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Return of Organization Exempt From Income Tax

2002

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2002 calendar year, or tax year beginning , 2002, and ending , 20

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

C Name of organization
Public Health Institute

Number and street (or P O box if mail is not delivered to street address) Room/suite
555 12th Street, 10th Floor

City or town state or country and ZIP + 4
Oakland, CA 94607-4046

D Employer identification number
94 1646278

E Telephone number
(510) 285-5500

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

I Enter 4 digit GEN ▶

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

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.

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 page 17 of the instructions)

Revenue	1 Contributions, gifts, grants, and similar amounts received				
	a Direct public support	1a	22,313,755		
	b Indirect public support	1b			
	c Government contributions (grants)	1c	22,916,164		
	d Total (add lines 1a through 1c) (cash \$ _____ noncash \$ _____)	1d			45,229,919
	2 Program service revenue including government fees and contracts (from Part VII line 93)	2			35,229,780
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4			409,721
	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 in Part VII)	7				
8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
		8a			
		8b			
		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			28,672	
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			80,898,092	
Expenses	13 Program services (from line 44, column (B))	13		72,010,145	
	14 Management and general (from line 44, column (C))	14		8,388,016	
	15 Fundraising (from line 44, column (D))	15		45,134	
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 16 and 44, column (A))	17			80,443,295
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		454,797	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		2,096,681	
	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			2,551,478

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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 page 21 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	8,476,778	8,476,778		
23	Specific assistance to individuals (attach schedule)	0	0		
24	Benefits paid to or for members (attach schedule)	0	0		
25	Compensation of officers, directors, etc	953,599	93,132	851,598	8,869
26	Other salaries and wages	26,008,276	22,835,126	3,154,556	18,594
27	Pension plan contributions	307,733	249,053	58,323	357
28	Other employee benefits	1,957,267	1,584,049	370,949	2,269
29	Payroll taxes	4,944,411	4,001,595	937,085	5,731
30	Professional fundraising fees	0	0	0	0
31	Accounting fees	42,042	0	42,042	0
32	Legal fees	34,700	66	34,634	0
33	Supplies	1,885,705	1,558,186	327,519	0
34	Telephone	699,951	588,153	111,239	559
35	Postage and shipping	257,017	206,051	50,917	49
36	Occupancy	2,773,611	2,066,003	702,142	5,466
37	Equipment rental and maintenance	156,595	143,733	12,862	0
38	Printing and publications	1,140,391	1,015,619	123,428	1,344
39	Travel	2,201,347	2,101,263	100,035	49
40	Conferences, conventions, and meetings	831,954	770,554	61,275	125
41	Interest	19,293	0	19,293	0
42	Depreciation, depletion, etc (attach schedule)	467,016	0	467,016	0
43	Other expenses not covered above (itemize) a				
	b See Statement 1	27,285,609	26,320,784	963,103	1,722
	c				
	d				
	e				
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	80,443,295	72,010,145	8,388,016	45,134

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 page 24 of the instructions)

What is the organization's primary exempt purpose? See Statement 1A	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 \$ _____)	19,021,967
b See Statement 1A, Partnership for the Public's Health (Grants and allocations \$ _____)	9,058,426
c See Statement 1A, California Nutrition Promotion Network for Lower Income Consumers (Grants and allocations \$ _____)	7,881,158
d See Statement 1A, Population Leadership Program (Grants and allocations \$ _____)	6,427,984
e Other program services (attach schedule) (Grants and allocations \$ See Statement II)	29,620,610
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	72,010,145

Part IV Balance Sheets (See page 24 of the instructions)

Note	Where required attached schedules and amounts within the description column should be for end-of-year amounts only	(A) Beginning of year		(B) End of year
45	Cash—non-interest-bearing	280,750	45	7,750,479
46	Savings and temporary cash investments	15,400,370	46	10,393,873
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	30,804,033	49	39,973,948
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	330,034	53	196,981
54	Investments—securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> 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	3,152,476	57a	
b	Less accumulated depreciation (attach schedule)	1,534,079	57b	
			57c	
58	Other assets (describe <input type="checkbox"/>)	2,085,413	58	1,618,397
59	Total assets (add lines 45 through 58) (must equal line 74)	48,900,600	59	59,933,678
60	Accounts payable and accrued expenses	7,481,865	60	8,333,065
61	Grants payable		61	
62	Deferred revenue	36,989,867	62	46,373,363
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 <input type="checkbox"/> See Statement 4)	2,332,187	65	2,675,773
66	Total liabilities (add lines 60 through 65)	46,803,919	66	57,382,201
	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
67	Unrestricted	2,096,681	67	2,551,477
68	Temporarily restricted		68	
69	Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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)	2,096,681	73	2,551,477
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	48,900,600	74	59,933,678

