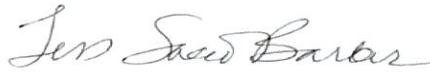


Executive Director/President: (Print name and Title)

Signature:

Date:

Tess Sacco-Barker, President and CEO



2/23/2016

2016 S.L. Gimbel Foundation Fund APPLICATION

Narrative

Please provide the following information by answering all questions (I to IV) in **FOUR (4) typed pages maximum, 12 Font, One Inch Margins**. Please be thorough, clear, specific, and concise.

I. Organization Background; Target Population:

- A) What is the history, mission and/or purpose of your organization? How long has the organization been providing programs and services to the community?
- B) What are some of your past organizational accomplishments (last three years)?
- C) What are your key programs and activities? Describe the communities you serve. Include populations, geographic locations served, and relevant statistics.

II. Project Information:

- A) Statement of Need
 1. Specify the community need you want to address and are seeking funds for.
- B) Project Goal, Objectives and Methodology
 1. State your project goal. Describe your project. How does your project meet the community need? What is unique and innovative about this project?
 2. State up to three objectives. Objectives should be specific, measurable, action-oriented, realistic, and time-specific. Specify the activities you will undertake to meet each objective. Use the following format for your objectives and respective activities:
 - Objective I:
 - Activities:
 - Objective II:
 - Activities:
 - Objective III:
 - Activities:
 3. **Provide a timeline for implementing the project. State the start date and ending date of the project, include timeframes for specific activities, as appropriate.**
 4. Who will this grant serve? Describe your target population. How many people will be impacted? Provide a breakdown: Number of Children, Youth, Adults, Seniors, Animals. Include a detailed list of activities and number of participants for each activity.
 5. 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?
- C) Project Outcomes and Evaluation
 1. What are the key anticipated outcomes of the project and impact on participants?
 2. How will you know if you have achieved the expected outcomes?
 3. How will progress towards the objectives be tracked and outcomes measured?
- D) How will you use the grant funds?

III. Project Future

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

IV. Governance, Executive Leadership and Key Personnel/Staff Qualifications

- A) Describe your board of directors and the role it plays in the organization. What committees exist within your board of directors? How does the board of directors make decisions?
- B) Describe the qualifications of key personnel/staff responsible for the project.

I. Organization Background: Target Population

A.) Planned Parenthood of the North Country New York, Inc. (PPNCNY) is the largest provider of reproductive health care services in the North Country, with more than 18,000 visits annually. PPNCNY has a five county service area: Clinton, Franklin, Jefferson, Lewis and St. Lawrence and has been providing services for nearly 50 years. It is PPNCNY's mission to provide the highest quality reproductive and sexual health care with access, education and advocacy for choice-no matter what.

B.) PPNCNY has been awarded funds from the Office of Victims Services to provide rape crisis prevention education on college campuses throughout the North Country.

C.) PPNCNY is currently the primary provider of teenage pregnancy prevention programming and related education throughout the North Country. PPNCNY works to provide education throughout the community, utilizing numerous partnerships and collaborative approaches to improve the local statistics related to local teenage STI prevalence and teenage pregnancy. Currently, in addition to providing individual counseling and education at each of its Title X clinic-based locations, PPNCNY provides the following programs in Franklin, Jefferson, Lewis and St. Lawrence counties: medically-accurate, age-appropriate reproductive and sexual health lessons. The communities PPNCNY serves are amongst the poorest counties in New York with between 13.5-19.6% of the population living below the poverty line as illustrated below in Figure 1 of the economic snapshot of the four targeted counties based on the 2009-2013 Census Community Survey data.

County Economic Snapshot (Figure 1)

County	Poverty Level ¹	Unemployment ²
Franklin	19.2%	9.8%
Jefferson	15.4%	11.6%
Lewis	13.5%	8.1%
St. Lawrence	19.6%	11.2%
New York State	15.6%	9.2%

II. Project Information

A.) Planned Parenthood of the North Country New York, Inc. proposes to implement the Teen Advocacy Program (TAP) program in Jefferson and Lewis counties with funding support from the S.L. Gimbel Foundation Fund. The North Country is comprised of low-income, rural communities and small towns that make it difficult for youth to access health information and reproductive health care services. The grant funds will help support the creation of the Teen

Advocacy Program (TAP) which is a program to educate and empower youth throughout the North Country to reduce teen pregnancy rates and HIV, AIDS and other STIs.

B.)The goal of the TAP program is to reduce rates of teenage pregnancy in 11 high-risk targeted Northern New York zip codes by an average of 10 percent using two specific evidence-based teenage pregnancy prevention programs by the year 2020. The 11 high-risk zip codes were identified by reviewing the teen pregnancy prevalence rates by zip code as provided by the New York State County/Zip Code Perinatal Data Profile which was updated in March of 2014.

Targeted High Risk Zip Codes (Figure 2)

Community/Zip Code	County	Teenage Birth Rate ²
Belleville Henderson (13650)	Jefferson	37%
Black River (13612)	Jefferson	42.9%
Calcium (13616)	Jefferson	40.7%
Evans Mills	Jefferson	63.5%
LaFargeville (13656)	Jefferson	45.6%
Watertown (13601)	Jefferson	47.9%
Carthage (13619)	Lewis	39.2%
Constableville (13325)	Lewis	49.0%
Copenhagen (13626)	Lewis	47.6%
Harrisville (13648)	Lewis	38.5%
Port Leyden	Lewis	86.2%

TAP will be implemented as an out-of-school program through community-based youth organizations, out-of-home foster care (adolescents in out-of-home foster care, according to the Guttmacher Institute, are nearly twice as likely to become pregnant by age 19 as their peers not involved in foster care), low-income housing developments, local health departments, social service agencies and our health centers in Watertown and Lowville. Within these settings, PPNCNY plans to implement two separate evidence-based teenage pregnancy prevention programs, Be Proud! Be Responsible! and FOCUS. Access to medically-accurate sex education and skill-building programs to prevent unintended pregnancy are important for this target audience, as is learning good parent/child communication techniques provided in the Be Proud!

² New York State County/Zip Code Perinatal Data Profile, 2010-2012 New York State Vital Statistics Data as of March, 2014 <http://www.health.ny.gov/statistics/chac/perinatal/index.htm>

Be Responsible! and FOCUS curricula. PPNCNY also plans to hire and train 5 peer educators throughout the North Country as teens often find peer educators more credible than adult educators.

