Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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.

Open to Public Inspection

| A F | or th | e 201 | 1 calendar year, or tax year beginning 10/01, 2011, | and ending | 09/ | 30, 20 12 |
|-----------------------------|---------------|------------|---|----------------------|---|----------------------------|
| _ | | | C Name of organization | | D Employer identifica | tion number |
| B C | neck if ap | oplicable: | THE FOUNDATION FOR AIDS RESEARCH | | | |
| | Addre | ess je | Doing Business As AMFAR | | 13-3163817 | |
| | Name | change | Number and street (or P.O. box if mail is not delivered to street address) | Room/suite | E Telephone number | |
| | Initia | return | 120 WALL STREET 13TH FLOOR | | (212) 806-16 | 500 |
| | Term | inated | City or town, state or country, and ZIP + 4 | | | |
| | Amer | | NEW YORK, NY 10005-3908 | | G Gross receipts \$ | 44,785,693. |
| | | cation | F Name and address of principal officer: KEVIN FROST | | H(a) Is this a group return affiliates? | for Yes X No |
| | | 5 | 120 WALL STREET 13TH FLOOR NEW YORK, NY 100 | 05 | H(b) Are all affiliates inclu | ded? Yes No |
| ı | Tax-ex | empt sta | atus: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or | r 527 | If "No," attach a list. | (see instructions) |
| J | Websi | te: 🕨 | WWW.AMFAR.ORG | | H(c) Group exemption nur | mber > |
| K | Form | of organ | ization: X Corporation Trust Association Other | L Year of fo | rmation: 1983 M State o | f legal domicile: NY |
| Pa | rt I | Sur | mmary | • | | |
| | 1 | Briefly | describe the organization's mission or most significant activities: | | | |
| • | | AMF | AR IS DEDICATED TO ENDING THE GLOBAL AIDS EPI | DEMIC TH | ROUGH | |
| ü | | | OVATIVE RESEARCH. | | | |
| Governance | | | | | | |
| ŏ | 2 | Check | this box F if the organization discontinued its operations or disposed | of more than | 25% of its net assets. | |
| ⊛ ≪ | 3 | Numb | er of voting members of the governing body (Part VI, line 1a) | | 3 | 20. |
| ies | 4 | Numb | er of independent voting members of the governing body (Part VI, line 1b) | | 4 | 20. |
| Activities | 5 | Total | number of individuals employed in calendar year 2011 (Part V, line 2a) | | 5 | 90. |
| Act | 6 | | number of volunteers (estimate if necessary) | | | 138. |
| | 7 a | Total | gross unrelated business revenue from Part VIII, column (C), line 12 | | 7a | 0 |
| | | | nrelated business taxable income from Form 990-T, line 34 | | | 0 |
| | | | | | Prior Year | Current Year |
| ø | 8 | Contri | butions and grants (Part VIII, line 1h) | | 31,689,016. | 33,247,849. |
| Revenue | 9 | Progra | am service revenue (Part VIII, line 2g) PUBLIC INSI | FOR | 0 | C |
| ě | 10 | Invest | ment income (Part VIII, column (A), lines 3, 4, and 7d) | PECTION | 885,610. | 1,178,972. |
| œ | 11 | | revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | -5,259,666. | -7,234,513. |
| | 12 | | revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 27,314,960. | 27,192,308. |
| | 13 | Grants | s and similar amounts paid (Part IX, column (A), lines 1-3) | | 6,694,401. | 8,086,344. |
| | 14 | Benef | its paid to or for members (Part IX, column (A), line 4) | | 0 | C |
| Ś | 15 | Salari | es, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 8,447,012. | 8,864,151. |
| Expenses | 16a | | | | 403,813. | 491,117. |
| xbe | b | Total t | ssional fundraising fees (Part IX, column (A), line 11e) fundraising expenses (Part IX, column (D), line 25) | | | |
| Ш | 17 | Other | expenses (Part IX, column (A), lines 11a-11d, 11f-24f) | | 10,565,187. | 11,261,191. |
| | 18 | | expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | | 26,110,413. | 28,702,803. |
| | 19 | Reven | ue less expenses. Subtract line 18 from line 12 | | 1,204,547. | -1,510,495. |
| Net Assets or Fund Balances | | | | В | eginning of Current Year | End of Year |
| sets | 20 | Total a | assets (Part X, line 16) | | 38,004,314. | 40,388,195. |
| A Ba | 21 | Total I | iabilities (Part X, line 26) | | 6,564,229. | 9,636,091. |
| 돌 | 22 | | ssets or fund balances. Subtract line 21 from line 20 | | 31,440,085. | 30,752,104. |
| | rt II | | gnature Block | | | |
| | | | f perjury, I declare that I have examined this return, including accompanying schedules ar blete. Declaration of preparer (other than officer) is based on all information of which prep | | | ge and belief, it is true, |
| | 1001, 01 | 10 001115 | roce. Decidation of property (ether than emotify to beside on an information of which prop | parer riae arry kiri | lowicago. | |
| | ign | | | | | |
| Н | ere | | Signature of officer | | Date | |
| | | | | | | |
| | | | Type or print name and title | | | |
| D-: | | Print/ | Type preparer's name Preparer's signature | Date | Check if self- | PTIN |
| Paid | | | | | employed > | P00741790 |
| | oarer Only | Firm's | name > GRANT THORNTON LLP | | | 055558 |
| | | Firm's | address ► 666 THIRD AVENUE NEW YORK, NY 10017 | | | -599-0100 |
| May | the I | RS dis | cuss this return with the preparer shown above? (see instructions) | | | X Yes No |

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2010)

