY 10038 | oooks | and record | S | | |

212-248-1111

Form **990** (2022)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

| (A) Name and title | (B) Average hours per week (list any | box, | unles er and | (C) Position heck more than coss person is both d a director/trust | | | an tee) | organization (M/2/ | 1099-MISC/ | (F) Estimated amount of other compensation from the |
|--------------------------------|--|--------------------------------|--|--|--|---|------------|--------------------|------------|---|
| | hours for related organizations below dotted line) | Individual trustee or director | Officer Institutional trustee Individual trustee | | Former Highest compensated employee Key employee | | Former | , | , | organization and related organizations |
| (1) HERMINIA PALACIO | 35.00 | | | | | | | | | |
| PRESIDENT & CEO | NONE | | | х | | | | 371,060. | NONE | 48,391. |
| (2) SUSHEELA SINGH | 35.00 | | | | | | | 3.2,333 | | |
| DISTINGUISHED SCHOLAR & VP | NONE | | | | X | | | 335,394. | NONE | 70,785. |
| (3) JONATHAN WITTENBERG | 35.00 | | | | | | | , | - | , |
| EXECUTIVE VICE PRESIDENT | NONE | | | Х | | | | 279,562. | NONE | 63,529. |
| (4) ALETHA AKERS | 35.00 | | | | | | | · | | |
| VP FOR RESEARCH | NONE | | | | X | | | 308,768. | NONE | 31,066. |
| (5) MAUREEN BURNLEY | 35.00 | | | | | | | | | |
| VP FOR FINANCE & ADMIN. | NONE | | | Х | | | | 254,714. | NONE | 52,894. |
| (6) MAIBE PONET | 35.00 | | | | | | | | | |
| VP FOR COMMUNICATIONS & PUBLIC | NONE | | | Х | | | | 238,385. | NONE | 62,960. |
| (7) HEATHER BOONSTRA | 35.00 | | | | | | | | | |
| VP FOR PUBLIC POLICY | NONE | | | Х | | | | 249,960. | NONE | 51,132. |
| (8) KATHYRN KOST | 35.00 | | | | | | | | | |
| DIRECTOR OF DOMESTIC RESEARCH | NONE | | | | | Х | | 247,657. | NONE | 51,870. |
| (9) WENDY SEALEY | 35.00 | | | | | | | | | |
| VICE PRESIDENT FOR DEVELOPMENT | NONE | | | Х | | | | 245,940. | NONE | 44,355. |
| (10) KATHLEEN RANDALL | 35.00 | | | | | | | | | |
| DIRECTOR OF PRODUCTION | NONE | | | | | Х | | 220,347. | NONE | 48,720. |
| (11) JENNIFER FROST | 35.00 | | | | | | | | | |
| PRINCIPAL RESEARCH SCIENTIST | NONE | | | | | Х | | 216,062. | NONE | 31,264. |
| (12) RACHEL JONES | 35.00 | | | | | | | | | |
| PRINCIPAL RESEARCH SCIENTIST | NONE | | | | | Х | | 203,535. | NONE | 31,432. |
| (13) REBECCA WIND | 35.00 | | | | | | | | | |
| DIRECTOR OF C&P ADMINISTRATIVE | NONE | | | | | Х | | 190,355. | NONE | 32,196. |
| (14) PAMELA MERRITT | 1.60 | | | | | | | | | |
| CHAIR | NONE | X | | Х | | | | NONE | NONE | NONE |

Form **990** (2022)

| | GUT | TMACHER INST | ITUTE, INC. | | 13-2890 | 727 |
|--------------|-------------------------------|--|--|------------------------------------|--------------------------------------|---------------------------------|
| Form 990 (20 | 22) | | | | | Page 8 |
| Part VII | Section A. Officers, Director | rs, Trustees, Ke | y Employees, and High | nest Compensat | ed Employees (d | continued) |
| | (A) | (B) | (C) | (D) | (E) | (F) |
| | Name and title | Average hours per week (list any | Position (do not check more than one box, unless person is both an | Reportable compensation from | Reportable compensation from related | Estimated amount of other |

| Section A. Officers, Directors, In | ustees, Ke | y En | тріо | yee | es, | and i | Higi | nest Compensat | ea Employees (d | continued) |
|--|-------------------------------|--------------------------------|-----------------------|---------|--------------|------------------------------|----------|----------------------|---------------------------|---------------------------------------|
| (A) | (B) | | | (C | C) | | | (D) | (E) | (F) |
| Name and title | Average | , , | | Pos | | | | Reportable | Reportable | Estimated |
| | hours per week (list any | , | | | | e than o is both | | compensation from | compensation from related | amount of other |
| | hours for | | | ad | | or/trust | | the | organizations | compensation |
| | related | or c | Inst | Officer | Key | Highest compensated employee | Former | organization | (W-2/1099-MISC) | from the |
| | organizations below dotted | Individual trustee or director | Institutional trustee | cer | Key employee | nest | ner | (W-2/1099-MISC) | | organization and related |
| | line) | tor tr | onal | | oloy | e con | | | | organizations |
| | | uste | trus | | ee | per | | | | |
| | | Ф | tee | | | nsate | | | | |
| | | | | | | ă. | | | | |
| (15) MICHAEL KLEIN | 1.00 | | | | | | | | | |
| VICE CHAIR | NONE | X | | Χ | | | | NONE | NONE | NONE |
| (16) ERNESTINA COAST | 1.20 | | | | | | | | | |
| IMMEDIATE PAST CHAIR | NONE | X | | Χ | | | | NONE | NONE | NONE |
| (17) GAIL BAITY | $-\frac{0.70}{10000}$ | - ,, | | ٠, | | | | NONE | NONE | 370375 |
| SECRETARY | NONE | X | | Χ | | | | NONE | NONE | NONE |
| (18) LAURA PHILIPS | 0.90 | 37 | | 3,7 | | | | NONE | NONE | NONE |
| TREASURER | 0.20 | X | | Χ | | | | NONE | NONE | NONE |
| (19) CYNTHIA FIELDS BOARD MEMBER (THRU 06/1/22) | NONE | X | | | | | | NONE | NONE | MONE |
| (20) SUSAN FRELICH APPLETON | 1.20 | _ A | | | | | | NONE | NONE | NONE |
| CHAIR, NOMINATING & GOVERNANCE | NONE | X | | | | | | NONE | NONE | NONE |
| (21) CAROLINE GREENE | 0.35 | Λ | | | | | | NOINE | NOINE | NONE |
| BOARD MEMBER | NONE | x | | | | | | NONE | NONE | NONE |
| (22) ALAN GUTTMACHER | 0.60 | _ ^ | | | | | | NONE | NONE | NOINE |
| MEMBER AT LARGE (THRU 06/1/22) | NONE | x | | | | | | NONE | NONE | NONE |
| (23) SILVIA HENRIQUEZ | 1.00 | 21 | | | | | | NONE | INOINE | NONE |
| CHAIR (THRU 06/1/22) | NONE | X | | | | | | NONE | NONE | NONE |
| (24) SUJATHA JESUDASON | 0.50 | - 21 | | | | | | 110111 | 110111 | 110111 |
| MEMBER AT LARGE (THRU 06/1/22) | NONE | X | | | | | | NONE | NONE | NONE |
| (25) BENJAMIN KAHRL | 0.75 | | | | | | | 110112 | 110112 | 110112 |
| BOARD MEMBER | NONE | x | | | | | | NONE | NONE | NONE |
| 1b Sub-total | | | | | | | | 3,361,739. | NONE | |
| c Total from continuation sheets to Part VII, § | Section A | | | | | | • | NONE | | · · · · · · · · · · · · · · · · · · · |
| d Total (add lines 1b and 1c) | - | | | | | | • | 3,361,739. | NONE | 620,594. |
| | | | | | | | | • | | |

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

| | | | Yes | No |
|---|---|---|-----|----|
| 3 | Did the organization list any former officer, director, or trustee, key employee, or highest compensated | | | |
| | employee on line 1a? If "Yes," complete Schedule J for such individual | 3 | | |
| 4 | For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such | | | |
| | individual | 4 | | |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual | | | |
| | for services rendered to the organization? If "Yes," complete Schedule J for such person | 5 | | |

Section B. Independent Contractors

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

| (A) Name and business address | (B) Description of services | (C) Compensation |
|-------------------------------|-----------------------------|---------------------|
| | | |
| | | |
| | | |

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

| Part VII Section A. Officers, Directors, Tru | 01000, 110 | y = | ipio | ye | ,, | anu i | ııgı | hest Compensat | ed Employees (c | onunueu) |
|---|-----------------------------|--------------------------------|-----------------------|---|--------------|------------------------------|--------|----------------------|---------------------------|-----------------------|
| (A) | (B) | | | (0 | C) | | | (D) | (E) | (F) |
| Name and title | Average | (do r | not ch | Pos | | than o | na | Reportable | Reportable | Estimated |
| | hours per week (list any | , | | check more than one ess person is both an | | | | compensation from | compensation from related | amount of other |
| | hours for | | | | | or/truste | | the | organizations | compensation |
| | related organizations | ndiv or di | nsti | Officer | (ey | emp | Former | organization | (W-2/1099-MISC) | from the organization |
| | below dotted | rect | tutio | er | emp | est o | Э | (W-2/1099-MISC) | | and related |
| | line) | Individual trustee or director | Institutional trustee | | Key employee | e comp | | | | organizations |
| | | stee | rust | | е | bens | | | | |
| | | | ee | | | Highest compensated employee | | | | |
| 26) ERIN ARMSTRONG | 0.70 | | | | | | | | | |
| MEMBER AT LARGE | NONE | Х | | | | | | NONE | NONE | NONE |
| 27) CONSTANCE MAO | 0.50 | | | | | | | | | |
| MEMBER AT LARGE (THRU 06/1/22) | NONE | Х | | | | | | NONE | NONE | NON |
| 28) ALEX EZEH | 0.25 | | | | | | | | | |
| BOARD MEMBER | NONE | Х | | | | | | NONE | NONE | NON |
| 29) MUGDHA MOKASHI | 0.40 | | | | | | | | | |
| BOARD MEMBER | NONE | Х | | | | | | NONE | NONE | NON |
| 30) MELISSA MURRAY | 0.50 | | | | | | | | | |
| BOARD MEMBER | NONE | X | | | | | | NONE | NONE | NON |
| 31) LIDA COLEMAN | 0.80 | | | | | | | | | |
| CHAIR OF AUDIT COMMITTEE | NONE | Х | | | | | | NONE | NONE | NON |
| 32) JESSICA PINKNEY GIL | 0.80 | | | | | | | | | |
| MEMBER AT LARGE | NONE | Х | | | | | | NONE | NONE | NONE |
| 33) LAURA ROSENBURY | 0.75 | | | | | | | | | |
| CHAIR OF DEVELOPMENT COMMITTEE | NONE | X | | | | | | NONE | NONE | NONI |
| 34) FAJER SAEED EBRAHIM | 0.50 | | | | | | | | | |
| BOARD MEMBER | NONE | X | | | | | | NONE | NONE | NONE |
| 35) NOZER SHERIAR | 0.60 | | | | | | | | | |
| BOARD MEMBER | NONE | X | | | | | | NONE | NONE | NONI |
| 36) BARBARA SINGHAUS | 0.75_ | | | | | | | NONE | NONE | 31031 |
| MEMBER AT LARGE | NONE | X | | | | | _ | NONE | NONE | NON |
| 1b Sub-total | | | | | | | | | | |
| c Total from continuation sheets to Part VII, Se d Total (add lines 1b and 1c) | | | | | | | | | | |
| 2 Total number of individuals (including but not li | | | | | | | re | ceived more than | \$100.000 of | |
| reportable compensation from the organization | | 1036 | 11316 | u ai | JOVE | s) wiic | , 10 | ceived more man | φ 100,000 01 | |
| | <u> </u> | | | | | | | | | Yes No |
| 3 Did the organization list any former office | er directo | r or | tru | ıcta | ا م | kev e | mn | Jovee or highest | compensated | 100 100 |
| employee on line 1a? If "Yes," complete Schedu | | | | | | | | | | 3 |
| | | | | | | | | | | |
| 4 For any individual listed on line 1a, is the s organization and related organizations gre | | | | | | | | | | |
| individual | | | | | | | | | | 4 |
| 5 Did any person listed on line 1a receive or a | | | | | | | | | | |
| | | | | | | | | | | |
| for services rendered to the organization? If "Ye | s," comple | te Sch | nedu | ıle J | for | such | per | son | | 5 |

year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|-------------------------------|-----------------------------|---------------------|
| | | |
| | | |
| | | |
| | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

