

Internal Use Only:
Grant No: _____

*GRANTEE I.D. 22486*

**Organization / Agency Information**

<b>Organization/Agency Name:</b> Planned Parenthood of Northern, Central and Southern New Jersey Inc		
<b>Physical Address:</b> 196 Speedwell Avenue <b>City/State/Zip:</b> Morristown, NJ 07960		
<b>Mailing Address:</b> 196 Speedwell Avenue <b>City/State/Zip:</b> 21 Morristown, NJ 07960		
<b>CEO or Director:</b> Mrs. Triste Brooks <b>Title:</b> President/CEO		
<b>Phone:</b> (732) 842-9300	<b>Fax:</b> (732) 842-9338	<b>Email:</b> triste.brooks@ppggnj.org
<b>Contact Person:</b> Alison Glaser		<b>Title:</b> VP of Community Services
<b>Phone:</b> (732) 842-9300	<b>Fax:</b> (732) 842-9338	<b>Email:</b> alison.glaser@ppggnj.org
<b>Web Site Address:</b> http://www.ppggnj.org		<b>Tax ID:</b> 22-1643997

**Program / Grant Information**

**Interest Area:**  Animal Protection  **Education**  Environment  Health  Human Dignity

<b>Program/Project Name:</b> Responsible Choices			<b>Amount of Grant Requested:</b> \$25,000
<b>Total Organization Budget:</b> \$25,264,131	<b>Per 990, Percentage of Program Service Expenses (Column B/Column A X 100):</b> 80%	<b>Per 990, Percentage of Management &amp; General Expenses Only (Column C / Column A x 100):</b> 16%	<b>Per 990, Percentage of Management &amp; General Expenses and Fundraising (Column C+D / Column A x 100):</b> 21%
<b>Purpose of Grant Request (one sentence):</b> The purpose of this request is to provide partial funding for a sexual health educator in Mercer County, specifically Trenton.			
<b>Program Start Date (Month and Year):</b> 10/1/2017		<b>Program End Date (Month and Year):</b> 9/30/2018	
<b>Gimbel Grants Received: List Year(s) and Award Amount(s)</b> 1			

*20/29/17*

**2017 S. L. Gimbel Foundation Fund Grant Application****Welcome Page****Welcome to the 2017 S. L. Gimbel Foundation Fund Grant Application**

Thank you for applying to the S. L. Gimbel Foundation Fund Grant. The mission of the S.L. Gimbel Foundation is to enhance the quality of life for people and animals by providing effective support in the Founder's specific fields of interest: Animal Protection, Education, Environmental Protection and Enhancement, Health, and Human Dignity. Please take a moment to review the grant application guidelines before continuing the process (use "Guidelines" link above). After you have read and understood the guidelines, please proceed with the grant application process. Should you have any questions, please check the "FAQs" link above or refer to "Application Procedures" on our website. If your questions are not answered via FAQs or Application Procedures, contact us using the "Contact Us" link above.

**Organization Information**

**NOTE: If you have already started an online application and would like to resume, please [CLICK HERE](#) to login to your Applicant Account Page.**

**Organization/Agency Information**

Organization/Agency Name

(If operating as a DBA, enter DBA name here)

Planned Parenthood Of Northern, Central and Southern New Jersey Inc

Legal Name

Planned Parenthood Of Northern, Central and Southern New Jersey Inc

Tax ID

221643997

Tax Status

501(c)3

Organization Mailing Address

Street Address or P.O. Box

196 Speedwell Avenue

City

Morristown

State

NJ

Zip Code

07960

Organization Physical Address (Street No. and Name, City, State, Zip)

*No residential addresses, please*

196 Speedwell Avenue, Morristown, NJ 07960

Website Address

<http://www.ppgnnj.org>

**Organizational Leadership** (Please list CEO, President, Board Chair, Executive Director)

Prefix

Mrs.

First Name

Triste

Last Name

Brooks

Title

President/CEO

Work Phone

(xxx-xxx-xxxx)

973-539-9580

Extension

151

Cell Phone

(xxx-xxx-xxxx)

561-801-2230

Fax

(xxx-xxx-xxxx)

973-539-3828

E-mail Address

[triste.brooks@ppgnnj.org](mailto:triste.brooks@ppgnnj.org)

**Program/Project Contact Person**

Check this box if the Program/Project Contact Person is the same as the organization's primary contact listed above

Fields in this section will auto-fill.

Prefix

Mrs.

First Name

Alison

Last Name

Glaser

Title

VP of Community Services

Work Phone

(xxx-xxx-xxxx)

732-842-9300

Extension

Fax

732-842-9338

E-mail Address

alison.glaser@ppggnj.org

## **Organization/Agency Background**

### **Organization Background**

What is the history, mission, and purpose of your organization?

Planned Parenthood of Northern, Central and Southern New Jersey, Inc. (PPNCSNJ) provides high-quality, comprehensive, accessible, and affordable reproductive and complementary health care services, emphasizing privacy, confidentiality, dignity and sexual self-determination. We advocate for public policies that guarantee these rights and ensure access to such services. We provide and support education programs that expand understanding of human sexuality.

Through our medical services, education and counseling we focus on the health and well-being of individuals. Our goal is to protect, promote, and maintain health and to prevent disease. We do so by integrating our medical service delivery with community education in order to improve health, safety, and equity outcomes; and provide our clinicians and education staff with skills and strategies to change the social circumstances that shape the health of our patients.

Founded in 1932, PPNCSNJ plays a vital role in providing quality, affordable health care and sexual health education to vulnerable populations, including low-income and uninsured women, men, and young people.

### **Length of Service** (number of years)

How long has the organization been providing programs and services to the community?

85

### **Organizational Accomplishments**

What are some of your past organizational accomplishments in the last 3 years?