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| Briefly describe the organization's m ATTACHMENT 1 | ission: | |
|--|--|--|
| | | |
| | significant program services during the year w | |
| prior Form 990 or 990-EZ? If "Yes," describe these new services | s on Schedule O. | Yes X I |
| Did the organization cease cond | ucting, or make significant changes in how | |
| If "Yes," describe these changes on | Schedule O. | |
| expenses. Section 501(c)(3) and | am service accomplishments for each of its th 501(c)(4) organizations and section 4947(a)(1 total expenses, and revenue, if any, for each pro- |) trusts are required to report the amount |
| a (Code:) (Expenses \$ | | 016.) (Revenue \$) |
| | S RESEARCH PROJECTS THAT EXPLORE CALLY SOUND BUT UNTESTED HYPOTHES | |
| | //AIDS, FUNDING GOAL-ORIENTED STU | |
| | ARY DATA REQUIRED FOR SUPPORT FRO | |
| 1 | S. THE FOUNDATION PLAYS A VITAL E | |
| HIV/AIDS RESEARCH, IDENT | FIFYING CRITICAL GAPS IN KNOWLEDG | GE AND |
| PROVIDING ESSENTIAL SEED | MONEY THAT ENABLES GRANTEES AND | O FELLOWS |
| TO TEST THE MERITS OF NE | EW CONCEPTS OR TECHNOLOGIES THAT | |
| | DATED THROUGH LARGE-SCALE STUDIE | |
| | ONAL INSTITUTES OF HEALTH. FOR I | FURTHER |
| DETAILS, SEE SCHEDULE O. | , | |
| h (Cada: \(\sigma\) (Funances th | in alluding grants of C | \ |
| b (Code:) (Expenses \$ | 5,740,184. including grants of \$ 2,721, AT ASIA PROGRAM (THERAPEUTICS RES | |
| | INING IN ASIA) INVOLVES A NETWORK | |
| | RESEARCH INSTITUTIONS WORKING W | |
| | AFE AND EFFECTIVE DELIVERY OF HIV | |
| | AND THE PACIFIC. THE TREAT ASIA N | |
| | 21 PEDIATRIC SITES THROUGHOUT | |
| | ARIETY OF PROJECTS. FOR FURTHER | · · · · · · · · · · · · · · · · · · · |
| SEE SCHEDULE O. | | |
| | | |
| c (Code:) (Expenses \$ | 3,138,663. including grants of \$ | o) (Revenue \$ o) |
| EDUCATION AND INFORMATION | ON: AMFAR SEEKS TO TRANSLATE AND | |
| | ON IMPORTANT AIDS-RELATED RESEAR | • |
| <u></u> | AND POLICY ISSUES FOR DIVERSE AU | |
| | ENESS OF THE NEED FOR BETTER TREA | |
| | AR ALSO PUBLISHES A WIDE RANGE OF | |
| | MAINTAINS AN INFORMATIVE WEBSITE, | |
| | C FIGURES, HIV/AIDS SCIENTISTS, A | |
| 1 | THE NEED FOR CONTINUED RESEARCH | |
| AIDS. FOR FURTHER DETAIL | DN, TREATMENT, AND, ULTIMATELY, A LS, SEE SCHEDULE O. | A CURE FOR |
| | | |
| | n Schedule O.) ATTACHMENT 2 | |
| | ing grants of \$ 1,384,460.) (Revenue \$ | 0) |
| e Total program service expenses 🕨 | 21,827,940. | |
| | | |
| 1.000 76004W 700J | V 11-6.5 | Form 990 (2 0176982-00003 PA |

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Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Х 1 Х 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Χ 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Х 4 election in effect during the tax year? If "Yes," complete Schedule C, Part II................................. Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Х 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Χ 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Χ the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Х Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," Χ 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted Х endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Х Schedule D, Part VI 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more Х of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more Х of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets Х reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 11d 11e e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Х 11f the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," Х b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if Х 12b Χ 13 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Х 14a Did the organization maintain an office, employees, or agents outside of the United States?.......... b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate Х foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any Х 15 organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance Χ 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services Х 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Х Χ **b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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Checklist of Required Schedules (continued) Part IV Yes No 21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization Х 21 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States Χ on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated Х employees? If "Yes," complete Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction Χ with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? Х 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 Х disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II. 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled Х entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L. 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): Χ a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b Χ c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) Χ 28c was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Х 29 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Χ 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Χ 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 Χ Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Χ 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, Χ IV, and V, line 1 34 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? Χ b Did the organization receive any payment from or engage in any transaction with a controlled entity within the Х meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 Х related organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Χ 37 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and Х

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Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V................ 98 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable ________1b c Did the organization comply with backup withholding rules for reportable payments to vendors and Х reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . 2a X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial Х account)? 4a **b** If "Yes," enter the name of the foreign country: ▶ THAILAND See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Х 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Χ 5b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the Х organization solicit any contributions 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? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods Х and services provided to the payor? 7 a Х b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Х 7с Χ e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand _______13c Х 14a Did the organization receive any payments for indoor tanning services during the tax year?

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14b

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

| Check if Schedule O contains a response to any question in this Part VI | X | |
|---|---|--|

| Soci | tion A. Governing Body and Management | • • • | • | Λ |
|-------|--|----------|-------|--------|
| Seci | tion A. Governing body and management | | Yes | No |
| 4. | Enter the number of voting members of the governing body at the end of the tay year. If there are | | 103 | 140 |
| 1a | Enter the number of voting members of the governing body at the end of the tax year. If there are | | | |
| | material differences in voting rights among members of the governing body, or if the governing body | | | |
| h | delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent | | | |
| b | Enter the humber of voting members included in line 1a, above, who are independent | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | | х |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct | _ | | |
| 3 | supervision of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | Х |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | | Х |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | | | Х |
| 6 | Did the organization have members or stockholders? | | | Х |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint | | | |
| , , | one or more members of the governing body? | 7a | | Х |
| h | Are any governance decisions of the organization reserved to (or subject to approval by) members, | | | |
| - | stockholders, or persons other than the governing body? | 7b | | Х |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | | | |
| | the year by the following: | | | |
| а | The governing body? | 8a | X | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Х | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at | | | |
| | the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | X |
| Secti | ion B. Policies (This Section B requests information about policies not required by the Internal Revenue | Code | .) | |
| | | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | Х |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, | | | |
| | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | X | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | ., | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | X | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give | | v | |
| | rise to conflicts? | 12b | Х | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | | Х | |
| | describe in Schedule O how this was done | 12c | X | |
| 13 | Did the organization have a written whistleblower policy? | 13 | X | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by | | | |
| _ | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | 15a | х | |
| a | The organization's CEO, Executive Director, or top management official | 15b | X | |
| b | Other officers or key employees of the organization | . 55 | | |
| 16a | | | | |
| ·ou | with a taxable entity during the year? | 16a | | х |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its | | | |
| - | participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the | | | |
| | organization's exempt status with respect to such arrangements? | 16b | | |
| Sect | ion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ▶_ATTACHMENT_3 | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section | | | nly) |
| | available for public inspection. Indicate how you made these available. Check all that apply. | . / \ | - | |
| | X Own website | | | |
| 19 | Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of | of inter | est p | olicy, |
| | and financial statements available to the public during the tax year. | | - | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of | he | | |
| | Organization: Peradley jensen 120 wall street 13th floor new york, ny 10005-3908 212-806-1703 | | | |

JSA Form **990** (2011)

| Dart VII | |
|----------|--|
| | |

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and **Independent Contractors**

