

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

**2002**Open to Public  
InspectionA For the 2002 calendar year, or tax year period beginning **JUL 1, 2002** and ending **JUN 30, 2003**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  
Instruc-  
tions

C Name of organization

**IPAS**

Number and street (or P O box if mail is not delivered to street address)

**300 MARKET STREET**

Room/suite

**200**

City or town, state or country, and ZIP + 4

**CHAPEL HILL, NC 27516**

D Employer identification number

**56-1071085**

E Telephone number

**(919) 967-7052**

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? **N/A** ☐ Yes ☐ No  
(If "No," attach a list)H(d) Is this a separate return filed by an or-  
ganization 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 **WWW.IPAS.ORG**J Organization type (check only one) ☒ 501(c) ( 3 ) (insert no) ☐ 4947(a)(1) or ☐ 527K 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 ▶ **24,049,770.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received						
	a	Direct public support	1a	<b>13,038,779.</b>				
	b	Indirect public support	1b					
	c	Government contributions (grants)	1c	<b>3,360,163.</b>				
	d	Total (add lines 1a through 1c) (cash \$ <b>16,398,942.</b> noncash \$ )	1d	<b>16,398,942.</b>				
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2					
	3	Membership dues and assessments	3					
	4	Interest on savings and temporary cash investments	4	<b>151,517.</b>				
	5	Dividends and interest from securities	5					
	6	a 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						
Revenue	8	a Gross income from sale of capital assets other than inventory	(A) Securities	8a	<b>6,165,291.</b>	(B) Other	8b	<b>75.</b>
	b	Less: cost of sales and sales expenses	8b	<b>6,176,164.</b>	8b	<b>55,965.</b>		
	c	Gain or (loss) (attach schedule)	8c	<b>&lt;10,873.&gt;</b>	8c	<b>&lt;55,890.&gt;</b>		
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	STMT 1		STMT 2		8d	<b>&lt;66,763.&gt;</b>
	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	
	10	a Gross sales of inventory, less returns and allowances	10a	<b>1,302,068.</b>				
	b	Less: cost of goods sold	10b	<b>1,010,092.</b>				
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	STMT 3				10c	<b>291,976.</b>	
11	Other revenue (from Part VII, line 103)	11	<b>31,877.</b>					
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	<b>16,807,549.</b>					
Expenses	13	Program services (from line 44, column (B))	13	<b>13,311,330.</b>				
	14	Management and general (from line 44, column (C))	14	<b>2,538,296.</b>				
	15	Fundraising (from line 44, column (D))	15	<b>626,970.</b>				
	16	Payments to affiliates (attach schedule)	16					
	17	Total expenses (add lines 13 and 14, column (A))	17	<b>16,476,596.</b>				
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	<b>330,953.</b>				
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	<b>2,472,390.</b>				
	20	Other changes in net assets or fund balances (attach explanation)	20	<b>50,911.</b>				
	21	Net assets or fund balances at end of year (combine lines 18, 19 and 20)	21	<b>2,854,254.</b>				

LHA For Paperwork Reduction Act Notice, see the separate Instructions

Form 990 (2002)

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2002.06030 IPAS

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SCANNED  
NOV 18 2003

## 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.**

Page 2

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I

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)	22				
cash \$ _____ noncash \$ _____					
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	454,000.	175,000.	174,500.	104,500.
26 Other salaries and wages	26	6,699,528.	5,543,990.	784,409.	371,129.
27 Pension plan contributions	27				
28 Other employee benefits	28	774,901.	487,144.	208,021.	79,736.
29 Payroll taxes	29				
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33	393,433.	276,467.	114,984.	1,982.
34 Telephone	34	376,155.	278,944.	94,800.	2,411.
35 Postage and shipping	35	45,159.	35,952.	7,529.	1,678.
36 Occupancy	36	769,690.	246,929.	522,761.	
37 Equipment rental and maintenance	37	57,094.	45,692.	11,402.	
38 Printing and publications	38	276,700.	270,598.	228.	5,874.
39 Travel	39	2,438,817.	2,324,305.	89,111.	25,401.
40 Conferences, conventions, and meetings	40				
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42	228,620.	10,001.	218,619.	
43 Other expenses not covered above (itemize)					
a _____	43a				
b _____	43b				
c _____	43c				
d _____	43d				
e SEE STATEMENT 6	43e	3,962,499.	3,616,308.	311,932.	34,259.
44 Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	16,476,596.	13,311,330.	2,538,296.	626,970.