Objective I: Increase knowledge about HIV, AIDS and other Sexually Transmitted Infections

Activity I: Implement evidence based curriculum, Be Proud! Be Responsible! (*see below) in ten settings throughout Jefferson and Lewis counties

Activity II: Implement evidence based curriculum, FOCUS (*see below) in PPNCNY health centers in Jefferson & Lewis Counties on a monthly basis at an after-hours teen clinic.

Activity III. Conduct intensive outreach to the high-risk targeted zip codes and provide short-term encounter education.

Objective II: Reduce sexual risk behaviors and decrease teen pregnancy rates

Activity I. Implement evidence based curriculum, Be Proud! Be Responsible! in ten settings throughout Jefferson and Lewis counties

Activity II: Implement evidence based curriculum, FOCUS in PPNCNY health centers in Jefferson & Lewis Counties on a monthly basis at an after-hours teen clinic.

Objective III. Increase access to reproductive health care and education.

Activity I. Intensive outreach throughout the 11 targeted high-risk zip codes in Jefferson and Lewis counties.

Activity II. On-site appointment scheduling at various locations throughout the 11 high-risk zip codes.

Activity III. PPNCNY health educator will provide assistance with the Family Planning Benefit Program application process throughout the 11 high-risk zip codes.

***Be Proud! Be Responsible!** consists of six sessions for youth ages 12-18 which will be easily implemented in foster care settings and low-income housing settings within the specified sessions. The goal of utilizing Be Proud! Be Responsible! with at-risk youth is to increase their knowledge of STI's and HIV, build confidence and condom negotiation skills and reduce risky sexual behaviors. Since youth are often faced with uncertainty and confusion, this curriculum gives youth the skills to build self-esteem and confidence to make safer and healthier decisions.

***FOCUS** will be easily implemented in PPNCNY health centers as the organization already has sexually active youth accessing services. FOCUS education will expand and allow youth additional education around knowledge of birth control options, risks of STIs, and building negotiation and refusal skills. The ability to offer gift cards as an incentive will be an additional asset for this population. The Northern New York region is rural and transportation can be a barrier to accessing services and attending groups. This incentive will help remove the transportation barrier to improve program success.

Upon award of funding for the TAP program PPNCNY plans to begin the one year grant period with 1 month of planning, readiness, and piloting to ensure that the proposed programming is implemented with fidelity. In month's 2 through 12, PPNCNY would implement Be Proud! Be

Responsible! in ten settings throughout Jefferson and Lewis counties, reaching 350 unduplicated at-risk youth. Also in month's 2 through 12, PPNCNY would implement FOCUS in our Watertown and Lowville health centers at an after-hours teen clinic each month, reaching 120 unduplicated at-risk youth. In month's 1-4 PPNCNY will hire and train 5 peer educators to conduct education sessions in months 4-12. Outreach and on-site appointment scheduling will also take place at the 11 high-risk zip codes throughout the entire grant period.

In the North Country, there are currently no existing teen advocacy programs that target high-risk zip codes and increase access to reproductive health care needs. The successful implementation of the proposed TAP program is dependent on successful collaboration with numerous partners in each of the targeted counties and specifically, those that serve adolescents living in the 11 zip codes with higher than average teen birth rates. PPNCNY plans to have the following key partners: Youth Advocate Program, ACR Health, Department of Social Services, Children's Home of Jefferson County, House of the Good Shepherd, North Country Family Health Center, Watertown Housing Authority, Neighbors of Watertown, Double Play After School Program, Local libraries, housing developments along with other health and human service agencies.

C.) The goal of the TAP program is to reduce rates of teenage pregnancy in 11 high-risk targeted Northern New York zip codes by an average of 10 percent by the year 2020. PPNCNY has a history of a strong focus on measuring outputs and outcomes for its programming and services. As a long-time grant funded organization through the State of New York and numerous private foundations, PPNCNY has an internal process managed by the Director of RQM for collecting and analyzing pre- and post- survey data as well as utilization rates and trends for education programming and family planning services.

D.) The grant funds will be used to cover a portion of the current health educators' time, oversight of health educator, mileage, fringe, program supplies offer incentives to the youth and peer educator stipends.

III. Project Future

A.) The TAP program is in line with the upcoming changes in Title X funding which will focus on arranging and offering reproductive health care services. This makes TAP a long-term sustainable program because of the shift in focus of Title X funding. PPNCNY will also fundraise and seek grants to help support the TAP program.

IV. Governance, Executive Leadership and Key Personnel/Staff Qualifications

A.) Policymaking of PPNCNY, including setting out values and vision, is vested in the Board. The Board has the full power, authority, and responsibility to set goals and monitor performance of PPNCNY, in accordance with the Standards of Affiliation and the principles outlined in the Corporation's Diversity Plan. The Board is ultimately responsible for the financial well-being of the Corporation

B.) PPNCNY's Director of Community Relations will oversee the Health Educator responsible for implementing the TAP program. The Director of Community Relations has been with PPNCNY for 11 years and has overseen numerous initiatives.

2016 S.L. Gimbel Foundation APPLICATION

V. Project Budget and Narrative

A) Budget Table: Provide a detailed line-item budget for your entire project by completing the table below.

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)

Line Item Request	Line Item Explanation	Support From Your Agency	Support From Other Funders	Requested Amount From TCF	Line Item Total of Project
Lauren Meade	\$16.60/hr x 20 hrs/wk x 52 weeks			\$17,264.00	
Katie Ramus	\$20.50/hr x 4 hrs/wk x 52 weeks			\$4,264.00	
Fringe	\$21,528.00 x 16%			\$3,444.00	
Travel	20,000 miles x \$.52			\$10,400.00	
Program Supplies				\$4,628.00	
5 peer Educators	5 x \$500.00			\$2,500.00	
Program Incentives				\$7,500.00	
TOTALS:				\$50,000.00	

B) Narrative:

1. Personnel: Meade - Project Coordinator coordinates all activities of your program such as setting meeting schedules, contacting students, preparing materials for meetings, scheduling trainers, etc. 20 hrs/week @ \$16.60/hr, =\$17,264.00
2. Personnel: Ramus –Provide oversight of program and Project Coordinator 4 hrs/week @ \$20.50/hr. =\$4264.00
3. Fringe: \$21,528.00 x 16% fringe rate= \$3,444.00
4. Travel: 20,000 miles @ .52/mile= \$10,400
5. Program Supplies: 2 evidence-based curriculum (\$1013.70) Workbooks (470 participants x \$7.69=\$3614.30) Total =\$4628
6. Peer Educators: 5 peer educators x \$500 stipend=\$2,500

7. Program Incentives: 10 gift cards x 300 participants (\$3000) Food for FOCUS groups (\$50/group x 10 groups=\$500) Food for Be Proud! Be Responsible! (\$50/group x 10 groups=\$500) Prizes for 20 total groups as incentives (\$175/group=\$3500) Total =7500

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

Secured/Awarded

Name of Funder: Foundation, Corporation, Government	Amount
NYS Department of Health Family Planning Grant	\$1,835,024.00
NYS Office of Victims Services Grant	\$240,256.24
Dyson Grant	\$90,000.00
NYS Department of Health Maternal Infant Health	\$132,000.00

Pending

Name of Funder: Foundation, Corporation, Government	Amount	Decision Date

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.