During the past three years our affiliate has successfully merged twice. The mergers have strengthened our effectiveness, enabled us to spread best practices, and expand our reach in under-served communities. We have also participated in a number of research studies including but not limited to measuring women's interest in self-administering SubQ Depo, and improving a patient's experience as it relates to the gynecological exam. We have successfully implemented The ACA Education and Outreach program providing on-site, Medicaid eligibility screening, education, and enrollment of our uninsured patients under the Medicaid expansion and/or the Marketplace through the Affordable Care Act. We are one of 26 Planned Parenthood affiliates across the country to receive Personal Responsibility Education Program (PREP) funding - the first state-grant program from the federal government that funds comprehensive sex education. PREP provides funding for evidence-based sex education programs that meet the needs of our country's young people by teaching teens how to prevent pregnancy and sexually transmitted infections, including HIV/AIDS, protect their health, make responsible decisions, and learn critical skills needed to form healthy relationships with parents, peers, and partners.

### **Programs and Activities**

What are some of your current key programs and activities? Describe the communities you serve. Include populations and geographic locations.

PPNCSNJ's primary program areas are Medical, Education, and Advocacy. Our Medical services include but are not limited to: comprehensive gynecological exams, immunizations, breast and cervical cancer screening, screening and treatment for sexually transmitted infections (STIs), testing and counseling for HIV, testicular and prostate cancer screening, pregnancy testing and options counseling, and screening for other health indicators.

Our Education department provides an array of outreach and education programs that impart medically accurate, age-appropriate education programs aimed at health promotion and alerting residents to the availability of reproductive health services.

The advocacy arm works to ensure unimpeded access to reproductive health care, comprehensive sexuality education, and other related issues.

PPNCSNJ covers an 18 county service area that spans the northern, central and southern regions of the state. This area is home to 80% of New Jersey's total population of 8.9 million residents. The 18 counties served by PPNCSNJ are Atlantic, Bergen, Burlington, Camden, Cape May, Cumberland, Gloucester, Hunterdon, Mercer, Middlesex, Monmouth, Morris, Ocean, Salem, Somerset, Sussex, Union, and Warren Counties. The population of New Jersey is racially and ethnically diverse. Our patients and education participants reflect the rich diversity of the state with 34% reporting as White; 38% Hispanic; 21% Black; 3% Native American; and 4% Asian. New Jersey boasts one of the country's wealthiest areas however pockets of extreme poverty exist throughout the state within distinct, geographically delineated areas. Several of these disadvantaged, disenfranchised pockets are home to low-income, predominantly minority residents that have the highest cumulative number of HIV/AIDS cases state-wide, highest rates of sexually transmitted infections and teen birth rates.

## **Program/Project Information**

### **Program / Project Information**

#### **Interest Area**

Education

#### **Program or Project Name**

Responsible Choices

#### **Amount of Grant Requested**

Use whole dollars, do not use \$ sign, comma, or decimal

25000

**Total Organization Operating Budget**

Use whole dollars, do not use \$ sign, comma, or decimal

25264131

**Per 990, Percentage of Program Service Expenses**

Column B divided by Column A, x 100

80

**Per 990, Percentage of Management & General Expenses Only**

Column C divided by Column A, x 100

16

**Per 990, Percentage of Management & General Expenses and Fundraising**

Column C + Column D, divided by Column A, x 100

21

**Purpose of Grant Request**

Please summarize the project (in 25 words or less).

The purpose of this request is to provide partial funding for a sexual health educator in Mercer County, specifically Trenton.

**Project Start Date**

Month and Year

October 01, 2017

**Project End Date**

Month and Year

September 30, 2018

**Gimbel Grants Received**

List Years and Award Amounts

1

**Statement of Need**

Specify the community need you want to address and are seeking funds for.

By preventing teen and unplanned pregnancy, we can significantly improve other serious social problems including poverty (especially child poverty), child abuse and neglect, father-absence, low birth weight, school failure, and poor preparation for the workforce. Given the increasing demands in schooling necessary to qualify for a well-paying job, it is more important than ever for teens to finish high school and attain post-secondary education whenever possible. Yet, overall, only about 51% of teen mothers get a high school diploma by age 22 compared to 89% of women who didn't have a teen birth.

According to the most recent data from Child Trends, young teen mothers (those who have a child before they turn 18) are even less likely to graduate from high school--fewer than four in 10 get a high school diploma and another 19% get a GED. Black young teen mothers are the most likely to finish high school or its equivalent; two in three do so by age 22. Hispanic young teen mothers are the least likely; less than half finish by age 22. Another study found that less than two percent of young teen mothers attain a college

degree by age 30.

The National Campaign to Prevent Teen and Unplanned Pregnancy reported that between 2009 and 2010, roughly 48% all mothers age 15 to 19 lived below the poverty line. Teen mothers still living with their own family were somewhat better off, as only 34% of them lived below the poverty line, while teen mothers who did not were particularly at risk--63% of them were living in poverty. As their children grow older, their likelihood of living in poverty increases. Forty-one percent of mothers who gave birth before age 20 were living in poverty within the first year of their child's birth, while the chances of living in poverty rose to 50% when their child reached age three, in part because more of them have left their own parent's home. Non-Hispanic black and especially Hispanic teen mothers became even more likely to drop below the poverty line once their children reached age three.

Although the STI rate has been increasing nationally, the rise in New Jersey predates the national trend. According to a CDC report released in November 2015, the national uptick in bacterial STIs began occurring between 2013 and 2014, whereas New Jersey's increase (35%) was seen as early as 2010, the year after funding for family planning services was eliminated. Planned Parenthood plays a critical role in educating about and providing testing for sexually transmitted infections and HIV/AIDS. We provide residents with education and information, free or low cost treatment and link patients to other resources for care.

### Project Description

Describe your project. How will this project enable this organization to better meet community needs? What is unique and innovative about this project?