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 page 26 of the instructions)

a Total revenue, gains, and other support per audited financial statements ▶	a	80,898,092
b Amounts included on line a but not on line 12, Form 990	b	0
(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	0
c Line a minus line b ▶	c	80,898,092
d Amounts included on line 12, Form 990 but not on line a	d	0
(1) Investment expenses not included on line 6b, Form 990 \$		
(2) Other (specify)		
\$		
Add amounts on lines (1) and (2) ▶	d	0
e Total revenue per line 12, Form 990 (line c plus line d) ▶	e	80,898,092

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

a Total expenses and losses per audited financial statements ▶	a	80,443,295
b Amounts included on line a but not on line 17, Form 990	b	0
(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	0
c Line a minus line b ▶	c	80,443,295
d Amounts included on line 17, Form 990 but not on line a	d	0
(1) Investment expenses not included on line 6b, Form 990 \$		
(2) Other (specify)		
\$		
Add amounts on lines (1) and (2) ▶	d	0
e Total expenses per line 17, Form 990 (line c plus line d) ▶	e	80,443,295

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page 26 of the instructions)

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

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 page 26 of the instructions

Part VI Other Information (See page 27 of the instructions)		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		✓
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		✓
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?		✓
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		✓
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?		✓
b	If "Yes," enter the name of the organization ▶ _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a	Enter direct or indirect political expenditures See line 81 instructions		
b	Did the organization file Form 1120-POL for this year?		✓
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?	✓	
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?	✓	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
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?		
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		
c	Dues, assessments, and similar amounts from members		
d	Section 162(e) lobbying and political expenditures		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
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?		
85c			
85d			
85e			
85f			
85g			
85h			
86a	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12		
b	Gross receipts, included on line 12, for public use of club facilities		
86b			
87a	501(c)(12) orgs Enter a Gross income from members or shareholders		
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		✓
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 ▶ _____		
b	Number of employees employed in the pay period that includes March 12, 2002 (See instructions)	90b	560
91	The books are in care of ▶ <u>Ralph McKinnon</u> Telephone no ▶ (<u>510</u>) <u>285-5541</u> Located at ▶ <u>555 12th Street, Oakland, CA</u> ZIP + 4 ▶ <u>94607-4046</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ <u>92</u>		

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions)

	Unrelated business income		Excluded by section 512 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
Note Enter gross amounts unless otherwise indicated					
93 Program service revenue					
a Research Development and public					35,229,780
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	409,721	
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 Misc Inc			0	28,672	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				438,393	35,229,780
105 Total (add line 104, columns (B), (D), and (E))					35,668,173

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 page 32 of the instructions)

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

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions)

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the instructions)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
 - (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
- Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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

Please Sign Here

Signature of officer: Bob E. Wolfson Date: 12/16/03

Type or print name and title: Bob E. Wolfson, Senior VP & COO

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed:

Firm's name (or yours if self-employed) address and ZIP + 4: _____ EIN: _____ Preparer's SSN or PTIN (See Gen. Inst. W): _____

Phone no: () _____



SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

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

2002

Supplementary Information—(See separate instructions.)