Funding Source	Amount	% of Total Revenue	Funding Source	Amount	% of Total Revenue
Contributions	\$200,242.64	4%	Program Fees	\$2,498,070.14	48%
Fundraising/Special Events	\$		Interest Income	\$1,218.12	
Corp/Foundation Grants	\$161,234.50	3%	Other:	\$30,283.34	
Government Grants	\$2,365,609.27	45%	Other:	\$	

Notes:

2016 S.L. Gimbel Foundation APPLICATION

VII. Financial Analysis

Agency Name: Planned Parenthood of the North Country New York, Inc.
 Most Current Fiscal Year (Dates): From 1/1/15 To: 12/31/15

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
\$5,701,031.00	\$4,675,890.00	\$839,342.00	\$185,799.00

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
	Columns B / A x 100	Columns C / A x 100	Columns D / A x 100
Must equal 100%	82%	15%	3%

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
15%	15%	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.

Cash	+ Accounts Receivables	/Current Liabilities	= Quick Ratio
\$1,049,011.42	\$999,659.85	507,950.63	4.04

Excess or Deficit for the Year:

Excess or (Deficit) Most recent fiscal year end	Excess or (Deficit) Prior fiscal year end
\$119,121.27	\$23,287.00

Notes:

VIII. Application submission check list:

	<u>Submit FOUR (4) Copies: 1 ORIGINAL (WITH ORIGINAL SIGNATURES) and 3 copies, collated and stapled together of the following:</u>		<u>Submit ONE (1) Copy:</u>
	Completed Grant Application Form (cover sheet, narrative (4 pages maximum), budget page and budget narrative (see sample) and sources of funding, financial analysis page		A copy of your current 501(c)(3) letter from the IRS
	A list of your Board members and their affiliations		A copy of your most recent year-end financial statements (audited if available; double-sided)
	Your current operating budget and the previous year's actual expenses (see sample Budget Comparison)		A copy of your most recent 990 (double-sided)
	Part IX only of the 990 form, Statement of Functional Expenses (one page). If you completed a 990-EZ, fill out the attached Part IX, Functional Expenses of the 990 form using figures from your 990-EZ		
	For past grantees, a copy of your most recent final report.		

PPNCNY PP of the North Country NY

ACTUAL ACTUAL

#REF! All

2016 FiscYr

1 Pd

BUDGET BUDGET

		ACTUAL		BUD
		January	YTD	January
3010	Patient Fees FP	3,644.63	3,644.63	4,166.67
3011	Patient Fees Abortion	2,957.41	2,957.41	20,833.33
3012	Pt Fees Colpo/Leep	(250.00)	(250.00)	3,333.33
3015	Health Department	1,415.00	1,415.00	3,333.33
3025	Commercial Insurance	84,017.31	84,017.31	108,333.33
3030	Medicaid	31,183.77	31,183.77	87,500.00
3035	FPBP	73,187.07	73,187.07	-
3040	Blue Cross/Blue Shield	49,368.97	49,368.97	-
3045	Medicare	3,140.00	3,140.00	2,992.60
3090	Contractual Adjustments	(36,752.92)	(36,752.92)	-
3095	Medicaid Write Off	-	-	-
31??	External Funding	210,756.07	210,756.07	191,743.25
33??	Community Support	3,869.50	3,869.50	16,666.67
34??	Financial Revenues	32.84	32.84	416.67
35??	Other Revenue	1,289.26	1,289.26	11,750.00
	Total Revenues	427,858.91	427,858.91	451,069.18

EXPENSES

5010	Payroll	194,892.50	194,892.50	200,720.62
51??	Fringe Benefits	41,108.52	41,108.52	28,692.31
	Total Personal Services	236,001.02	236,001.02	229,412.93

5210	Rent	6,708.00	6,708.00	6,250.00
5215	Depreciation Buildings	5,740.17	5,740.17	5,833.33
5220	Amort. Leasehold Improv.	2,969.27	2,969.27	3,000.00
5225	Interest Paid Mortgage	-	-	-
5230	Bldg Repair & Maint.	1,013.06	1,013.06	2,916.67
5235	Property Taxes	-	-	-
5240	Property Insurance	-	-	1,375.00
5245	Van/Trailer Expenses	-	-	30.64
5250	Amort. Closing Costs	-	-	-
5255	Security/Alarm Monitoring	644.84	644.84	458.33
5310	Electricity	2,756.09	2,756.09	2,500.00
5315	Fuel Oil	1,264.60	1,264.60	1,416.67
5320	Water/Sewer	694.75	694.75	500.00
5325	Trash Removal	1,170.45	1,170.45	1,250.00
5330	Snow Removal/Mowing	150.00	150.00	666.67
5335	Cleaning Services	3,420.95	3,420.95	3,750.00
5340	Furniture & Equipment	506.70	506.70	-

