Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545 0047

2001

Open to Public Inspection

A For the 2001 calendar year, or tax year beginning **JANUARY 1** , 2001, and ending **DECEMBER 31** , 20 01

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization
Public Health Institute

Number and street (or P O box if mail is not delivered to street address) | Room/suite
2001 Addison Street, Second Floor

City or town state or country and ZIP + 4
Berkeley, CA 94704-1103

D Employer identification number
94 1646278

E Telephone number
(510) 644-8200

F Accounting method: ☐ Cash ☑ Accrual ☐ Other (specify) ▶

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

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? ☐ Yes ☑ No
H(b) If "Yes" enter number of affiliates ▶
H(c) Are all affiliates included? ☐ Yes ☐ No
(If "No" attach a list See instructions)
H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☑ No

G Web site ▶ phi org

J Organization type (check only one) ▶ ☑ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

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

I Enter 4 digit GEN ▶

M Check ▶ ☐ if the organization is **not** required to attach Sch B (Form 990, 990-EZ or 990-PF)

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶

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

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	20,732,672		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c	14,868,261		
	d	**Total** (add lines 1a through 1c) (cash $ 35,600,933 noncash $)			1d	35,600,933
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	42,570,794
	3	Membership dues and assessments			3	
	4	Interest on savings and temporary cash investments			4	755,452
	5	Dividends and interest from securities			5	
	6a	Gross rents	6a			
	b	Less rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
	7	Other investment income (describe ▶)			7	
	8a	Gross amount from sales of assets other than inventory — (A) Securities: ; (B) Other:	8a			
	b	Less cost or other basis and sales expenses	8b			
	c	Gain or (loss) (attach schedule)	8c			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	
	9	Special events and activities (attach schedule)				
	a	Gross revenue (not including $ of contributions reported on line 1a)	9a			
	b	Less direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
	11	Other revenue (from Part VII, line 103)			11	3,462
	12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	78,930,641
Expenses	13	Program services (from line 44, column (B))			13	70,266,604
	14	Management and general (from line 44, column (C))			14	7,872,364
	15	Fundraising (from line 44, column (D))			15	20,730
	16	Payments to affiliates (attach schedule)			16	
	17	**Total expenses** (add lines 16 and 44, column (A))			17	78,159,698
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	770,943
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	1,544,438
	20	Other changes in net assets or fund balances (attach explanation)			20	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	2,315,381

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

	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash $ ______ noncash $ ______)	22	8,750,010	8,750,010		
23	Specific assistance to individuals (attach schedule)	23				
24	Benefits paid to or for members (attach schedule)	24				
25	Compensation of officers, directors, etc	25	1,039,167	154,415	881,876	2,875
26	Other salaries and wages	26	24,328,725	21,066,904	3,261,822	0
27	Pension plan contributions	27	2,093,841	1,830,779	262,970	92
28	Other employee benefits	28	2,562,478	2,240,539	321,827	112
29	Payroll taxes	29	1,821,846	1,592,957	228,809	80
30	Professional fundraising fees	30				
31	Accounting fees	31	10,086	0	10,086	0
32	Legal fees	32	4,167	4,157	10	0
33	Supplies	33	2,231,931	1,696,290	534,790	851
34	Telephone	34	771,298	630,102	140,844	352
35	Postage and shipping	35	278,720	224,695	51,519	2,506
36	Occupancy	36	2,319,406	1,707,052	611,104	1,250
37	Equipment rental and maintenance	37	159,594	143,363	16,231	0
38	Printing and publications	38	1,606,579	1,440,300	166,258	21
39	Travel	39	2,017,810	1,915,310	99,091	3,409
40	Conferences, conventions, and meetings	40	698,662	650,850	47,230	582
41	Interest	41	143,428	0	143,428	0
42	Depreciation, depletion, etc (attach schedule)	42	427,560	0	427,560	0
43	Other expenses not covered above (itemize) a	43a				
b	See Statement 1	43b	26,894,390	26,218,881	666,909	8,600
c		43c				
d		43d				
e		43e				
44	Total functional expenses (add lines 22 through 43) *Organizations completing columns (B)-(D), carry these totals to lines 13—15*	44	78,159,698	70,266,604	7,872,364	20,730

Joint Costs Check ▶ ☐ if you are following SOP 98-2

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

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

(iii) the amount allocated to Management and general $ ________ and **(iv)** the amount allocated to Fundraising $ ________

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

What is the organization's primary exempt purpose? ▶ See Statement 1A

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

		Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)
a	See Statement 1A, California Cancer Registry & Associated Regional Registries (Grants and allocations $)	17,508,508
b	See Statement 1A, California Nutrition Promotion Network for Lower Income Consumers (Grants and allocations $)	9,286,846
c	See Statement 1A, Partnership for the Public's Health (Grants and allocations $)	9,089,806
d	See Statement 1A, Population Leadership Program (Grants and allocations $)	6,404,448
e	Other program services (attach schedule) (Grants and allocations $ See Statement II)	27,976,996
f	**Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶	70,266,604