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

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 ▶	187			

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 ▶	44	

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

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>17,460</u> (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	✓	
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?		✓
b Lending of money or other extension of credit?		✓
c Furnishing of goods, services, or facilities?		✓
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	✓	
e Transfer of any part of its income or assets?		✓
3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)		✓
4 Do you have a section 403(b) annuity plan for your employees?	✓	
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 5 of the instructions)

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

- 5** A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)
- 6** A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7** A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)
- 8** A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)
- 9** A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b** A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12** An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5) or (6), if they meet the test of section 509(a)(2). (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 5 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) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	43,282,623	29,079,678	31,518,601	29,266,291	133,147,193
16 Membership fees received	45,825		4,000	3,598	53,423
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	29,008,723	24,036,818	29,678,567	27,182,021	109,906,129
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	755,452	1,577,307	239,827	195,053	2,767,639
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	74,290,623	55,891,803	62,638,995	57,844,963	250,666,384
24 Line 23 minus line 17	45,281,900	31,854,985	32,960,428	30,662,942	140,760,255
25 Enter 1% of line 23	742,906	558,918	626,390	578,450	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24 ▶				26a 2,815,205
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 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶					26b 69,547,861
c Total support for section 509(a)(1) test. Enter line 24, column (e) ▶					26c 140,760,255
d Add: Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____ ▶					26d 72,315,500
e Public support (line 26c minus line 26d total) ▶					26e 68,444,755
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					26f 48.63 %
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: (2001) _____ (2000) _____ (1999) _____ (1998) _____ 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: (2001) _____ (2000) _____ (1999) _____ (1998) _____ c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶				
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 1998 through 2001, 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?		
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?		
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)		
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
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)		
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
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		
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		

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		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	17,460
38	Total lobbying expenditures (add lines 36 and 37)	38	17,460
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
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 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	41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	
Caution If there is an amount on either line 43 or line 44, you must file Form 4720			

4-Year Averaging Period Under Section 501(h)

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

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
46					6,000,000
47	17,460	16,000	20,000	17,400	70,860
48					
49					1,500,000
50					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

During the year, did the organization attempt to influence national state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
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

**PUBLIC HEALTH INSTITUTE
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2002**

**STATEMENT 1
94-1646278**

**FORM 990
PART II, LINE 43**

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUND RAISING
Consultants	5,643,599	5,265,358	376,374	1,867
Research Participant Costs	577,685	577,685	0	0
Temporary Services and Work Study	529,889	303,949	225,940	0
Training/Professional Development	272,439	219,383	52,676	380
Educational/Training Material	1,007,339	1,007,155	184	0
Insurance	90,409	524	89,886	0
Subcontracts	18,261,380	18,261,380	0	0
Non-capitalized Equipment	208,146	153,635	54,511	0
Miscellaneous	694,723	531,714	163,534	(525)
	27,285,609	26,320,784	963,103	1,722

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 17 million cases of cancer with over 140,000 new cases added annually. This data is available to researchers and epidemiologists worldwide. | \$19,021,967 |
| b | 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. | \$9,058,426 |
| c | 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. | \$7,881,158 |
| d | The Population Leadership Program provided leadership training and approximately 20 staff positions for U.S. Agency for International Development's population programs. | \$6,427,984 |

PUBLIC HEALTH INSTITUTE		
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS		
FOR THE YEAR ENDED DECEMBER 31, 2002		
FORM 990 PART III (e)		
Account Number	Description	Amount
Various	Alcohol Research Group	3,711,481
Various	International Public Health Programs	2,929,376
Various	Healthy Cities and Communities	2,085,548
Various	Center for Collaborative Planning	1,137,429
Various	Project Lean	904,189
01502-01-01	C/Net	679,106
02127-01-01	NIDR Research - Pacific DBTAC	651,193
02006-01-01	Pharmacy Access Project	618,215
02111-01-01	MedPin CHCF Strategic Planning	528,396
01624-05-01	PARTNERS Project	506,621
01879-03-01	Talking about Child Care	429,940
01832-01-01	Pharmaceuticals	427,901
01937-01-01	CalWORKS/Child Welfare Ptshp	347,420
01779-04-01	TALC TCS Augmentation	313,238
01779-03-01	Ashe, Marice	312,582
01942-01-01	Teen Preg Prev Initiative TCWF	298,633
02206-01-01	CHIS III - DHS	286,634
01875-01-01	RAMP (TCE)	284,875
01523-01-01	EMF Research Project	283,512
01956-01-01	Why Is Crime Down? TCWF	260,394
01884-02-01	Occup Lead Poisoning Prev	259,948
02136-01-01	Family PACT 2001	258,184
01937-01-05	County Grants	254,405
01889-01-01	PHT Calcium II	222,776
02005-01-01	School Outreach Program	221,168
01884-03-01	Occup Lead Poison Prev	215,894
01799-03-01	Regional Variations in BC-CA	213,333
01521-05-01	Alameda County Study	206,891
01903-01-01	Natl Downs Syndrome Study	205,671
01948-03-01	TANDEM MASS CONTRACT	198,490
02081-01-01	Successful Women's Health Prog	190,567
01987-01-01	CRWCH Child Health and Develo	189,992
02186-01-01	Tibet Vision (Kanbar)	189,565
02030-01-01	MedPin Training & Education	188,597
01948-02-01	Tandem Mass Contract (GDB) y2	186,160
02178-01-01	Pharmacy Access (Buffett)	183,962
01720-03-01	CA TEACHERS STUDY COHORT	168,937
01978-01-01	RIDE	167,718
02013-02-01	Core Surveillance	158,251
02127-02-01	NIDR - Pacific DBTAC	157,390
01953-02-01	Safe Schools/Healthy Students	156,712
01710-03-01	Adolescent Treatment Model	151,707
01699-04-01	CHLP NGA Center	150,926