5345	Equip. Repair & Maint.	769.25	769.25	1,666.67
5350	Depreciation F & E	5,044.43	5,044.43	5,250.00
5355	Amort. Computer Software	4,107.74	4,107.74	4,583.33
5410	Medical Supplies	7,840.85	7,840.85	11,250.00
5420	Pharmacy Supplies	2,803.30	2,803.30	3,833.33
5430	Contraceptive Supplies	21,114.78	21,114.78	21,250.00
5440	Laboratory Services	527.30	527.30	1,666.67
5450	Clinic Laundry/Scrubs	57.00	57.00	166.67
5460	Medical Waste Disposal	750.00	750.00	833.33
5510	Education Program Supplies	-	-	1,666.67
5520	Janitorial Supplies	473.35	473.35	833.33
5530	Dues and Subscriptions	27,248.22	27,248.22	19,583.33
5540	Community Relations	-	-	142.88
5550	Volunteer Expense	-	-	-
5560	Special Event (Fundraising)	-	-	440.07
5570	Miscellaneous	-	-	416.67
5580	Discounts Taken	-	-	-
5610	Office Supplies	3,818.61	3,818.61	4,583.33
5710	Postage	1,874.81	1,874.81	2,083.33
5720	Telephone	3,895.38	3,895.38	4,166.67
5730	Advertising	13,646.08	13,646.08	3,333.33
5740	Beeper Service	159.73	159.73	291.67
5750	Printing	156.00	156.00	833.33
5760	Website	-	-	416.67
5770	Internet	1,589.58	1,589.58	1,666.67
5810	Staff Travel	6,150.67	6,150.67	12,916.67
5820	Food/Lodging	2,631.79	2,631.79	3,208.32
5910	Outside Medical Services	9,603.00	9,603.00	12,500.00
5915	Temporary Services	-	-	-
5920	Professional Consultant	3,433.46	3,433.46	4,166.67
5925	Auditor	9,000.00	9,000.00	2,333.33
5930	Architect	-	-	250.00
5935	Payroll Processing	1,876.04	1,876.04	1,833.33
5940	Legal Services	157.50	157.50	833.33
5945	3rd Party Billing Services	8,333.00	8,333.00	8,833.33
5950	NextGen/Voxent	11,879.11	11,879.11	7,500.00
5955	Insurance Liability	-	-	2,500.00
5960	Background Checks New Staff	130.00	130.00	250.00
6010	Staff Training	651.10	651.10	3,249.99
6020	Board Expenses	-	-	-
6110	Bank Charges	1,062.54	1,062.54	1,333.33
6120	Interest/Late Fees Paid	270.86	270.86	41.67
6130	Bad Debt Patient	5,400.00	5,400.00	5,416.67
6131	Bad Debt Insurance	760.48	760.48	2,916.67
6140	Stock Commissions/Fees	-	-	33.47
6210	FEBE Expenses	-	-	55.76
6220	Benefit Admin. Fee	704.00	704.00	291.67

6230	Purchase Price Variance	-	-	-
	Total Other than Personal Svcs	184,958.84	184,958.84	191,369.47
	Total PS and OTPS	420,959.86	420,959.86	420,782.40
	Net Income/(Loss)	6,899.05	6,899.05	30,286.78

PLANNED PARENTHOOD OF THE NORTH
COUNTRY NEW YORK, INC.

Form 990 (2014)

16-0919175 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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>				
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	198,345.		198,345.	
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	2,499,866.	2,146,418.	244,199.	109,249.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	37,432.	32,781.	3,671.	980.
9 Other employee benefits	94,393.	76,453.	12,466.	5,474.
10 Payroll taxes	277,312.	221,245.	45,708.	10,359.
11 Fees for services (non-employees):				
a Management				
b Legal	4,546.		4,546.	
c Accounting	29,963.		29,963.	
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.)	81,986.	29,446.	47,881.	4,659.
12 Advertising and promotion	38,974.	38,487.		487.
13 Office expenses	227,577.	159,430.	37,735.	30,412.
14 Information technology				
15 Royalties				
16 Occupancy	230,897.	206,464.	20,842.	3,591.
17 Travel	176,022.	133,652.	39,190.	3,180.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	201,843.	179,958.	17,844.	4,041.
23 Insurance	59,884.	56,117.	3,330.	437.
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 MEDICAL SUPPLIES	484,769.	484,769.	0.	0.
b BAD DEBT EXPENSE	293,034.	293,034.	0.	0.
c DUES & SUBSCRIPTIONS	237,505.	120,404.	113,462.	3,639.
d PATIENT CARE	171,471.	171,471.		
e All other expenses	355,212.	325,761.	20,160.	9,291.
25 Total functional expenses. Add lines 1 through 24e	5,701,031.	4,675,890.	839,342.	185,799.
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 98-2 (ASC 958-720)

GET	Variance to BUDGET				Last Year ACTUAL		
	YTD	January		YTD	January	YTD	
	4,166.67	(522.04)	-13%	(522.04)	-13%	618.64	618.64
	20,833.33	(17,875.92)	-86%	(17,875.92)	-86%	3,511.22	3,511.22
	3,333.33	(3,583.33)	-108%	(3,583.33)	-108%	-	-
	3,333.33	(1,918.33)	-58%	(1,918.33)	-58%	3,020.00	3,020.00
	108,333.33	(24,316.02)	-22%	(24,316.02)	-22%	91,317.11	91,317.11
	87,500.00	(56,316.23)	-64%	(56,316.23)	-64%	68,131.07	68,131.07
	-	73,187.07	0%	73,187.07	0%	22,687.30	22,687.30
	-	49,368.97	0%	49,368.97	0%	60,769.24	60,769.24
	2,992.60	147.40	5%	147.40	5%	1,909.41	1,909.41
	-	(36,752.92)	0%	(36,752.92)	0%	(39,035.64)	(39,035.64)
	-	-	0%	-	0%	-	-
	191,743.25	19,012.82	10%	19,012.82	10%	173,442.30	173,442.30
	16,666.67	(12,797.17)	-77%	(12,797.17)	-77%	8,729.51	8,729.51
	416.67	(383.83)	-92%	(383.83)	-92%	5.86	5.86
	11,750.00	(10,460.74)	-89%	(10,460.74)	-89%	1,028.80	1,028.80
	451,069.18	(23,210.27)	-5%	(23,210.27)	-5%	396,134.82	396,134.82

	200,720.62	(5,828.12)	-3%	(5,828.12)	-3%	184,050.23	184,050.23
	28,692.31	12,416.21	43%	12,416.21	43%	30,936.76	30,936.76
	229,412.93	6,588.09	3%	6,588.09	3%	214,986.99	214,986.99

	6,250.00	458.00	7%	458.00	7%	6,510.00	6,510.00
	5,833.33	(93.16)	-2%	(93.16)	-2%	5,472.14	5,472.14
	3,000.00	(30.73)	-1%	(30.73)	-1%	2,969.10	2,969.10
	-	-	0%	-	0%	-	-
	2,916.67	(1,903.61)	-65%	(1,903.61)	-65%	2,015.59	2,015.59
	-	-	0%	-	0%	-	-
	1,375.00	(1,375.00)	-100%	(1,375.00)	-100%	1,353.68	1,353.68
	30.64	(30.64)	-100%	(30.64)	-100%	27.00	27.00
	-	-	0%	-	0%	-	-
	458.33	186.51	41%	186.51	41%	336.29	336.29
	2,500.00	256.09	10%	256.09	10%	1,989.70	1,989.70
	1,416.67	(152.07)	-11%	(152.07)	-11%	1,524.57	1,524.57
	500.00	194.75	39%	194.75	39%	634.46	634.46
	1,250.00	(79.55)	-6%	(79.55)	-6%	1,076.83	1,076.83
	666.67	(516.67)	-78%	(516.67)	-78%	762.00	762.00
	3,750.00	(329.05)	-9%	(329.05)	-9%	3,270.62	3,270.62
	-	506.70	0%	506.70	0%	341.20	341.20