Responsible Choices community education program provides participants with the tools to make informed decisions and build healthy relationships; Stresses the value of abstinence while also preparing young people for when they become sexually active; Provides medically accurate information about the health benefits and side effects of all contraceptives, including condoms, as a means to prevent pregnancy and reduce the risk of contracting STIs, including HIV/AIDS; Encourages family communication about sexuality between parent and child; Teaches young people the skills to make responsible decisions about sexuality, including how to avoid unwanted verbal, physical, and sexual advances; and teaches how alcohol and drug use can affect responsible decision making.

We accomplish this through multi-session programs that take place over a period of time with the same participants, intensive single-session programs, and our annual, Teen Conference, which offers a variety of interactive workshops on numerous health issues affecting today's adolescent. Conference attendance has averaged 400 high school students from 30 schools.

Additionally, we deliver professional training on dozens of sexual health topics designed to increase capacity of educators, health care providers, and youth-serving professionals who work specifically with high risk youth. PPNCNJ is registered with the New Jersey State Department of Education to provide Continuing Education Units (CEUs) for workshop participants as well as nursing contact hours through the New Jersey State Nurses Association. The impact of our training is truly an investment to our communities. Local professionals are able to reach many more individuals than we possibly could, and as a result of our training, have consistently reported that they can more effectively communicate with their students and clients on sexual health and related preventive topics.

We are committed to improving the lives of youth, parents, and families in New Jersey through education and training. Responsible Choices helps us to meet this commitment by providing evidence-based sex education programs that meet the needs of our country's young people by teaching teens how to prevent pregnancy and sexually transmitted infections, including HIV/AIDS, protect their health, make responsible decisions, and learn critical skills needed to form healthy relationships with parents, peers, and partners. While the program itself may not be unique we are the only comprehensive sexual health education provider in Trenton.

**Project Goal, Objectives, Activities, Expected Outcomes, and Evaluation:** In fields below, state in the following order: **1. ONE Project Goal** that is a broad, aspirational statement of purpose for the project and **ONE Objective** that is a specific, measurable, verifiable, action-oriented, realistic, and time-specific statement intended to guide your organization's activities toward achieving the goal. **2. Specify the**



**Project Activities** you will undertake to meet the objective and number of participants for each activity. **3. Expected Outcomes** are the individual, organizational, or community-level changes that can reasonably occur during the grant period as a result of the proposed activities or services. What are the key anticipated outcomes of the project and impact on participants? State in quantifiable and verifiable terms. **4. Evaluation** How will progress towards the objectives be tracked and outcomes measured? Provide specific information on how you will collect relevant data and statistics that meet your objective and validate your expected outcomes in a quantifiable manner as you describe your evaluation process.

### 1. Project Goal and Objective

Goal: Reduce unintended pregnancy and prevent the spread of STIs, including HIV/AIDS.

Objective: Facilitate at least 80 educational sessions (1,000 participants) and 20 outreach events reaching 2,000 participants.

### 2. Project Activities

Provide group and/or individual educational sessions

Participate in Outreach events

Provide resources

Link participants to healthcare services

### 3. Expected Outcomes

We expect that 563 educational participants will demonstrate an increase in knowledge acquisition of sexually transmitted infections and ways to prevent infections and report that because of the information they learned they will make healthier choices regarding sexual activity.

### 4. Evaluation

The impact of our education program is measured via pre-and post-testing. The tests are designed to gauge existing and increased knowledge gains, behavioral intent, and self-awareness to determine if the information presented will have a positive effect on the choices our participants make regarding their health. To measure our quantitative goals, we track the number of: education sessions delivered, program participants, outreach events, and demographic data. We also maintain a log of community partners and referrals to healthcare providers. 750 participants will be given a pre-and post-test.

**\*Below are some examples of how to list your Goals, Objectives, Activities, Expected Outcomes, and Evaluation: Objective, Outcome, and Evaluation should align and should be written in a linear format, using actual numbers and data that are quantifiable and verifiable.**

#### **STATE ONE GOAL, ONE OBJECTIVE, ONE OUTCOME:**

- **GOAL:** House all homeless youth ages 18-24 in Mariposa County who are physically, mentally, and legally able to work within 24 hours and help them become self-sufficient in 90 days.
- **OBJECTIVE:** House up to 145 homeless youth referred or who contact us within 24 hours.
- **OUTCOME:** We expect to provide rapid rehousing to over 45 homeless youth in 2017.

**EVALUATION:** Using Build Futures' Salesforce database client management and tracking system, generate reports on the number of clients served and housed. Track our role in housing 145 youth. Account for additional success or lower numbers of youth in the program.

#### **Target Population**



Who will this grant serve? How many people will be impacted? Provide a breakdown: Number of children, youth, adults, seniors, animals.

General Population

### **Project Timeline**

Provide a timeline for implementing the project. Include timeframes for specific activities, as appropriate.

Responsible Choices operates on an ongoing basis throughout the year.

### **Projects in the Community**

How does this project relate to other existing projects in the community? Who else in the community is providing this service or has a similar project? Who are your community partners, if any? How are you utilizing volunteers?

Responsible Choices is the only program in Trenton that provides comprehensive sexual health education. HiTops a non-profit organization formerly providing sexual health education in the Trenton area relocated approximately 1 year ago and now provides services only in Princeton. PPNCNJ partners with a variety of community based organizations and schools to deliver educational sessions and inform/link residents to health services. They include: Trenton School Based Youth Services, Bordentown High School, HomeFront (services for the homeless), Pei Kids (child abuse & intervention program), Daylight/Twilight High School (alternative school), National Black HIV/AIDS Organization, Isles Youth, Delaware Valley School for Exceptional Children, the College of New Jersey, Rider University, Children's Aid Society, Pennrose Housing Complex, Boys and Girls Club, All Access Mental Health, Millhill Child and Family Development Center, and Womanspace (Domestic Violence). Volunteers in the education department serve on the Education and Training Advisory Committee as well as our Teen Advisory Committee. These groups provide us with guidance and feedback to continually enhance and update our programs to meet the evolving needs of the communities we serve.