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- · List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A) Name and Title | (B) Average hours per | l ' | not ch | | ition more | e than o | | (D) Reportable compensation from | (E) Reportable compensation from | (F) Estimated amount of other |
|--------------------------------------|------------------------------------|--------------------------------|-----------------------|---------|---------------|------------------------------|--------|----------------------------------|----------------------------------|--|
| | week (describe | | | | | is both | | the | related organizations | compensation |
| | hours for related | | er and | | | or/trust | | organization | (W-2/1099-MISC) | from the |
| | organizations in Schedule O) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | (W-2/1099-MISC) | | organization and related organizations |
| (1) MATHILDE KRIM, PH.D. | | | | | | | | | | |
| FOUNDING CHAIRMAN | 1.00 | Х | | х | | | | 0 | 0 | 0 |
| (2) KENNETH COLE | | | | | | | | | | |
| CHAIRMAN OF THE BOARD | 1.00 | х | | х | | | | 0 | 0 | 0 |
| (3) PATRICIA J. MATSON | | | | | | | | | | |
| VICE CHAIRMAN | 1.00 | Х | | Х | | | | o | 0 | 0 |
| (4) JOHN C. SIMONS | | | | | | | | | | |
| VICE CHAIRMAN | 1.00 | Х | | Х | | | | o | 0 | 0 |
| (5) WALLACE SHEFT, C.P.A. | | | | | | | | | | |
| TREASURER | 1.00 | Х | | Х | | | | 0 | 0 | 0 |
| (6) MERVYN F. SILVERMAN, M.D., M.E | . н | | | | | | | | | |
| SECRETARY | 1.00 | X | | Х | | | | 0 | 0 | 0 |
| (7) ARLEN H. ANDELSON | | | | | | | | | | |
| TRUSTEE | 1.00 | X | | | | | | 0 | 0 | 0 |
| (8) HARRY BELAFONTE | | | | | | | | | | |
| TRUSTEE (NON-VOTING) | 1.00 | X | | | | | | 0 | 0 | 0 |
| (9) DAVID BOHNETT | | | | | | | | _ | | _ |
| TRUSTEE | 1.00 | Х | | | | | | 0 | 0 | 0 |
| (10) ZEV BRAUN | | | | | | | | | | |
| TRUSTEE (NON-VOTING) | 1.00 | Х | | | | | | 0 | 0 | 0 |
| (11) JONATHAN S. CANNO | 1 00 | | | | | | | | | |
| TRUSTEE | 1.00 | Х | | | | | | 0 | 0 | 0 |
| (12) DONALD CAPOCCIA | 1 00 | ., | | | | | | | | |
| TRUSTEE | 1.00 | Х | | | | | | 0 | 0 | 0 |
| (13) R. MARTIN CHAVEZ, PH.D. TRUSTEE | 1.00 | х | | | | | | 0 | 0 | 0 |
| TRUSTEE (NON-VOTING) | 1.00 | Х | | | | | | 0 | 0 | 0 |
| | • | | | | | | | | | Form QQ0 (2011) |

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| Pa | rt VII Section A. Officers, Directors, Tru | | ey En | тріс | | | and F | ııg | _ | 1 | es (co | ontinue | - | |
|------|---|-----------------------|--------------------------------|-----------------------|---------|---------------|------------------------------|--------|--------------------------------|-------------------------|------------------|---------------|---------------------|-----|
| | (A) | (B) | | | | C) | | | (D) | (E) | | - | (F) | |
| | Name and title | Average hours per | (do | not c | | ition more | e than o | ne | Reportable compensation | Reportable compensation | | | timated rount of | |
| | | week | | | | | is both | | from | related | 110111 | | other | |
| | | (describe | | | | T | or/trust | _ | the | organizatio | ns | | pensatio | on |
| | | hours for | ndi or d | nst | Officer | Key employee | emp | Former | organization | (W-2/1099-M | ISC) | | om the anizatio | 'n |
| | | related organizations | /idu | tutic | er | emp | lest | ner | (W-2/1099-MISC) | | | - | d related | |
| | | in Schedule | or th | onal | | oloy | e com | | | | | orga | anizatior | าร |
| | | O) | Individual trustee or director | Institutional trustee | | Эe | l per | | | | | | | |
| | | | Ф | tee | | | Highest compensated employee | | | | | | | |
| | | | | | | | <u>g</u> | | | | | | | |
| 15) | T. RYAN GREENAWALT | 1 00 | | | | | | | | | | | | • |
| 1.6 | TRUSTEE | 1.00 | Х | | | | | | 0 | | 0 | | | |
| T () | REGAN HOFMANN | | | | | | | | | | | | | _ |
| | TRUSTEE | 1.00 | Х | | | | | | 0 | | 0 | | | 0 |
| 17) | MICHAEL J. KLINGENSMITH | | | | | | | | | | | | | |
| | TRUSTEE | 1.00 | X | | | | | | C | | 0 | | | 0 |
| 18) | MICHELE V. MCNEILL, PHARM.D. | | | | | | | | | | | | | |
| | TRUSTEE (NON-VOTING) | 1.00 | Х | | | | | | 0 | | 0 | | | 0 |
| 19) | RAYMOND F. SCHINAZI, PH.D. | | | | | | | | | | | | | |
| | TRUSTEE | 1.00 | X | | | | | | 0 | | 0 | | | 0 |
| 20) | EDWARD MILSTEIN | | | | | | | | | | | | | |
| | TRUSTEE | 1.00 | Х | | | | | | 0 | | 0 | | | 0 |
| 21) | CINDY RACHOFSKY | | | | | | | | | | | | | |
| | TRUSTEE | 1.00 | Х | | | | | | 0 | | 0 | | | 0 |
| 22) | VINCENT A. ROBERTI | | | | | | | | | | \neg | | | |
| | TRUSTEE | 1.00 | Х | | | | | | 0 | | 0 | | | 0 |
| 23) | BILL ROEDY | | | | | | | | | | | | | |
| : | TRUSTEE | 1.00 | Х | | | | | | | | 0 | | | 0 |
| 24) | ALAN D. SCHWARTZ | | | | | | | | - | | | | | |
| : | TRUSTEE (NON-VOTING) | 1.00 | Х | | | | | | | | 0 | | | 0 |
| 25) | DIANA L. TAYLOR | | | | | | | | | | - | | | |
| | TRUSTEE | 1.00 | Х | | | | | | 0 | | 0 | | | 0 |
| 1 h | Sub-total | | | | | | | | 0 | | 0 | | | 0 |
| | Total from continuation sheets to Part VII, S | oction A | | • • | | • • | | | 2,527,999. | | 0 | 3 | 60,5 | 87. |
| | Total (add lines 1b and 1c) | - | | | • • | • • | | | 2,527,999. | | 0 | | 60,5 | |
| | Total number of individuals (including but not | | | | | hove | 2) who | re | L | \$100 000 of | | | | |
| _ | reportable compensation from the organization | | 1030 | | uu | DOV | <i>J</i>) W 110 | , , , | cerved more than | φ100,000 01 | | | | |
| | | | | | | | | | | | | | Yes | No |
| 2 | Did the organization list any former offic | or directo | or or | tri | ıcto | _ | kov o | mn | Novos or highes | t component | od | | 100 | |
| 3 | Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu | | | | | | | | | | | 3 | | х |
| | | | | | | | | | | | | | | |
| 4 | For any individual listed on line 1a, is the | | | | | | | | | | | | | |
| | organization and related organizations gre | | | | | | | | | | | 4 | х | |
| _ | individual | | | | | | | | | | | 4 | 21 | |
| 5 | Did any person listed on line 1a receive or | | | | | | | | | | | - | | х |
| | for services rendered to the organization? If "Yestion B. Independent Contractors | es, compre | ie Sci | ieat | iie J | 101 | Such | per | SOII | <u> </u> | · • | 5 | | |
| | · | nanaatad i | n d o n | d | - nt | | trooto | | hat raceived mare | than 6100 (| 200 01 | | | |
| 1 | Complete this table for your five highest com compensation from the organization. Report of | | | | | | | | | | | | | |
| | year. | ompensati | JII 101 | LITE | , ca | ICIIC | aa ye | ui C | Ziranig With Or With | the organ | - - au011 | | | |
| _ | · | | | | | | | Т | | | | | | |
| | (A) Name and business add | Iracc | | | | | | | (B) Description of se | arvices | C, | (C) ompens | | |
| | | ii C33 | | | | | | - | Describiton of Se | N VICES | | ompens | auull | |
| Α'. | TACHMENT 4 | | | | | | | | | | | | | |
| | | | | | | | | 1 | | | | | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 6