_____ Page **8**

| Part VI Section A. Officers, Directors, | Trustees, Ke | y En | npic | ye | es, | and F | ııgı | nest Compensat | ea Employ | yees (c | ontinued) |
|---|-----------------------------|--------------------------------|-----------------------|---------|--------------|---------------------|--------------|-----------------------|---------------------|---------|------------------------------|
| (A) | (B) | | | (0 | C) | | | (D) | (E) | | (F) |
| Name and title | Average | (40. | 4 1 | | sition | . 46 | | Reportable | Reportable | | Estimated |
| | hours per week (list any | , | | | | e than o is both | | compensation from | compensation relate | | amount of other |
| | hours for | 1 | | | | tor/trust | | the | organizat | | compensation |
| | related | or Ind | Ins | Off | .ĕ | Highest co | Fol | organization | (W-2/1099 | | from the |
| | organizations | livid | Ē | Officer | / en | hes | Former | (W-2/1099-MISC) | , | | organization |
| | below dotted line) | ual | lion | | Key employee | st co | ļ ~ | | | | and related organizations |
| | ilite) | Individual trustee or director | al tn | | yee | mp | | | | | organizations |
| | | lee | Institutional trustee | | | compensated ee | | | | | |
| | | | | | | ed | | | | | |
| 37) DENISE SPILLANE | 0.40 | | | | | | | | | | |
| BOARD MEMBER (THRU 06/1/22) | NONE | X | | | | | | NONE | | NONE | NON |
| 38) LOU TURNER ZELLNER | 1.10 | | | | | | | | | | 17017 |
| IMMED PAST CHAIR(THRU 06/1/22) | NONE | X | | | | | | NONE | | NONE | NON |
| 39) ALLANA WELCH | 0.70 | | | | | | | | | | |
| BOARD MEMBER | NONE | X | | | | | | NONE | | NONE | NON |
| 40) KIERRA JOHNSON | 0.40_ | 1 | | | | | | | | | |
| BOARD MEMBER (THRU 06/1/22) | NONE | X | | | | | | NONE | | NONE | NON: |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | _ | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | - | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| 1b Sub-total | | | | | | | | | | | |
| c Total from continuation sheets to Part VII | , Section A | | | | | | ightharpoons | | | | |
| d Total (add lines 1b and 1c) | | | | | | | > | | | | |
| 2 Total number of individuals (including but reportable compensation from the organiza | | hose | liste | d a | bov | e) who | re | ceived more than | \$100,000 | of | |
| Tepotrable compensation from the organiza | ILIOII 🕨 | | | | | | | | | | Yes No |
| 3 Did the organization list any former of | fficer. directo | or. or | tru | ıste | e. | kev e | ame | lovee, or highes | t compens | ated | 100 110 |
| employee on line 1a? If "Yes," complete Sch | | | | | | | | | | | 3 X |
| 4 For any individual listed on line 1a, is th | e sum of red | oortab | ole d | com | per | sation | n ar | nd other compens | sation from | the | |
| organization and related organizations | greater than | \$15 | 50,0 | 00? | ' It | "Yes | 3," | complete Schedu | le J for | such | |
| individual | | | | | | | | | | | 4 X |
| 5 Did any person listed on line 1a receive | | | | | | | | | | | |
| for services rendered to the organization? It | "Yes," comple | te Sci | hedu | ıle J | J for | such | per | son | <u></u> | | 5 X |
| Section B. Independent Contractors | ompopostod i | ndon | and c | nt | 000 | trooto | ro t | hat received mare | than \$100 | 0000 | £ |
| 1 Complete this table for your five highest c compensation from the organization. Repo | | | | | | | | | | | |
| year. | | | | | | | | | | | |
| (A) SEE SCHEDIILE O Name and business | AL LL I LL | | | | | | | (B) Description of se | rvices | <u></u> | (C) compensation |
| SEE SCHEDULE O Name and business | address | | | | | | | Description of se | II VICES | | ompensation |
| | | | | | | | | | | | |
| | | | | | | | - | | | | |
| | | | | | | | | | | | |
| 2 Total number of independent contractors | | | | nite | d to | thos | e li | <u>-</u> | received | | |
| more than \$100,000 in compensation from | the organizat | tion 🕽 | ▶ | | | | | 18 | | | |

Part VIII Statement of Revenue

| | | Check if Schedule O cor | ntains a respor | se or note to ar | y line in this Part V | /111 | | |
|---|--------|--|------------------|------------------|-----------------------|--|--------------------------------------|---|
| | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| s, s, | 1a | Federated campaigns | 1a | | | | | |
| Contributions, Gifts, Grants, and Other Similar Amounts | b | Membership dues | | | | | | |
| عَ ق | C | Fundraising events | | | | | | |
| its, r A | d | Related organizations | | | | | | |
| ig ig | e | Government grants (contributi | | 619,473. | | | | |
| JS, | f | All other contributions, gifts, | , | | | | | |
| ξë | | and similar amounts not included | - | 31,822,564. | | | | |
| ş Ç | _ | Noncash contributions include | | 31,021,301. | | | | |
| Ę, | g | lines 1a-1f | | 7,489,224. | | | | |
| a S | h | Total. Add lines 1a-1f | | | 32,442,037. | | | |
| _ | - " | Total. Add lines 1a-11 | | Business Code | 32,112,037. | | | |
| ø | | PUBLICATIONS | | 900099 | 14,029. | 14,029. | | |
| ξ | 2a | | | 300033 | 11,025. | 11,025. | | |
| Se | b | | | | | | | |
| a S | C | | | | | | | |
| Regis | d | | | | | | | |
| Program Service Revenue | e | All other program consise you | | | | | | |
| | f g | All other program service reve Total. Add lines 2a-2f | | | 14,029. | | | |
| | 3 | Investment income (includi | | | , | | | |
| | " | other similar amounts) | - | | 909,138. | | | 909,138. |
| | 4 | Income from investment of ta | | | NONE | | | |
| | 5 | Royalties | | - | 5,997. | | | 5,997. |
| | | | (i) Real | (ii) Personal | | | | |
| | 6a | Gross rents 6a | | | | | | |
| | b | Less: rental expenses 6b | | | | | | |
| | C | Rental income or (loss) 6c | NONE | NONE | | | | |
| | d | Net rental income or (loss) | | | NONE | | | |
| | 7a | Gross amount from | (i) Securities | (ii) Other | | | | |
| | | sales of assets | | | | | | |
| | | other than inventory 7a | 28,805,683. | | | | | |
| <u>o</u> | b | Less: cost or other basis | | | | | | |
| n (| | and sales expenses 7b | 29,341,384. | | | | | |
| evenue | С | Gain or (loss) 7c | -535,701. | | | | | |
| ~ | d | Net gain or (loss) | | | -535,701. | | | -535,701. |
| Other | 8a | Gross income from fu | | | | | | |
| Ö | | events (not including \$ | ٠, | | | | | |
| | | of contributions reported | | | | | | |
| | | 1c). See Part IV, line 18 | | NONE | | | | |
| | b | Less: direct expenses | | NONE | | | | |
| | С | Net income or (loss) from fun | | | NONE | | | |
| | 9a | Gross income from | gaming | | | | | |
| | | activities. See Part IV, line 19 | 9a | NONE | | | | |
| | b | Less: direct expenses | 9b | NONE | | | | |
| | С | Net income or (loss) from ga | ming activities | | NONE | | | |
| | 10a | Gross sales of inventor | • . | | | | | |
| | | returns and allowances | <u>10a</u> | NONE | | | | |
| | b | Less: cost of goods sold | | NONE | | | | |
| | С | Net income or (loss) from sale | es of inventory. | | NONE | | | |
| ns | | | | Business Code | | | | |
| Miscellaneous Revenue | 11a | OTHER | | 900099 | 143,966. | | | 143,966. |
| scellaneo Revenue | b | | | | | | | |
| Se. | С | | | | | | | |
| Ξ | d | All other revenue | | | | | | |
| | e_ | Total. Add lines 11a-11d | | | 143,966. | | | |
| | 12 | Total revenue. See instruction | 15 | | 32,979,466. | 14,029. | | 523,400. |

13-2890727

Part IX Statement of Functional Expenses

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

| Check | if Schedule O contains a resp | onse or note to any line | in this Part IX | | |
|--|---|--------------------------|------------------------------|---|---------------------------------------|
| Do not include amo 8b, 9b, and 10b of | ounts reported on lines 6b, 7b, Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 Grants and other a | assistance to domestic organizations | | | | |
| and domestic gove | rnments. See Part IV, line 21 | NONE | | | |
| 2 Grants and of | ther assistance to domestic | | | | |
| individuals. See | Part IV, line 22 | NONE | | | |
| 3 Grants and c | other assistance to foreign | | | | |
| • | foreign governments, and | | | | |
| • | lls. See Part IV, lines 15 and 16 | NONE | | | |
| | or for members | NONE | | | |
| • | of current officers, directors, | 0 500 005 | 0.010.554 | 521 065 | 164 254 |
| trustees, and key | employees | 2,708,895. | 2,012,554. | 531,967. | 164,374. |
| · | t included above to disqualified | | | | |
| | ed under section 4958(f)(1)) and | 170177 | | | |
| | in section 4958(c)(3)(B) | NONE | 0.000.040 | 0 110 041 | 654 105 |
| | nd wages | 10,775,308. | 8,008,942. | 2,112,241. | 654,125. |
| | cruals and contributions (include | 1,073,008. | 795,310. | 212,742. | 64,956 |
| . , | nd 403(b) employer contributions) | 1,809,112. | 1,340,997. | 358,589. | 109,526. |
| | benefits | 922,122. | 683,473. | 182,827. | 55,822 |
| • | | 922,122. | 003,473. | 102,027. | 33,022. |
| 11 Fees for services | | NONE | | | |
| | | 354,004. | 189,082. | 164,922. | |
| | | 105,955. | 100,002. | 105,955. | |
| - | | 4,710. | 4,710. | 103,333. | |
| | aising services. See Part IV, line 17 | NONE | 1,710. | | |
| | agement fees | 147,072. | | 147,072. | |
| | amount exceeds 10% of line 25, column | SEE SCHE O | | 117,072. | |
| | 1g expenses on Schedule O.) | 5,499,822. | 5,161,182. | | 338,640. |
| | promotion | NONE | 3/101/1021 | | 330,010. |
| | | 601,777. | 385,553. | 109,261. | 106,963. |
| | nology | 511,469. | 174,331. | 301,746. | 35,392 |
| | | NONE | , | , | , |
| | | 1,784,417. | 1,468,590. | 192,478. | 123,349. |
| | | 309,001. | 99,206. | 209,185. | 610 |
| | avel or entertainment expenses | | | | |
| , | state, or local public officials | NONE | | | |
| 19 Conferences, co | onventions, and meetings | 189,884. | 60,963. | 128,546. | 375 |
| | | NONE | | | |
| | liates | NONE | | | |
| 22 Depreciation, de | pletion, and amortization | 703,202. | 522,667. | 137,846. | 42,689 |
| 23 Insurance | | 131,029. | 107,838. | 14,134. | 9,057 |
| 24 Other expenses. | Itemize expenses not covered | | | | |
| above. (List misce | ellaneous expenses on line 24e. If | | | | |
| line 24e amount | exceeds 10% of line 25, column | | | | |
| (A), amount, list li | ine 24e expenses on Schedule O.) | | | | |
| a PRINTING A | AND ARTWORK | 74,974. | 10,067. | 4,360. | 60,547 |
| b MISCELLANE | EOUS | 64,186. | 5,519. | 53,091. | 5,576 |
| c | | | | | |
| d | | | | | |
| e All other expens | es | | | | |
| | expenses. Add lines 1 through 24e | 27,769,947. | 21,030,984. | 4,966,962. | 1,772,001. |
| organization rep from a combine | omplete this line only if the orted in column (B) joint costs ed educational campaign and itation. Check here | | | | |
| • | 8-2 (ASC 958-720) | | | | |