### **Project Future**

#### **Project Future / Sustainability**

Explain how you will support the project after the grant performance period. Include plans for fundraising or increasing financial support designated for the project.

We continuously seek opportunities to ensure continuation of grant funded programs. We will approach several local foundations with interests in ensuring all residents have unimpeded access to quality education and healthcare services. The project currently receives support from the Princeton Area Community Foundation and the Church & Dwight Employee Giving Program.

### **Governance, Executive Leadership, and Key Personnel / Staff Qualifications**

#### **Governance**

Governance: Describe your Board of Directors and the role it plays in the organization. What committees exist within your Board? How does your Board make decisions?

PPNCNJ's board of directors is a group of knowledgeable, and culturally diverse members who collectively possess special areas of knowledge. The board members understand business models, fund development and health care reform in order to effectively guide the organization. The board is responsible for the tenure and responsibilities of the CEO, and the overall fiscal health of the organization. Board committees include: Executive, Governance, Budget and Finance, and Nominating. There are also several ad-hoc committees. The board makes decisions by a majority vote when a quorum exists.

#### **Executive Leadership**

**Management:** Describe the qualifications of key personnel/staff responsible for implementing the project.

Alison Glaser, VP of Community Services will oversee the project. Ms. Glaser has over 15 years of experience in the social service field having worked at the local, state, and national levels developing youth mentoring programs and school-business partnerships. Ms. Glaser serves as an adjunct professor of Social Work at Rutgers University and Brookdale Community College. She earned a Master of Social Work degree in Administration and Social Planning from Temple University and a B.A. in Sociology from the Pennsylvania State University.

Sally Mennah, Sexual Health Educator will have the responsibility of delivering project activities. Ms. Mennah holds a B.S. in Public Health from Rutgers University. She has nearly 10 years of experience working in the public health field, including internships with the World Health Organization in West Africa, and the United Nations Development Program in Mozambique.

## Attachments

### Attachments

**REQUIRED .PDF ATTACHMENTS:** The maximum size for all attachments combined is 25 MB. Please note that files with certain extensions such as “exe”, “com”, “vbs”, or “bat” cannot be uploaded. You must **1.**

**BROWSE FILES** on your computer, **2. SELECT FILES**, then **3. CLICK UPLOAD** to attach files.

**\*IMPORTANT:** For each set of required documents below, please scan all pages of each set into one .pdf, as only a single document upload is permitted for each item being requested.

#### 1. Project Budget and Budget Narrative

Please provide a detailed line-item budget for your **entire** project. Download the **V. Project Budget and Narrative Worksheet**, complete, and **Upload**. SEE **SAMPLE Budget & Narratives Worksheet**,

[2017-Gimbel-App-Project-Budget-and-Narrative-1.pdf](#)

#### 2. Sources of Funding

Please list your current sources of funding and amounts. Download the **VI. Sources of Funding Worksheet**, complete, and **Upload**.

[2017-Gimbel-App-Sources-of-Funding.pdf](#)

#### 3. Financial Analysis

Please provide all information requested for your **entire organization**. Included any notes that may explain any extraordinary circumstances. Download the **VII. Financial Analysis Worksheet**, complete, and **Upload**.

[2017-Gimbel-App-Financial-Analysis.pdf](#)

#### 4. Current Year Operating Budget

Please provide a copy of your current year's operating budget

[Fiscal Year 2017 Budget.pdf](#)

#### 5. Budget Comparison

Download the **SAMPLE Budget Comparison Worksheet**, complete, and **Upload**.

[2017-Gimbel-App-Sample-Budget-Comparison.pdf](#)

#### 6. Part IX only of the 990 form

Statement of Functional Expenses (one page). If you completed a 990-EZ, Download the **Part IX Functional Expenses sample** of the 990 form using figures from your 990 EZ, complete, and **Upload**.

[Part IX-990.pdf](#)

#### 7. Financial Statements

Please provide a copy of your most recent year-end financial statements (audited, if possible)

[Final Financial Statements - 2016.pdf](#)

**8. Most Recent 990**

Please provide a copy of your most recent 990 form

[990 - Public Inspection Copy.pdf](#)

**9. Tax Exemption Letter**

Please provide an electronic copy of your IRS 501 (c) (3) determination letter.

[PPCGNNJ 501 C3.pdf](#)

**10. Board of Directors List**

Please provide a list of your current Board of Directors, including their name, position on the board, and professional affiliation(s).

[BOD Occupations.pdf](#)

**11. Evaluation & Expenditure Report**

For past grantees, provide a copy of your most recent final evaluation report, including your most recent expenditure report.

[Gimbel Foundation. Final Report May 2016-May 2017.pdf](#)

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**V. Project Budget and Narrative (Do not delete these instructions on your completed form).**

A) **Budget Table:** Provide a detailed line-item budget for your entire project by completing the table below. Requested line items should be limited to Ten (10) line items. The less the better.

A breakdown of specific line item requests and attendant costs should include:

- 1) Line item requests for materials, supplies, equipment and others:
  - a. Identify and list the type of materials, supplies, equipment, etc.
  - b. Specify the unit cost, number of units, and total cost
  - c. Use a formula/equation as applicable. (i.e. 40 books @ \$100 each = \$4000)
- 2) Line item requests for staff compensation, benefits: **Do not use FTE percentages.**
  - a. Identify the position; for each position request, specify the hourly rate and the number of hours (i.e. \$20/hr x 20 hours/week x 20 weeks = \$8,000)
  - b. For benefits, provide the formula and calculation (i.e. \$8,000 x 25% = \$2,000)
- 3) Line items on Salaries/Personnel included in budget (contribution or in-kind) but NOT requested from the Gimbel Foundation must be broken down per number 2) above: Provide rate of pay per hour and number of hours.