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

Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only*			(A) Beginning of year		(B) End of year
Assets 45	Cash—non-interest-bearing		1,387,453	45	12,905,980
46	Savings and temporary cash investments		12,250,632	46	6,491,902
47a	Accounts receivable	47a			
b	Less allowance for doubtful accounts	47b		47c	
48a	Pledges receivable	48a			
b	Less allowance for doubtful accounts	48b		48c	
49	Grants receivable		27,621,567	49	23,996,409
50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
51a	Other notes and loans receivable (attach schedule)	51a			
b	Less allowance for doubtful accounts	51b		51c	
52	Inventories for sale or use			52	
53	Prepaid expenses and deferred charges		617,462	53	661,840
54	Investments—securities (attach schedule) ▶ ☐ Cost ☐ FMV			54	
55a	Investments—land, buildings, and equipment basis	55a			
b	Less accumulated depreciation (attach schedule)	55b		55c	
56	Investments—other (attach schedule)			56	
57a	Land, buildings, and equipment basis	57a 3,152,475			
b	Less accumulated depreciation (attach schedule) See Statement 3	57b 1,067,064	2,512,973	57c	2,085,411
58	Other assets (describe ▶)			58	
59	**Total assets** (add lines 45 through 58) (must equal line 74)		44,390,087	59	46,141,542
Liabilities 60	Accounts payable and accrued expenses		2,588,221	60	11,620,871
61	Grants payable			61	
62	Deferred revenue		38,062,415	62	29,666,741
63	Loans from officers, directors, trustees, and key employees (attach schedule)			63	
64a	Tax-exempt bond liabilities (attach schedule)			64a	
b	Mortgages and other notes payable (attach schedule)			64b	
65	Other liabilities (describe ▶ See Statement 4)		2,195,013	65	2,538,549
66	**Total liabilities** (add lines 60 through 65)		42,845,649	66	43,826,161
Net Assets or Fund Balances	**Organizations that follow SFAS 117, check here ▶ ☐** and complete lines 67 through 69 and lines 73 and 74				
67	Unrestricted		1,544,438	67	2,315,381
68	Temporarily restricted			68	
69	Permanently restricted			69	
	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74				
70	Capital stock, trust principal, or current funds			70	
71	Paid-in or capital surplus, or land, building, and equipment fund			71	
72	Retained earnings, endowment, accumulated income, or other funds			72	
73	**Total net assets or fund balances** (add lines 67 through 69 OR lines 70 through 72 column (A) **must** equal line 19 column (B) **must** equal line 21)		1,544,438	73	2,315,381
74	**Total liabilities and net assets / fund balances** (add lines 66 and 73)		44,390,087	74	46,141,542

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

Part IV-A **Reconciliation of Revenue per Audited Financial Statements with Revenue per Return** (See Specific Instructions, page 26.)

a	Total revenue, gains, and other support per audited financial statements ▶	a	See Note A
b	Amounts included on line **a** but not on line 12, Form 990		
(1)	Net unrealized gains on investments $		
(2)	Donated services and use of facilities $		
(3)	Recoveries of prior year grants $		
(4)	Other (specify) $		
	Add amounts on lines **(1)** through **(4)** ▶	b	
c	Line **a** minus line **b** ▶	c	
d	Amounts included on line 12, Form 990 but not on line **a**		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) $		
	Add amounts on lines **(1)** and **(2)** ▶	d	
e	Total revenue per line 12, Form 990 (line **c** plus line **d**) ▶	e	

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

a	Total expenses and losses per audited financial statements ▶	a	See Note A
b	Amounts included on line **a** but not on line 17, Form 990		
(1)	Donated services and use of facilities $		
(2)	Prior year adjustments reported on line 20, Form 990 $		
(3)	Losses reported on line 20, Form 990 $		
(4)	Other (specify) $		
	Add amounts on lines **(1)** through **(4)** ▶	b	
c	Line **a** minus line **b** ▶	c	
d	Amounts included on line 17, Form 990 but not on line **a**		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) $		
	Add amounts on lines **(1)** and **(2)** ▶	d	
e	Total expenses per line 17, Form 990 (line **c** plus line **d**) ▶	e	

Part V **List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated, see Specific Instructions on page 26.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
See Statement 5 & Statement 8				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100 000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? ▶ ☐ Yes ☑ No
If "Yes," attach schedule—see Specific Instructions on page 27

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

		Line	Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		✔
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77		✔
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		✔
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b		
79	Was there a liquidation dissolution termination, or substantial contraction during the year? If "Yes," attach a statement	79		✔
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization?	80a		✔
b	If "Yes," enter the name of the organization ▶ ______ and check whether it is ☐ exempt OR ☐ nonexempt			
81a	Enter direct or indirect political expenditures See line 81 instructions **81a**			
b	Did the organization file **Form 1120-POL** for this year?	81b		✔
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	✔	
b	If 'Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) **82b**			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	✔	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	✔	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		✔
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85	*501(c)(4), (5), or (6) organizations* a Were substantially all dues nondeductible by members?	85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less? If Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b		
c	Dues, assessments, and similar amounts from members **85c**			
d	Section 162(e) lobbying and political expenditures **85d**			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices **85e**			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) **85f**			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	*501(c)(7) orgs* Enter a Initiation fees and capital contributions included on line 12 **86a**			
b	Gross receipts, included on line 12, for public use of club facilities **86b**			
87	*501(c)(12) orgs* Enter a Gross income from members or shareholders **87a**			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) **87b**			
88	At any time during the year did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes," complete Part IX	88		✔
89a	*501(c)(3) organizations* Enter Amount of tax imposed on the organization during the year under section 4911 ▶ ______, section 4912 ▶ ______, section 4955 ▶ ______			
b	*501(c)(3) and 501(c)(4) orgs* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		✔

c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ ______

d Enter Amount of tax on line 89c, above, reimbursed by the organization ▶ ______