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| Part VII Section A. Officers, Directors, Tru | ustees, Ke | y En | plo | yee | es, | and I | ligl | hest Compensat | ed Employe | ees (co | ontinue | d) | |
|--|---|--------------------------------|-----------------------|----------------------|--------------|------------------------------|------------------|--|-----------------------------------|----------|--------------------|--|--------------|
| (A) Name and title | (B) Average hours per week | box, | unles | Pos neck ss pe | rson | e than o | an | (D) Reportable compensation from | (E) Reportab compensation related | n from | am | (F) timated ount of other pensatio | f |
| | (describe hours for related organizations in Schedule O) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizatio | I | fro orga and | om the anization in related in ization | n t |
| 26) KEVIN WENDLE | | | | | | | | | | | | | |
| TRUSTEE (NON-VOTING) | 1.00 | X | | | | | | 0 | | 0 | | | 0 |
| 27) KEVIN FROST CHIEF EXECUTIVE OFFICER | 40.00 | | | х | | | | 361,481. | | 0 | | 54,1 | .57 <u>.</u> |
| 28) BRADLEY JENSEN | | | | | | | | | | | | | |
| ASST TREASURER, CFO | 40.00 | | | Х | | | | 219,053. | | 0 | | 44,7 | 34. |
| 29) JOHN F. LOGAN, J.D. PH.D. ASST SECRETARY, VP & GC | 40.00 | | | х | | | | 200,521. | | 0 | | 23,2 | 268. |
| 30) ROWENA JOHNSTON | 40 00 | | | v | | | | 155,658. | | 0 | | 20 3 | 226 |
| ASST SECRETARY, VP OF RESEARCH 31) EDWARD DONNELLY | 40.00 | | | Х | | | | 155,656. | | - 0 | | 20,3 | .20. |
| ASST TREASURER, CONTROLLER | 40.00 | | | х | | | | 137,426. | | 0 | | 18,0 | 55. |
| 32) GREGORY L. BOROFF | | | | | | | | | | | | | |
| VICE PRESIDENT OF DEVELOPMENT | 40.00 | | | | X | | | 223,561. | | 0 | | 25,0 | 128. |
| 33) CHRISTOPHER COLLINS VICE PRESIDENT, PUBLIC POLICY | 40.00 | | | | x | | | 184,540. | | 0 | | 30,4 | 12. |
| 34) ANNETTE SOHN | | | | | | | | | | | | | |
| VICE PRESIDENT, TREAT ASIA | 40.00 | | | | X | | | 193,480. | | 0 | | 17,3 | 365. |
| 35) ANNMARIE SHANNAHAN VICE PRESIDENT, PUBLIC INFO | 40.00 | | | | х | | | 187,799. | | 0 | | 22,5 | 555. |
| 36) ERIC MUSCATELL | 10.00 | | | | | | | 2017133. | | | | | |
| DIRECTOR, PHILANTHROPY | 40.00 | | | | | х | | 151,952. | | 0 | | 20,2 | 204 |
| 1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) | ection A | | | | | | > > | | \$400.000 at | | | | |
| 2 Total number of individuals (including but not reportable compensation from the organizatio | | nose 16 | _ | a aı | DOV | e) wno | o re | ceived more than | \$100,000 01 | Т | | | |
| | | | | | | | | | | | | Yes | No |
| 3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched | | | | | | | | | | | 3 | | Х |
| 4 For any individual listed on line 1a, is the organization and related organizations graindividual | eater than | \$15 | 0,0 | 00? | If | "Yes | ;" (| complete Schedu | le J for su | uch | 4 | х | |
| 5 Did any person listed on line 1a receive or for services rendered to the organization? If "Yo | accrue co | mpen | sati | on 1 | fron | n any | uni | related organization | on or individ | lual | 5 | | Х |
| Section B. Independent Contractors | | | | | | | | | | | | | |
| Complete this table for your five highest com- compensation from the organization. Report of year. | | | | | | | | | | | | | |
| (A) Name and business add | dress | | | | | | | (B) Description of se | rvices | Co | (C) ompens | ation | |
| | | | | | | | | | | | | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization \blacktriangleright

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| Part VII Section A. Officers, Directors, Tru | ıstees, Ke | y En | nplo | ye | es, | and F | lig | hest Compensat | ed Employ | yees (d | continue | d) | |
|--|--|-----------------------------------|-----------------------|----------------------|--------------|------------------------------|------------------|--|--|--------------|----------------|--|---------|
| (A) Name and title | (B) Average hours per week (describe | box, | unles | Pos heck ss pe | erson | e than o | an ee) | (D) Reportable compensation from the | (E) Reporta compensation relate organizati | on from d | am com | (F) timated rount of other pensation | f |
| | hours for related organizations in Schedule O) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | organization (W-2/1099-MISC) | (W-2/1099 | -MISC) | org: and | om the anizatio I related inization | b |
| 37) ANDREW MCINNES DIRECTOR, PUBLICATIONS | 40.00 | | | | | х | | 137,632. | | 0 | | 38,3 | 2/1 |
| 38) ANTHONY ANCONA VICE PRESIDENT, HUMAN RESOURCE | | | | | | X | | 148,185. | | 0 | | 11,0 | |
| 39) MICHAEL COWING SENIOR ADVISOR FOR PROGRAMS | 40.00 | | | | | х | | 107,043. | | 0 | | 16,9 | |
| 40) SUSAN DOSTER CHIEF TECHNOLOGY OFFICER | 40.00 | | | | | х | | 119,668. | | 0 | | 18,1 | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 46 006 4441 | | | | | | | | | | | | | |
| 1b Sub-total c Total from continuation sheets to Part VII, So d Total (add lines 1b and 1c) | ection A | | | | | | > > | | | | | | |
| Total number of individuals (including but not reportable compensation from the organization) | limited to t | hose | liste | | | | re | ceived more than | \$100,000 | of | | | |
| 3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu | | | | | | | | | | | 3 | Yes | No X |
| 4 For any individual listed on line 1a, is the sorganization and related organizations great | eater than | \$15 | 50,0 | 00? | . If | "Yes | ," | complete Schedu | le J for s | such | | v | |
| individualDid any person listed on line 1a receive or for services rendered to the organization? If "Ye | accrue co | mpen | sati | on · | fron | n any | un | related organization | on or indivi | idual | 5 | Х | Х |
| Section B. Independent Contractors | , <u> </u> | | 1040 | | . 101 | ouo | <i>p</i> 0, | | | | | | |
| Complete this table for your five highest com compensation from the organization. Report c year. | | | | | | | | | | | | | |
| (A) Name and business add | lress | | | | | | | (B) Description of se | ervices | C | (C) Compens | ation | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | 1 | | | | | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

