

ANNUAL REPORT

For Non-Government Organizations Registered in Kosovo

In respect of the financial period ending 31 December 2003

Pursuant to UNMIK Regulation 2000/10, all NGOs registered with UNMIK and who have been further granted public benefit status shall file an Annual Report. Please ensure the details you provide below are accurate and complete. Any incomplete or inaccurate Report will be returned for correction.

Part I Management and Administration

(A) This report is filed by:

| | |
|---------------------------------------------------------------------------------------------|------------------------------------------|
| Name of Organization and acronym, if any IPKO | Telephone Number 381-38-244-264 |
| Address National and University Library, 4 th Floor, Prishtina, Kosova 380000 | Facsimile Number 381-38-244-265 |
| | E-mail Address info@ipkoinstitute.org |

(B) This Organization is: a Foundation an Association
 an International Organization

(C) What is the name and title of the Organization's Chief Executive Officer?

| | |
|----------------------------------------------------|---------------------------------------------|
| Name of Chief Executive Officer: Samuel Johnson | Title (if different): Executive Director |
|----------------------------------------------------|---------------------------------------------|

(D) What is the name of each member of the Organization's Board of Directors?

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|-----------------------------|----------------------|-----------------------|
| 1. Fron Nazi (Chairman) | 2. Akan Ismaili | 3. Teresa Crawford |
| 4. Bujar Musa | 5. Sanna Johnsson | 6. Paul Meyer |
| 7. | 8. | 9. |
| 10. | 11. | 12. |

Check here if the Organization does not have a Board of Directors.

(E) What is the name and title of each officer of the Organization?

| | |
|------------------------|--------------------------------|
| Name Samuel Johnson | Position Executive Director |
| Name Fron Nazi | Position Chairman |
| Name Bashkim Uka | Position Financial Officer |
| Name | Position |
| Name | Position |

Part II Report on Activities and Achievements

(A) What is the Organization's mission as set forth in its statutes?

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| The IPKO Institute's mission is to help provide the tools, knowledge, and environment required for Kosova to participate in the global information society. |
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(B)(1) What are the Organization's major programs?

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| CISCO Regional Academy |
| Internet Connectivity Program |
| NGO2NGO |
| The IPKO Institute Management Program |
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(B)(2) What activities does the Organization engage in to implement the programs in (B)(1), above?

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| The organization aspires to assist those individuals seeking education and training in computer technologies. We have an open door policy where individuals can inquire about our programs and visit our facilities. |
| Our CISCO Academy and training follows the regulations and guidelines set forth by CISCO. |
| Our Management program runs in partnership with the Swedish School for New Media Management—Hyper Island sponsored by Olof Palme International Center. This is the second year this program is being run. |
| Our Internet Connectivity Program grants free internet connections to deserving organizations where they can use technology to better achieve their missions and goals. |

- (E) Did the Organization participate in any financial transactions with its officers, directors, employees, or their family members? Yes No

If you checked yes, please identify each such transaction in the space below. You should state the name and position of the person who engaged in such transaction; what funds or benefits the Organization received in the transaction; what funds or benefits the person received in the transaction; and any other information that explains the nature of the transaction.

If you checked no, you are required to complete the certification on page 7.

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- (F) Did the Organization engage in any financial transactions with Organizations with which it is affiliated? Yes No

If you checked yes, please identify each such transaction in the space below. An affiliated Organization is one with which the NGO, its directors, officers, staff, or their relatives have an ownership or management interest. You should state the name and address of the affiliated Organization; the nature of the relationship between the Organizations; what funds or benefits the NGO received in the transaction, what funds or benefits the affiliated Organization received in the transaction; and any other information that explains the nature of the transaction.

If you checked no, you are required to complete the certification on page 7.

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I. Part III Financial Statements

II.