90a List the states with which a copy of this return is filed ▶ CA

b Number of employees employed in the pay period that includes March 12, 2001 (See instructions) **90b** 514

91 The books are in care of ▶ Ralph McKinnon Telephone no ▶ (510) 644-8200
Located at ▶ 2001 Addison Street, 2nd Floor, Berkeley, CA ZIP + 4 ▶ 94704-1103

92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* ***Form 1041***—Check here ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ **92**

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

Note: Enter gross amounts unless otherwise indicated.	Unrelated business income (A) Business code	Unrelated business income (B) Amount	Excluded by section 512, 513, or 514 (C) Exclusion code	Excluded by section 512, 513, or 514 (D) Amount	(E) Related or exempt function income
93 Program service revenue:					
a Research development and public					42,570,794
b health training					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	755,452	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b Miscellaneous Income			0	3,462	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		758,914	42,570,794

105 Total (add line 104, columns (B), (D), and (E)) ▶ 43,329,708

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

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

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

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

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

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

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

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

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

Please Sign Here

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

Bob E. Wolfson 1/24/03

Signature of officer Date

Bob E Wolfson, Senior VP & COO

Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ▶ ☐	Preparer's SSN or PTIN (See Gen. Inst. W)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶		EIN ▶	
		Phone no. ▶ ( )	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information—(See separate instructions)

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

OMB No 1545 0047

2001

Name of the organization: **Public Health Institute**

Employer identification number: **94 1646278**

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

(a) Name and address of each employee paid more than $50 000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
See Statement 6				
Total number of other employees paid over $50,000 ▶	179			

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

(a) Name and address of each independent contractor paid more than $50 000	(b) Type of service	(c) Compensation
See Statement 7		
Total number of others receiving over $50,000 for professional services ▶ 58		

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

			Yes	No
1	During the year, has the organization attempted to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes" enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ 16,000 **(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)** Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities	1	✔	
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors officers, creators, key employees, or members of their families or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions)*			
a	Sale, exchange, or leasing of property?	2a		✔
b	Lending of money or other extension of credit?	2b		✔
c	Furnishing of goods, services, or facilities?	2c		✔
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d	✔	
e	Transfer of any part of its income or assets?	2e		✔
3	Does the organization make grants for scholarships, fellowships, student loans, etc? (See **Note** below)	3		✔
4	Do you have a section 403(b) annuity plan for your employees?	4	✔	

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

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

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

5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V)

7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 ☐ A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** ▶

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)

11a ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)

11b ☐ A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)

12 ☐ An organization that normally receives **(1) more than 33⅓%** of its support from contributions membership fees, and gross receipts from activities related to its charitable, etc, functions—subject to certain exceptions, and **(2) no more than 33⅓%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in **(1)** lines 5 through 12 above, or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

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

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

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

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

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

	Calendar year (or fiscal year beginning in) ▶	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants See line 28)	29,079,678	31,518,601	29,266,291	12,934,037	102,798,607
16	Membership fees received		4,000	3,598		7,598
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization s charitable, etc , purpose	24,036,818	29,678,567	27,182,021	19,051,412	99,948,818
18	Gross income from interest dividends amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	1,577,307	239,827	195,053	36,339	2,048,526
19	Net income from unrelated business activities not included in line 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge	1,198,000	1,198,000	1,198,000	1,198,000	4,792,000
22	Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
23	Total of lines 15 through 22	55,891,803	62,638,995	57,844,963	33,219,788	209,595,549
24	Line 23 minus line 17	31,854,985	32,960,428	30,662,942	14,168,376	109,646,731
25	Enter 1% of line 23	558,918	626,390	578,450	332,198	

26 Organizations described on lines 10 or 11 **a** Enter 2% of amount in column (e) line 24 ▶ **26a** 2,192,934

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a **Do not file this list with your return** Enter the total of all these excess amounts ▶ **26b** 47,914,309

c Total support for section 509(a)(1) test Enter line 24, column (e) ▶ **26c** 109,646,731

d Add Amounts from column (e) for lines 18 2,048,526 19 - 22 - 26b 47,914,309 ▶ **26d** 49,962,835

e Public support (line 26c minus line 26d total) ▶ **26e** 59,683,896

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ **26f** 54 4 %

27 Organizations described on line 12 **a** For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person " **Do not file this list with your return** Enter the sum of such amounts for each year