Form 990 (2022) Page **11**

Part X Balance Sheet

| F | art X | Balance Sheet Check if Schedule O contains a response or note to any line in this | Part X | | |
|----------------------|-------|---|--------------------------|----|------------------------|
| | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | 97,457. | 1 | 1,548,948. |
| | 2 | Savings and temporary cash investments | 22,434,548. | 2 | 18,952,862. |
| | 3 | Pledges and grants receivable, net | 10,566,327. | 3 | 4,364,841. |
| | 4 | Accounts receivable, net | 54,435. | 4 | 282,810. |
| | 5 | Loans and other receivables from any current or former officer, director, | | | |
| | | trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| | | controlled entity or family member of any of these persons | NONE | 5 | NON |
| | 6 | Loans and other receivables from other disqualified persons (as defined | | | |
| | | under section 4958(f)(1)), and persons described in section $4958(c)(3)(B)$. | NONE | 6 | NONE |
| şţs | 7 | Notes and loans receivable, net | . NONE | 7 | NON |
| Assets | 8 | Inventories for sale or use | | 8 | NONE |
| ⋖ | 9 | Prepaid expenses and deferred charges | 342,924. | 9 | 177,338. |
| | 10 a | Land, buildings, and equipment: cost or other | | | |
| | | basis. Complete Part VI of Schedule D 10a 19,829,443 | | | |
| | b | Less: accumulated depreciation | | | 8,623,134. |
| | 11 | Investments - publicly traded securities | | 11 | 36,984,010. |
| | 12 | Investments - other securities. See Part IV, line 11 | | | NONE |
| | 13 | Investments - program-related. See Part IV, line 11 | | 13 | NONE |
| | 14 | Intangible assets | | | NONE |
| | 15 | Other assets. See Part IV, line 11 | | 15 | 5,108,317. |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 33) | | 16 | 76,042,260. |
| | 17 | Accounts payable and accrued expenses | | 17 | 1,562,179. |
| | 18 | Grants payable | | | NONE |
| | 19 | Deferred revenue | | | NONE |
| | 20 | Tax-exempt bond liabilities | | | NONE |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | NONE |
| es | 22 | Loans and other payables to any current or former officer, director, | | | |
| ≝ | | trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| Liabilities | | controlled entity or family member of any of these persons | | | NONE |
| _ | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | 7,363,829. |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | NONE |
| | 25 | Other liabilities (including federal income tax, payables to related third | | | |
| | | parties, and other liabilities not included on lines 17-24). Complete Part X | | | |
| | | of Schedule D | 7,217,939. | | 6,037,101. |
| _ | 26 | Total liabilities. Add lines 17 through 25 | 16,658,857. | 26 | 14,963,109. |
| ces | | Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. | | | |
| <u>a</u> | 27 | Net assets without donor restrictions | 22,852,296. | 27 | 33,563,759. |
| ĕ | 28 | Net assets with donor restrictions | | 28 | 27,515,392. |
| Fund Balances | | Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. | , , | | · |
| ō | 29 | Capital stock or trust principal, or current funds | | 29 | |
| ets | 30 | Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| SS | 31 | Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| Net Assets or | 32 | Total net assets or fund balances | | 32 | 61,079,151. |
| Ž | 33 | Total liabilities and net assets/fund balances | | 33 | 76,042,260. |
| _ | 55 | Total navintes and het assets/fund valances, , , , , , , , , , , , , , , , , , , | /0,905,0/5. | ာ၁ | Form 990 (2022) |

Form **990** (2022)

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| Form 9 | 90 (2022) | | | | Pa | ige IZ |
|--------|---|-------|-----|------|-----|-------------|
| Part | XI Reconciliation of Net Assets | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | | . X |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | • | 32,9 | 79, | 466 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | • | 27,7 | 69, | 947 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | 5,2 | 09, | <u>519</u> |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | (| 50,2 | 46, | 818 |
| 5 | Net unrealized gains (losses) on investments | 5 | | -4,1 | 24, | 445 |
| 6 | Donated services and use of facilities | 6 | | | | |
| 7 | Investment expenses | 7 | | | | |
| 8 | Prior period adjustments | 8 | | | | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | | -2 | 52, | <u>741</u> |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line | | | | | |
| | 32, column (B)) | 10 | (| 51,0 | 79, | <u> 151</u> |
| Part | | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | | \perp |
| | | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," ex | plain | on | | | |
| | Schedule O. | | | _ | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | | 2a | | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were com- | piled | or | | | |
| | reviewed on a separate basis, consolidated basis, or both: | | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | | 2b | X | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audit | ed o | n a | | | |
| | separate basis, consolidated basis, or both: | | | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over | _ | | | | |
| | the audit, review, or compilation of its financial statements and selection of an independent accounta- | | | 2c | X | |
| | If the organization changed either its oversight process or selection process during the tax year, ex | plain | on | | | |
| | Schedule O. | | | | | |
| 3 a | As a result of a federal award, was the organization required to undergo an audit or audits as set for | | | | | |
| | Uniform Guidance, 2 C.F.R. Part 200, Subpart F? | | | 3a | X | - |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not und | ergo | the | | | |

required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits . . .

3b X

SCHEDULE A (Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

| GU: | TM | ACHER INSTITUTE, IN | | | | | | 890727 | |
|----------|---|---------------------------------|---------------------|---|-------------------|------------------------------|--|-----------------------------------|--|
| Pa | rt I | Reason for Public Ch | arity Status. (All | organizations must | comple | ete this p | oart.) See instruction | ns. | |
| The | orga | anization is not a private fou | ndation because it | is: (For lines 1 through | gh 12, ch | eck only | one box.) | | |
| 1 | | A church, convention of chu | urches, or associa | tion of churches descr | ribed in s | ection 1 | 70(b)(1)(A)(i). | | |
| 2 | | A school described in secti | on 170(b)(1)(A)(ii) | . (Attach Schedule E | (Form 99 | 90).) | | | |
| 3 | | A hospital or a cooperative | hospital service o | rganization described | in sectio | n 170(b) | (1)(A)(iii). | | |
| 4 | | A medical research organiz | zation operated in | conjunction with a hos | spital de | scribed ir | n section 170(b)(1)(A) | (iii). Enter the | |
| | _ | hospital's name, city, and st | | | | | | | |
| 5 | | An organization operated to | | a college or universit | y owne | d or ope | rated by a governme | ental unit described in | |
| | | section 170(b)(1)(A)(iv). (C | Complete Part II.) | | | | | | |
| 6 | | A federal, state, or local go | • | | | • | , , , , , , , | | |
| 7 | X | An organization that norma | | | pport fr | om a go | vernmental unit or fr | om the general public | |
| | | described in section 170(b) | | | | | | | |
| 8 | | A community trust describe | | | | | | | |
| 9 | | An agricultural research org | = | | | - | - | | |
| | | or university or a non-land- | grant college of ac | griculture (see instruct | ions). E | nter the i | name, city, and state o | f the college or | |
| | | university: | | | | | | | |
| 10 | An organization that normally receives (1) more than 331/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). | | | | | | | | |
| 11 12 | | An organization organized a | • | • | • | | | rry out the nurneese of | |
| 12 | | one or more publicly suppo | • | • | | | | | |
| | | the box on lines 12a through | = | | | - | | | |
| а | Г | Type I. A supporting orga | | ,, ,, | 0 0 | | • | | |
| а | _ | the supported organization | • | • | | | • , , | | |
| | | supporting organization. | | | | ajority of | the directors of truste | ico di tric | |
| b | | Type II. A supporting org | - | | | with its | supported organizati | on(s), by having | |
| - | | control or management of | • | | | | | | |
| | | organization(s). You must | | | | , p - 1 - 1 - 1 | | | |
| С | | Type III functionally integ | • | | ited in c | onnectio | n with, and functiona | lly integrated with, | |
| | | its supported organization | | | | | | | |
| d | | Type III non-functionally | | • | | | | ted organization(s) | |
| | | that is not functionally into | egrated. The organ | nization generally mus | t satisfy | a distrib | ution requirement an | d an attentiveness | |
| | _ | requirement (see instruct | ions). You must co | omplete Part IV, Sect | ions A a | nd D, an | d Part V. | | |
| е | L | _ Check this box if the orga | anization received | a written determinatio | n from t | he IRS th | nat it is a Type I, Type | II, Type III | |
| | | functionally integrated, or | | ionally integrated sup | porting o | organizat | ion. | | |
| f | | ter the number of supported | | | | | | | |
| g | | ovide the following information | | | 1 | | | T | |
| | (i) N | ame of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-10 | ` ' | organization ur governing | (v) Amount of monetary support (see | (vi) Amount of other support (see | |
| | | | | above (see instructions)) | | ment? | instructions) | instructions) | |
| | | | | | Yes | No | | | |
| (A) | | | | | | | | | |
| | | | | | | | | | |
| (B) | | | | | | | | | |
| | | | | | | | | | |
| (C) | | | | | | | | | |
| | | | | | | | | | |
| (D) | | | | | | | | | |
| | | | | | | | | | |
| (E) | | | | | | | | | |
| | | | | | | | | | |
| Tota | 11 | | | | | | | 1 | |

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

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

| Sec | tion A. Public Support | | | | | | |
|--------|--|------------------------|-------------------------|-------------------------|-------------------------|-------------------------|----------------------------|
| Cale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 9,909,078. | 17,411,971. | 18,034,032. | 33,703,442. | 32,442,037. | 111,500,560. |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | NONE |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | NONE |
| 4 | Total. Add lines 1 through 3 | 9,909,078. | 17,411,971. | 18,034,032. | 33,703,442. | 32,442,037. | 111,500,560. |
| 5 | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount | | | | | | |
| | shown on line 11, column (f) | | | | | | 48,129,384. |
| _6 | Public support. Subtract line 5 from line 4 | | | | | | 63,371,176. |
| | tion B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| 7 8 | Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 9,909,078. 751,326. | 17,411,971. 771,265. | 18,034,032. 526,871. | 33,703,442. 593,146. | 32,442,037. 915,135. | 111,500,560. 3,557,743. |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | NONE |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)SEE. SUPP.PAGE | 25,996. | 207,690. | 14,057. | 15,511. | 143,966. | 407,220. |
| 11 | Total support. Add lines 7 through 10 | | | | | | 115,465,523. |
| 12 | Gross receipts from related activities, etc. (s | see instructions) . | | | | 12 | 168,407. |
| 13 | First 5 years. If the Form 990 is for organization, check this box and stop here | <u> </u> | | | | | |
| | tion C. Computation of Public Sup | | | | | | |
| 14 | Public support percentage for 2022 (li | | • | | | 14 | 54.88 % |
| 15 | Public support percentage from 2021 | • | • | | | 15 | 62.97 % |
| тоа | 331/3% support test - 2022. If the orgonization question and stop here. The organization question question and stop here. | | | | | | |
| h | 331/3% support test - 2021. If the organization qu | • | | • | | | |
| b | this box and stop here. The organization | | | | | | |
| 17a | 10%-facts-and-circumstances test - 2 | | | _ | | | |
| | 10% or more, and if the organization | _ | | | | | |
| | Part VI how the organization meets | | | | | - | - |
| | organization | | | _ | - | | |
| b | 10%-facts-and-circumstances test - 2 | | | | | | |
| ~ | 15 is 10% or more, and if the organization | - | = | | | | |
| | in Part VI how the organization meets | | | | | _ | |
| | organization | | | | | | |
| 18 | Private foundation. If the organization | | | | | | |
| • | instructions | | | | | | |