1,666.67	(897.42)	-54%	(897.42)	-54%	2,566.62	2,566.62
5,250.00	(205.57)	-4%	(205.57)	-4%	4,930.88	4,930.88
4,583.33	(475.59)	-10%	(475.59)	-10%	4,435.27	4,435.27
11,250.00	(3,409.15)	-30%	(3,409.15)	-30%	8,118.46	8,118.46
3,833.33	(1,030.03)	-27%	(1,030.03)	-27%	3,497.56	3,497.56
21,250.00	(135.22)	-1%	(135.22)	-1%	26,704.58	26,704.58
1,666.67	(1,139.37)	-68%	(1,139.37)	-68%	-	-
166.67	(109.67)	-66%	(109.67)	-66%	57.00	57.00
833.33	(83.33)	-10%	(83.33)	-10%	1,079.34	1,079.34
1,666.67	(1,666.67)	-100%	(1,666.67)	-100%	497.32	497.32
833.33	(359.98)	-43%	(359.98)	-43%	370.29	370.29
19,583.33	7,664.89	39%	7,664.89	39%	26,264.67	26,264.67
142.88	(142.88)	-100%	(142.88)	-100%	-	-
-	-	0%	-	0%	-	-
440.07	(440.07)	-100%	(440.07)	-100%	-	-
416.67	(416.67)	-100%	(416.67)	-100%	90.59	90.59
-	-	0%	-	0%	-	-
4,583.33	(764.72)	-17%	(764.72)	-17%	4,601.96	4,601.96
2,083.33	(208.52)	-10%	(208.52)	-10%	1,364.05	1,364.05
4,166.67	(271.29)	-7%	(271.29)	-7%	4,038.30	4,038.30
3,333.33	10,312.75	309%	10,312.75	309%	1,941.00	1,941.00
291.67	(131.94)	-45%	(131.94)	-45%	277.33	277.33
833.33	(677.33)	-81%	(677.33)	-81%	759.99	759.99
416.67	(416.67)	-100%	(416.67)	-100%	-	-
1,666.67	(77.09)	-5%	(77.09)	-5%	1,255.64	1,255.64
12,916.67	(6,766.00)	-52%	(6,766.00)	-52%	7,541.56	7,541.56
3,208.32	(576.53)	-18%	(576.53)	-18%	1,877.08	1,877.08
12,500.00	(2,897.00)	-23%	(2,897.00)	-23%	9,808.00	9,808.00
-	-	0%	-	0%	-	-
4,166.67	(733.21)	-18%	(733.21)	-18%	5,200.27	5,200.27
2,333.33	6,666.67	286%	6,666.67	286%	5,000.00	5,000.00
250.00	(250.00)	-100%	(250.00)	-100%	-	-
1,833.33	42.71	2%	42.71	2%	1,559.68	1,559.68
833.33	(675.83)	-81%	(675.83)	-81%	292.50	292.50
8,833.33	(500.33)	-6%	(500.33)	-6%	8,333.00	8,333.00
7,500.00	4,379.11	58%	4,379.11	58%	6,745.00	6,745.00
2,500.00	(2,500.00)	-100%	(2,500.00)	-100%	2,400.87	2,400.87
250.00	(120.00)	-48%	(120.00)	-48%	106.00	106.00
3,249.99	(2,598.89)	-80%	(2,598.89)	-80%	1,716.43	1,716.43
-	-	0%	-	0%	-	-
1,333.33	(270.79)	-20%	(270.79)	-20%	938.78	938.78
41.67	229.19	550%	229.19	550%	188.88	188.88
5,416.67	(16.67)	0%	(16.67)	0%	6,666.00	6,666.00
2,916.67	(2,156.19)	-74%	(2,156.19)	-74%	-	-
33.47	(33.47)	-100%	(33.47)	-100%	-	-
55.76	(55.76)	-100%	(55.76)	-100%	-	-
291.67	412.33	141%	412.33	141%	710.00	710.00

-	-	0%	-	0%	-	-
191,369.47	(6,410.63)	-3%	(6,410.63)	-3%	180,218.08	180,218.08
420,782.40	177.46	0%	177.46	0%	395,205.07	395,205.07
30,286.78	(23,387.73)	-77%	(23,387.73)	-77%	929.75	929.75

Variance to Last Year ACTUAL			
January		YTD	
3,025.99	489%	3,025.99	489%
(553.81)	-16%	(553.81)	-16%
(250.00)	0%	(250.00)	0%
(1,605.00)	-53%	(1,605.00)	-53%
(7,299.80)	-8%	(7,299.80)	-8%
(36,947.30)	-54%	(36,947.30)	-54%
50,499.77	223%	50,499.77	223%
(11,400.27)	-19%	(11,400.27)	-19%
1,230.59	64%	1,230.59	64%
2,282.72	-6%	2,282.72	-6%
-	0%	-	0%
37,313.77	22%	37,313.77	22%
(4,860.01)	-56%	(4,860.01)	-56%
26.98	460%	26.98	460%
260.46	25%	260.46	25%
31,724.09	8%	31,724.09	8%

10,842.27	6%	10,842.27	6%
10,171.76	33%	10,171.76	33%
21,014.03	10%	21,014.03	10%

198.00	3%	198.00	3%
268.03	5%	268.03	5%
0.17	0%	0.17	0%
-	0%	-	0%
(1,002.53)	-50%	(1,002.53)	-50%
-	0%	-	0%
(1,353.68)	-100%	(1,353.68)	-100%
(27.00)	-100%	(27.00)	-100%
-	0%	-	0%
308.55	92%	308.55	92%
766.39	39%	766.39	39%
(259.97)	-17%	(259.97)	-17%
60.29	10%	60.29	10%
93.62	9%	93.62	9%
(612.00)	-80%	(612.00)	-80%
150.33	5%	150.33	5%
165.50	49%	165.50	49%