PUBLIC HEALTH INSTITUTE		
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS		
FOR THE YEAR ENDED DECEMBER 31, 2002		
FORM 990 PART III (e)		
Account Number	Description	Amount
01824-03-01	Lab Reporting for Pesticide	148,280
02143-01-01	WHC CPO Evaluation	146,879
01886-01-01	Prostate Cancer Prospective	146,035
01524-06-01	Self-Help Agency Functions	142,220
01879-02-01	Talking about Child Care	135,188
02062-01-01	MEDPIN Pharm Assistance Prog	132,528
02157-01-01	Philanthropy & Evaluation	132,009
01979-02-01	Inborn Errors of Metabolism	130,657
02180-01-01	GAN (MacArthur Foundation)	130,307
01906-02-01	ASTHMA PH PERSPECTIVE	126,437
01926-01-01	PETS Data Collection	120,523
01506-15-01	SENSOR	119,334
01876-01-01	WHC (TCE)	113,857
01919-02-01	Carpal Tunnel	112,651
01914-02-01	BMSG Reporting on Violence	107,707
01855-03-01	Welfare Policy Research Proj	105,677
01900-02-01	ADOLESCENT TREATMENT PROJECT	105,623
01905-01-02	Battelle (Feighery)	104,532
01926-01-03	PETS Analysis & Publication	97,627
02201-01-01	PHT Tobacco Free Events	92,044
01698-03-01	CRWCH PRENATAL EXPOSURE	90,904
01517-11-01	CA FACE	90,116
02247-01-01	YES!	89,891
02197-01-01	BMSG Family Assets Init (Ford)	87,205
02208-01-01	Pharmacy Access (OSI)	86,879
01689-04-01	HETC AIDS ETC	84,692
01993-01-01	CLT Social Marketing Conf	83,710
01979-01-01	Inborn Errors of Metabolism	81,781
01978-02-01	RIDE	81,698
02140-01-01	Permanency for Adolescents	77,682
02175-02-01	GDB SLOS Pilot	77,179
01055-04-01	LEAD SAFETY SEMINARS	76,579
01960-01-01	Tibet Vision 2001/2002/2003	75,599
02004-03-01	Tobacco Free Challenge Racing	73,604
01959-01-01	SRG UCD Case Control	73,307
02110-01-01	Turning Point Evaluation	72,801
02004-02-01	Tobacco Free Challenge Racing	71,561
02219-01-01	BMSG Community Action (PHFE)	71,515
01690-04-01	HETC AHEC	71,079
01739-01-01	CALWORKS Study	68,268
01550-04-01	Laotian Study	68,045
01961-01-01	Smoking Cessation (RWJ)	67,927
02242-01-01	Pharmacy Access (Goldman)	67,046