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

| Sec | tion A. Public Support | | | | | | |
|------|---|---------------------|----------------------|-------------------|-----------------|------------------|-----------|
| Cale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees | | | | | | |
| | received. (Do not include any "unusual grants.") | | | | | | |
| 2 | Gross receipts from admissions, merchandise | | | | | | |
| | sold or services performed, or facilities | | | | | | |
| | furnished in any activity that is related to the | | | | | | |
| | organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an | | | | | | |
| | unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the | | | | | | |
| | organization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to the | | | | | | |
| | organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| 7 a | Amounts included on lines 1, 2, and 3 | | | | | | |
| | received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified | | | | | | |
| | persons that exceed the greater of \$5,000 | | | | | | |
| | or 1% of the amount on line 13 for the year | | | | | | |
| | Add lines 7a and 7b | | | | | | |
| 8 | Public support. (Subtract line 7c from | | | | | | |
| Sec | tion B. Total Support | | | | | | |
| | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| 9 | Amounts from line 6 | (-, - | (.,, | (3, 2 | (1) | | () |
| | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar | | | | | | |
| h | Unrelated business taxable income (less | | | | | | |
| b | section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | | |
| | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business | | | | | | |
| • | activities not included on line 10b, whether | | | | | | |
| | or not the business is regularly carried on | | | | | | |
| 12 | | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets | | | | | | |
| | (Explain in Part VI.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, | | | | | | |
| | and 12.) | | | | | | |
| 14 | First 5 years. If the Form 990 is for | the organizati | on's first, secon | d, third, fourth, | or fifth tax ye | ar as a section | 501(c)(3) |
| | organization, check this box and stop here | <u> </u> | | | | | |
| Sec | tion C. Computation of Public Supp | | | | | | |
| 15 | Public support percentage for 2022 (line 8, | , column (f), divid | led by line 13, colu | ımn (f)) | | 15 | % |
| 16 | Public support percentage from 2021 Sche | | | | | 16 | % |
| Sec | tion D. Computation of Investmen | | | | | | |
| 17 | Investment income percentage for 2022 (lin | | | | | 17 | % |
| 18 | Investment income percentage from 2021 | | | | | 18 | % |
| 19 a | 331/3% support tests - 2022. If the or | - | | | | | |
| | 17 is not more than 331/3 %, check this | - | - | • | | | |
| b | 331/3% support tests - 2021. If the orga | | | | | | |
| | line 18 is not more than 331/3 %, check | | - | • | | | |
| 20 | Private foundation If the organization of | TIC NOT CHECK 1 | a nov on line 1 | ıд 192 or 10h | Check this ho | y and see instri | ICTIONS |

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- 10 a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

| | | Yes | No |
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| | 10b | | |

| Part | V Supporting Organizations (continued) | | | |
|---------------|--|---------|------------|----|
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described on lines 11b and | | | |
| | 11c below, the governing body of a supported organization? | 11a | | |
| | A family member of a person described on line 11a above? | 11b | | |
| С | A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. | 11c | | |
| Secti | on B. Type I Supporting Organizations | 110 | | |
| 500 th | on billypo i cupporting organizations | | Yes | No |
| 1 | Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. | 2 | | |
| Secti | on C. Type II Supporting Organizations | | \ <u>\</u> | |
| | | | Yes | NO |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | 1 | | |
| Secti | on D. All Type III Supporting Organizations | | | |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of | | Yes | No |
| | the organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | | | |
| | supported organizations played in this regard. | 3 | | |
| | on E. Type III Functionally Integrated Supporting Organizations | 44* | | |
| 1 a b | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. | arucu | oris). | |
| С | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see | e instr | | |
| 2 | Activities Test. Answer lines 2a and 2b below. | | Yes | No |
| а | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. | 2a | | |
| b | Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. | 2b | | |
| 3 a | Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | | | |
| b | trustees of each of the supported organizations? <i>If</i> "Yes" or "No," provide details in Part VI. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | 3a | | |
| | of its supported organizations? If "Vas " describe in Part VI the role played by the organization in this regard | 26 | | |

Page 6 Schedule A (Form 990) 2022

| Pa | art V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ | nization | 5 | |
|----------------------------------|--|-----------|-------------------------|--------------------------------|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifyin instructions. All other Type III non-functionally integrated supporting organization | | | |
| Se | ection A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3. | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| _7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | | |
| Section B - Minimum Asset Amount | | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see | | | |
| | instructions for short tax year or assets held for part of year): | | | |
| a | Average monthly value of securities | 1a | | |
| _ | Average monthly cash balances | 1b | | |
| C | Fair market value of other non-exempt-use assets | 1c | | |
| | Total (add lines 1a, 1b, and 1c) | 1d | | |
| e | Discount claimed for blockage or other factors (explain in detail in Part VI): | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 | Subtract line 2 from line 1d. | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by 0.035. | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Se | ction C - Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 | | |
| 2 | Enter 0.85 of line 1. | 2 | | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, column A) | 3 | | |
| 4 | | 4 | | |
| 5 | Income tax imposed in prior year | 5 | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). | 6 | | |
| 7 | | | ted Type III supporting | n organization |
| ' | (see instructions). | ny miegla | ted Type iii Supporting | y organization |

Schedule A (Form 990) 2022

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Page **7**

| Secti | ction D - Distributions Current Year | | | | |
|----------|--|------------------------------------|---------------------------------------|----|---|
| 1 | Amounts paid to supported organizations to accomplish ex | kempt purposes | | 1 | |
| 2 | Amounts paid to perform activity that directly furthers exer | ed | | | |
| | organizations, in excess of income from activity | | 2 | | |
| 3 | Administrative expenses paid to accomplish exempt purpo | zations | 3 | | |
| 4 | Amounts paid to acquire exempt-use assets | | | 4 | |
| 5 | Qualified set-aside amounts (prior IRS approval required - p | rovide details in Part VI) | | 5 | |
| 6 | Other distributions (describe in Part VI). See instructions. | | | 6 | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | 7 | |
| 8 | Distributions to attentive supported organizations to which | the organization is resp | onsive | | |
| | (provide details in Part VI). See instructions. | | | 8 | |
| 9 | Distributable amount for 2022 from Section C, line 6 | | | 9 | |
| 10 | Line 8 amount divided by line 9 amount | | | 10 | |
| Secti | on E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistribution Pre-2022 | s | (iii) Distributable Amount for 2022 |
| 1 | Distributable amount for 2022 from Section C, line 6 | | | | |
| 2 | Underdistributions, if any, for years prior to 2022 | | | | |
| | (reasonable cause required - explain in Part VI). See | | | | |
| | instructions. | | | | |
| 3 | Excess distributions carryover, if any, to 2022 | | | | |
| а | From 2017 | | | | |
| b | From 2018 | | | | |
| С | From 2019 | | | | |
| d | From 2020 | | | | |
| е | From 2021 | | | | |
| f | Total of lines 3a through 3e | | | | |
| g | Applied to underdistributions of prior years | | | | |
| h | Applied to 2022 distributable amount | | | | |
| i_ | Carryover from 2017 not applied (see instructions) | | | | |
| j_ | Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | | |
| 4 | Distributions for 2022 from | | | | |
| | Section D, line 7: \$ | | | | |
| a | Applied to underdistributions of prior years | | | | |
| b | Applied to 2022 distributable amount | | | | |
| <u>c</u> | Remainder. Subtract lines 4a and 4b from line 4. | | | | |
| 5 | Remaining underdistributions for years prior to 2022, if | | | | |
| | any. Subtract lines 3g and 4a from line 2. For result | | | | |
| | greater than zero, explain in Part VI. See instructions. | | | | |
| 6 | Remaining underdistributions for 2022. Subtract lines 3h | | | | |
| | and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. | | | | |
| 7 | Excess distributions carryover to 2023. Add lines 3j | | | | |
| | and 4c. | | | | |
| 8 | Breakdown of line 7: | | | | |
| a | Excess from 2018 | | | | |
| b | Excess from 2019 | | | | |
| <u>c</u> | Excess from 2020 | | | | |
| d | Excess from 2021 | | | | |
| ее | Excess from 2022 | | | | |

Schedule A (Form 990 or 990-EZ) 2022

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part

III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

| SCHEDULE A, PART II - OTHER INCOME | | | | | | |
|------------------------------------|---------|----------|---------|---------|----------|----------|
| DESCRIPTION | 2018 | 2019 | 2020 | 2021 | 2022 | TOTAL |
| OTHER | 25,996. | 207,690. | 14,057. | 15,511. | 143,966. | 407,220. |
| | | | | | | |
| TOTALS | 25,996. | 207,690. | 14,057. | 15,511. | 143,966. | 407,220. |

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

| Name of the organization | Employer identification nu | Employer identification number | | |
|---|--|--|--|--|
| | 7. 7.7.0 | 13,0000000 | | |
| GUTTMACHER INSTITUTE Organization type (check one | • | 13-2890727 | | |
| organization type (enleak on | ·/· | | | |
| Filers of: | Section: | | | |
| Form 990 or 990-EZ | X 501(c)(3) (enter number) organization | | | |
| | 4947(a)(1) nonexempt charitable trust not treated | as a private foundation | | |
| | 527 political organization | | | |
| Form 990-PF | 501(c)(3) exempt private foundation | | | |
| | 4947(a)(1) nonexempt charitable trust treated as | a private foundation | | |
| | 501(c)(3) taxable private foundation | | | |
| Check if your organization is | covered by the General Rule or a Special Rule . | | | |
| Note: Only a section 501(c)(instructions. | 7), (8), or (10) organization can check boxes for both the Ger | eral Rule and a Special Rule. See | | |
| General Rule | | | | |
| _ | n filing Form 990, 990-EZ, or 990-PF that received, during the or property) from any one contributor. Complete Parts I and contributions. | | | |
| Special Rules | | | | |
| regulations under s 16b, and that rece | n described in section 501(c)(3) filing Form 990 or 990-EZ thections 509(a)(1) and 170(b)(1)(A)(vi), that checked Sched ved from any one contributor, during the year, total contributor on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line | ule A (Form 990), Part II, line 13, 16a, or tions of the greater of (1) \$5,000; or | | |
| contributor, during literary, or education | n described in section 501(c)(7), (8), or (10) filing Form 990 the year, total contributions of more than \$1,000 exclusively anal purposes, or for the prevention of cruelty to children or instead of the contributor name and address), II, and III. | for religious, charitable, scientific, | | |
| contributor, during contributions totale during the year for General Rule appli | n described in section 501(c)(7), (8), or (10) filing Form 990 the year, contributions exclusively for religious, charitable, ed more than \$1,000. If this box is checked, enter here the total exclusively religious, charitable, etc., purpose. Don't comes to this organization because it received nonexclusively religions during the year | tc., purposes, but no such otal contributions that were received plete any of the parts unless the gious, charitable, etc., contributions | | |
| = | isn't covered by the General Rule and/or the Special Rules, line 2, of its Form 990; or check the box on line H of its Form | | | |

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

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2022)

Name of organization

GUTTMACHER INSTITUTE INC

Employer identification number

| | GUTTMACHER INSTITUTE, INC. | | 13-2890727 |
|------------|--|--|---|
| Part I | Contributors (see instructions). Use duplicate copie | es of Part I if additional space is ne | eded. |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1_ | N/A | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | N/A | \$\$, 7,385,361. | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | N/A | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 4 | N/A | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 5_ | N/A | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 6 | N/A | | Person X Payroll Noncash |

(Complete Part II for noncash contributions.)

Name of organization

Employer identification number

| | GUTTMACHER INSTITUTE, INC. | 13-2890727 |
|--------|--|------------|
| Part I | Contributors (see instructions). Use duplicate copies of Part I if additional space is | needed. |

| | , , , | | |
|------------|-----------------------------------|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 7 | N/A | \$ 15,000,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 8 | N/A | \$1,401,457 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization Employer identification number

GUTTMACHER INSTITUTE, INC. 13-2890727

| art II | Noncash Property | (see instructions). | . Use duplicate copi | es of Part II if additiona | al space is needed. |
|--------|------------------|---------------------|----------------------|----------------------------|---------------------|

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|---------------------------|--|---|------------------------------|
| 2 | STOCKS | | |
| | | \$ | 11/30/2022 |
| (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 |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ | |
| | | | Cabadula B (Farm 000) (2022) |

Page 4 Schedule B (Form 990) (2022)

Name of organization GUTTMACHER INSTITUTE, INC. 13-2890727 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Employer identification number

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public
Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