Line Item Request	Line Item Explanation	Support From Your Agency	Support From Other Funders	Requested Amount From Gimbel/TCF	Line Item Total of Project
Project Personnel: Sexual Health Educator, VP of	\$22/hour x 35hours/week x 62 weeks; 53hour x 3.5hours/week x		\$29,646	\$20,000	\$49,646
Fringe Benefits Includes all taxes, insurances, etc	25% of Salary	\$5,000	\$2,411	\$5,000	\$12,411
Local Travel	100miles/month x .59/mile; 50miles/mo x.59/mile (VP)	\$1,062			\$1,062
Professional Development	Local seminars + 1 national conference includes airfare, meals, lo	\$1,500			\$1,500
Program Supplies	Office Supplies and educational materials	\$2,500			\$2,500
Printing & Copying	Reproduction of lessons, flyers, etc. average cost of \$41/month	\$500			\$500
Condoms	\$72/case x 28 cases		\$2,000		\$2,000
Cell Phone	\$40/month x 12 months	\$480			\$480
Occupancy (includes utilities)	Portion of building occupancy	\$11,400			\$11,400
<b>TOTALS:</b>		\$22,442	\$34,057	\$25,000	\$81,499

B) **Narrative:** The budget narrative is the justification of "how" and/or "why" a line item helps to meet the project deliverables. Provide a description for each line item request as necessary. Explain how the line item relates to the project. If you are requesting funds to pay for staff, list the specific duties of each position. See attached SAMPLE Project Budget and Budget Narrative

Personnel: The sexual health educator will deliver group and/or individual educational sessions, conduct outreach activities and participate in community events. The VP of Community Services will be responsible for project oversight including meeting with community partners.

Fringe Benefits: Benefits are calculated at 25% of salaries. They include all state and federal taxes, insurance, retirement, etc.

Local Travel: Mileage for educator to travel to community locations to conduct sessions, outreach and community events. Travel allotment for VP of Community Services to provide oversight and meet with community partners.

Supplies: Project supplies include folders, pens, paper, flip charts, markers. Educational materials include pamphlets on safer sex, STI's, Contraception, HIV, etc. Average cost of pamphlets is \$150/500 for English and Spanish.

Printing/Copying: Reproduction of lessons, flyers to promote program, etc.

Condoms: Condoms are distributed free of charge to program participants and during outreach/community events, as appropriate.

Cell Phone: Cell Phone for educator to use as a means of communication especially while out in the field.

Professional Development: Seminars relating to sexual health and/or related topics to ensure educator maintains abreast of cutting edge strategies and information.

Occupancy: Sexual health educator will have office space at the Trenton health center and at nearby Hamilton, and the College of New Jersey.

**2017 S.L. Gimbel Foundation APPLICATION**

**VI. Sources of Funding:** Please list your current sources of funding and amounts.

*Secured/Awarded*

<b>Name of Funder: Foundation, Corporation, Government</b>	<b>Amount</b>
Princeton Area Community Foundation	\$20,000
Church & Dwight Employee Giving Program	\$10,000

*Pending*

<b>Name of Funder: Foundation, Corporation, Government</b>	<b>Amount</b>	<b>Decision Date</b>

**Diversity of Funding Sources:** A financially healthy organization should have a diverse mix of funding sources. Complete those categories that apply to your organization using figures from your most recent fiscal year.

<b>Funding Source</b>	<b>Amount</b>	<b>% of Total Revenue</b>	<b>Funding Source</b>	<b>Amount</b>	<b>% of Total Revenue</b>
Contributions	\$ 2,635,016	10	Program Fees	\$ 14,442,144	57
Fundraising/Special Events	\$ 246,708	1	Interest Income	\$	
Corp/Foundation Grants	\$ 1,015,399	4	Other: Center for Sex Ed	\$ 346,953	1
Government Grants	\$ 5,843,859	23	Other: Research Grants	\$ 363,749	1

**Notes:**

**2017 S.L. Gimbel Foundation APPLICATION**

**VII. Financial Analysis**

**Agency Name:** Planned Parenthood of Northern, Central and Southern New Jersey

**Most Current Fiscal Year (Dates):** From 10/1/16 To: 10/1/16

This section presents an overview of an applicant organization’s financial health and will be reviewed along with the grant proposal. Provide all the information requested on your **entire organization**. Include any notes that may explain any extraordinary circumstances. Information should be taken from your most recent 990 and audit. **Double check your figures!**

**Form 990, Part IX: Statement of Functional Expenses**

**1) Transfer the totals for each of the columns, Line 25- Total functional expenses (page 10)**

(A) Total Expenses	(B) Program service expenses	(C) Management & general expenses	(D) Fundraising expenses
\$ 15,721,574	\$ 12,477,542	\$ 2,562,562	\$ 681,470

**2) Calculate the percentages of Columns B, C, and D, over A (per totals above)**

- Program services (B) – A general rule is that at least 75% of total expenses should be used to support programs
- Management & general administration (C) – A general rule is that no more than 15% of total expenses should be used for management & general expenses
- Fundraising (D) – A general rule is that no more than 10% of total expenses should be used for fundraising

(A) Total Expenses	(B) Program service expenses	(C) Management & general expenses	(D) Fundraising expenses
15,721,574	Columns B / A x 100	Columns C / A x 100	Columns D / A x 100
Must equal 100%	80 %	16 %	4 %

**3) Calculate the difference between your CURRENT year budget for management & general expenses and your previous management & general expenses per your 990 (Column C)**

Percentage of Organization’s <u>Current</u> Total Budget used for Administration	Column C, Management & general expenses per 990 above	Differential
16 %	16 %	0 %

If the differential is above (+) or below (-) 10%, provide an explanation:



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**Quick Ratio:** Measures the level of liquidity and measures only current assets that can be quickly turned to cash. A generally standard Quick Ratio equals 1 or more.