(2000) (1999) (1998) (1997) -

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5 000 (Include in the list organizations described in lines 5 through 11, as well as individuals) **Do not file this list with your return** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year

(2000) (1999) (1998) (1997)

c Add Amounts from column (e) for lines 15 ____ 16 ____ 17 ____ 20 ____ 21 ____ ▶ **27c**

d Add Line 27a total ____ and line 27b total ____ ▶ **27d**

e Public support (line 27c total minus line 27d total) ▶ **27e**

f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ▶ **27f**

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ **27g** %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ **27h** %

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

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

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	31		
32	Does the organization maintain the following			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)	32d		
33	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	33h		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		16,000
38 Total lobbying expenditures (add lines 36 and 37)	38		16,000
39 Other exempt purpose expenditures	39		78,143,698
40 Total exempt purpose expenditures (add lines 38 and 39)	40		78,159,698
41 Lobbying nontaxable amount Enter the amount from the following table—			
If the amount on line 40 is— / **The lobbying nontaxable amount is—**			
Not over $500,000 — 20% of the amount on line 40			
Over $500 000 but not over $1 000,000 — $100 000 plus 15% of the excess over $500 000			
Over $1 000,000 but not over $1,500,000 — $175,000 plus 10% of the excess over $1,000,000	41		1,000,000
Over $1 500,000 but not over $17,000,000 — $225,000 plus 5% of the excess over $1,500,000			
Over $17,000 000 — $1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		250,000
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43		0
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44		0
Caution *If there is an amount on either line 43 or line 44, you must file Form 4720*			

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

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45 Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures	16,000	20,000	17,400	15,950	69,350
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					1,500,000
50 Grassroots lobbying expenditures					

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

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

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

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

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

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

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

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

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

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Public Health Institute
990 Tax Return
For the Year Ended December 31, 2001

Note A
94-1646278

In October, 2002, the Public Health Institute completed Phase I of the three-year conversion of its financial and accounting system The significant complications and delays encountered during this process have severely impacted the preparation and auditing of our financial statements The audit for Year 2000 was issued on November 22, 2002, and the audit for Year 2001 is underway Consequently, Parts IV A&B of this tax return cannot be completed In addition, we anticipate minor adjustments to both the Income/Expense Statement and Balance Sheet once the audit is complete An amended return will be filed, if necessary, when the Year 2001 audit is issued

Public Health Institute
Statement of Functional Expenses
For the Year Ended December 31, 2001

Statement 1

94-1646278

Form 990
Part II, Line 43

Tax Return Line	Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fund Raising
43a Total	Consultants	$3,650,686	$3,499,913	$142,973	$7,800
43 b Total	Research Participant Costs	$607,056	$606,601	$455	$0
43 c Total	Temporary Services and Work Study	$579,788	$355,093	$224,785	($90)
43 d Total	Training/Professional Development	$393,546	$339,417	$54,129	$0
43 e Total	Educational/ Training Material	$1,433,537	$1,433,537	$0	$0
43 f Total	Insurance	$92,103	$3,621	$88,482	$0
43 g Total	Subcontracts	$19,384,615	$19,384,615	$0	$0
43 h Total	Non-capitalized Equipment	$189,233	$189,233	$0	$0
43 i Total	Miscellaneous	$563,826	$406,851	$156,085	$890
Total: Other Expenses		$26,894,390	$26,218,881	$666,909	$8,600

Public Health Institute
2001 Form 990
Part III

94-1646278
Statement 1A

What is the organization's primary exempt purpose?

Public health research, training, and professional education, consultation and technical assistance, information dissemination, and policy analysis

a	PHI's largest program service, the California Cancer Registry and associated Regional Registries have collected detailed information on over 1 7 million cases of cancer with over 140,000 new cases added annually This data is available to researchers and epidemiologists worldwide	$ 17,508,508
b	The California Nutrition Promotion Network for Lower Income Consumers conducts a statewide social marketing campaign to promote health and nutrition in order to reduce the incidence of cancer and other diet-related diseases in California The project distributed numerous brochures, newsletters, TV and radio public service announcements, etc.	$ 9,286,846
c	The Partnership for the Public's Health works with county health departments and local collaboratives to establish public health improvement goals, to stimulate the redesign of systems to protect and improve the public's health in communities throughout California, to address statewide public policy efforts in the area of public health, and to document and evaluate the process	$ 9,089,806
d	The Population Leadership Program provided leadership training and approximately 20 staff positions for U S Agency for International Development's population programs	$ 6,404,448

PUBLIC HEALTH INSTITUTE
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS
FOR THE YEAR ENDED DECEMBER 31, 2001

FORM 990 PART III (e)