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

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

| - | (See separate instructions), their | | | | |
|-------------|---|---|-------------------------|--|--|
| | Section 501(c)(4), (5), or (6) organization | anizations: Complete Part III. | | Employer ide | ntification number |
| | · · | | | | |
| | TTMACHER INSTITUTE, I | organization is exempt under | sastion 501(a) or i | | 890727 |
| ₽ €1 | | he organization's direct and indi | | | |
| 1 | · | • | rect political camp | aigh achvilles in Fan | iv. See instructions to |
| 2 | definition of "political campa | xpenditures. See instructions | | ¢ | |
| 3 | | | | | |
| _ | rt I-B Complete if the c | campaign activities. See instruction organization is exempt under s | section 501(c)(3) | | |
| 1 | | cise tax incurred by the organization | | | |
| 2 | Enter the amount of any exc | cise tax incurred by the organization m | anager section 495. | οn 4955 \$ | |
| 3 | | a section 4955 tax, did it file Form | | | |
| - | | | | | |
| | If "Yes," describe in Part IV. | | | | res No |
| | rt I-C Complete if the c | organization is exempt under | section 501(c), ex | cept section 501(c)(3 | 3). |
| 1 | • | xpended by the filing organization | | | , |
| • | | | | | |
| 2 | | ng organization's funds contributed | | | |
| _ | | es | | | |
| 3 | | enditures. Add lines 1 and 2. Ent | | | |
| • | | | | | |
| 4 | Did the filing organization file | e Form 1120-POL for this year? | | | Yes No |
| 5 | Enter the names, addresses | and employer identification numb | er (EIN) of all section | on 527 political organiz | ations to which the filing |
| | | s. For each organization listed, en | | | |
| | the amount of political cont | tributions received that were prom | ptly and directly de | livered to a separate po | olitical organization, such |
| | | nd or a political action committee (I | | | |
| | (a) Name | (b) Address | (c) EIN | (d) Amount paid from | (e) Amount of political |
| | | | | filing organization's funds. If none, enter -0 | contributions received and promptly and directly |
| | | | | Turidor ir riorio, cintor o r | delivered to a separate |
| | | | | | political organization. |
| | | | | | If none, enter -0 |
| (1) | | | | | |
| | | | | | |
| (2) | | | | | |
| | | | | | |
| (3) | | | | | |
| | | | | | |
| (4) | | | | | |
| | | | | | |
| (5) | | | | | |
| (C) | | | | | |
| (6) | | | | | |
| | | 1 | l . | 1 | 1 |

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

Schedule C (Form 990) 2022

| Sche | edule C (Form 990) 2022 | GUTTMACHER INS | STITUTE, INC. | | 13- | -2890727 Page 2 |
|------|--|---------------------------------------|--|--------------------|----------------------------------|-----------------------------|
| Pa | rt II-A Complete if the org section 501(h)). | anization is exer | npt under sectior | n 501(c)(3) and | filed Form 5768 (elec | ction under |
| Α | | | affiliated group (and bbying expenditures) | | ch affiliated group mem | ber's name, address |
| В | Check if the filing organize | ation checked box A | A and "limited contro | ol" provisions app | ly. | |
| | Limits ((The term "expenditu | on Lobbying Expen ires" means amou | |) | (a) Filing organization's totals | (b) Affiliated group totals |
| 1a | Total lobbying expenditures to ir | fluence public opin | ion (grassroots lobb | ying) | | |
| b | Total lobbying expenditures to in | nfluence a legislative | e body (direct lobbyi | ng) | 4,710. | |
| | Total lobbying expenditures (add | | | | 4,710. | |
| | Other exempt purpose expenditor | | | | 27,268,609. | |
| | Total exempt purpose expenditu | | | | 27,273,319. | |
| f | Lobbying nontaxable amount. I | Enter the amount | from the following | table in both | | |
| | columns. | | | | 1,000,000. | |
| | If the amount on line 1e, column (a) | or (b) is: The lobbyir | ng nontaxable amount | is: | | |
| | Not over \$500,000 | 20% of the | amount on line 1e. | | | |
| | Over \$500,000 but not over \$1,000 | ,000 \$100,000 p | lus 15% of the excess | over \$500,000. | | |
| | Over \$1,000,000 but not over \$1,50 | 00,000 \$175,000 p | lus 10% of the excess | over \$1,000,000. | | |
| | Over \$1,500,000 but not over \$17,0 | 000,000 \$225,000 p | lus 5% of the excess of | ver \$1,500,000. | | |
| | Over \$17,000,000 | \$1,000,000 | | | | |
| g | Grassroots nontaxable amount | enter 25% of line 1f |) | | 250,000. | |
| | Subtract line 1g from line 1a. If a | | | _ | | |
| | Subtract line 1f from line 1c. If z | | | | | |
| j | If there is an amount other that | | | | | |
| | reporting section 4911 tax for th | | | | | Yes No |
| | | | raging Period Unde | . , | | |
| | (Some organizations that | | | _ | | ns below. |
| | | See the separa | te instructions for I | ines 2a through | 2f.) | |
| | | Lobbying Expe | nditures During 4-Yo | ear Averaging Pe | riod | |
| | Calendar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) Total |
| 2a | Lobbying nontaxable amount | 1,000,000. | 1,000,000. | 1,000,000 | 1,000,000. | 4,000,000 |
| b | Lobbying ceiling amount (150% of line 2a, column (e)) | | | | | 6,000,000 |
| С | Total lobbying expenditures | 9 901 | 10 976 | 0 52 | 4 710 | 43 026 |

250,000.

250,000.

Schedule C (Form 990) 2022

1,000,000.

1,500,000.

250,000.

d Grassroots nontaxable amount

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

f Grassroots lobbying expenditures

250,000.

| Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 |
|-----------|--|
| | (election under section 501(h)). |

| legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912. If "Yes," enter the amount of any tax incurred under section 4912. If "Yes," enter the amount of any tax incurred under section 4912. If "Yes," enter the amount of any tax incurred under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Dues, assessments and similar amounts from members Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Aggregate amount reported in section 527(f) tax was paid). Current year. Aggregate amount reported in section 503(e)(1)(A) notices of nondeductible section 162(e) dues. Aggregate amount reported in section 503(e)(1)(A) notices of nondeductible section 162(e) dues. Ag | | (cicotion under scotion out (ii)). | (; | a) | (k | o) |
|---|----|--|--------|--------|---------|------|
| legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? J Direct contact with legislators, their staffs, government officials, or a legislative body? Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? I Other activities? J Total. Add lines 1c through 1i Tyes," enter the amount of any tax incurred under section 4912. If "Yes," enter the amount of any tax incurred under section 4912. If "Yes," enter the amount of any tax incurred under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization incurred a section 4912 tax, did it file Form 4720 for this year? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Dues, assessments and similar amounts from members Section 162(e) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. C Total. A Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. A Gagregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. A Gagregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. A Horizona Analysis of the section 527(f) tax was paid). I f | | | Yes | No | Amo | ount |
| legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? J Direct contact with legislators, their staffs, government officials, or a legislative body? Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? I Other activities? J Total. Add lines 1c through 1i Tyes," enter the amount of any tax incurred under section 4912. If "Yes," enter the amount of any tax incurred under section 4912. If "Yes," enter the amount of any tax incurred under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization incurred a section 4912 tax, did it file Form 4720 for this year? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Dues, assessments and similar amounts from members Section 162(e) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. C Total. A Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. A Gagregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. A Gagregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. A Horizona Analysis of the section 527(f) tax was paid). I f | 1 | During the year, did the filing organization attempt to influence foreign, national, state, or local | | | | |
| A Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? Total. Add lines 1c through 1i a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 503(e)(1)(A) notices of nondeductible section 162(e) dues. A Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. Total. Carryover from last year. 2b | | | | | | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?. c Media advertisements? d Mailings to members, legislators, or the public?. e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912. If "Yes," enter the amount of any tax incurred by organization managers under section 4912. If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members C Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 503(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures. See instructions. 5 | | referendum, through the use of: | | | | |
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| i Other activities? j Total. Add lines 1c through 1i. 2 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 3 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 4 If "Yes," enter the amount of any tax incurred under section 4912. 5 Total. Add lines 1c through 1i. 6 Did the organization incurred a section 4912 tax, did it file Form 4720 for this year? 6 Did the organization incurred a section 4912 tax, did it file Form 4720 for this year? 7 Did the organization incurred a section 4912 tax, did it file Form 4720 for this year? 8 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 9 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 9 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 9 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 9 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 9 Did the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 1 Dues, assessments and similar amounts from members 1 Des, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expensitives (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 Current year. 2 Description and political expensitives of nondeductible section 162(e) dues. 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? 1 Taxable amount of lobbying and political expenditures. See instructions. 5 Did the organization for the polit | g | | | | | |
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| c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? | _ | - · · · · · · · · · · · · · · · · · · · | | | - | |
| If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | · · · · · · · · · · · · · · · · · · · | | | | |
| Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year. Carryo | | | | | | |
| Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year. Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? Taxable amount of lobbying and political expenditures. See instructions. | Pa | | (c)(5) | , or s | section | |
| Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Current year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues Taxable amount of lobbying and political expenditures. See instructions. 5 | | | | | | Yes |
| Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year. Carryover from last year. Carryover from last year. Carryover from last year. Carryover from last year or total. Carryover from last year or total. Carryover from last year or total or total or the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? Carryover from lobbying and political expenditures. See instructions. See tion 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "No" OR (b) Part III-A, line 3, is answered "No" OR (b) Part III-A, line 3, is answered "No" OR (b) Part III-A, line 3, is answered "No" OR (b) Part III-A, line 3, is answered "No" OR (b) Part III-A, line 3, is answered "No" OR (b) Part III-A, line 3, is answered "No" OR (b) Part III-A, line 3, is answered "No" OR (b) Part III-A, line 3, is answered "No" OR (b) Part III-A, line 3, is answered "No" OR (b) Part III-A, line 3, is answered "No" OR (b) Part III-A, line 3, is answered "No" OR (b) Part III-A, line 3, is answered "No" OR (| 1 | | | | 1 | |
| Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Carryover from last year If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? Taxable amount of lobbying and political expenditures. See instructions 5 1 Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "No" OR (b) Part III-A, line 3 | 2 | | | | | |
| 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year. Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? Taxable amount of lobbying and political expenditures. See instructions. 5 | 3 | | | | | |
| Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year | 1 | | | | 1 | |
| political expenses for which the section 527(f) tax was paid). a Current year. b Carryover from last year. c Total. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?. Taxable amount of lobbying and political expenditures. See instructions. 5 | | | | | | |
| a Current year | - | · · · · · · · · · · · · · · · · · · · | illo | OI . | | |
| b Carryover from last year. c Total. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? Taxable amount of lobbying and political expenditures. See instructions. 5 | а | | | | 2a | |
| C Total | _ | · | | | | |
| Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? | | · · · · · · · · · · · · · · · · · · · | | | 2c | |
| If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? | | | | | 3 | |
| excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? | _ | | | | | |
| and political expenditures next year? | | excess does the organization agree to carryover to the reasonable estimate of nondeductible lo | obbvir | na | | |
| 5 Taxable amount of lobbying and political expenditures. See instructions | | and political expenditures next year? | | | 4 | |
| | 5 | Taxable amount of lobbying and political expenditures. See instructions | | | 5 | |
| rovide the descriptions required for Part I-A, line 1: Part I-B, line 4: Part I-C, line 5: Part II-A (affiliated group list): Part II-A, lines 1, a | | | | | | |
| Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 a (See instructions); and Part II-B, line 1. Also, complete this part for any additional information. | | | | | | |
| rovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 a (See instructions); and Part II-B, line 1. Also, complete this part for any additional information. | | | | | | |
| | | | | | | |