<b>Cash</b>	<b>+ Accounts Receivables</b>	<b>/Current Liabilities</b>	<b>= Quick Ratio</b>
\$ 659,839	\$ 2,239,075	1,898,500	1.53

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**Excess or Deficit for the Year:**

<b>Excess or (Deficit) Most recent fiscal year end</b>	<b>Excess or (Deficit) Prior fiscal year end</b>
\$ (351,152)	\$ 3,585,662

**Notes:**

Please note that the fiscal year was changed from 1/1-12/31 to 10/1-9/30 when the merger occurred on 10/1/16. Both the audit and 990 represent a 9-month period.

**Planned Parenthood of Northern, Central and Southern New Jersey, Inc.**  
**Fiscal Year 2017 Operating Budget**  
**October 1, 2016 through September 30, 2017**

	<b>2017 Budget</b>
<b>Revenue</b>	
Fundraising and Development	2,635,016
Private Grants and Reimbursement Contracts	1,015,399
Government Grants	5,843,859
Patient Revenue	14,442,144
Center for Sex Education	346,953
Research & Development	363,749
Release of Restrictions	370,303
Other Income	246,708
<b>Total Revenue</b>	<b>25,264,131</b>
<b>Expenses</b>	
Personnel Costs	15,957,867
Medical	3,586,429
Operational Expenses	992,217
Facilities	3,082,307
Dues & Membership	524,199
Outside Services	1,012,131
<b>Total Expenses</b>	<b>25,155,150</b>
<b>Net Operating Surplus (Deficit)</b>	<b>108,981</b>
<b>Depreciation Expense</b>	<b>533,127</b>
<b>Net Surplus (Deficit)</b>	<b>(424,147)</b>

**PLANNED PARENTHOOD OF CENTRAL AND  
GREATER NORTHERN NEW JERSEY**

Form 990 (2015)

22-1643997 Page 10

**Part IX Statement of Functional Expenses**

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

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	302,894.		302,894.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
7 Other salaries and wages .....	6,762,994.	5,383,861.	1,007,377.	371,756.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) .....	218,385.	174,680.	32,388.	11,317.
9 Other employee benefits .....	1,034,760.	807,996.	171,004.	55,760.
10 Payroll taxes .....	558,331.	428,798.	99,941.	29,592.
11 Fees for services (non-employees):				
a Management .....				
b Legal .....	53,513.	17,887.	35,626.	
c Accounting .....	25,676.		25,676.	
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees .....				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	702,280.	413,298.	170,876.	118,106.
12 Advertising and promotion .....	18,066.	16,053.	50.	1,963.
13 Office expenses .....	1,019,777.	905,102.	93,462.	21,213.
14 Information technology .....	361,219.	328,849.	25,485.	6,885.
15 Royalties .....				
16 Occupancy .....	1,028,299.	960,977.	60,897.	6,425.
17 Travel .....	234,792.	181,197.	42,762.	10,833.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings .....	373,802.	140,475.	219,121.	14,206.
20 Interest .....				
21 Payments to affiliates .....	281,118.	54,340.	199,211.	27,567.
22 Depreciation, depletion, and amortization .....	377,128.	336,786.	35,419.	4,923.
23 Insurance .....	159,347.	159,347.		
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>SUPPLIES &amp; MEDICATION</b> .....	1,903,193.	1,903,193.	0.	0.
b <b>LABORATORY SERVICES</b> .....	196,743.	196,743.	0.	0.
c <b>OTHER EXPENSES</b> .....	65,408.	56,232.	8,252.	924.
d <b>DUES</b> .....	43,849.	11,728.	32,121.	0.
e All other expenses .....				
25 Total functional expenses. Add lines 1 through 24e	15,721,574.	12,477,542.	2,562,562.	681,470.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP BR-2 (ASC 058-770)

**Planned Parenthood of Northern, Central and Southern New Jersey  
Gimbel Foundation  
Final Report May 2016-June 30, 2017**

**Total number of clients served through this grant funding:**

4,017

**Describe the project's key outcomes and results based on the goals and objectives. Use the following format:**

**State the Goal**

**State Objective 1**

**Describe the Activities, Results and Outcomes for Objective 1**

**State Objective 2 (if applicable)**

**Describe the Activities, Results and Outcomes for Objective 2:**

**State Objective 3 (if applicable):**

**Describe the Activities, Results and Outcomes for Objective 3:**

Goal: To reduce unintended pregnancy and prevent the spread of STIs, including HIV.

Objective I: Participants will demonstrate a minimum of a 75% increase in knowledge acquisition of sexually transmitted infections and ways to prevent infections.

Activities, Results and Outcomes: Group and/or individual sessions were delivered at various locations throughout the community, including schools, campuses, residential programs/shelters. STD education materials such as pamphlets, fact sheets, PowerPoint slides and scenario DVDS were utilized to provide participants with an enhanced understanding of sexually transmitted infections. Participants, upon completion of the workshops, could successfully identify STD facts, causes and modes of transmission. Most importantly, participants practiced how to effectively use condoms and better understood the various types of condoms. This activity promotes consistency in condom use and safer sex awareness.

Objective II: A minimum of 75% of participants will report that as a result of the information they learned during our safer sex workshop, they will make healthier choices regarding sexual activity.

Activities, Results and Outcomes: During our safer sex workshops, participants consider an array of situations related to sexual health, relationships and decision-making. Our educator uses a variety of learning techniques including showing scenarios on educational DVDs to facilitate active discussions as well as role plays. Positive outcomes of role play as a teaching method provided participants with improved self-confidence, decision making and overall communication skills to influence positive responsible sexual behavior. Surveys of Responsible

Choices participants have found that 95% of participants surveyed reported they will make healthier choices regarding their sexual activity.