Account Number	Description	Amount
Various	Alcohol Research Group	4,070,566
Various	International Public Health Programs	2,323,231
Various	Healthy Cities and Communities	2,307,984
Various	Center for Collaborative Planning	1,498,427
Various	Project Lean	1,425,626
01551-05-01	Pacific DBTAC	591,583
01523-01-01	EMF Research Project	498,446
01624-04-01	Young Women at Risk (PARTNERS)	488,073
02006-01-01	Pharmacy Access Project	463,323
01832-01-01	Pharmaceuticals	401,546
01937-01-01	CalWORKS/Child Welfare Ptshp	389,798
01640-02-02	WHC CA Alliance for WHL (TCE)	332,212
01779-02-01	TALC II	301,725
01799-02-01	Regional Variations in BC	277,440
01677-01-01	CLPPG Vacuum Cleaner Study (H	272,285
01935-01-01	CalWORKS Wave 3 (ASPE,TANF)	270,404
01879-01-01	Talking about Child Care	258,999
01855-02-01	Welfare Policy Research Proj	256,599
01875-01-01	RAMP (TCE)	251,206
02005-01-01	School Outreach Program	241,621
01884-01-01	Occup Lead Poisoning Prev	239,930
01732-01-01	BMSG Violence Prevention-PHFE	220,913
01521-04-01	Alameda County Study	218,828
01506-14-01	SENSOR	217,395
01651-01-01	EPRI Childhood Leukemia	211,819
01167-02-01	Regional Genetics Network	211,656
01779-03-01	Ashe,Marice	208,097
01942-01-01	Teen Preg Prev Initiative TCWF	192,138
01827-02-01	CHIS II - DHS	191,468
01900-01-01	Adolescent Treatment Project	188,848
01956-01-01	Why Is Crime Down? TCWF	188,208
01710-03-01	Adolescent Treatment Model	180,146
01938-01-01	Global Action Network (Gates)	179,230
01698-03-01	CRWCH PRENATAL EXPOSURE	178,949
01884-02-01	Occup Lead Poisoning Prev	174,536
01524-06-01	Self-Help Agency Functions	169,715
01699-03-01	CHLP NGA Center	157,101
01953-02-01	Safe Schools/Healthy Students	144,178
01548-05-01	Xenoestrogens & Breast Cancer	143,783
01889-01-01	PHT Calcium II	143,063
01903-01-01	Natl Downs Syndrome Study	139,840
01055-03-01	LEAD SAFETY SEMINARS	138,693
02127-01-01	NIDR Research - Pacific DBTAC	137,321
01886-01-01	Prostate Cancer Prospective	133,749
01816-02-01	American Indian Women PVD	128,011
01813-01-01	Welfare Reform and Substance A	119,403
01636-01-01	CRWCH Child Health and Develo	113,294
02004-01-01	Tobacco Free Challenge Racing	108,099
01906-01-01	Asthma PH Perspective	104,348
01948-02-01	Tandem Mass Contract (GDB) y2	103,058
01800-02-01	Prostate Cancer in Rural Calif	101,540
01767-01-01	Infectious Diseases Among Stat	101,517
01879-02-01	Talking about Child Care	100,589
01839-01-01	CLPPB Settlement	99,314
01624-05-01	PARTNERS Project	98,270
01739-01-01	CALWORKS Study	97,685
01515-01-01	Environmental Health Account	95,136
01824-02-01	LABORATORY REPORTING	94,735
01761-01-01	CEHN Wellness	92,987
02013-01-01	Core Surveillance	90,122
01055-04-01	LEAD SAFETY SEMINARS	89,657

PUBLIC HEALTH INSTITUTE		
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS		
FOR THE YEAR ENDED DECEMBER 31, 2001		
FORM 990 PART III (e)		
Account Number	Description	Amount
01905-01-01	Youth Access to Tobacco	87,437
01901-01-01	CHIS II - NCI	86,942
01953-01-01	Safe Schools/Healthy Students	86 007
01506-15-01	SENSOR	83 116
02020-01-01	CEHN State Level Campaign	81,569
01783-01-01	Growth Factors & Immune Functi	80 278
01822-01-01	CPNS Latino Evaluation Study	74,479
01926-01-01	PETS Data Collection	74 283
02004-02-01	Tobacco Free Challenge Racing	74,228
02030-01-01	MedPtn Training & Education	72,270
01779-03-02	Point of Sale	72,108
01979-01-01	Inborn Errors of Metabolism	71 752
01517-10-01	CA FACE	69,768
00802-01-01	PHI Wellness Support	68,841
01894-02-02	Organochlorine Pesticides HML	66 376
01791-01-01	Childhood Leukemia II	65 612
01550-04-01	Laotian Study	65 514
01674-02-01	Substance Dependent - PTSD The	65,502
01960-01-01	Tibet Vision 2001/2002	64,004
01961-01-01	Smoking Cessation (RWJ)	62 045
01924-01-01	Enumeration Methodology II	60 844
02037-01-01	Exemplary Practice Review(TCE)	58,967
01908-01-01	Smoke Free Families (UNC)	58,100
01840-01-01	CEHN EPA (2nd International	57 970
02136-01-01	Family PACT 2001	57,377
01569-03-01	Breast Cancer and Organochlori	55 676
01906-02-01	ASTHMA PH PERSPECTIVE	55,224
01900-02-01	ADOLESCENT TREATMENT PROJECT	53,291
02023-01-01	BMSG Program Support 2001	52 398
01895-02-01	Breast Can CA Teacher Regional	51,116
01690-03-01	HETC AHEC	49,975
01849-01-01	AIDS Prevention Photovoice Prj	48,675
01720-03-01	CA TEACHERS STUDY COHORT	46 724
01926-01-03	PETS Analysis & Publication	45,031
01937-01-02	Child Welfare Ptn (Speiglman)	44,692
02018-01-01	Turner Foundation	44,119
01926-01-04	PETS Study Management	43 902
01689-03-01	HETC AIDS ETC	43 220
01905-01-02	Battelle (Feighery)	43,089
01037-01-01	Healthy Families School Outrea	43,033
01658-01-01	CEHN - Registration	42 453
01987-01-01	CRWCH Child Health and Develo	42,377
01558-02-02	Smokeless States Program	40,710
01517-11-01	CA FACE	40,348
01671-01-01	Center for Health Leadership	40,330
01793-02-01	TOBACCO-RELATED DISEASE RESEAR	39,058
01699-04-01	CHLP NGA Center	37,958
02013-02-01	Core Surveillance	37,882
02044-01-01	Proposition 36 - Phase I(RWJ)	37,662
01876-01-01	WHC (TCE)	37,647
02130-01-01	CHLP Alameda County PH	37,515
01824-03-01	Lab Reporting for Pesticide	37,037
02026-01-01	TRDRP Tobacco Cessation Serv	36,694
01669-01-01	Public Health Leadership Soc	36,588
01893-01-01	Project Independence	36,375
01978-01-01	RIDE	35,907
02007-01-01	HETC HIV (Santa Clara)	35,585
01988-01-01	ACS NGA/RWJF Transfer	35,023
01816-02-02	American Indian Women CHIS	34,879
01916-02-01	CYSTIC FIBROSIS SCREENING II	34,720
01883-01-01	CEHN NIEHS/UCB	33 577