(1,797.37)	-70%	(1,797.37)	-70%
113.55	2%	113.55	2%
(327.53)	-7%	(327.53)	-7%
(277.61)	-3%	(277.61)	-3%
(694.26)	-20%	(694.26)	-20%
(5,589.80)	-21%	(5,589.80)	-21%
527.30	0%	527.30	0%
-	0%	-	0%
(329.34)	-31%	(329.34)	-31%
(497.32)	-100%	(497.32)	-100%
103.06	28%	103.06	28%
983.55	4%	983.55	4%
-	0%	-	0%
-	0%	-	0%
-	0%	-	0%
(90.59)	-100%	(90.59)	-100%
-	0%	-	0%
(783.35)	-17%	(783.35)	-17%
510.76	37%	510.76	37%
(142.92)	-4%	(142.92)	-4%
11,705.08	603%	11,705.08	603%
(117.60)	-42%	(117.60)	-42%
(603.99)	-79%	(603.99)	-79%
-	0%	-	0%
333.94	27%	333.94	27%
(1,390.89)	-18%	(1,390.89)	-18%
754.71	40%	754.71	40%
(205.00)	-2%	(205.00)	-2%
-	0%	-	0%
(1,766.81)	-34%	(1,766.81)	-34%
4,000.00	80%	4,000.00	80%
-	0%	-	0%
316.36	20%	316.36	20%
(135.00)	-46%	(135.00)	-46%
-	0%	-	0%
5,134.11	76%	5,134.11	76%
(2,400.87)	-100%	(2,400.87)	-100%
24.00	23%	24.00	23%
(1,065.33)	-62%	(1,065.33)	-62%
-	0%	-	0%
123.76	13%	123.76	13%
81.98	43%	81.98	43%
(1,266.00)	-19%	(1,266.00)	-19%
760.48	0%	760.48	0%
-	0%	-	0%
-	0%	-	0%
(6.00)	-1%	(6.00)	-1%

-	0%	-	0%
4,740.76	3%	4,740.76	3%
25,754.79	7%	25,754.79	7%
5,969.30	642%	5,969.30	642%

**PLANNED PARENTHOOD OF THE NORTH COUNTRY NEW YORK, INC.
BOARD LIST
APRIL 2015**

NAME	Terms	Board Position, Committees	Home Address/County	All/Home Phone/Work Phone Fax & E-mail Address
Augsbury, Alexandra	Ends: 4/30/16 Eligible for 1 more 3 yr term	Fund Development Committee	PO Box 408 Ogdensburg, NY 13669 St. Lawrence County	H. 315-393-2636 C. 315-825-8009 Alexandra2488@hotmail.com
Fitzgerald, Rita	Ends: 10/30/2017 Eligible for 1 more 3 yr term	Fund Development Committee	834 Walker Road Essex, NY 12936 Essex County	H. 518-963-7216 Rfg111@wildblue.net
Fortsch, Heidi	Ends: 12/30/2017 Eligible for 1 more 3 yr term	Fund Development Committee	99 Eagle Acres Rd. Apt A Chazy, NY 12921 Essex County	518-578-4488 hfortsch@twcny.rr.com
Gable, Carol	Ends: 6/30/2016 Eligible for 1 more 3 yr term	Treasurer Finance Committee, Chair Executive Committee	7 Crescent Street Canton, NY 13617 St. Lawrence County	H. 315-212-6563 W. 315-229-5563, Fax 315-229- 7417 cgable@stlawu.edu
Griffin, Linda	Ends: 4/30/17	Fund Development Committee, Chair	408 Proctor Avenue Ogdensburg, NY 13669 St. Lawrence County	H.315-393-5202 lingriff@twcny.rr.com

KEY: Executive Committee, Board Development Committee, Finance Committee, Fund Development Committee, FPA Board Member, By-Laws & Policies Committee, Diversity Committee, Strategic Planning Committee, Family Planning Advocates Representative, Planned Parenthood Advocates of NY Board Member, Leave of Absence

February 2010; March 2010; April 2010; May 2010; June 2010; July 2010; September 2010; October 2010; January 2011; April 2011; May 2011; July 2011, October 2011, March 2012, July 2012, October 2012, December 2012, October 2014, April 2015

**PLANNED PARENTHOOD OF THE NORTH COUNTRY NEW YORK, INC.
BOARD LIST
APRIL 2015**

NAME	Terms	Board Position, Committees	Home Address/County	All/Home Phone/Work Phone Fax & E-mail Address
Hart, Melissa	Ends: 12/31/2017 Eligible for 1 more 3 yr term	Fund Development Committee Executive Committee	58 Reservoir Rd. Peru, NY 12972 Clinton County	518-645-6985 mhart@adirondack.org
Johnson, Suzy	Ends: 3/30/2018 Eligible for 1 more 3 yr term	Finance Committee	40 Colligan PT Rd Plattsburgh, NY 12901 Clinton County	518-561-0917 suzyjhn@charter.net
Jubin, Jennifer	Ends: 5/30/17 Eligible for 1 more 3 yr term	Fund Development Committee	PO Box 888 Lake Placid, NY 12946 Essex County	518-524-4902 Jjubin77@gmail.com
Maid, Cheryl	Ends: 12/31/18	Board Chair Executive Committee, EXO Finance Committee, EXO Governance Committee, EXO Fund Development Committee, EXO	120 Boulderwood Way P.O. Box 1899 Lake Placid, NY 12946 (UPS won't deliver to street address except in summer months) Essex County	H.518-523-8254 C.518-578-4266 (summer months) cmmaid@gmail.com

KEY: Executive Committee, Board Development Committee, Finance Committee, Fund Development Committee, FPA Board Member, By-Laws & Policies Committee, Diversity Committee, Strategic Planning Committee, Family Planning Advocates Representative, Planned Parenthood Advocates of NY Board Member, Leave of Absence

February 2010; March 2010; April 2010; May 2010; June 2010; July 2010; September 2010; October 2010; January 2011; April 2011; May 2011; July 2011, October 2011, March 2012, July 2012, October 2012, December 2012, October 2014, April 2015

**PLANNED PARENTHOOD OF THE NORTH COUNTRY NEW YORK, INC.
BOARD LIST
APRIL 2015**

Packard, Deborah	Ends 3/30/2018 Eligible for 1 more 3 yr term	Governance Committee Clergy for Choice	7983 US HWY 11 Potsdam, NY 13676 St. Lawrence County	Revdeb02@gmail.com
Rottier, Barbara	Ends: 4/30/16 Eligible for 1 more 3 yr term	By-Laws, Chair Governance Committee Executive Committee	53 Norman Ridge Road Vermontville, NY 12989 Franklin County	H.518-891-7878 barottier@gmail.com
Schumacher, Michelle	Ends: 10/31/18		751 County Route 27 Owls Head, NY 12969	518-483-6891 greatermaloneymca@yahoo.com
Semegram, Harris	Ends: 6/2016 Eligible for 1 more 3 yr term	Finance Committee	40 Amanda Drive Lake Placid NY 12946 Essex County	518-523-5611 hsemegram@gmail.com
Simmonds, Robert, Ph.D	Ends: 6/30/17	Finance Committee Executive Committee	26618 Bonney Road Watertown, NY 13601 Jefferson County	H.315-681-6972 Fax Hm. 315-681-6972 W.315-772-2364 Docbob2000@yahoo.com
Weller, Cheryl	Ends: 6/30/17	Vice Chair Governance Committee, Chair By-Laws Executive Committee	26618 Bonney Road Watertown, NY 13601 Jefferson County	H.315-681-6972 Fax Hm. 315-681-6972 W.315-772-9688 Cweller6@twcny.rr.com