Objective III: A minimum of 75% of participants will report that they are more aware of the health services available to them in their community.

Activities, Results and Outcomes: Responsible Choices educates individuals about the health services available to them through outreach events, resources provided during educational workshops, linkages to health care through partnerships with other organizations in Mercer County and having a presence at health fairs and other community events. Many of the community members were unaware of the scope of health services available. Our educator provided information and assistance to aid individuals in accessing services at Planned Parenthood. Surveys of Responsible Choices participants have found that 94% of participants surveyed reported they are more aware of the health services available to them.

**Please describe any challenges/obstacles the organization encountered (if any) in attaining goals & objectives.**

The primary challenges we encountered had to do with scheduling issues with our partner organizations. Due to conflicting priorities and the unpredictable circumstances under which some of our program partners operate, programs were often postponed or delayed or rescheduled.

A second challenge, in the initial phase of our grant period, was reconnecting and reestablishing relationships with organizations that we had not worked with much in the prior year (this was due largely in part to the merger on 4/1/15).

**How did you overcome and/or address the challenges and obstacles?**

Scheduling conflicts were resolved with patience, flexibility and more frequent and consistent communication with our program partners. In some programs, we created long-range schedules and then confirmed multiple times as the programs drew near.

In order to reestablish a consistent presence and strong relationships within the community, this grant allowed us to assign a designated Mercer County Community Health Educator. Throughout the year we forged many new partnerships and strengthened existing partnerships for providing education as well as for referring patients to our Health Center.

**Describe any unintended positive outcomes as a result of the efforts supported by this grant.**

As a result of the efforts supported by this grant, we have seen an increase in the number of referrals for our health services; a deeper understanding by community members and collaborative partners of the breadth of health services Planned Parenthood provides; and many

new collaborations, relationships and partnerships with community based organizations. We most certainly have stronger community presence and trust with Mercer county community members.

**Briefly describe the impact this grant has had on the organization and community served.**

This grant has positively impacted our ability to bridge health services gaps within the community and overall build stronger partnerships with numerous organizations and schools.

Furthermore, this grant has increased overall reproductive/sexual health and the likelihood of healthier decision-making among program participants. As an organization, the grant has provided us with increased referrals and enhanced participant's comfort in utilizing our services and discussing sexual health concerns.

**Provide detail information on how funds were expended. Copies of receipts or additional information can be emailed to [grant-info@thecommunityfoundation.net](mailto:grant-info@thecommunityfoundation.net).**

**Please provide a budget expenditure report of the approved line items. Include a brief narrative on how the funds were used to fulfill grant objectives.**

The approved line items were:

Project Personnel: Sexual Health Educator = \$40,000 (\$22/hour x 35 hours/week x 52 weeks)

Fringe Benefits: includes all taxes, insurance = \$10,000 (25% of salary)

Total Amount Approved: \$50,000

The funds were used to pay the salary and fringe of Sally Manneh, Sexual Health Educator. Sally was designated to provide education and outreach services in Mercer County through the Responsible Choices program funded through this grant.

**Please use the following spaces to provide any client stories, antidotes, or quotes to showcase the success and impact you were able to achieve due to this funding.**

**Please relate a success story:**

---

A young mother of one and domestic violence survivor was inspired by our workshops to go back to school and earn a medical assistant degree in women's health. Our Health Educator had multiple group and individual sessions with her, providing information on a variety of reproductive health topics. The participant has since successfully completed her first semester at Mercer County Community College and is still actively attending our Responsible Choices workshops.

**Please relate a success story:**

---

One of our program participants was unaware of the existence of the herpes epidemic. Upon completion of our STI workshop the participant verbally stated that as a result of the educational program, he will take immediate healthier steps to protect himself. He went further to state that

he had a habit of engaging in unsafe sexual activities while intoxicated, thus he was inspired to take active steps to avoid alcohol and drug use. Additionally, he has recommended our program to his friends and we have seen an increase in male participants during our workshops which were predominately attended by females.

**Which category best describes the organization?**

- Other: Reproductive health care organization

**What is the organization's primary program area of interest?**

- Education
- Health & Human Services

**Percentage of clients served through grant in each ethnic group?**

African American –50%

Asian /Pacific Islander- 1%

Caucasian -10%

Native American-0%

Hispanic/Latino- 39%

**Approximate percentage of client served from grant funds in each age category?**

- Youth Ages 13-18- 25%
- Young Adults 18-24- 40%
- Adults - 35%

**Approximate % of clients served with disabilities from grant funds.**

- Mentally/emotionally disabled -10%

**Approximate % of clients served in each economic group?**

- At/Below Poverty level - 45%
- Homeless/Indigent- 5%
- Working poor – 50%

**Approximate % of clients served from grant funds in each population category.**

- Single parent families – 30%
- Ethnic Minority – 10%



- LGBTQ - 5%
- Abused Women/children- 2%
- Homeless/Indigent – 8%
- Students – 45%