PUBLIC HEALTH INSTITUTE		
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS		
FOR THE YEAR ENDED DECEMBER 31, 2002		
FORM 990 PART III (e)		
Account Number	Description	Amount
02068-01-01	Access to ECP (TCWF)	67,025
01793-03-01	Tobacco Related Disease Resear	65,985
01791-01-01	Childhood Leukemia II	65,676
01515-01-01	Environmental Health Account	65,493
01506-16-01	SENSOR	64,102
02176-01-01	RAMP CAFA (TCE)	62,061
01908-02-01	Smoke Free Families (UNC)	61,098
01949-01-01	TPPI Policy Advocacy (TCWF)	57,010
01895-02-01	Breast Can CA Teacher Regional	56,054
01962-01-01	ACS Survivor Study	56,011
01894-02-02	Organochlorine Pesticides HML	55,258
01167-02-01	Regional Genetics Network	51,409
01905-01-01	Youth Access to Tobacco	50,834
02187-01-01	Evaluation Violence Prev Init	50,352
01517-12-01	CA FACE	50,325
01900-03-01	Adolescent Treatment Project	49,800
01783-01-01	Growth Factors & Immune Functi	49,198
02082-01-01	CLT Policy Advocacy Retreats	48,934
01689-05-01	HETC AIDS ETC	48,042
02094-01-01	Eval Wrkplc Viol Prev CA Hosp	47,667
02102-01-01	CIWMB Materials Emissions Test	45,917
01799-02-01	Regional Variations in BC	45,061
02148-01-01	PHT - Candles	45,000
01699-05-01	CHLP NGA Center	44,999
02013-03-01	Core Surveillance	43,261
02059-01-01	SAMHSA-Thunder Road Sub	42,569
01894-03-02	Organochlorine Pesticides HML	42,058
02069-01-01	Variation-Stage at Diagnosis	41,930
01983-01-01	Zellerbach Family Fund	40,335
02026-01-01	TRDRP Tobacco Cessation Serv	39,878
01779-03-02	Point of Sale	39,696
01974-01-01	HETC Youth Tobacco Cessation	37,820
01829-01-01	HML Program Support	37,619
02075-01-01	MedPin Technical Assistance	37,254
01967-01-01	CFFT Mutation Freq - Hispanics	37,145
01732-01-01	BMSG Violence Prevention-PHFE	35,958
02340-01-01	SRG County of Ventura	35,527
02182-01-01	BCRP Placenta Factors & Race	34,438
02007-02-01	HETC HIV (Santa Clara)	33,790
01937-01-03	Conferences/Meetings	33,324
01901-01-01	CHIS II - NCI	32,782
02272-01-01	Community Benefit Practice TCE	31,822
02002-01-01	Volunteering/Health	31,788

PUBLIC HEALTH INSTITUTE		
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS		
FOR THE YEAR ENDED DECEMBER 31, 2002		
FORM 990 PART III (e)		
Account Number	Description	Amount
02070-02-01	Pesticides & Breast Cancr	31,505
01820-03-02	CHLP Packard/FP Leadership	31,471
02175-01-01	GDB SLOS Pilot	30,633
01922-02-01	Garment Industry Ergonomic	30,537
01916-02-01	CYSTIC FIBROSIS SCREENING II	29,652
01897-01-01	Case Studies ATM (NGIT)	29,397
02070-01-01	Pesticides & Breast Cancr	29,248
02206-02-01	CHIS III - DHS	29,111
02244-01-01	BMSG Tobacco-Free Events	28,722
02130-01-03	CHLP Alameda County 3	28,277
02037-01-01	Exemplary Practice Review(TCE)	27,837
02218-01-01	GAN (Goldman Fund)	27,221
01839-01-01	CLPPB Settlement	27,195
01900-03-02	Adolescent Treatment Project	27,174
02023-02-01	BMSG Program Support 2002	26,730
02118-01-01	SAC AIDS Prev Prog Eval	26,690
02245-01-01	Solano County MSA	26,645
01991-01-01	CHI Community Health Assessmnt	26,584
02294-01-01	Managed Care (subk)	26,229
01545-03-02	Well Being in Old Age	25,668
01919-03-01	Carpal Tunnel	25,636
01926-01-04	PETS Study Management	24,947
02189-01-01	Health Disparities Collab	24,748
01935-01-01	CalWORKS Wave 3 (ASPE,TANF)	24,539
02259-01-01	ECC Evaluation	24,406
01562-88-01	BMSG Raising Voices Interest	24,395
02129-01-01	CA Working Families Summit	24,236
01906-03-01	ASTHMA PH PERSPECTIVE	24,226
02246-01-01	Communities and Health	24,198
00802-01-01	PHI Wellness Support	23,257
01849-01-01	AIDS Prevention Photovoice Prj	22,435
02349-01-01	Homeless Count	21,799
02096-01-01	PHT Brass Keys	20,245
02007-03-01	HETC HIV (Santa Clara)	20,081
01871-01-01	San Joaquin County	19,968
01943-01-01	Conference Services	19,887
02132-01-01	HETC AHEC	18,891
02073-01-01	CANCOR Subcontract	18,590
01702-02-02	CCR Teachers Cohort(Reynolds)	18,433
02130-01-02	CHLP Alameda County PH 2	18,003
02110-02-01	Turning Point Evaluation	17,634
01715-01-01	Exposure To Particulates	17,380
02316-01-01	SRG Barriers to Employment-DSS	17,140