**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

What is the organization's primary exempt purpose? ► SEE STATEMENT 7

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 14

(Grants and allocations \$	13,311,330.
----------------------------	-------------

**b**

(Grants and allocations \$

**C**

(Grants and allocations \$

**d**

(Grants and allocations \$

**e Other program services (attach schedule)**

(Grants and allocations \$

**f Total of Program Service Expenses (should equal line 44, column (B), Program services)**

▶ 13,311,330.

**Part IV** Balance Sheets

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	3,167,311.	45 2,833,682.
	46 Savings and temporary cash investments	2,575,575.	46 1,241,974.
	47 a Accounts receivable	47a 229,676.	
	b Less allowance for doubtful accounts	47b	47c 229,676.
	48 a Pledges receivable	48a	
	b Less allowance for doubtful accounts	48b	48c
	49 Grants receivable	116,057.	49 484,320.
	50 Receivables from officers, directors, trustees, and key employees		50
	51 a Other notes and loans receivable	51a	
	b Less allowance for doubtful accounts	51b	51c
	52 Inventories for sale or use	482,967.	52 604,077.
	53 Prepaid expenses and deferred charges	27,354.	53 153,185.
	54 Investments - securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54
	55 a Investments - land, buildings, and equipment basis	55a	
	b Less accumulated depreciation	55b	55c
56 Investments - other		56	
57 a Land, buildings, and equipment basis	57a 2,070,097.		
b Less accumulated depreciation <i>STMT 15</i>	57b 896,457.	57c 1,173,640.	
58 Other assets (describe <input type="checkbox"/> SEE STATEMENT 8 )	217,391.	58 237,813.	
59 Total assets (add lines 45 through 58) (must equal line 74)	8,120,255.	59 6,958,367.	
Liabilities	60 Accounts payable and accrued expenses	755,745.	60 565,742.
	61 Grants payable		61
	62 Deferred revenue	4,780,172.	62 3,467,498.
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable		64b
	65 Other liabilities (describe <input type="checkbox"/> CAPITAL LEASE OBLIGATION )	111,948.	65 70,873.
66 Total liabilities (add lines 60 through 65)	5,647,865.	66 4,104,113.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74		
	67 Unrestricted	2,472,390.	67 2,854,254.
	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)	2,472,390.	73 2,854,254.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	8,120,255.	74 6,958,367.

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 VI Other Information**

	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	X
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	X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a 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	X
b If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a Enter direct or indirect political expenditures. See line 81 instructions	81a	0.
b Did the organization file Form 1120-POL for this year?	81b	X
82 a 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	X
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	N/A
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A
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	85c	N/A
d Section 162(e) lobbying and political expenditures	85d	N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
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	N/A
86 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12	86a	N/A
b Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87 501(c)(12) organizations Enter a Gross income from members or shareholders	87a	N/A
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A
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	X
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0.</u> , section 4912 <u>0.</u> , section 4955 <u>0.</u>		
b 501(c)(3) and 501(c)(4) organizations 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	X
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d Enter Amount of tax on line 89c, above, reimbursed by the organization		0.
90 a List the states with which a copy of this return is filed	90a	NONE
b Number of employees employed in the pay period that includes March 12, 2002	90b	219
91 The books are in care of <u>TERRY KOMINSKI</u> Telephone no <u>(919) 967-7052</u>		

Located at 300 MARKET STREET, SUITE 200, CHAPEL HILL, NCZIP + 4 2751692 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

N/A

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

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a					
b					
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	151,517.	
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			18	<66,763.>	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					291,976.
103 Other revenue					
a MISCELLANEOUS					31,877.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		84,754.	323,853.
105 Total (add line 104, columns (B), (D), and (E))					408,607.

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)

SEE STATEMENT 12

**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
N/A	%			
	%			
	%			
	%			

**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).

I am preparing this return and accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and I am not aware of any information of which preparer has any knowledge.