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization Employer identification number GUTTMACHER INSTITUTE, INC. 13-2890727 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) . 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes Nο Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2a 2b 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after July 25, 2006, and not on 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located _ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (ii) Assets included in Form 990, Part X.....\$_ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

| Sche | | | NSTITUTE, IN | | | | 13-289072 | | Page 2 |
|--------|--|-----------------|---------------------------------------|----------------------------|-----------|------------------------------|--------------------|----------|--------|
| Pa | rt III Organizations Maintaini | ng Collectio | ns of Art, Histo | rical Treasur | es, or | Other Similar / | Assets (continu | ied) | |
| 3 | Using the organization's acquisition | n, accession, | and other recor | ds, check any | of the | following that r | nake significant | use c | of its |
| | collection items (check all that appl | ly): | | | | | | | |
| а | Public exhibition | | d | Loan or exc | change | program | | | |
| b | Scholarly research | | e | Other | | | | | |
| С | Preservation for future gener | rations | | | | | | | |
| 4 | Provide a description of the organ | | ections and expla | ain how they t | further | the organization | 's exempt purpo | se in | Part |
| | XIII. | | | | | . | | | |
| 5 | During the year, did the organization | n solicit or re | ceive donations o | f art_historical | treasu | ires or other simi | lar | | |
| • | assets to be sold to raise funds rath | | | | | | | | No |
| Dэ | rt IV Escrow and Custodial A | | | it of the organ | iization | o concention. | | | |
| Га | Complete if the organiza | | | m 000 Part I | \/ line | 0 or reported a | n amount on F | orm | |
| | 990, Part X, line 21. | mon answere | eu 165 oil i oil | 11 990, Fait I | v, III IC | e, or reported a | in amount on i | OIIII | |
| 4.5 | <u> </u> | too ovotodios | | adiam, far ac | | | | | |
| та | Is the organization an agent, trust | | | - | | | | | ٦ |
| | included on Form 990, Part X? | | | | | | Yes | · | No |
| b | If "Yes," explain the arrangement in | n Part XIII and | complete the fol | lowing table: | | <u> </u> | | | |
| | | | | | | | Amount | | |
| С | Beginning balance | | | | | | | | |
| d | Additions during the year | | | | | | | | |
| е | Distributions during the year | | | | | | | | |
| f | Ending balance | | | | | | | | , |
| 2a | Did the organization include an am | | | | | | | | ∐ No |
| | If "Yes," explain the arrangement in | n Part XIII. Ch | neck here if the ex | xplanation has l | been pi | rovided on Part XII | <u> </u> | | |
| Pa | rt V Endowment Funds. | | | | | | | | |
| | Complete if the organiza | tion answere | ed "Yes" on For | m 990, Part I' | V, line | 10. | | | |
| | | (a) Current y | ear (b) Prio | r year (c) | Two year | rs back (d) Three y | years back (e) Fou | ır years | back |
| 1a | Beginning of year balance | 9,645,2 | 24. 8,83 | 33,429. | 7,888,8 | 371. 6,4 | 87,915. 7 | ,151,8 | 37. |
| b | Contributions | | | | | | | | |
| c | Net investment earnings, gains, | | | | | | | | |
| · | and losses | -1,638,1 | 50. 1,07 | 70,119. | 1,207,7 | 790. 1,6 | 50,464. | -428,2 | 239. |
| ٨ | Grants or scholarships | | | | | | | | |
| | - | | | | | | | | |
| е | Other expenditures for facilities | 270,1 | 20 25 | 58,324. | 263,2 | 232 | 49,508. | 235,6 | 83 |
| | and programs | 270,1 | 20. | 70,324. | 203,2 | | 17,500. | 233,0 | ,05. |
| f | Administrative expenses | 7,736,9 | F4 0.64 | 15,224. | 0 022 / | 120 7.0 | 00.071 | 407.0 | 1.5 |
| g | End of year balance | | l . | • | 8,833,4 | | 88,871. 6 | ,487,9 | 113. |
| 2 | Provide the estimated percentage | | year end balance | e (line 1g, colur | mn (a)) | held as: | | | |
| a | Board designated or quasi-endowm | | 70 | | | | | | |
| b | Permanent endowment 37.10 | <u>00</u> % | | | | | | | |
| С | Term endowment 62.9000 % | | 1.4000/ | | | | | | |
| _ | The percentages on lines 2a, 2b, a | | • | | | | 41 | | |
| 3a | Are there endowment funds not in | the possession | on of the organiza | ition that are h | ield an | d administered for | the | Vaa | Na |
| | organization by: | | | | | | [- m | Yes | No |
| | (i) Unrelated organizations | | | | | | | | X |
| | (ii) Related organizations | | | | | | | | X |
| b | If "Yes" on line 3a(ii), are the relate | _ | • | | R? | | 3b | | |
| 4 | Describe in Part XIII the intended u | | ganization's endo | wment funds. | | | | | |
| Pa | rt VI Land, Buildings, and Equ | ipment. | ad Vaa an Fa | 000 David | N / 1: | . 44a Caa Fawa | 000 Dawl V II | 10 | |
| | Complete if the organization of property | | | | | | | | |
| | pescription of property | (a) | Cost or other basis (investment) | (b) Cost or other (other) | Dasis | (c) Accumulated depreciation | (d) Book v | aiue | |
| 1a | Land | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| b | Buildings | | | 11,966,6 | 673. | 4,563,853. | 7.4 | 02,8 | 20. |
| C | Leasehold improvements | | | 2,460, | | 1,952,492. | | 07,9 | |
| d | Equipment | | | 3,562, | | 3,058,609. | | 03,8 | |
| и Д | Other | | | 1,839, | | 1,631,355. | | 08,5 | |
| Tota | II. Add lines 1a through 1e. (Column | (d) must eau | al Form 000 Part | | | | | 23,1 | |
| . 014 | , wa mios ta unough le. (Column | (a) must equi | ari onni 990, Fall | 7., coluinii (<i>D)</i> , | 1110 10 | ··/ | 0,0 | ⊥,د∟ | Jt. |

Schedule D (Form 990) 2022

| Schedule D (Form 990) 2022 GUTTMACHER INS | TITUTE, INC. | | 3-2890727 Page • |
|---|-------------------------|---|--------------------|
| Part VII Investments - Other Securities. Complete if the organization answered | d "Yes" on Form 99 | 00, Part IV, line 11b. See Form 990 | , Part X, line 12. |
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valua Cost or end-of-year mark | tion: |
| | | Coot of one of your man | tot varao |
| (1) Financial derivatives | | + | |
| (2) Closely held equity interests | | + | |
| (3) Other(A) | | | |
| (B) | | + | |
| (C) | | + | |
| (D) | | | |
| (E) | | | |
| (F) | | | |
| (G) | | | |
| (H) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) | | | |
| Part VIII Investments - Program Related. Complete if the organization answered | d "Yes" on Form 99 | 00, Part IV, line 11c. See Form 990 | , Part X, line 13. |
| (a) Description of investment | (b) Book value | (c) Method of valua | |
| | | Cost or end-of-year mark | ket value |
| <u>(1)</u> | | | |
| (2) | | | |
| (3) | | | |
| _(4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) | | | |
| Part IX Other Assets. Complete if the organization answered | d "Yes" on Form 99 | 0, Part IV, line 11d. See Form 990 | , Part X, line 15. |
| (a) De | scription | | (b) Book value |
| (1)SECURITY DEPOSITS | | | 211,199. |
| (2)RIGHT OF USE ASSET-OPER. LEASE | | | 4,897,118. |
| (3) | | | |
| (4) | | | |
| _(5) | | | |
| _(6) | | | |
| <u>(7)</u> | | | |
| (8) | | | |
| (9) | " (5) | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) | ine 15.) | | 5,108,317. |
| Part X Other Liabilities. Complete if the organization answered | 1 "Voo" on Form 00 | 00 Dort IV line 11e or 11f See For | m 000 Port V |
| line 25. | res on Form 98 | o, Partiv, line Tie of Til. See For | 990, Part X, |
| • | otion of liability | | (b) Book value |
| (1) Federal income taxes | | | |
| (2)OPERATING LEASE LIABILITIES | | | 5,513,244. |
| (3)POSTRETIREMENT BENEFITS PAYABLE | | | 523,857. |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) | | | 6,037,101. |
| 2. Liability for uncertain tax positions. In Part XIII, provide the | text of the footnote to | the organization's financial statements t | hat reports the |

| Part 2 | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. | ۱. | |
|---------|---|------------------|----------------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 28,455,208. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| | Net unrealized gains (losses) on investments | | |
| | Donated services and use of facilities | | |
| | Recoveries of prior year grants | | |
| | Other (Describe in Part XIII.) | | |
| | | 2e | -4,377,186. |
| | Add lines 2a through 2d | 3 | 32,832,394. |
| 3 | Subtract line 2e from line 1 | | 32,032,334. |
| 4 | | | |
| | , | | |
| | Cition (Booking in Late Allin) | 4c | 147,072. |
| С 5 | Add lines 4a and 4b | 5 | 32,979,466. |
| Part 2 | | _ | 32,373,400. |
| I ait 2 | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. | | |
| 1 | Total expenses and losses per audited financial statements | 1 | 27,622,875. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| а | Donated services and use of facilities | | |
| b | Prior year adjustments | | |
| С | Other losses | | |
| d | Other (Describe in Part XIII.) | | |
| е | Add lines 2a through 2d | 2e | |
| 3 | Subtract line 2e from line 1 | 3 | 27,622,875. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b 4a 147,072. | | |
| | Other (Describe in Part XIII.) | | |
| С | Add lines 4a and 4b | 4c | 147,072. |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). | 5 | 27,769,947. |
| Provide | Supplemental Information. The the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Foundational Street, III, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. | art V, ation. | line 4; Part X, line |
| SEE S | SUPPLEMENTAL PAGE | | |
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| | | | |

Part XIII Supplemental Information (continued)

SCHEDULE D, PART V, LINE 4

GUTTMACHER'S ENDOWMENT PROVIDES SUPPORT FOR THE INSTITUTE'S ANNUAL OPERATIONS. THE BOARD HAS HISTORICALLY APPROVED 3% OF THE AVERAGE OF THE PRIOR TWELVE QUARTERS TO BE SPENT IN THE CURRENT FISCAL YEAR FOR GENERAL OPERATIONS.

SCHEDULE D, PART XI, LINE 2D

OTHER ADJUSTMENTS:

POSTRETIREMENT BENEFITS ADJUSTMENT: \$344,729

FOREIGN EXCHANGE GAIN: -\$ 17,638

SCHEDULE D, PART X, LINE 2

MANAGEMENT HAS EVALUATED THEIR INCOME TAX POSITIONS UNDER THE GUIDANCE INCLUDED IN ASC 740. BASED ON THEIR REVIEW, MANAGEMENT HAS NOT IDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS TO BE RECORDED OR DISCLOSED IN THE FINANCIAL STATEMENTS.

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

GUTTMACHER INSTITUTE, INC. 13-2890727 **Questions Regarding Compensation** Part I Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Health or social club dues or initiation fees Tax indemnification and gross-up payments Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 2 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Written employment contract Compensation committee Independent compensation consultant Compensation survey or study X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Χ 4a Χ **b** Participate in or receive payment from a supplemental nonqualified retirement plan? 4b Χ 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: Χ 5a 5b Χ If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a Χ 6b Χ If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed 7 Χ Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8 Χ

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

Schedule J (Form 990) 2022

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

| (A) Name and Title | | (B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation | | | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation |
|-----------------------------------|------|--|-------------------------------------|---|-----------------------------|----------------|----------------------|--|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | other deferred compensation | benefits | (B)(i)-(D) | in column (B) reported as deferred on prior Form 990 |
| HERMINIA PALACIO | (i) | 348,976. | NONE | 22,084. | 37,359. | 11,032. | 419,451. | |
| 1 PRESIDENT & CEO | (ii) | NONE | NONE | NONE | NONE | NONE | NONE | |
| JONATHAN WITTENBERG | (i) | 279,202. | NONE | 360. | 28,738. | 34,791. | 343,091. | |
| 2 EXECUTIVE VICE PRESIDENT | (ii) | NONE | NONE | NONE | NONE | NONE | NONE | |
| MAUREEN BURNLEY | (i) | 231,166. | NONE | 23,548. | 26,356. | 26,538. | 307,608. | |
| 3 VP FOR FINANCE & ADMIN. | (ii) | NONE | NONE | NONE | NONE | NONE | NONE | |
| HEATHER BOONSTRA | (i) | 227,826. | NONE | 22,134. | 25,602. | 25,530. | 301,092. | |
| 4 VP FOR PUBLIC POLICY | (ii) | NONE | NONE | NONE | NONE | NONE | NONE | |
| WENDY SEALEY | (i) | 238,251. | NONE | 7,689. | 9,708. | 34,647. | 290,295. | |
| 5 VICE PRESIDENT FOR DEVELOPMENT | (ii) | NONE | NONE | NONE | NONE | NONE | NONE | |
| MAIBE PONET | (i) | 238,025. | NONE | 360. | 23,700. | 39,260. | 301,345. | |
| 6 VP FOR COMMUNICATIONS & PUBLIC | (ii) | NONE | NONE | NONE | NONE | NONE | NONE | |
| KATHYRN KOST | (i) | 246,073. | NONE | 1,584. | 25,472. | 26,398. | 299,527. | |
| 7 DIRECTOR OF DOMESTIC RESEARCH | (ii) | NONE | NONE | NONE | NONE | NONE | NONE | |
| KATHLEEN RANDALL | (i) | 218,763. | NONE | 1,584. | 22,781. | 25,939. | 269,067. | |
| 8 DIRECTOR OF PRODUCTION | (ii) | NONE | NONE | NONE | NONE | NONE | NONE | |
| JENNIFER FROST | (i) | 214,478. | NONE | 1,584. | 21,577. | 9,687. | 247,326. | |
| 9 PRINCIPAL RESEARCH SCIENTIST | (ii) | NONE | NONE | NONE | NONE | NONE | NONE | |
| RACHEL JONES | (i) | 202,983. | NONE | 552. | 20,880. | 10,552. | 234,967. | |
| 10 PRINCIPAL RESEARCH SCIENTIST | (ii) | NONE | NONE | NONE | NONE | NONE | NONE | |
| REBECCA WIND | (i) | 189,995. | NONE | 360. | 19,444. | 12,752. | 222,551. | |
| 11 DIRECTOR OF C&P ADMINISTRATIVE | (ii) | NONE | NONE | NONE | NONE | NONE | NONE | |
| SUSHEELA SINGH | (i) | 330,450. | NONE | 4,944. | 34,050. | 36,735. | 406,179. | |
| 12 DISTINGUISHED SCHOLAR & VP | (ii) | NONE | NONE | NONE | NONE | NONE | NONE | |
| ALETHA AKERS | (i) | 308,216. | NONE | 552. | 30,828. | 238. | 339,834. | |
| 13 VP FOR RESEARCH | (ii) | NONE | NONE | NONE | NONE | NONE | NONE | |
| | (i) | | | | | | | |
| 14 | (ii) | | | | | | | |
| | (i) | | | | | | | |
| 15 | (ii) | | | | | | | |
| | (i) | | | | | | | |
| 16 | (ii) | | | | | | | |

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No. 1545-0047

2022

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

GUTTMACHER INSTITUTE, INC. 13-2890727 **Types of Property** (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art - Works of art 1 Art - Historical treasures 3 Art - Fractional interests Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Intellectual property 14 7,489,224. SALE PRICE Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution - Historic 14 Qualified conservation contribution - Other 15 Real estate - Residential Real estate - Commercial 16 Real estate - Other 17 Collectibles 18 Food inventory 19 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other ►(26 Other ►(_ Other ►(27 28 Other ►(Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement No Yes 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required 30a Χ **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard 31 Χ contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Χ contributions? **b** If "Yes," describe in Part II.