**SAMPLE Budget Comparison**

	Actuals		Budget		Variance	
	Most Recently Completed Year		Projections Current Year			
	20 15		20 16			
<b>Income</b>						
Individual Contributions	2,219,288	-	2,635,016	-	415,728	-
Corporate Contributions	-	-	-	-	-	-
Foundation Grants	672,138	-	1,015,399	-	343,261	-
Government Contributions	4,239,075	-	5,843,859	-	1,604,784	-
Other Earned Income	11,801,015	-	15,769,857	-	3,968,842	-
Other Unearned Income	-	-	-	-	-	-
Interest & Dividend Income	-	-	-	-	-	-
<b>Total Income</b>	<b>18,931,516</b>	<b>-</b>	<b>25,264,131</b>	<b>-</b>	<b>6,332,615</b>	<b>-</b>
<b>Expenditures</b>						
<b>Personnel</b>						
Salary CEO	257,096	-	257,096	-	0	-
Salary Assistant	60,000	-	60,000	-	0	-
Payroll Taxes	24,258	-	24,258	-	0	-
Insurance - Workers' Comp	15,855	-	15,855	-	0	-
Insurance - Health	34,024	-	34,024	-	0	-
Payroll Services	9,764	-	9,764	-	0	-
Retirement	-	-	-	-	-	-
<b>Total Personnel</b>	<b>400,997</b>	<b>-</b>	<b>400,997</b>	<b>-</b>	<b>0</b>	<b>-</b>
<b>General Program/Administrative</b>						
Bank/Investment Fee	0	-	0	-	0	-
Publications	0	-	0	-	0	-
Conferences & Meetings	370,465	-	219,121	-	151,243	-
Mileage	35,204	-	42,762	-	(7,558)	-
Audit & Accounting	36,686	-	25,676	-	11,010	-
Program Consultants	58,058	-	60,897	-	(2,829)	-
Insurance Expense	169,019	-	196,743	-	(27,724)	-
Telephone Expense - Land Lines	7,795	-	12,605	-	(4,810)	-
DSL & Internet	68,851	-	35,419	-	33,432	-
Website	-	-	-	-	-	-
Office Supplies	69,203	-	93,462	-	(24,259)	-
Postage & Delivery	21,800	-	28,980	-	(7,180)	-
Printing & Copying	-	-	-	-	-	-
Miscellaneous	53,627	-	40,373	-	13,254	-
<b>Total General Program/Administrative</b>	<b>890,708</b>	<b>-</b>	<b>756,038</b>	<b>-</b>	<b>134,670</b>	<b>-</b>
<b>Total Expenditures</b>	<b>1,291,705</b>	<b>-</b>	<b>1,157,035</b>	<b>-</b>	<b>134,670</b>	<b>-</b>
<b>Revenue Less Expense</b>	<b>17,639,811</b>	<b>-</b>	<b>24,107,096</b>	<b>-</b>	<b>6,197,945</b>	<b>-</b>

**Planned Parenthood of Northern, Central and Southern New Jersey, Inc.  
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2016-2017**

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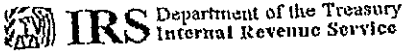
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Joshua S. Saks  
Professor, Morris County College



OGDEN UT 84201-0046

In reply refer to: 0423256121  
June 13, 2012 LTR 252C 0  
22-1643997 000000 00  
00007760  
BODC: TE

PLANNED PARENTHOOD OF CENTRAL AND  
GREATER NORTHERN NEW JERSEY INC  
196 SPEEDWELL AVE  
MORRISTOWN NJ 07960-2934



24916

Taxpayer Identification Number: 22-1643997

Dear Taxpayer:

Thank you for the inquiry dated Mar. 12, 2012.

We have changed the name on your account as requested. The number shown above is valid for use on all tax documents.

If you need forms, schedules, or publications, you may get them by visiting the IRS website at [www.irs.gov](http://www.irs.gov) or by calling toll-free at 1-800-TAX-FORM (1-800-829-3676).

If you have any questions, please call us toll free at 1-877-829-5500.

If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number ( ) \_\_\_\_\_ Hours \_\_\_\_\_

Sincerely yours,

Sheila Bronson  
Dept. Manager, Code & Edit/Entity 3

Enclosure(s):  
Copy of this letter

P.O. Box 35045  
Jacksonville FL 32202-0000

In reply refer to: 0752658385  
July 12, 2012 LTR 4168C 0  
22-1643997 000000 00 000  
00001

BODC: TE

PLANNED PARENTHOOD OF CENTRAL AND  
GREATER NORTHERN NEW JERSEY INC  
196 SPEEDWELL AVE  
MORRISTOWN NJ 07960-2934

Employer Identification Number: 22-1643997  
Person to Contact: H Baumgarten  
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your July 12, 2012, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in June of 1957.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website [www.irs.gov/eo](http://www.irs.gov/eo) for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Stephen E. Faxton  
Operations Manager, AM Operations 3



Strengthening Inland Southern California through Philanthropy

BOARD OF DIRECTORS

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November 30, 2017

*S. L. Gimbel Foundation Fund*

Ms. Triste A. Brooks

President & CEO

Planned Parenthood of Central & Greater Northern New Jersey, Inc.

196 Speedwell Avenue

Morristown, NJ 07960

Dear Ms. Brooks:

Congratulations! A grant has been approved for **Planned Parenthood of Central & Greater Northern New Jersey, Inc.** in the amount of \$25,000.00 from the S.L. Gimbel Foundation. **The performance period for this grant is December 1, 2017 to November 30, 2018.** Additional funding beyond the performance period is not guaranteed. It is highly recommended that alternative funding sources be sought accordingly. The grant is to support the following as specified in your proposal:

*To provide partial funding for a sexual health educator*

This grant is subject to the terms outlined in the enclosed Grant Agreement. After you have reviewed the terms and conditions of the Grant Agreement, **please sign and date the agreement and return with original signature to The Community Foundation by Friday, December 29, 2017.** Be sure to copy the signed agreement for your records. Funds will be released upon receipt of the signed Grant Agreement.

A condition of this grant is that you agree to submit the Grant Evaluation Form which includes a narrative report and fiscal report. **The Grant Evaluation is due by December 15, 2018** and will be available online at:

<https://www.thecommunityfoundation.net/grants/grants/forms>.

We wish you great success and look forward to working with you during the grant performance period. If you have any questions, please feel free to contact me at 951-241-7777.

Sincerely,

Celia Cudiamat

Executive Vice President of Programs

22486 Planned Parenthood of Central & Greater Northern New Jersey, Inc.  
20170859 GIMB