1/3/03

TERENCE S. KOMINSKI, TREASURER

Type or print name and title

Date

Check if

Preparer's SSN or PTIN

**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

**2002**

Name of the organization

IPAS

Employer identification number

56 1071085

**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
EUNICE BROOKMAN ----- 300 MARKET STREET, CHAPEL HILL, NC	37.5	102,600.	4,104.	
NADINE GASMAN ----- 300 MARKET STREET, CHAPEL HILL, NC	37.5	114,500.	4,580.	
ANURADHA KUMAR ----- 300 MARKET STREET, CHAPEL HILL, NC	37.5	105,000.	4,200.	
ANN LEONARD ----- 300 MARKET STREET, CHAPEL HILL, NC	37.5	101,918.	4,077.	
NADINE BURTON ----- 300 MARKET STREET, CHAPEL HILL, NC	37.5	103,678.	4,147.	
Total number of other employees paid over \$50,000 ▶	38			

**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
PATH ----- SEATTLE, WASHINGTON	REDESIGN WORK	52,894.
HUMAN CENTRIC TECHNOLOGIES ----- CARY, NORTH CAROLINA	REDESIGN WORK	81,971.
MORGAN, LEWIS & BOCKIUS, LLP ----- WASHINGTON DC	LEGAL SERVICES	100,413.
FAMILY CARE INT'L ----- NEW YORK, NEW YORK	CONSULTANTS	82,709.
POYNER & SPRUILL ----- RALEIGH, NORTH CAROLINA	LEGAL SERVICES	51,697.
Total number of others receiving over \$50,000 for professional services ▶	0	

**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 ► \$ \_\_\_\_\_ \$ \_\_\_\_\_ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B)

1 X

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?

2a X

b Lending of money or other extension of credit?

2b X

c Furnishing of goods, services, or facilities?

2c X

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V, FORM 990

2d X

e Transfer of any part of its income or assets?

2e X

- 3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below)

3 X

- 4 Do you have a section 403(b) annuity plan for your employees?

4 X

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.)	14,224,594.	15,976,774.	9,117,823.	7,079,960.	46,399,151.
16 Membership fees received					
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	862,465.	1,301,393.	1,116,069.	1,257,671.	4,537,598.
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	282,796.	369,578.	175,918.	163,336.	991,628.
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.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	32,535.	24,726.	32,741.	37,009.	127,011.
23 Total of lines 15 through 22	15,402,390.	17,672,471.	10,442,551.	8,537,976.	52,055,388.
24 Line 23 minus line 17	14,539,925.	16,371,078.	9,326,482.	7,280,305.	47,517,790.
25 Enter 1% of line 23	154,024.	176,725.	104,426.	85,380.	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				
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 sum of all these excess amounts.					
c Total support for section 509(a)(1) test. Enter line 24, column (e).					
d Add Amounts from column (e) for lines	18	991,628.	19		
	22	127,011.	26b	29,559,065.	
e Public support (line 26c minus line 26d total)					
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					
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					
e Public support (line 27c total minus line 27d total)					
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e).					
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					
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.					

NONE

Schedule A (Form 990 or 990-EZ) 2002

**Part V Private School Questionnaire** (See page 7 of the instructions )

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

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?

Yes No

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?

31

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?

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?

32d

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?

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?

33h

If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )

34 a 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?

34b

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

35

Schedule A (Form 990 or 990-EZ) 2002

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions )

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check ☒ a ☐ if the organization belongs to an affiliated groupCheck ☐ 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
	N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38 Total lobbying expenditures (add lines 36 and 37)	38	
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 -		
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	
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				N/A
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

**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 )

N/A

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

- 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 )

Yes	No	Amount
		0.

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



FORM 990	GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES	STATEMENT	1
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DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
VARIOUS INVESTMENTS	6,165,291.	6,176,164.	0.	<10,873.>
TO FORM 990, PART I, LINE 8	6,165,291.	6,176,164.	0.	<10,873.>

FORM 990	GAIN (LOSS) FROM SALE OF OTHER ASSETS	STATEMENT	2
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DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED		
VARIOUS FIXED ASSETS	VARIOUS	VARIOUS	PURCHASED		
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	75.	173,147.	0.	117,182.	<55,890.>
TO FM 990, PART I, LN 8	75.	173,147.	0.	117,182.	<55,890.>

FORM 990

INCOME AND COST OF GOODS SOLD  
INCLUDED ON PART I, LINE 10

STATEMENT 3

INCOME

1. GROSS RECEIPTS . . . . .	1,302,068	
2. RETURNS AND ALLOWANCES . . . . .		
3. LINE 1 LESS LINE 2 . . . . .		1,302,068
4. COST OF GOODS SOLD (LINE 13) . . . . .	1,010,092	
5. GROSS PROFIT (LINE 3 LESS LINE 4) . . . . .		291,976