PUBLIC HEALTH INSTITUTE		
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS		
FOR THE YEAR ENDED DECEMBER 31, 2002		
FORM 990 PART III (e)		
Account Number	Description	Amount
02054-01-01	AG Surv of Respiratory Disease	16,555
02188-01-01	CLT CANFit Conference	16,390
02156-01-01	California Center	15,789
02097-01-01	Central Valley Outreach Init	15,193
02083-01-01	Spirituality & Empathy	14,927
01937-01-04	Educational Materials	14,696
01867-01-01	HETC Health Careers(Stanford)	14,651
02101-01-01	Preg,Horm,Env,Genes & Off Hlth	14,117
02293-01-01	SRG Adult Women Survey (CMRI)	13,953
02161-01-01	GAN (Moriah Fund)	13,759
02265-01-01	CHLP LVCHO	13,386
01651-01-01	EPRI Childhood Leukemia	13,366
02091-01-01	Polly Klaas Fdtn Lobbying	13,307
02318-01-01	Pharmacy Access (Brush)	13,293
01986-01-01	WHC Family Planning	13,043
01958-01-01	EPA Fish Dioxin Tests	12,985
01784-01-01	Breast Cancer Fund TRAM Sampl	12,554
02335-01-01	EMF CPUC Continuation	12,274
01544-01-01	PHT Master Account	12,124
02194-01-01	Adolescent Mental Health Mtgs	12,078
01906-02-02	Asthma - Supplement	11,985
02138-01-01	HETC Positive Self-Management	11,654
02021-01-01	Youth Cessation Study	11,480
02299-01-01	CHLP TA for Grantees	11,356
01681-01-01	Anti-Inflammatory Peptides	11,200
02128-01-01	CPITS Evaluation	10,955
01894-03-01	Organochlorine Pesticides	10,870
01964-01-01	SFEI Fish Contaminants	10,735
02123-02-01	MOD/CBDMP EPA Study 2	10,673
02112-01-01	Regional Home Visits	10,517
02223-01-01	TALC TTAC Workshop	10,477
01816-02-02	American Indian Women CHIS	10,445
01533-03-01	Childhood Cancer & GIS	10,085
02357-01-01	CA Working Family Summit 2003	10,000
02353-01-01	NEEDS ASSESSMENT FOR HIV INDIV	9,679
02126-01-01	PCB Study - Avian Eggs	9,535
01562-03-01	BMSG Raising Voices For Child	9,382
02087-01-01	University of CA, SF	9,307
02130-01-01	CHLP Alameda County PH	9,142
01992-01-92	IRS/FPPC Lobbying (WCC)	9,000
01926-01-02	PETS Data Cleaning & File Prep	8,840
01888-01-01	SLO Farmworker Survey	8,716
01985-01-01	CHLP Consulting	8,555