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| Pai | rt VII | Statement of Revenue | | | | | |
|--|--------------|---|-------------------------|-----------------------------|--|---|---|
| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| Contributions, Gifts, Grants and Other Similar Amounts | 1a b c | Federated campaigns 1a Membership dues 1b Fundraising events 1c | 323,724. 18,955,276. | | | | |
| tions, Gif er Similar | d e f | Related organizations | 5,008,478. | | | | |
| Sontribund Other | g | and similar amounts not included above . 1f Noncash contributions included in lines 1a-1f: \$ | 8,960,371. 216,180. | | | | |
| | h | Total. Add lines 1a-1f | | 33,247,849. | | | |
| e ne | | | Business Code | | | | |
| Program Service Revenue | 2a b | | | | | | |
| <u> </u> | | | | | | | |
| Serv | c d | | | | | | |
| ran | е | | | | | | |
| Prog | f g | All other program service revenue | | 0 | | | |
| | 3 | Investment income (including dividends, intere | | | | | |
| | | other similar amounts) | | 773,961. | | | 773,961. |
| | | Income from investment of tax-exempt bond p | | 0 | | | · |
| | 4 | Royalties • • • • • • • • • • • • • • • • • • • | | 124,013. | | | 124,013. |
| | 5 | (i) Real | (ii) Personal | 124,013. | | | 124,013. |
| | 6a | Gross rents | | | | | |
| | b | Less: rental expenses | | | | | |
| | C | Rental income or (loss) | | | | | |
| | d | Net rental income or (loss) | • | 0 | | | |
| | " | (i) Securities | (ii) Other | | | | |
| | 7a | Gross amount from sales of assets other than inventory 9,014,904. | (, | | | | |
| | b | Less: cost or other basis and sales expenses 8,609,893. | | | | | |
| | | and saids expenses | | | | | |
| | d | Ret gain or (loss) | | 405,011. | | | 405,011. |
| nue | 8 a | Gross income from fundraising events (not including \$18,955,276. | | | | | |
| Other Revenu | | of contributions reported on line 1c). | 1 200 420 | | | | |
| Ī | | See Part IV, line 18 a | 1,389,430. | | | | |
| Othe | b c | Less: direct expenses b Net income or (loss) from fundraising events | 8,981,287. | -7,591,857. | | | -7,591,857. |
| | 9 a | Gross income from gaming activities. See Part IV, line 19 a | | | | | |
| | b | Less: direct expenses b | | | | | |
| | С | Net income or (loss) from gaming activities | <u></u> ▶ | 0 | | | |
| | 10a | Gross sales of inventory, less returns and allowances a | 215,910. | | | | |
| | b | Less: cost of goods sold b | 2,205. | | | | |
| | С | Net income or (loss) from sales of inventory Miscellaneous Revenue | Business Code | 213,705. | | | 213,705. |
| | | | | | | | |
| | 11a | LIST RENTALS | 900099 | 17,365. | | | 17,365. |
| | b | MISCELLANEOUS INCOME | 900099 | 2,261. | | | 2,261. |
| | С | | | | | | |
| | d | All other revenue | | | | | |
| | е | Total. Add lines 11a-11d | ▶ | 19,626. | | | |
| | 12 | Total revenue. See instructions | | 27,192,308. | | | -6,055,541. |

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JSA 1E1051 1.000

13-3163817

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

| req | uired to complete columns (B), (C), and (D). Check if Schedule O contains a resp | oneo to any question in | thic Part IV | | |
|-----|---|-------------------------|------------------------------|---------------------------------|------------------------|
| _ | | (A) | | (C) | (D) |
| | not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII. | Total expenses | (B) Program service expenses | Management and general expenses | Fundraising expenses |
| 1 | Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 | 3,180,410. | 3,180,410. | | |
| 2 | Grants and other assistance to individuals in the United States. See Part IV, line 22 | 0 | | | |
| 3 | Grants and other assistance to governments, | | | | |
| | organizations, and individuals outside the | | | | |
| | United States. See Part IV, lines 15 and 16 | 4,905,934. | 4,905,934. | | |
| 4 | Benefits paid to or for members | 0 | | | |
| 5 | Compensation of current officers, directors, | 2,213,343. | 1,418,763. | 447,231. | 347,349 |
| c | trustees, and key employees | 2,213,343. | 1,410,703. | 447,251. | 347,343 |
| О | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | 0 | | | |
| 7 | Other salaries and wages | 4,663,290. | 3,141,792. | 329,817. | 1,191,681 |
| 8 | Pension plan accruals and contributions (include section | | | | · · · |
| - | 401(k) and 403(b) employer contributions) | 429,229. | 284,355. | 57,480. | 87,394 |
| 9 | Other employee benefits | 1,091,789. | 680,056. | 149,045. | 262,688 |
| 10 | Payroll taxes | 466,500. | 294,356. | 56,227. | 115,917 |
| 11 | Fees for services (non-employees): | | | | |
| а | Management | 0 | | | |
| | Legal | 129,221. | 117,986. | 4,907. | 6,328 |
| С | Accounting | 180,472. | | 180,472. | |
| d | Lobbying | 69,975. | 69,975. | | |
| | Professional fundraising services. See Part IV, line 17 | 491,117. | | 1.15.006 | 491,117 |
| | Investment management fees | 145,306. | 006 166 | 145,306. | 200 140 |
| g | Other | 1,203,393. | 806,166. | 108,087. | 289,140 |
| 12 | Advertising and promotion | 365,252. 93,190. | 353,621. 61,089. | 947. | 10,684 21,887 |
| 13 | Office expenses | 193,788. | 143,718. | 32,584. | 17,486 |
| 14 | Information technology | 193,788. | 143,710. | 32,364. | 17,400 |
| 15 | Royalties | 1,152,154. | 791,254. | 163,489. | 197,411 |
| 16 | Occupancy | 873,089. | 530,817. | 1,877. | 340,395 |
| 17 | Travel | 073,003. | 330,0171 | 2,077. | 310,330 |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | 0 | | | |
| 19 | Conferences, conventions, and meetings | 959,001. | 824,293. | 13,916. | 120,792 |
| 20 | Interest | 6. | , | 6. | · |
| 21 | Payments to affiliates | 0 | | | |
| 22 | Depreciation, depletion, and amortization | 301,791. | 207,474. | 42,868. | 51,449 |
| 23 | Insurance | 173,070. | 118,981. | 24,584. | 29,505 |
| 24 | Other expenses. Itemize expenses not covered | | | | |
| | above (List miscellaneous expenses in line 24e. If | | | | |
| | line 24e amount exceeds 10% of line 25, column | | | | |
| | (A) amount, list line 24e expenses on Schedule O.) | | | | |
| - | PROGRAM MATERIALS | 2,053,701. | 2,053,701. | | |
| | POSTAGE & SHIPPING | 733,949. | 311,076. | 5,946. | 416,927 |
| - | PROGRAM TECHNICAL SUPPORT | 670,193. | 670,193. | | |
| - | PRINTING | 667,644. | 254,370. | 3,133. | 410,141 |
| | All other expenses | 1,295,996. | 607,560. | 442,501. | 245,935 |
| | Total functional expenses. Add lines 1 through 24e | 28,702,803. | 21,827,940. | 2,220,637. | 4,654,226 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and | | | | |
| _ | fundraising solicitation. Check here ► X if following SOP 98-2 (ASC 958-720) | 1,034,553. | 353,495. | | 681,058 |
| JSA | | | | <u> </u> | Form 990 (2011) |