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR . . . . .	482,967	
7. MERCHANDISE PURCHASED . . . . .		
8. COST OF LABOR . . . . .		
9. MATERIALS AND SUPPLIES . . . . .		
10. OTHER COSTS . . . . .	1,131,202	
11. ADD LINES 6 THROUGH 10 . . . . .		1,614,169
12. INVENTORY AT END OF YEAR . . . . .	604,077	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12). .		1,010,092

FORM 990	COST OF GOODS SOLD - OTHER COSTS	STATEMENT	4
DESCRIPTION		AMOUNT	
MATERIAL COSTS		1,066,692.	
FREIGHT		58,169.	
STERILIZATION		6,341.	
TOTAL INCLUDED ON FORM 990, PART I, LINE 10B		1,131,202.	

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	5
DESCRIPTION		AMOUNT	
UNREALIZED GAIN ON MARKETABLE SECURITIES		43,775.	
FOREIGN TRANSLATION ADJUSTMENT		7,136.	
TOTAL TO FORM 990, PART I, LINE 20		50,911.	

FORM 990	OTHER EXPENSES			STATEMENT	6
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING	
INSURANCE	71,102.	31,823.	39,279.		
CONSULTANTS & TEMPORARY SERVICES	2,837,383.	2,767,065.	43,466.	26,852.	
UTILITIES	29,671.	29,671.			
CLEANING	30,844.	30,594.	250.		
DUES AND SUBSCRIPTIONS	36,909.	27,168.	3,322.	6,419.	
PROGRAM EQUIPMENT	486,634.	483,955.	2,055.	624.	
SAMPLES	23,332.	23,332.			
MISCELLANEOUS	89,703.	60,871.	28,690.	142.	
EDUCATIONAL MATERIAL	114,261.	114,003.	36.	222.	
ADVERTISING	58,583.	45,813.	12,770.		
STAFF DEVELOPMENT	67,816.	21,802.	46,014.		
PROFESSIONAL FEES	294,580.	159,335.	135,245.		
LOSS ON CURRENCY EXCHANGE RATES	913.	108.	805.		
SECURITY	7,273.	7,273.			
SITE STAFF	6,821.	6,821.			
BAD DEBT	17,268.	17,268.			
ALLOCATION TO OTHER DEPARTMENTS	<210,594.>	<210,594.>			
TOTAL TO FM 990, LN 43	3,962,499.	3,616,308.	311,932.	34,259.	



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FORM 990	STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III	STATEMENT	7
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## EXPLANATION

EDUCATE THE PUBLIC & PROMOTE & SUPPORT THE EXTENSION OF REPRODUCTIVE HEALTH SERVICES & ESTABLISH STANDARDS FOR THE PROVISION OF THESE SERVICES.

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FORM 990	OTHER ASSETS	STATEMENT	8
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## DESCRIPTION

## AMOUNT

CASH SURRENDER VALUE LIFE INSURANCE	96,941.
MISCELLANEOUS RECEIVABLES	140,872.
INTEREST RECEIVABLE	0.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	237,813.

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FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT	9
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## DESCRIPTION

## AMOUNT

COST OF GOODS SOLD	1,010,092.
LOSS ON DISPOSAL OF ASSETS	55,890.
TOTAL TO FORM 990, PART IV-A	1,065,982.

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FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	10
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## DESCRIPTION

## AMOUNT

COST OF GOODS SOLD	1,010,092.
LOSS ON DISPOSAL OF ASSETS	55,890.
TOTAL TO FORM 990, PART IV-B	1,065,982.