KEY: Executive Committee, Board Development Committee, Finance Committee, Fund Development Committee, FPA Board Member, By-Laws & Policies Committee, Diversity Committee, Strategic Planning Committee, Family Planning Advocates Representative, Planned Parenthood Advocates of NY Board Member, Leave of Absence

February 2010; March 2010; April 2010; May 2010; June 2010; July 2010; September 2010; October 2010; January 2011; April 2011; May 2011; July 2011, October 2011, March 2012, July 2012, October 2012, December 2012, October 2014, April 2015

**PLANNED PARENTHOOD OF THE NORTH COUNTRY NEW YORK, INC.
BOARD LIST
APRIL 2015**

Wickham Will, Laurena (Rev.)	Ends: 12/31/18	FPA Rep Clergy for Choice	25 Woodruff Road Parishville, NY 13625 St. Lawrence County	H.315-268-1562 C.315-335-4480 W.315-393-2510 Clergyopc@slc.com
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KEY: Executive Committee, Board Development Committee, Finance Committee, Fund Development Committee, FPA Board Member, By-Laws & Policies Committee, Diversity Committee, Strategic Planning Committee, Family Planning Advocates Representative, Planned Parenthood Advocates of NY Board Member, Leave of Absence

February 2010; March 2010; April 2010; May 2010; June 2010; July 2010; September 2010; October 2010; January 2011; April 2011; May 2011; July 2011, October 2011, March 2012, July 2012, October 2012, December 2012, October 2014, April 2015

PLANNED PARENTHOOD OF THE NORTH
COUNTRY NEW YORK, INC.

Form 990 (2014)

16-0919175 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	198,345.		198,345.	
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	2,499,866.	2,146,418.	244,199.	109,249.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	37,432.	32,781.	3,671.	980.
9 Other employee benefits	94,393.	76,453.	12,466.	5,474.
10 Payroll taxes	277,312.	221,245.	45,708.	10,359.
11 Fees for services (non-employees):				
a Management				
b Legal	4,546.		4,546.	
c Accounting	29,963.		29,963.	
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.)	81,986.	29,446.	47,881.	4,659.
12 Advertising and promotion	38,974.	38,487.		487.
13 Office expenses	227,577.	159,430.	37,735.	30,412.
14 Information technology				
15 Royalties				
16 Occupancy	230,897.	206,464.	20,842.	3,591.
17 Travel	176,022.	133,652.	39,190.	3,180.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	201,843.	179,958.	17,844.	4,041.
23 Insurance	59,884.	56,117.	3,330.	437.
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 MEDICAL SUPPLIES	484,769.	484,769.	0.	0.
b BAD DEBT EXPENSE	293,034.	293,034.	0.	0.
c DUES & SUBSCRIPTIONS	237,505.	120,404.	113,462.	3,639.
d PATIENT CARE	171,471.	171,471.		
e All other expenses	355,212.	325,761.	20,160.	9,291.
25 Total functional expenses. Add lines 1 through 24e	5,701,031.	4,675,890.	839,342.	185,799.
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 98-2 (ASC 958-720)



Strengthening Inland Southern California through Philanthropy



BOARD OF DIRECTORS

May 27, 2016

Philip Savage IV
Chair of the Board

Sean Varner
Vice Chair of the Board

Pat Spafford, CPA
Chief Financial Officer

Sergio Bohon
Secretary of the Board

Glenda Bayless

Dr. Paulette Brown-Hinds

Rabbi Hillel Cohn

James Cuevas
Immediate Past Board Chair

Paul Granillo

Stanley Grube

Kirk Harns

Dr. Fred Jandt

Andrew Jaramillo

Dr. Albert Karnig

D. Matthew Pim

Teresa Rhyne

Kathleen Sawa

Dr. Henry Shannon

Tamara Sipos

Beverly Stephenson

Randall Tagami

Diane Valenzuela

Dr. Jonathan Lorenzo Yorba
President and CEO

Ms. Tess Barker

President & CEO

Planned Parenthood of the North Country New York

160 Stone Street

Watertown, NY 13601

Dear Ms. Barker:

Congratulations! A grant has been approved for **Planned Parenthood of the North Country New York** in the amount of \$50,000 from the S.L. Gimbel Foundation. **The performance period for this grant is May 16, 2016 to May 16, 2017.** 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 support the Teen Advocacy program (TAP) for at-risk teens in North Country to reduce risk of pregnancy or contracting HIV or other STI's.

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 Wednesday, June 15, 2016.** 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 June 15, 2017** and a copy will be available online.

We wish you great success and look forward to working with you during the grant performance period. If you have any questions, please call me at 951-241-7777, ext. 114, or email me at ccudiamat@thecommunityfoundation.net.

Sincerely,

Celia Cudiamat

Executive Vice President of Programs

22492 Planned Parenthood of the North Country New York 20160264 GIMB1



Confirmed in Compliance
with National Standards for
S. Community Foundations



Strengthening Inland Southern California through Philanthropy

3700 Sixth Street, Suite 200
Riverside, CA 92501
P: 951-241-7777 F: 951-684-1911
www.thecommunityfoundation.net

2016 S.L. Gimbel Foundation Fund Grant Agreement

Organization: Planned Parenthood of the North Country New York
Grant Amount: \$50,000 **Grant Number:** 20160264
Grant Period: May 16, 2016 through May 16, 2017
Purpose: To support the Teen Advocacy program (TAP) for at-risk teens in North Country to reduce risk of pregnancy or contracting HIV or other STI's.

1. Use of Grant Funds

Grant funds must be expended within the grant period, for the purpose and objectives described in your grant proposal. Grant funds may not be expended for any other purpose without prior written approval by The Community Foundation. If there are significant difficulties in making use of the funds as specified in your proposal, or if the grant funds cannot be spent within the grant period, notify us in writing promptly.