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

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describe in Part II.

Part II Suppler

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

PART I, COLUMN (B)

THIS REPRESENTS THE NUMBER OF CONTRIBUTIONS.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

13-2890727

GUTTMACHER INSTITUTE, INC.

FORM 990, PART VI, SECTION B, LINE 11B

THE AUDIT COMMITTEE IS RESPONSIBLE FOR REVIEWING AND APPROVING THE 990 BEFORE SUBMISSION. IF THERE ARE ANY QUESTIONS, THEY ARE DISCUSSED WITH THE TAX PREPARER AND RESOLVED TO THE COMMITTEE'S SATISFACTION.

ONCE THE AUDIT COMMITTEE HAS SIGNED OFF, THE 990 IS EMAILED TO ALL BOARD MEMBERS AND THEY ARE ASKED TO CONFIRM THAT THEY HAVE RECEIVED THE FORM 990.

FORM 990, PART VI, SECTION B, LINE 12C

OFFICERS AND DIRECTORS ARE REQUIRED TO REVIEW, DISCLOSE POTENTIAL CONFLICTS, AND SIGN THE CONFLICT OF INTEREST POLICY ANNUALLY. THE AUDIT COMMITTEE GATHERS ALL MATERIAL FACTS CONCERNING ANY DISCLOSED CONFLICTS. THE INFORMATION IS PROVIDED TO THE BOARD OF DIRECTORS IF THERE IS A CONFLICCT. IF NECESSARY, THE BOARD VOTES UPON THE APPROPRIATE ACTION WHILE THE INTERESTED PERSON IS EXCUSED.

FORM 990, PART VI, SECTION B, LINE 15A

AN EXECUTIVE COMPENSATION COMMITTEE, CONSISTING OF THE BOARD CHAIR, THE FINANCE COMMITTEE CHAIR, AND THE IMMEDIATE PAST BOARD CHAIR, SETS

COMPENSATION FOR THE CEO AND REVIEWS COMPENSATION FOR ALL OTHER OFFICERS

(I.E. VICE PRESIDENTS). THESE INDIVIDUALS EXERCISE SUBSTANTIAL INFLUENCE

OVER THE AFFAIRS OF THE INSTITUTE AND ARE, AS SUCH, DISQUALIFIED PERSONS

WITHIN THE MEANING OF SECTION 4958(F)(1) OF THE INTERNAL REVENUE CODE.

THE EXECUTIVE COMPENSATION COMMITTEE'S PRIMARY PURPOSE IS TO ENSURE THAT

EXECUTIVE COMPENSATION PACKAGES REPRESENT REASONABLE REMUNERATION FOR THE

SERVICES PREFORMED AND TO ENSURE COMPLIANCE WITH ALL APPLICABLE FEDERAL,

STATE AND LOCAL LAWS. PRIOR TO THE NOVEMBER BOARD MEETING, THE COMMITTEE

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

13-2890727

GUTTMACHER INSTITUTE, INC.

REVIEWS COMPENSATION FOR SENIOR EXECUTIVES AT COMPARABLE NON-PROFIT ORGANIZATIONS, WITH STAFFING LEVELS AND BUDGETS ON PAR WITH THOSE OF THE INSTITUTE, AND WHICH CONDUCT ACTIVITIES SIMILAR IN SCOPE AND PURPOSE TO THOSE OF THE INSTITUTE, IN ORDER TO BENCHMARK OUR COMPENSATION PRACTICES FOR OFFICERS. THE COMMITTEE MAY ALSO REVIEW SURVEYS COMPILED BY INDEPENDENT FIRMS AND OTHER ORGANIZATIONS' PUBLIC DOCUMENTATION OF SALARY PRACTICES. THE COMMITTEE REPORTS ITS COMPENSATION DETERMINATIONS ANNUALLY TO THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE AND THE BOARD OF DIRECTORS MUST APPROVE THE CEO COMPENSATION PACKAGE AND BE INFORMED OF THE COMPENSATION OF THE OTHER OFFICERS. THIS PROCESS FOR THE 2022 SALARIES WAS CONDUCTED IN NOVEMBER 2021. SUBSEQUENTLY ANOTHER REVIEW WAS DONE IN NOVEMBER 2022 FOR THE 2023 SALARIES.

FORM 990, PART VI, SECTION B, LINE 15B

NOVEMBER 2022 - COMPENSATION COMMITTEE.

FORM 990, PART VI, SECTION C, LINE 19

MEMBERS OF THE PUBLIC MAY REQUEST A COPY OF THE GOVERNING DOCUMENTS,

CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS BY PHONE, EMAIL

OR MAIL. COPIES OF THE REQUESTED DOCUMENTS ARE SENT TO THEM VIA THE

MEDIUM OF THEIR CHOICE.

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS:

CHANGE IN POSTRETIREMENT BENEFITS \$ 344,729

FOREIGN EXCHANGE GAIN \$ - 597,470

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

GUTTMACHER INSTITUTE, INC.

Employer identification number

13-2890727

TOTAL \$ - 252,741

FORM 990, PAGE 1, BOX G

FROM PART VIII - STATEMENT OF REVENUE

THE BREAKDOWN OF GUTTMACHER'S REVENUE FOR 2022 IS AS FOLLOWS:

 CONTRIBUTIONS/ GRANTS
 32,442,037

 PUBLICATIONS
 14,029

 INVESTMENT INCOME
 909,138

 ROYALTIES
 5,997

 GROSS SALES OF INVESTMENTS
 28,805,683

 OTHER
 143,966

 TOTAL PER PAGE 1
 62,320,850

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE GUTTMACHER INSTITUTE IS A LEADING RESEARCH AND POLICY ORGANIZATION COMMITTED TO ADVANCING SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS IN THE UNITED STATES AND GLOBALLY. THE INSTITUTE ENVISIONS A WORLD IN WHICH ALL PEOPLE ARE ABLE TO EXERCISE THEIR RIGHTS AND RESPONSIBILITIES REGARDING SEXUAL BEHAVIOR AND REPRODUCTION FREELY AND WITH DIGNITY. THE INSTITUTE PRODUCES A WIDE RANGE OF RESOURCES ON TOPICS PERTAINING TO SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS, INCLUDING TWO PEER-REVIEWED JOURNALS (PERSPECTIVES ON SEXUAL AND REPRODUCTIVE HEALTH AND INTERNATIONAL PERSPECTIVES ON SEXUAL AND REPRODUCTIVE HEALTH), THE GUTTMACHER POLICY REVIEW, AND A MULTITUDE OF REPORTS, ISSUE BRIEFS, FACT SHEETS AND INFOGRAPHICS. ITS WEBSITE RECEIVES 10 MILLION PAGE VIEWS ANNUALLY. GUTTMACHER IS THE RECIPIENT OF THE 2018 UN POPULATION AWARD.

Name of the organization

GUTTMACHER INSTITUTE, INC.

13-2890727

Employer identification number

FORM 990, PART III - PROGRAM SERVICE

LINE 4A, PROGRAM SERVICE

RESEARCH: IN 2022, GUTTMACHER'S RESEARCH TEAM GENERATED A WIDE RANGE OF SCIENTIFIC EVIDENCE. WE PUBLISHED FINDINGS FROM THE LATEST ROUND OF THE US ABORTION PROVIDER CENSUS, SUPPLYING DATA ON THE INCIDENCE OF ABORTION AND SERVICE AVAILABILITY FOR EVERY STATE IN THE COUNTRY IN 2019 AND 2020: OUR RESULTS ESTABLISHED THE LANDSCAPE OF ABORTION PROVISION JUST BEFORE THE SUPREME COURT OVERTURNED ROE V. WADE. FOLLOWING THE COURT'S DECISION, OUR RESEARCHERS MEASURED ITS IMMEDIATE IMPACT ON THE PROVISION OF ABORTION SERVICES IN EVERY STATE. WITHIN JUST 30 DAYS OF THE DECISION, WE DOCUMENTED THE NUMBER OF CLINICS FORCED TO CLOSE (OR ELIMINATE ABORTION SERVICES), AN ANALYSIS WE REPEATED 100 DAYS AFTER THE DECISION. THIS RESEARCH PLAYED AN IMPORTANT ROLE IN QUALIFYING THE IMMEDIATE HARMS OF ENDING FEDERAL CONSTITUTIONAL PROTECTION FOR ABORTION. BUILDING ON THESE EFFORTS, THE INSTITUTE'S SCIENTISTS WORKED THROUGHOUT THE REST OF THE YEAR ON THE DEVELOPMENT OF NEW AND INNOVATIVE RESEARCH PLANS TO MEASURE ABORTION INCIDENCE IN EVERY STATE IN THE POST-ROE V. WADE LANDSCAPE, INCLUDING LEVERAGING THE INSTITUTE'S DEPTH OF EXPERIENCE IN MEASURING ABORTION INCIDENCE IN COUNTRIES WHERE IT HAS LONG BEEN HIGHLY RESTRICTED OR ILLEGAL. THESE NEW DATA COLLECTION ACTIVITIES WERE BEGUN IN LATE 2022 AND WILL PROVIDE THE ESSENTIAL EVIDENCE NEEDED TO MEASURE THE IMPACT OF RECENT SHIFTS IN ABORTION POLICY IN THE UNITED STATES. GUTTMACHER SCIENTISTS ALSO PUBLISHED NEW RESEARCH ON PUBLICLY FUNDED CONTRACEPTIVE AND REPRODUCTIVE HEALTH CARE PROVIDERS AND THEIR PATIENTS. FOR EXAMPLE, THROUGH OUR REPRODUCTIVE HEALTH IMPACT STUDY, A FIVE-YEAR LONGITUDINAL STUDY MEASURING THE IMPACT OF FEDERAL AND STATE POLICIES ON CONTRACEPTIVE ACCESS FOR LOW-INCOME INDIVIDUALS IN FOUR STATES (IOWA, ARIZONA, WICONSIN AND NEW JERSEY), GUTTMACHER RESEARCHERS PUBLISHED ARTICLES IN FIVE RESPECTED PEER-REVIEWED JOURNALS IN 2022, ON TOPICS SUCH AS COVID-19 DISRUPTIONS IN CONTRACEPTIVE CARE PROVISION. THE INSTITUTE ALSO CONTINUED TO GENERATE NEW EVIDENCE AT THE GLOBAL LEVEL. FOR THE FIRST TIME EVER, GUTTMACHER (IN PARTNERSHIP WITH THE WORLD HEALTH ORGANIZATION) PUBLISHED COUNTRY-LEVEL ESTIMATES OF ABORTION AND UNINTENDED PREGNANCY FOR 150 COUNTRIES. USING THESE FINDINGS AND EVIDENCE FROM OTHER GUTTMACHER RESEARCH, WE PRODUCED 150 COUNTRY PROFILES THAT ARE DESIGNED TO BE USED BY POLICYMAKERS AND OTHER KEY STAKEHOLDERS TO MAKE EVIDENCE-INFORMED DECISIONS ABOUT INVESTMENTS IN SEXUAL AND REPRODUCTIVE HEALTH SERVICES. OUR

FORM 990, PART III - PROGRAM SERVICE

SCIENTISTS ALSO PUBLISHED FINDINGS FROM OUR MULTI YEAR STUDY OF THE IMPACT OF THE TRUMP ADMINISTRATION'S EXPANDED ETHIOPIA AND UGANDA, AS WELL AS A REVIEW OF RESEARCH ON THE IMPACT OF THE COVID-19 PANDEMIC ON SEXUAL AND REPRODUCTIVE HEALTH WORLDWIDE FINDINGS ON TOPICS LIKE CONTRACEPTION, UNINTENDED PREGNANCY, AND ABORTION IN A NUMBER OF COUNTRIES, INCLUDING THE DEMOCRATIC REPUBLIC OF CONGO, GHANA, INDONESIA, TANZANIA, AND ZIMBABWE. THE INSTITUTE'S RESEARCH TEAM CONTINUED TO STRENGTHEN THE CAPACITY OF IN-COUNTRY PARTNERS BY PROVIDING TECHNICAL SUPPORT AND TRAININGS, HELPING FORM A NEW ABORTION RESEARCH CONSORTIUM, AND HELPING LAUNCH A NEW CAPACITY-STRENGTHENING PROGRAM FOR JUNIOR AND EARLY-CAREER RESEARCHERS INTERESTED IN ABORTION.