PUBLIC HEALTH INSTITUTE
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS
FOR THE YEAR ENDED DECEMBER 31, 2001

FORM 990 PART III (e)

Account Number	Description	Amount
01916-01-01	Cystic Fibrosis Screening	33,557
01902-01-02	HETC Tobacco (Advocacy)	32,640
02021-01-01	Youth Cessation Study	32,527
01897-01-01	Case Studies ATM (ROW)	31,985
01820-02-02	CHLP IFPLP (Packard)	31 777
01741-02-01	BMSG Wellness-TV	29,741
01954-01-01	Fed Drug Pricing Laws	29,585
01888-01-01	SLO Farmworker Survey	28 885
01637-01-01	IHP Tibet Vision	28,507
01562-03-01	BMSG Raising Voices For Child	28,205
01867-01-01	HETC Health Careers(Stanford)	27,475
01702-02-02	CCR Teachers Cohort(Reynolds)	27,305
02082-01-01	CLT Policy Advocacy Retreats	26,784
01922-01-01	Garment Industry Ergonomics	26,736
01943-01-01	Conference Services	26 432
01895-01-01	Breast Can CA Teacher Regional	25,873
02129-01-01	CA Working Families Summit	25,102
01780-01-01	Taiwan	24 990
01902-01-01	HETC Tobacco (Bidis)	24,850
01974-01-01	HETC Youth Tobacco Cessation	24 803
01741-01-01	BMSG Wellness-TV	24 266
01944-01-01	Pharmacy Access (Compton)	23,431
01969-01-01	Reviewers Conference (Packard)	23,359
01948-01-01	Tandem Mass Contract (GDB)	23,277
02007-02-01	HETC HIV (Santa Clara)	22,982
02111-01-01	PIC CHCF Strategic Planning	22,900
01914-01-01	BMSG Reporting on Violence	21,875
01689-04-01	HETC AIDS ETC	21,805
01919-01-01	Carpal Tunnel	21,284
02102-01-01	CIWMB Materials Emissions Test	21,120
02068-01-01	Access to ECP (TCWF)	20,807
02038-01-01	GIRLS, INC	20,778
02133-01-01	County Baseline Info (RWJF)	20,740
01860-01-01	PHT Probiotics	20,625
01793-03-01	Tobacco Related Disease Resear	20,260
02039-01-01	CHLP Turning Point	19,478
01647-05-01	Catholic Healthcare West	19,170
01544-01-01	PHT Master Account	18,723
02062-01-01	PIC Pharm Assistance Prog PAC	18,717
01827-01-01	CHIS II - DHS	18,626
01572-03-01	Cotinine & Reproductive Outcom	18,012
01926-01-02	PETS Data Cleaning & File Prep	17,669
01933-01-01	CFRI CF Mutation Frequencies	17,131
02110-01-01	Turning Point Evaluation	16,970
02024-01-01	CEHN ALIDA R MESSINGER	16,894
01545-03-02	Well Being in Old Age	16,882
01977-01-01	BMSG Healthy Wealthy & Wise	16,752
01962-01-01	ACS Survivor Study	16,494
01861-01-01	IHP Training Division	16,364
01846-02-02	CHLP IFPLP (Gates)	16,210
01925-01-01	Options Recovery Evaluation	16,007
02118-01-01	SAC AIDS Prev Prog Eval	15,762
02002-01-01	Volunteering/Health	15 613
01799-03-01	Regional Variations in BC-CA	15,285
01559-01-01	Tobacco Coalition - Matching	14,392
01973-01-01	Program Support - Barnett	14 190
02054-01-01	AG Surv of Respiratory Disease	14,074
02034-01-01	HIV Prevention Education	13,882
01536-01-01	Cancer Surveillance & Control	13,225
01690-04-01	HETC AHEC	13,030
01919-02-01	Carpal Tunnel	12 979