PUBLIC HEALTH INSTITUTE		
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS		
FOR THE YEAR ENDED DECEMBER 31, 2002		
FORM 990 PART III (e)		
Account Number	Description	Amount
02044-01-01	Proposition 36 - Phase I(RWJ)	8,484
02089-01-01	CRWCH Serological Studies	8,469
01890-01-01	SRG SEER (NCCC)	8,243
02320-01-01	Youth Runaways (subk)	8,142
02217-01-01	MedPin Scholarships	8,129
02241-01-01	Ultrasound Study - UCSF	8,105
02292-01-01	CAHC support from CFHC	8,071
02354-01-01	CA Working Family Summit 2003	8,063
02099-01-02	CFL Mntl Hlth Grntee Assess &	7,666
02322-01-01	SRG SDSU	7,616
02210-01-01	BMSG Working Families	7,615
02192-01-01	CLT Packard Meetings	7,250
01977-01-01	BMSG Healthy Wealthy & Wise	7,241
02314-01-01	UCSF-Industrial Hygiene Serv	7,201
01894-04-01	Organochlorine Pesticides	7,183
02209-01-01	SRG CMRI Af Amer Adult Immuniz	7,146
01876-01-02	WHC Conference Income/Costs	6,921
02073-02-01	CANCOR Subcontract	6,863
02304-01-01	Exposure Insights & GIS	6,802
01551-05-01	Pacific DBTAC	6,731
02308-01-01	Solano County II	6,045
02107-01-01	SF Redevelopment Agency	5,959
01971-02-01	State Genetics Profiles	5,555
01634-01-01	CRWCH Program Support	5,508
02298-01-01	CLT CCR Technical Conference	5,449
01895-03-01	Breast Cancer in CA Teachers	5,244
02224-01-02	SHC TA Conference Registration	5,157
01906-03-02	ASTHMA Mortality Study	5,022
02295-01-01	Akron III (RWJF)	5,000
Various	Less Than \$5,000	99,680
	Total. Part III e	29,620,610

PUBLIC HEALTH INSTITUTE
PROPERTY, EQUIPMENT & DEPRECIATION
FOR THE YEAR ENDED DECEMBER 31, 2002

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, 2001	2002 DEPRECIATION	TOTAL ACCUMULATED DEPRECIATION THROUGH ACCEMBER 31, 2002	BALANCE
95	STR LINE	52,817	(52,647)	(170)	(52,817)	0
96	STRLINE	43,185	(42,205)	(686)	(42,891)	294
97	STRLINE	37,044	(32,680)	(4,364)	(37,044)	0
98	STRLINE	615,887	(176,119)	(103,512)	(279,631)	336,256
99	STRLINE	1,505,361	(405,230)	(250,284)	(655,514)	849,847
2000	STR LINE	773,098	(233,098)	(108,000)	(341,098)	432,000
		3,027,392	(941,979)	(467,016)	(1,408,995)	1,618,397

**PUBLIC HEALTH INSTITUTE
OTHER LIABILITIES
FOR THE YEAR ENDED DECEMBER 31, 2002**

**STATEMENT 4
94-1646278**

FORM 990, PART IV, LINE 65

OTHER LIABILITIES	BEGINNING	ENDING
Accrued Payroll	538,057	834,022
Accrued Vacation	1,793,764	1,839,698
Other Accrued Expenses	366	2,052
Total	2,332,187	2,675,773

**PUBLIC HEALTH INSTITUTE
LIST OF OFFICERS AND DIRECTORS
FOR THE YEAR ENDED DECEMBER 31, 2002**

**STATEMENT 5
94-1646278**

FORM 990, PAGE 4, PART V

Name and Address	Title	Compensation	Benefits	Expense Acct & Other Allowances
Robert J Mellon M D ,M P H Public Health Institute 555 12th Street, 10th Floor Oakland, CA 94607	Board Member/ President	\$0	\$0	\$0
Mary Pittman,Dr P H Public Health Institute 555 12th Street 10th Floor Oakland CA 94607	Board Member/ Vice President	\$0	\$0	\$0
David E Bonfilio, MBA Public Health Institute 555 12th Street 10th Floor Oakland, CA 94607	Board Member/ Chief Financial Officer	\$0	\$0	\$0
Russell C Coile Jr MBA Public Health Institute 555 12th Street 10th Floor Oakland CA 94607	Board Member/ Secretary	\$0	\$0	\$0
Carmela R Castellano Esq Public Health Institute 555 12th Street 10th Floor Oakland, CA 94607	Board Member	\$0	\$0	\$0
LucyAnn Geiselman Ph D Public Health Institute 555 12th Street 10th Floor Oakland CA 94607	Board Member	\$0	\$0	\$0
Jessie C Gruman Public Health Institute 555 12th Street, 10th Floor Oakland CA 94607	Board Member	\$0	\$0	\$0
Glenn Hildebrand MPH Public Health Institute 555 12th Street 10th Floor Oakland CA 94607	Board Member	\$0	\$0	\$0
Margaret H Jordan, RN, MPH Public Health Institute 555 12th Street, 10th Floor Oakland CA 94607	Board Member	\$0	\$0	\$0
Diane Littlefield MPH Public Health Institute 555 12th Street, 10th Floor Oakland CA 94607	Board Member	\$99,483	\$19,871	\$0
Henry J Ongerth PE, MPH Public Health Institute 555 12th Street, 10th Floor Oakland CA 94607	Board Member	\$0	\$0	\$0
Robert O Valdez PhD Public Health Institute 555 12th Street 10th Floor Oakland CA 94607	Board Member	\$0	\$0	\$0
Antronette K Yancey MD MPH Public Health Institute 555 12th Street 10th Floor Oakland CA 94607	Board Member	\$0	\$0	\$0
Joseph Hafey Public Health Institute 555 12th Street 10th Floor Oakland CA 94607	President & CEO	\$278,544	\$36,594	\$4,364