LINE 4B, PROGRAM SERVICE

COMMUNICATIONS AND PUBLICATIONS: THE INSTITUTE SHAPED AND INFORMED MEDIA COVERAGE AND PUBLIC DATABASE ON SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS ISSUES THROUGHOUT 2022. WE STRATEGICALLY DISSEMINATED THE INSTITUTE'S EVIDENCE AND ANALYSES IN RANGE OF FORMATS AND ACROSS A MULTITUDE OF PLATFORMS, TARGETING KEY STAKEHOLDERS AND INFLUENCERS INCLUDING ADVOCATES; HEALTH CARE PROVIDERS; POLICYMAKERS AND THEIR STAFF; MEDIA; AND THE SCIENTIFIC COMMUNITY. THE OVERTURNING OF ROE V. WADE AND THE ENORMOUS HARM THIS UNPRECEDENTED SUPREME COURT DECISION UNLEASHED ACCROSS THE UNITED STATES DOMINATED MUCH OF OUR DOMESTIC COMMUNICATIONS WORK IN 2022. SOME OF THE MOST NOTEWORTHY ACCOMPLISHMENTS INCLUDED LAUNCHING AN INTERACTIVE MAP IN JUNE THAT ALLOWS USERS TO TRACK STATE POLICIES IN NEAR-REAL TIME AND OFFERS KEY CONTEXTUAL INFORMATION ON ABORTION DATA IN EACH STATE; THAT MAP GENERATED ABOUT 300,000 PAGE VIEWS BY THE END OF THE YEAR. FURTHERMORE, OUR MEDIA RELATIONS EFFORTS SHATTERED ALL PREVIOUS RECORDS, AS OUR TEAM RESPONDED TO MORE THAN 2,400 MEDIA REQUESTS AND HELPED TO ACHIEVE CLOSE TO 70,000 MENTIONS OF THE INSTITUTE AND ITS WORK IN NEWS STORIES, INCLUDING NUMEROUS ARTICLES AND SEGMENTS THROUGHOUT THE YEAR IN LEADING OUTLETS LIKE THE NEW YORK TIMES, THE WASHINGTON POST, USA TODAY, ASSOCIATED PRESS, REUTERS AND THE GUARDIAN, AS WELL AS TOP-TIER BROADCASTERS LIKE NPR, NBC NEWS, ABC NEWS, CBS NEWS, AND NUMEROUS REGIONAL, STATE AND LOCAL NEWS OUTLETS. SOCIAL MEDIA CHANNELS WERE ANOTHER FOCAL POINT OF OUR WORK: WE KEPT OUR ALMOST 98,300 FOLLOWERS ACCROSS TWITTER, INSTAGRAM, FACEBOOK AND LINKEDIN INFORMED WITH A STEADY STREAM OF TIMELY POSTS AND IMPACTFUL GRAPHICS AND SHORT VIDEOS. FINALLY, OUR

FORM 990, PART III - PROGRAM SERVICE

WEBSITE RECEIVED A TOTAL OF 12,830,215 PAGE VIEWS IN 2022. OUR COMMUNICATION TEAM FOCUSED INTERNATIONALLY ON CAPACITY STRENGTHENING INITIATIVES AIMED AT SUPPORTING PARTNERS IN LOWER AND MIDDLE INCOME COUNTRIES IN TRANSLATING EVIDENCE INTO PROGRAMMATIC AND POLICY CHANGE. IN ADDITION, OUR COMMUNICATIONS TEAM SUPPORTED THE DISSEMINATION OF THE FIRST-EVER COUNTRY-LEVEL ESTIMATES OF ABORTION AND UNINTENDED PREGNANCY FOR 150 COUNTRIES. OUR COMMUNICATIONS & PUBLICATIONS TEAM ALSO COLLABORATED WITH GUTTMACHER SCIENTISTS TO CREATE AND DISSEMINATE THE FAMILY PLANNING INVESTMENT IMPACT CALCULATOR, A NEW INTERACTIVE ONLINE TOOL THAT ALLOWS USERS TO ESTIMATE THE HEALTH BENEFITS OF INVESTING IN FAMILY PLANNING IN LOWER AND MIDDLE INCOME COUNTRIES.

LINE 4C, PROGRAM SERVICE

PUBLIC POLICY: IN 2022, GUTTMACHER AGAIN PLAYED A PROMINENT ROLE IN ADVOCATING FOR EVIDENCE-BASED POLICIES. FOLLOWING THE SUPREME COURT'S RULING THAT OVERTURNED ROE V. WADE, THE INSTITUTE'S POLICY TEAM RESPONDED RAPIDLY TO TRACK THE SUBSEQUENT FLURRY OF STATE-LEVEL ABORTION BANS AND RESTRICITONS. OUR INTERACTIVE MAP OF STATE LAWS AND POLICIES WAS ONE OF THE MOST WIDELY CITED SOURCES FOR INFORMATION ON REPRODUCTIVE RIGHTS ACCROSS THE COUNTRY IN 2022 GUTTMACHER POLICY STAFF ALSO WORKED DIRECTLY WITH STATE LAWMAKERS AND ADVOCATES SEEKING TO PROTECT ACCESS TO REPRODUCTIVE HEALTH CARE, SERVING AS A CATALYST FOR EVIDENCE-BASED POLICIES AND OUTLINING WAYS THAT STATES COULD BOLSTER ACCESS TO CARE. THE INSTITUTE'S EXPERTS WERE CITED WIDELY IN PROMINENT MEDIA OUTLETS THROUGHOUT THE YEAR AS JOURNALISTS AND THE PUBLIC SOUGHT TO MAKE SENSE OF THE NEW LEGAL LANDSCAPE. GUTTMACHER ALSO PROMOTED ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH CARE FOR PEOPLE IN LOWER AND MIDDLE INCOME COUNTRIES. SHORTLY AFTER ROE WAS OVERTURNED, OUR TEAM PUBLISHED POLICY ANALYSES ON THE POTENTIAL RIPPLE EFFECTS OF THE SUPREME COURT'S DECISION OVERSEAS, CALLING ON POLICYMAKERS TO SHORE UP PROTECTIONS IN THE FACE OF A WELL-FUNDED, GLOBALIZED ANTI-ABORTION MOVEMENT. THE INSTITUTE ALSO WORKED WITH POLICY PARTNERS IN AFRICA, ASIA AND LATIN AMERICA TO ADVANCE EVIDENCE-BASED POLICIES, INCLUDING EFFORTS TO INCLUDE SEXUAL AND REPRODUCTIVE HEALTH CARE IN COUNTRIES' UNIVERSAL HEALTH COVERAGE PLANS. IN CONGRESS, OUR EVIDENCE-BASED ADVOCACY EFFORTS PLAYED A KEY ROLE IN EFFORTS TO EXPAND ACCESS TO CARE AROUND THE WORLD -FOR EXAMPLE, CHAMPIONS IN THE HOUSE AND SENATE INTRODUCED BILLS TO REPEAL THE HELMS AMENDMENT, BOTH OF WHICH CITED GUTTMACHER'S WORK

FORM 990, PART III - PROGRAM SERVICE

EXTENSIVELY. GOVERNMENT'S INVESTMENT IN INTERNATIONAL FAMILY PLANNING, ONCE AGAIN PROVED TO BE A KEY ADVOCACY RESOURCE. IN APRIL, MORE THAN 150 MEMBERS OF CONGRESS UTILIZED THIS EVIDENCE TO REQUEST SUPPORT TO INCREASE FUNDING FOR FAMILY PLANNING AND REPRODUCTIVE HEALTH. ADDITIONALLY, 90 ORGANIZATIONS SIGNED A LETTER THAT CITES GUTTMACHER EVIDENCE WHILE URGING THE HOUSE AND SENATE TO SUPPORT INCREASED FUNDING AND ADDRESS POLICIES THAT LIMIT THE EFFECTIVENESS OF THESE PROGRAMS IN THE STATE, FOREIGN OPERATIONS AND RELATED PROGRAMS FY 2022 APPROPRIATIONS BILL.

FORM 990, PART VI, LINE 17 - STATES

AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OR, PA, RI, SC, TN, UT, VA, WV, WI, Page 2

| NAME AND ADDRESS | DESCRIPTION OF SERVICES | COMPENSATION |
|--|-------------------------|--------------|
| | | |
| AFRICAN POPULATION & HEALTH RESEARCH CTR | | |
| MANGA CLOSE, KIRAWA ROAD | | |
| NAIROBI KENYA 00100 | PRGRM SUBCONTRACTOR | 414,594. |
| RENTA 00100 | FRGRM SUBCONTRACTOR | 111,301. |
| PMO ADVISORY LLC | | |
| 41 WATCHUNG PLAZA, SUITE 186 | | |
| MONTCLAIR, NJ 07042 | MANAGEMENT CONSULTIN | 293,888. |
| NORC AT THE UNIVERSITY OF CHICAGO | | |
| 55 EAST MONROE STREET | | |
| CHICAGO, IL 60603 | PRGRM SUBCONTRACTOR | 303,238. |
| THE POPULATION COUNCIL | | |
| ONE DAG HAMMARSKJOLD PLAZA | | |
| NEW YORK, NY 10017 | PRGRM SUBCONTRACTOR | 350,000. |
| WORLD HEALTH ORGANIZATION | | |
| AVENUE APPIA 20 1211 | | |
| GENEVE | | |
| SWITZERLAND | PRGRM SUBCONTRACTOR | 290,975. |

| Name of the organization | Employer identification | Employer identification number | | | | | | | | | |
|---|-------------------------|--------------------------------|-------------|-------------|--|--|--|--|--|--|--|
| GUTTMACHER INSTITUTE, | 13-2890727 | 7 | | | | | | | | | |
| | | | • | | | | | | | | |
| FORM 990, PART IX - OTHER FEES | | | | | | | | | | | |
| ======================================= | | | | | | | | | | | |
| | (A) | (B) | (C) | (D) | | | | | | | |
| | TOTAL | PROGRAM | MANAGEMENT | FUNDRAISING | | | | | | | |
| DESCRIPTION | FEES | SERVICE EXP. | AND GENERAL | EXPENSES | | | | | | | |
| | | | | | | | | | | | |
| SUB-CONTRACTS | 2,845,002. | 2,845,002. | | | | | | | | | |
| CONSULTANTS | 1,908,174. | 1,664,605. | | 243,569. | | | | | | | |
| RECRUITMENT COSTS | 419,626. | 366,195. | | 53,431. | | | | | | | |
| TEMPORARY HELP | 327,020. | 285,380. | | 41,640. | | | | | | | |
| | | | | | | | | | | | |
| TOTALS | | | | | | | | | | | |
| | 5,499,822. | 5,161,182. | | 338,640. | | | | | | | |
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