PUBLIC HEALTH INSTITUTE		
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS		
FOR THE YEAR ENDED DECEMBER 31, 2001		
FORM 990 PART III (e)		
Account Number	Description	Amount
01007-05-01	HRET	12,393
01834-01-01	Workers Compensation Initiati	12,268
01628-01-01	Center for Youth Policy/Advoca	12,258
01850-01-01	Ctr for Youth Policy Advocacy	11,538
01990-01-01	CHLP PH Code of Ethics	11,117
01976-01-01	GAN (Compton 2001)	11 087
02040-01-01	CHLP Workshops 2001-2002	10 970
01533-03-01	Childhood Cancer & GIS	10 927
02109-01-01	BMSG SFDPH Trainings	10,427
01927-01-01	WHC Operating Grant (TCWF)	10 402
01871-01-01	San Joaquin County	9,935
01820-01-02	CHL Packard (FPL)	9,555
01982-01-01	UCSF - CHART REVIEW	9,381
02161-01-01	GAN (Moriah Fund)	9,299
01939-01-01	CA Adol Hlth Strategic Plan	8 615
02107-01-01	SF Redevelopment Agency	8 338
01964-01-01	SFEI Fish Contaminants	7 968
01542-01-01	Coachella Valley	7 811
01917-01-01	Exposures & Age at Menarche	7,503
01983-01-01	Zellerbach Family Fund	7,500
02097-01-01	Central Valley Outreach Init	7 456
01757-01-01	WHC Dialogue on Childbearing	7 340
01985-01-01	CHLP Consulting	7,324
01647-04-01	Catholic Healthcare West	6,971
02066-01-01	CSH Corp for Supportive Housng	6 823
01922-02-01	Garment Industry Ergonomic	6 765
01521-03-01	AL County Study- 1994 Followup	6 284
02036-01-01	BMSG Media Advocacy (Idaho)	6,171
02128-01-01	CPITS Evaluation	6,140
02071-01-01	Georgia Institute of Techn	5 994
02099-01-02	CFL Mntl Hlth Grntee Assess &	5,662
01975-01-01	CF NEWBORN SCREENING CONF	5,510
01624-03-01	PIWH CDC - Young Women at Ris	5,355
01764-01-01	CEHN Alida R Messinger	5,268
02087-01-01	University of CA SF	5,267
02019-01-01	PHLS Health Disparity (HRSA)	5,127
Various	Under $5 000	114 103
	Total Part III e	27,976,996

PUBLIC HEALTH INSTITUTE
PROPERTY, EQUIPMENT & DEPRECIATION
FOR THE YEAR ENDED DECEMBER 31, 2001

STATEMENT 3
94-1646278

FORM 990, PART II, LINE 42 and
FORM 990, PART IV, LINE 57

ACQ DATE	METHOD	COST	TOTAL ACCUMULATED DEPRECIATION THROUGH DECEMBER 31, 2000	2001 DEPRECIATION	TOTAL ACCUMULATED DEPRECIATION THROUGH DECEMBER 31, 2001	BALANCE
93	STR LINE	63,870	(63,870)	0	(63,870)	0
					0	0
94	STR LINE	61,213	(60,427)	(787)	(61,214)	(1)
					0	0
95	STR LINE	52,817	(52,239)	(408)	(52,647)	170
					0	0
96	STRLINE	43,185	(36,620)	(5,585)	(42,205)	980
					0	0
97	STRLINE	37,044	(25,300)	(7,380)	(32,680)	4,364
					0	0
98	STRLINE	615,887	(86,407)	(89,712)	(176,119)	439,768
					0	0
99	STRLINE	1,505,361	(189,542)	(215,688)	(405,230)	1,100,131
2000	STRLINE	773,098	(125,098)	(108,000)	(233,098)	540,000
00	STRLINE					
		3,152,475	(639,504)	(427,560)	(1,067,064)	2,085,411

PUBLIC HEALTH INSTITUTE **STATEMENT 4**
OTHER ASSETS AND LIABILITIES **94-1646278**
FOR THE YEAR ENDED DECEMBER 31, 2001

FORM 990, PART IV, LINE 65

OTHER LIABILITIES	2000 ENDING	2001 ENDING
Accrued Payroll	638,467	626,044
Accrued Vacation	1,555,839	1,912,139
Other Accrued Expenses	707	366
Total	2,195,013	2,538,549