Formal requests for extensions or variances must be submitted to the Foundation's Board of Directors for approval a minimum of 60 days before the end of the grant period.

Requests for variances or extensions are reviewed on a case-by-case basis and approved by the Board of Directors. If a request is denied, unused funds must be immediately refunded to the Foundation.

2. Payment of Grant Funds

The grant funds will be paid in full by the Foundation upon receipt of the signed Grant Agreement. Challenge grant funds will be paid in full upon receipt of the signed Grant Agreement and upon receipt of documentation providing evidence that condition(s) of the challenge grant has/have been met.

3. Certification and Maintenance of Exempt Organization Status

This grant is specifically conditioned upon Grantee's status as an eligible grantee of The Community Foundation. The Foundation has obtained a copy of the Grantee's IRS determination letter. Grantee confirms that it has not had any change in its tax-exempt status, and shall notify the Foundation immediately of any such change.

4. Final Report and Records

The Grantee will submit the Grant Evaluation report per the deadline set forth in the award letter. This report includes a narrative on outcomes based on goals and objectives set forth in the grant proposal and an expenditure report documenting use of grant funds. If equipment was purchased, copies of receipts need to be included.

5. Grantee's Financial Responsibilities

Grantee will keep records of receipts and expenditures of grant funds and other supporting documentation related to the grant at least four (4) years after completion of the grant and will make such records of receipts, expenditures and supporting documentation available to the Foundation upon request.

6. Publicity

The Community Foundation recommends publicity for the grant and acknowledging The Community Foundation in internal correspondence, brochures as appropriate; newsletters, annual reports and email blasts or e-newsletters.

The credit line of "Made possible in part by a grant from the "S.L. Gimbel Foundation Advised Fund at The Community Foundation – Inland Southern California" is suggested. When your donors are listed in printed materials, include the S.L. Gimbel Foundation Advised Fund at The Community Foundation in the appropriate contribution size category. When publishing our name, please note the "The" at the beginning of our name is a legal part of our name. It should always be used and capitalized. Attaching our logo is also appreciated. Our logo can be downloaded from our website at www.thecommunityfoundation.net.

Email our Marketing & Communications Officer, Charee Gillins, at cgillins@thecommunityfoundation.net with any publicity questions as well as any copies of any printed or publicity materials that highlight the grant.

7. Indemnification

In the event that a claim of any kind is asserted against the Grantee or the Foundation related to or arising from the project funded by the Grant and a proceeding is brought against the Foundation by reason of such claim, the Grantee, upon written notice from the Foundation, shall, at the Grantee's expense, resist or defend such action or proceeding, at no cost to the Foundation, by counsel approved by the Foundation in writing.

Grantee hereby agrees, to the fullest extent permitted by law, to defend, indemnify, and hold harmless the Foundation, its offices, directors, employees, and agents, from and against any and all claims, liabilities, losses, and expenses (including reasonable attorneys' fees) directly, indirectly, wholly, or partially arising from or in connection with any act or omission by Grantee, its employees, or agents in applying for or accepting the Grant, in expending or applying the Grant funds or in carrying out any project or program supported by the Grant, except to the extent that such claims, liabilities, losses, and expenses arise from or in connection with any bad faith act or omission by the Foundation, its officers, directors, employees, or agent.

8. Termination

The Community Foundation may terminate this agreement, withhold payments, or both at any time, if, in the Community Foundation's judgment: a) The Community Foundation is not satisfied with the quality of the Grantee's progress toward achieving the project goals and objectives; b) the Grantee dissolves or fails to operate; c) the Grantee fails to comply with the terms and conditions of this agreement.

9. Limitation of Support

This Agreement contains the entire agreement between the parties with respect to the Grant and supersedes any previous oral or written understandings or agreements.

I have read and agree to the terms and conditions of the Grant Agreement.

Jen Barber

Signature

6/2/16

Date

Tess Barber

Printed Name

CEO

Title

Organization: 22492 Planned Parenthood of the North Country New York

Grant Number: 20160264

dcy
6/14/16



Strengthening Inland Southern California through Philanthropy



BOARD OF DIRECTORS

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President and CEO

June 21, 2016

S. L. Gimbel Foundation Fund

Ms. Tess Barker
President & CEO
Planned Parenthood of the North Country New York
160 Stone Street
Watertown, NY 13601

Dear Ms. Barker:

The Community Foundation is pleased to enclose a grant check for \$50,000 from the S. L. Gimbel Foundation, a component fund at The Community Foundation. By cashing the grant check, you are agreeing to the conditions stated under the *Terms of Grant* which you have signed and returned. **The completed Grant Evaluation form is due by June 15, 2017** and will be available online on The Community Foundations website under Grants/Forms. Please note that any grant variances or extensions must be requested in writing and in advance. Any remaining grant funds must be returned to The Community Foundation at the end of the grant period.

Please use the following grant recognition credit for your newsletter or annual report: **"The Teen Advocacy Program is supported by a grant from The S. L. Gimbel Foundation."**

Please feel free to contact me at 951-241-7777, ext. 114, if you have any questions.

Sincerely,

Celia Cudiamat
Executive Vice President of Programs

20160264

40969

GIMBPP



Confirmed in Compliance
with National Standards for
U.S. Community Foundations

The Community Foundation
 Strengthening Inland Southern California through Philanthropy
 3700 SIXTH STREET, SUITE 200
 RIVERSIDE, CA 92501
 951-241-7777 / FAX 951-684-1911

CITIZENS BUSINESS BANK
 A Financial Services Company
 1695 Main Street, Riverside, CA 92501
 90-3414/1222

1234567890 Check Fraud
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40303

PAY * Fifty Thousand and no/100 *

TO THE ORDER OF

DATE

AMOUNT

06/16/2016

\$****50,000.00

Planned Parenthood of the North Country New York
 160 Stone Street
 Watertown, NY 13601



Celia Andriani
 AUTHORIZED SIGNATURE

Security features. Details on back.

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The Community Foundation

40969

22492	Planned Parenthood of the North Country New York	06/16/2016	040969	
20160264	05/26/2016 Support Teen Advocacy Program (TAP)			50,000.00
GIMB	S.L. Gimbel Foundation Advised Fund		50,000.00	

CHECK TOTAL: \$****50,000.00

The Community Foundation

40969

22492	Planned Parenthood of the North Country New York	06/16/2016	040969	
20160264	05/26/2016 Support Teen Advocacy Program (TAP)			50,000.00
GIMB	S.L. Gimbel Foundation Advised Fund		50,000.00	

CHECK TOTAL: \$****50,000.00