Carmen Nevarez MD Public Health Institute 555 12th Street, 10th Floor Oakland, CA 94607	VP External Affairs & Medical Officer	\$109,028	\$20,684	\$2,234
James Simpson Public Health Institute 555 12th Street, 10th Floor Oakland CA 94607	General Counsel	\$184,725	\$34,526	\$1,380
Donna Sofaer Public Health Institute 555 12th Street 10th Floor Oakland CA 94607	VP Development Fundraising & Communications	\$106,381	23951	\$0
Bob Wolfson Public Health Institute 555 12th Street 10th Floor Oakland CA 94607	VP Operation & COO	\$177,299	33497	\$0
	Total	\$955,481	\$169,123	\$7,978

**PUBLIC HEALTH INSTITUTE
FIVE HIGHEST PAID EMPLOYEES PAID > \$50,000
FOR THE YEAR ENDED DECEMBER 31, 2002**

**STATEMENT 6
94-1646278**

**FORM 990, SCHEDULE A
PART 1**

	TITLE & HOURS DEVOTED PER WEEK	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCOUNT & OTHER ALLOWANCES
Thomas K. Greenfield Public Health Institute 555 12th Street, 10th Floor Oakland, CA 94607	Research Program Director II 40 hours per week	\$142,863	\$25,472	\$2,225
Cheryl Cheripitel Public Health Institute 555 12th Street, 10th Floor Oakland, CA 94607	Research Program Director II 40 hours per week	\$127,725	\$23,407	\$2,627
Maria Casey Public Health Institute 555 12th Street, 10th Floor Oakland, CA 94607	Program Director III 40 hours per week	\$131,120	\$28,129	\$0
Ralph P. McKinnon Public Health Institute 555 12th Street, 10th Floor Oakland, CA 94607	Controller 40 hours per week	\$113,872	\$21,519	\$2,324
Tod M. Engel Public Health Institute 555 12th Street, 10th Floor Oakland, CA 94607	Network Systems Engineer III 40 hours per week	\$114,773	\$23,938	\$0

**PUBLIC HEALTH INSTITUTE
FIVE HIGHEST PAID INDEPENDENT CONTRACTORS
FOR YEAR ENDED DECEMBER 31, 2002**

**STATEMENT 7
94-1646278**

PROFESSIONAL SERVICES, PAID MORE THAN \$50,000

FORM 990, SCHEDULE A, PART II

(a) NAME AND ADDRESS	(b) TYPE OF SERVICE	(c) COMPENSATION
Center for Applied Local Research 5200 Huntington Ave , #200 Richmond, CA 94804	Project Consultants	\$460,189
Brown Miller Communications 1114 Jones St Martinez, CA 94553	Project Consultants	\$386,395
Mariela Communications, LLC 3603 W Hidden Lane, #115 Rolling Hills, CA 90274	Project Consultants	\$301,189
Ogilvy Public Relations Worldwide 2495 Natomas Park Dr , #650 Sacramento, CA 95833	Project Consultants	\$219,783
Steven Aldana, PhD 935 East 900 North Mapleton, UT 84664	Project Consultants	\$218,380