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FORM 990

PART V - LIST OF OFFICERS, DIRECTORS,  
TRUSTEES AND KEY EMPLOYEES

STATEMENT 11

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ELIZABETH S. MAGUIRE 300 MARKET STREET CHAPEL HILL, NC 27516	PRESIDENT 37.5 HRS	139,000.	5,560.	0.
TERRENCE KOMINSKI 300 MARKET STREET CHAPEL HILL, NC 27516	TREASURER 37.5 HRS	105,000.	4,200.	0.
BARBARA CRANE 300 MARKET STREET CHAPEL HILL, NC 27516	VICE-PRESIDENT 37.5 HRS	105,000.	4,200.	0.
MARY LUKE 300 MARKET STREET CHAPEL HILL, NC 27516	SECRETARY 37.5 HRS	105,000.	4,200.	0.
MARIE BASS 300 MARKET STREET CHAPEL HILL, NC 27516	BOARD MEMBER 1 HR	0.	0.	0.
JANE BERTRAND, PHD 300 MARKET STREET CHAPEL HILL, NC 27516	BOARD MEMBER 1 HR	0.	0.	0.
MABEL BIANCO, MD 300 MARKET STREET CHAPEL HILL, NC 27516	BOARD MEMBER 1 HR	0.	0.	0.
PAUL BLUMENTHAL, MD, MPH 300 MARKET STREET CHAPEL HILL, NC 27516	BOARD MEMBER 1 HR	0.	0.	0.
DILYS COSSEY 300 MARKET STREET CHAPEL HILL, NC 27516	BOARD MEMBER 1 HR	0.	0.	0.
ANGELA J SAWYERR-KAMARA 300 MARKET STREET CHAPEL HILL, NC 27516	BOARD MEMBER 1 HR	0.	0.	0.
GORDON DUNCAN, PHD 300 MARKET STREET CHAPEL HILL, NC 27516	BOARD MEMBER 1 HR	0.	0.	0.

MAHMOUD FATHALLA, MD 300 MARKET STREET CHAPEL HILL, NC 27516	BOARD MEMBER 1 HR	0.	0.	0.
NICKI NICHOLS GAMBLE, ED.D 300 MARKET STREET CHAPEL HILL, NC 27516	CHAIRMAN OF BOARD 2 HR	0.	0.	0.
DONALD COLLINS 300 MARKET STREET CHAPEL HILL, NC 27516	BOARD MEMBER 1 HR	0.	0.	0.
FRED NUNES, MPA,PHD,LLB 300 MARKET STREET CHAPEL HILL, NC 27516	BOARD MEMBER 1 HR	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		454,000.	18,160.	0.

FORM 990      PART VIII - RELATIONSHIP OF ACTIVITIES TO      STATEMENT 12  
ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
102	PRODUCES AND DISTRIBUTES MEDICAL DEVICES OF A QUALITY NOT READILY AVAILABLE. THE DEVICES ARE PARTICULARLY SUITED FOR USE IN FIELD OPERATIONS AND REPRODUCTIVE HEALTH CARE PROGRAMS IN DEVELOPING COUNTRIES.
103	REFUNDS OF SALES TAX AND OTHER MISCELLANEOUS REVENUES

SCHEDULE A	OTHER INCOME				STATEMENT 13
DESCRIPTION	2001 AMOUNT	2000 AMOUNT	1999 AMOUNT	1998 AMOUNT	
OTHER INCOME	32,535.	24,726.	32,741.	37,009.	
TOTAL TO SCHEDULE A, LINE 22	32,535.	24,726.	32,741.	37,009.	

**IPAS**  
**ID No. 56-1071085**  
**6/30/03**

**STATEMENT 14**

Program Management and Field Operations – Funding provided for project development in countries to assess the quality and scope of reproductive health care and the need for an IPAS training project or research initiative. Oversight of training programs in developing nations, educating health professionals in appropriate reproductive health techniques and family planning counseling, training projects in developing countries worldwide.

Health Systems Research – Assists local researchers and investigators in executing research initiatives, design and implementing appropriate evaluation strategies; documenting the impact of IPAS training programs and the effect of introducing new reproductive health techniques

Instructional Development – Providing curriculums, instructional and educational materials, technical assistance and evaluation methods to training sites, tailoring the training programs to the particular needs of the individual health care facility; production of publications and maintaining resource documents pertaining to reproductive health.

IPAS  
 EIN# 56-1071085  
 SCHEDULE 15  
 6/30/03

Description	Balance 6/30/2002	Additions	Deletions	Balance 6/30/2003
Office Equip't	\$ 918,282.42	\$ 77,683.55	\$ (65,821.37)	\$ 930,144.60
Warehouse Equip't	143,094.18	4,900.00	(21,428.40)	126,565.78
Leaseholds-Warehse	85,896.92	-	(85,896.92)	-
Leaseholds-Office Carr.	257,809.35	-	-	257,809.35
Leaseholds-Office SV	<u>739,214.52</u>	<u>16,362.50</u>	<u>-</u>	<u>755,577.02</u>
Total PP&E	2,144,297.39	98,946.05	(173,146.69)	2,070,096.75
Accum. Deprec	(785,023.35)	(228,615.16)	117,181.74	(896,456.77)
Net	<u>\$ 1,359,274.04</u>			<u>\$ 1,173,639.98</u>