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| 1 | _ | 11 990 (| | | | Page II |
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| Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Temporarily restricted net assets Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Retained earnings, endowment, accumulated income, or other funds | Ë | | | O | 22 | 0 |
| Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Temporarily restricted net assets Organizations that do not follow SFAS 117, check here ► and complete lines 30 through 34. Separate of the part X and complete lines 30 through 34. Separate of the part X and complete lines 30 through 34. Separate of the part X and complete lines 30 through 34. Separate of the part X and complete lines 30 through 34. Separate of third parties and complete lines 30 through 34. | | 23 | | | | 0 |
| Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25. 6,564,229. 26 9,636,000 Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 20,620,666. 27 21,921,400 28 Temporarily restricted net assets 10,486,272. 28 8,493,100 Permanently restricted net assets 333,147. 29 337,400 Organizations that do not follow SFAS 117, check here ► and complete lines 30 through 34. Set of the liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 271,653. 25 761,800 761,800 762,600 763,000 763,000 764,229. 26 9,636,000 764,229. 26 9,636,000 765,64,290 765,64,290 765,64,290 765,64,290 765,64,290 | | 24 | | 0 | 24 | 0 |
| of Schedule D 271,653. 25 761,8 26 Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 29 Paid-in or capital surplus, or land, building, or equipment fund 30 Retained earnings, endowment, accumulated income, or other funds 31 Retained earnings, endowment, accumulated income, or other funds | | 25 | | | | |
| Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Retained earnings, endowment, accumulated income, or other funds | | | parties, and other liabilities not included on lines 17-24). Complete Part X | | | |
| Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117, check here ► and complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Retained earnings, endowment, accumulated income, or other funds | | | of Schedule D | 271,653. | 25 | 761,884. |
| lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 2 | | 26 | Total liabilities. Add lines 17 through 25 | 6,564,229. | 26 | 9,636,091. |
| 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 31 Retained earnings, endowment, accumulated income, or other funds | es | | | | | |
| 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 31 32 | an c | 27 | Unrestricted net assets | 20,620,666. | 27 | 21,921,458. |
| 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 31 Retained earnings, endowment, accumulated income, or other funds | 3ali | 28 | Temporarily restricted net assets | 10,486,272. | 28 | 8,493,158. |
| 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 31 32 | Þ | 29 | Permanently restricted net assets | 333,147. | 29 | 337,488. |
| 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 31 32 | or Fur | | | | | |
| Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 31,440,085,33 30,752,1 | | | Capital stock or trust principal, or current funds | | 30 | |
| Retained earnings, endowment, accumulated income, or other funds 32 31,440,085,33 30,752,1 | SSe | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | | |
| 31,440,085, 33 30,752,1 | ğ | 32 | Retained earnings, endowment, accumulated income, or other funds | | | |
| | Ret | 33 | Total net assets or fund balances | 31,440,085. | 33 | 30,752,104. |
| | | | Total liabilities and net assets/fund balances | 38,004,314. | 34 | 40,388,195. |

Form **990** (2011)

Page **12** Form 990 (2011) **Reconciliation of Net Assets** Part XI X 27,192,308. 1 28,702,803. 2 2 -1,510,495. 3 3 31,440,085. 4 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 822,514. 5 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, 30,752,104. Part XII Financial Statements and Reporting No Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Х b Were the organization's financial statements audited by an independent accountant? X 2b If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight Х of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: Both consolidated and separate basis X | Separate basis Consolidated basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the 3a Х required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b Χ

Form **990** (2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Name of the organization

Employer identification number

13-3163817 THE FOUNDATION FOR AIDS RESEARCH **Reason for Public Charity Status** (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). Χ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% 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). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type III - Functionally integrated Type II С By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes Nο and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization in (v) Did you notify (vii) Amount of (vi) Is the organization (described on lines 1-9 the organization organization in support col. (i) listed in above or IRC section in col. (i) of col. (i) organized your governing (see instructions)) your support? in the U.S.? Yes Νo Yes (A) (B) (C) (D) (E)

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (a) 2007 **(b)** 2008 (d) 2010 (c) 2009 (e) 2011 (f) Total Calendar year (or fiscal year beginning in) grants. contributions. membership fees received. (Do not 30,491,706. 20,760,601 22,553,697 22,876,129 33,247,849 129,929,982. include any "unusual grants.") Tax revenues levied the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 30,491,706. 20,760,601. 22,553,697 22,876,129. 33,247,849 129,929,982. Total. Add lines 1 through 3 The portion of total contributions by each (other person governmental unit publicly supported organization) included on line 1 that exceeds 2% of the amount 5,362,542. shown on line 11, column (f) Public support. Subtract line 5 from line 4. 124,567,440. Section B. Total Support (a) 2007 (c) 2009 (d) 2010 (e) 2011 **(b)** 2008 Calendar year (or fiscal year beginning in) (f) Total 30,491,706 20,760,601 22,553,697 22,876,129 33,247,849 129,929,982. Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 842,799 643,473 668,573 951,963 897,974 4,004,782. sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1 4,177,745 155,966. 2,756,152 1,735,330 1,624,966 10,450,159. 144,384,923. 11 Total support. Add lines 7 through 10 . . . First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 86.27 % Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 86.32% 16a 331/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check b 331/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