For the period ending December 31, 2003

Balance Sheet

| Assets | | Liabilities | |
|--------------------------------|--------------------------|--------------------------------------------|--------------------------|
| | <i>Enter amount here</i> | | <i>Enter amount here</i> |
| Cash | 51,134.52 | Accounts Payable | 3,849.00 |
| Accounts Receivable | 151,430.11 | Grants Payable | |
| Notes receivable | | Deferred Revenue | 198,246.45 |
| Inventory | | Mortgages and other Notes payable | |
| Investments | 196,460.84 | Other liabilities | |
| Securities | | Total Liabilities: | 202,095.45 |
| Land, buildings, and equipment | | | |
| Other | | Fund Balance: | |
| Land, buildings, and equipment | 209,744.50 | Fund balance as of 01 January 200200. | 1,108,930.09 |
| Other assets | 632,460.22 | Excess (from income statement) | (69,795.35) |
| | | Total Balance: | 1,039,134.74 |
| | | | |
| Total Assets: | 1,241,230.19 | Total Liabilities and Fund Balance: | 1,241,230.19 |

Income Statement

| Revenue | | Expenses | |
|--------------------------------------------|--------------------------|------------------------------------|--------------------------|
| | <i>Enter amount here</i> | | <i>Enter amount here</i> |
| Contributions, gifts or grants | 321,600.59 | Program services | 431,693.27 |
| Fees and revenues from economic activities | 142,941.32 | Management and Administration | 118,347.60 |
| Dues | | Other Expenses | 29,102.00 |
| Dividends and interest | | Total Expenses: | 579,142.87 |
| Rents | | Net Income from Operations: | (69,795.35) |
| Other investment income | | | |
| Sale of assets | | | |
| (less cost of sales) | | Taxes | |
| Special event revenue | | | |
| Gross sales of inventory | | | |
| (less cost of goods sold) | | | |
| Other revenue | 44,805.61 | | |
| Total Revenue: | 509,347.52 | Net Income: | (69,795.35) |

Schedule A

This schedule is to be completed only by Organizations engaged in public benefit activities in the fields of education, health, or economic development.

X Check this box if the Organization is engaged in public benefit activities in the fields of education or health.

(If you checked this box, please complete questions 1 and 2, and the certification in question 3.)

(1) Name the disadvantaged groups or individuals that the Organization serves?

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| We serve all those who wish to take courses. |
| IPKO also assists deserving local NGO's and different schools with Free Connections to the Internet. |
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(2) List the goods, services or other benefits are provided to the groups or individuals identified in response to question 2, above?

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| Deserving NGO's or different schools can apply for a free connection and if they are awarded the free connection, they receive 12 months worth of free broad bank activity. |
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(3) *Check one:*

X I hereby certify that the goods, services, or other benefits described in response to question 3 are provided at no cost to the Organization.

 I hereby certify that the goods, services, or other benefits described in response to question 3 are provided at less than fair market value.

If you checked this box, please explain in the space below what was the price charged for the benefits, and how you determined that the price was below market value.

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- Check this box if the Organization engages in public benefit activities in the field of economic development.

(If you checked the box, please answer question 4, below).

- (4) Name the disadvantaged groups or individuals the Organization serves?

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The statements contained in this Schedule A are true and correct.

Samuel Johnson

Print or type name of authorized representative

Signature of authorized representative

March 31, 2004

Date

Schedule B

This schedule is only to be completed if the Organization was dissolved during the period ending December 31, 2003.

Check here if the Organization was dissolved during the period from registration through June 30, 2003.

Check here if this is the final Annual Report to be filed by the Organization.

(1) What was the date of dissolution? _____.

(2) The name and contact information of the liquidator are:

| | |
|---------|------------------|
| Name | Telephone Number |
| Address | Facsimile Number |
| | Email Address |

(3) What provisions were made for winding up the Organization's affairs?

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(4) What is the amount of net assets that the Organization holds following the winding up of its affairs?

- (5) How did the Organization dispose of its funds and/or assets identified in response to question 4, above?

If funds were transferred to another NGO, please provide the name of the NGO, its registration number, the name and contact information of the NGO's authorized representative, and the date of the transfer.

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- (6) Disposing of the Organization's assets was (*check one*):

- in accordance with the provisions of the Organization's statutes;
 by a vote of the Organization's highest governing body; or
 organized by UNMIK.

- (7) Please attach a copy of the liquidator's final report.

The statements contained in this Schedule B are true and correct.

Samuel Johnson

Print or type name of authorized representative

Signature of authorized representative

March 31, 2004

Date