PUBLIC HEALTH INSTITUTE
LIST OF OFFICERS AND DIRECTORS
FOR THE YEAR ENDED DECEMBER 31, 2001

STATEMENT 5
94-1646278

FORM 990, PAGE 4, PART V

NAME AND ADDRESS	TITLE	COMPENSATION	BENEFITS	EXPENSE ACCOUNT
Robert J Melton, MD, MPH 7 White Oak Way Carmel Valley, CA 93924	Board Member/ President	$0	$0	$0
Vacant Position	Vice President	$0	$0	$0
Andrew Sun 2350 Anza Street San Francisco, CA 94118	Board Member/ Secretary	$0	$0	$0
David E Bonfilio, MBA 242 Catalina Boulevard San Rafael, CA 94901	Board Member/ Treasurer	$0	$0	$0
Carmela R Castellano, Esq 1215 K Street, Suite 700 Sacramento, CA 95814	Board Member	$0	$0	$0
Russell C Coile, Jr , MBA 17021 Running Ridge Washington, TX 77880	Board Member	$0	$0	$0
LucyAnn Geiselman, Ph D 1600 Holloway, Admin-153 San Francisco CA 94132	Board Member	$0	$0	$0
Elaine Zahnd, Ph D 1001 Carol Lane Lafayette, CA 94546	Board Member	$89,915	$13,882	$0
Margaret H Jordan, RN, MPH 611 Ryan Plaza Drive, #900 Arlington, TX 76011	Board Member	$0	$0	$0
Glenn I Hildebrand, MPH 2348 Shannon Drive South San Francisco, CA 94080	Board Member	$0	$0	$0
Henry J Ongerth, PE, MPH 905 Contra Costa Avenue Berkeley, CA 94707	Board Member	$0	$0	$0
Mary Pittman,Dr P H 1 North Frenklin, 29th Floor Chicago,IL, 60606	Board Member	$0	$0	$0
Helen Rodriguez-Trias, PhD 11565 Alta Via Road Brookdale, CA 95007	Board Member	$0	$0	$0

PUBLIC HEALTH INSTTUTE
FIVE HIGHEST PAID EMPLOYEES PAID > $50,000
FOR THE YEAR ENDING DECEMBER 31, 2001

STATEMENT 6
94-1646278

FORM 990, SCHEDULE A PART 1	TITLE & HOURS DEVOTED PER WEEK	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS & DEFERRED COMPENSATION	EXPENSE ACCOUNT & OTHER ALLOWANCES
Joseph M. Hafey 2001 Addison St., 2nd Floor Berkeley, CA 94704	President & CEO 40 hours per week	$271,173	$38,770	$4,727
James B. Simpson 2001 Addison St., 2nd Floor Berkeley, CA 94704	General Counsel 40 hour per week	$170,878	$25,248	$1,380
Bob Wolfson 2001 Addison St., 2nd Floor Berkeley, CA 94704	Vice President of Operations 40 hours per week	$164,014	$35,302	$0
James A. Wiley 2001 Addison St., 2nd Floor Berkeley, CA 94704	VP of Research & Evaluation 40 hours per week	$141,695	$29,638	$0
Thomas K. Greenfield 2000 Hearst Ave., Ste 300 Berkeley, CA 94709	Research Program Director 40 hours per week	$137,662	$29,362	$0

PUBLIC HEALTH INSTITUTE
FIVE HIGHEST PAID INDEPENDENT CONTRACTORS
FOR YEAR ENDED DECEMBER 31, 2001

STATEMENT 7
94-1646278

PROFESSIONAL SERVICES, PAID MORE THAN $50,000

FORM 990, SCHEDULE A, PART II

VENDOR NAME AND ADDRESS	TYPE OF SERVICE	COMPENSATION
MARTHA WILSON ASSOCIATES 11875 DUBLIN BLVD STE C-244 DUBLIN, CA 94568	PROJECT CONSULTANTS	$711,806
PUBLICIS DIALOG P O BOX 911747 DALLAS, TX, 75391-1747	PROJECT CONSULTANTS	$527,827
CENTER FOR APPLIED RESEARCH 5200 HUNTINGTON AVE , STE 200 RICHMOND, CA 94804	PROJECT CONSULTANTS	$496,931
MARIELA COMMUNICATIONS 3603 W HIDDEN LANE, STE 115 ROLLING HILLS, CA 90274	PROJECT CONSULTANTS	$326,507
BROWN MILLER COMMUNICATIONS 1114 JONES STREET MARTINEZ, CA 94553-1814	PROJECT CONSULTANTS	$284,603

PUBLIC HEALTH INSTITUTE
LABOR DISTRIBUTION - KEY EMPLOYEES
PAY PERIOD Calendar Year 2001

STATEMENT 8
94-1646278

Name	Position	Program	G&A	Fund Raising	Total
Hafey, Joseph M	President & CEO	$0	$269,817	$1,356	$271,173
Nevarez, Carmen R	VP External Affairs & Medical Officer	$12,370	$90,714	$0	$103,084
Simpson, James B	General Counsel	$0	$170,878	$0	$170,878
Soafer, Donna S	VP Development, Fundraising & Communications	$984	$95,907	$1,519	$98,410
Wiley, James A	VP Research & Evaluation	$53,844	$87,850	$0	$141,694
Wolfson, Bob	VP Operation & COO	$0	$164,013	$0	$164,013
TOTAL		$67,198	879,179	2,875	$949,252