instructions _______ Schedule A (Form 990 or 990-EZ) 2011

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2011 Page 3

Part III

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

| Sec | tion A. Public Support | amy arraics are | | , p. ca.co | | , | |
|------|--|------------------|------------------|--------------------|------------------|------------------|-----------|
| | ndar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees | | | | | | |
| - | received. (Do not include any "unusual grants.") | | | | | | |
| 2 | Gross receipts from admissions, merchandise | | | | | | |
| _ | sold or services performed, or facilities | | | | | | |
| | furnished in any activity that is related to the | | | | | | |
| | organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an | | | | | | |
| • | unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the | | | | | | |
| • | organization's benefit and either paid | | | | | | |
| | to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities | | | | | | |
| • | furnished by a governmental unit to the | | | | | | |
| | organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| | Amounts included on lines 1, 2, and 3 | | | | | | |
| . u | received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 | | | | | | |
| | received from other than disqualified | | | | | | |
| | persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c | Add lines 7a and 7b | | | | | | |
| 8 | Public support (Subtract line 7c from | | | | | | |
| | line 6.) | | | | | | |
| Sec | tion B. Total Support | | • | • | | • | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| b | Unrelated business taxable income (less | | | | | | |
| | section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | | |
| С | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets | | | | | | |
| 13 | (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, | | | | | | |
| 13 | and 12.) | | | | | | |
| 14 | First five years. If the Form 990 is for | the organization | n's first second | third fourth or | fifth tay vear | as a section 501 | (c)(3) |
| | organization, check this box and stop here . | • | | | • | | ``` |
| Sec | tion C. Computation of Public Sup | | | | | | |
| 15 | Public support percentage for 2011 (line 8, | • | | mn (f)) | | 15 | % |
| 16 | Public support percentage from 2010 Scheo | | | | | 16 | % |
| | tion D. Computation of Investmen | | | | | 1 1 | ,,, |
| 17 | Investment income percentage for 2011 (lin | | | 13, column (f)) | | 17 | % |
| 18 | Investment income percentage from 2010 S | , | | | | 18 | % |
| | 331/3% support tests - 2011. If the org | | | | | | |
| u | 17 is not more than 331/3%, check this | | | | | | |
| b | 331/3% support tests - 2010. If the organ | nization did not | check a box on | line 14 or line 19 | a, and line 16 i | s more than 331/ | 3 %, and |
| 20 | line 18 is not more than 331/3%, check Private foundation. If the organization of | | | | | | |
| | are realisation in the organization t | | ~ DON OIL IIIIC | , | ., oncon uno bi | unu 000 mot | |

Schedule A (Form 990 or 990-EZ) 2011

JSA 1E1221 1.000 76004W 700J V 11-6.5 0176982-00003 PAGE 18 Schedule A (Form 990 or 990-EZ) 2011 Page **4**

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

| | | | | | ATTACHMENT | 1 |
|----------------------------|-------------|----------|------------|------------|------------|-------------|
| SCHEDULE A, PART II - | OTHER INCOM | ſΕ | | | | |
| DESCRIPTION | 2007 | 2008 | 2009 | 2010 | 2011 | TOTAL |
| MISCELLANEOUS | 1,021. | 3,247. | 67. | 13,257. | 2,261. | 19,853. |
| LIST RENTALS | 30,541. | | 27,804. | 26,881. | 17,365. | 102,591. |
| QUALIFIED SPONSORSHIP PMTS | 59,831. | | | | | 59,831. |
| SPECIAL EVENTS | 4,086,352. | 113,758. | 2,289,889. | 1,452,830. | 1,389,430. | 9,332,259. |
| INVENTORY | | 38,961. | 438,392. | 242,362. | 215,910. | 935,625. |
| TOTALS | 4,177,745. | 155,966. | 2,756,152. | 1,735,330. | 1,624,966. | 10,450,159. |

Schedule A (Form 990 or 990-EZ) 2011

Schedule B

(Form 990, 990-EZ, or 990-PF)

Internal Revenue Service

Name of the organization

or 990-PF) Attach to Form 990, Form 990-EZ, or Form 990-PF.

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule of Contributors

OMB No. 1545-0047

2011

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

THE FOUNDATION FOR AIDS RESEARCH 13-3163817 Organization type (check one): Filers of: Section: x | 501(c)(3 Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number 13-3163817

| Part I | Contributors (see instructions). Use duplicate copies of Part | t I if additional space is need | ded. |
|------------|---|---------------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1_ | | \$2,802,072. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | | \$2,155,890. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 _ | | \$1,000,000. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 4 | | \$901,591. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 5 | | \$864,493. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 6 _ | | \$802,184. | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |

Employer identification number 13-3163817

| | Contributors (see instructions). Use duplicate copies of Pa | | T |
|------------|---|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 7 7 | | \$739,981. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 8 | | \$676,744. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - - \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - - \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - - \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - - \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |

Employer identification number

| | sh Property (see instructions). Use duplicate copies | | |
|--------------------------|--|--|----------------------|
| n) No. From Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date receive |
| | | \$ | |
| n) No. rom Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| n) No. From Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date receive |
| | | \$ | |
| a) No. From Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| a) No. From Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |

Employer identification number 13-3163817

| Part III | Exclusively religious, charitable, etc., that total more than \$1,000 for the year. | ear. Complete colur | nns (a) through (e |) and the following line entry. | | | | |
|---------------------------|---|---|---|--|--|--|--|--|
| | For organizations completing Part III, e contributions of \$1,000 or less for the | enter the total of exc e year. (Enter this inf | <i>lusively</i> religious, o ormation once. Se | charitable, etc., ee instructions.) ►\$ | | | | |
| | Use duplicate copies of Part III if addition | • | | Ψ | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | | | | |
| | | | | | | | | |
| | - | | | | | | | |
| | | (e) Transf | er of gift | | | | | |
| | | (c) Trunsi | or or gift | | | | | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relatio | nship of transferor to transferee | | | | |
| | - | | | | | | | |
| | | | | | | | | |
| (a) No. | | | | T | | | | |
| from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | (a) Transf | or of gift | | | | | |
| | (e) Transfer of gift | | | | | | | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relatio | nship of transferor to transferee | | | | |
| | | | | | | | | |
| | | | | | | | | |
| (a) No | | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | | | | |
| | <u> </u> | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | (e) Transf | nsfer of gift | | | | | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relatio | nship of transferor to transferee | | | | |
| | | | | | | | | |
| | - | | | | | | | |
| | | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | | | | |
| | | | | | | | | |
| | - | | | | | | | |
| | | | | | | | | |
| | | (e) Transf | er of gift | | | | | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relatio | nship of transferor to transferee | | | | |
| | | | | | | | | |
| | | | | | | | | |

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Attach to Form 990 or Form 990-EZ. ► Complete if the organization is described below.

OMB No. 1545-0047

b If "Yes," describe in Part IV.

| Department of the Treasury Internal Revenue Service | Inspection | |
|---|---|---------------------------------------|
| If the organization answer | ered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Ca | mpaign Activities), then |
| Section 501(c)(3) org | ganizations: Complete Parts I-A and B. Do not complete Part I-C. | |
| Section 501(c) (other | r than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete | ete Part I-B. |
| Section 527 organiza | itions: Complete Part I-A only. | |
| If the organization answer | ered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying A | Activities), then |
| Section 501(c)(3) org | ganizations that have filed Form 5768 (election under section 501(h)): Complete Part I | II-A. Do not complete Part II-B. |
| Section 501(c)(3) org | ganizations that have NOT filed Form 5768 (election under section 501(h)): Complete | Part II-B. Do not complete Part II-A. |
| • | ered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c 5), or (6) organizations: Complete Part III. | (Proxy Tax), then |
| Name of organization | | Employer identification number |
| THE FOUNDATION | FOR AIDS RESEARCH | 13-3163817 |
| Part I-A Complet | e if the organization is exempt under section 501(c) or is a sectio | n 527 organization. |
| 1 Provide a descrip | tion of the organization's direct and indirect political campaign activities in Pa | art IV. |
| 2 Political expenditu | ıres | \$ |
| | | ••• |
| Part I-B Complete | e if the organization is exempt under section 501(c)(3). | |
| 1 Enter the amount | of any excise tax incurred by the organization under section 4955 | > \$ |
| 2 Enter the amount | of any excise tax incurred by organization managers under section 4955 | > \$ |
| 3 If the organization | incurred a section 4955 tax, did it file Form 4720 for this year? | Yes |

| 3 | Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$ | | | | | | | |
|-----|---|--------------------------------|---|--|--------|--|--|--|
| 4 | | e Form 1120-POL for this year? | | | Yes No | | | |
| 5 | Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. | | | | | | | |
| | filing organi | | (d) Amount paid from filing organization's funds. If none, enter -0 | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0 | | | | |
| (1) | | | | | | | | |
| (2) | | | | | | | | |
| (3) | | | | | | | | |

Complete if the organization is exempt under section 501(c), except section 501(c)(3).

Enter the amount directly expended by the filing organization for section 527 exempt function

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2011

JSA 1E1264 1.000

(4)

(5)

(6)

| Sch | nedule C (Form 990 or 990-EZ) 2011 | THE FC | UNDATIO | N FOR AIDS RES | SEARCH | 13-3 | 3163817 Page 2 | |
|-----|---|--------------------------|----------------------------|------------------------|--|----------------------------------|-----------------------------|--|
| | | rganizati | on is exen | npt under section | n 501(c)(3) and | filed Form 5768 (ele | ction under | |
| A | Check ▶ if the filing org | | - | an affiliated grou | | rt IV each affiliated g | roup member's | |
| В | | | | oox A and "limited | | | | |
| | Limi | ts on Lobb | ying Expen | | | (a) Filing organization's totals | (b) Affiliated group totals | |
| 1 2 | Total lobbying expenditures to | | | | - | organization s totals | group totals | |
| | Total lobbying expenditures to | | | | | | | |
| | Total lobbying expenditures (a | | | | | | | |
| | Other exempt purpose expendence | | | | | | | |
| | Total exempt purpose expend | | | | | | | |
| | Lobbying nontaxable amount. | | | | | | | |
| | columns. | | | 3 | | | | |
| | If the amount on line 1e, column | (a) or (b) is: | The lobbying | g nontaxable amount | is: | | | |
| | Not over \$500,000 | ., ., | | amount on line 1e. | | | | |
| | Over \$500,000 but not over \$1,0 | 00,000 | \$100,000 pl | us 15% of the excess | over \$500,000. | | | |
| | Over \$1,000,000 but not over \$1 | ,500,000 | \$175,000 pl | us 10% of the excess | over \$1,000,000. | | | |
| | Over \$1,500,000 but not over \$1 | 7,000,000 | \$225,000 pl | us 5% of the excess of | ver \$1,500,000. | | | |
| | Over \$17,000,000 | | \$1,000,000. | | | | | |
| g | Grassroots nontaxable amou | nt (enter 25 | 5% of line 1f) | | | | | |
| h | Subtract line 1g from line 1a. | If zero or le | ess, enter -0 | - | | | | |
| i | Subtract line 1f from line 1c. I | | | | | | | |
| j | If there is an amount other that | an zero on | either line 1 | Ih or line 1i, did the | organization file | Form 4720 | | |
| | reporting section 4911 tax for | this year? | | | | | Yes No | |
| | | ations tha lumns belo | t made a se ow. See the | instructions for lin | on do not have to les 2a through 2f | | ve | |
| | | Lobi | oying Expe | nditures During 4-Y | ear Averaging Pe | riod | | |
| | Calendar year (or fiscal year beginning in) | (a) 2 | 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) Total | |
| 2 a | Lobbying nontaxable amount | | | | | | | |
| b | Lobbying ceiling amount (150% of line 2a, column (e)) | | | | | | | |
| С | : Total lobbying expenditures | | | | | | | |
| d | Grassroots nontaxable amount | | | | | | | |
| е | Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | | | |
| f | Grassroots Johnving expenditures | | | | | | | |

Schedule C (Form 990 or 990-EZ) 2011

JSA 1E1265 1.000

Page 3 Schedule C (Form 990 or 990-EZ) 2011

| Pa | | if the organization is exempt under section 501(c)(3) and has NO ınder section 501(h)). | I file | d Fo | rm 576 | 38 | | |
|---------|-------------------------|---|---------|--------|----------|--------|---------|----------|
| For | each "Yes" response | to lines 1a through 1i below, provide in Part IV a detailed description | (| a) | | (b |)) | |
| | | | Yes | No | | Amo | unt | |
| 1 | During the year, did | the filing organization attempt to influence foreign, national, state or local | | | | | | |
| | | g any attempt to influence public opinion on a legislative matter or | | | | | | |
| | referendum, through | | | Х | 4 | | | |
| a b | Volunteers? | ment (include compensation in expenses reported on lines 1c through 1i)? | X | | - | | | |
| C | Media advertisemen | | 7. | Х | | | | |
| d | Mailings to member | s, legislators, or the public? | | X | | | | |
| е | Publications, or publ | ished or broadcast statements? | | Х | | | | |
| f | Grants to other orga | nizations for lobbying purposes? | | Х | | | | |
| g | | egislators, their staffs, government officials, or a legislative body? | | Х | | | | |
| h | | ons, seminars, conventions, speeches, lectures, or any similar means? | L | X | | | 100 | 001 |
| i | Other activities? | | X | | | | 193 | |
| j 2a | Did the activities in I | nrough 1i ine 1 cause the organization to be not described in section 501(c)(3)? | | Х | | | 193 | , 901 |
| ∠a b | | nount of any tax incurred under section 4912 | | Λ | | | | |
| C | | nount of any tax incurred by organization managers under section 4912 | | | | | | |
| d | | ion incurred a section 4912 tax, did it file Form 4720 for this year? | | х | | | | |
| Pa | rt III-A Complete | if the organization is exempt under section 501(c)(4), section 501 | | , or s | sectio | n | | |
| | 501(c)(6). | | | | | | T | |
| 1 | Were substantially a | II (90% or more) dues received nondeductible by members? | | | | 4 | Yes | No |
| 2 | | make only in-house lobbying expenditures of \$2,000 or less? | | | | 2 | _ | |
| 3 | | agree to carry over lobbying and political expenditures from the prior year? | | | | | | |
| Pa | | if the organization is exempt under section 501(c)(4), section 501 | | | | | | |
| | | and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" | OR (I | o) Pa | rt III-A | , line | 3, is | |
| | answered | | | | | | | |
| 1 | | nd similar amounts from members | | | 1 | | | |
| 2 | | ndeductible lobbying and political expenditures (do not include amount or which the section 527(f) tax was paid). | unts | от | | | | |
| • | • | • • • | | | 2a | | | |
| a b | Carryover from last v | ear | | | 2b | | | |
| c | | | | | 2c | | | |
| 3 | Aggregate amount r | eported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du | es | | 3 | | | |
| 4 | If notices were sen | and the amount on line 2c exceeds the amount on line 3, what portion | n of tl | ne | | | | |
| | excess does the org | anization agree to carryover to the reasonable estimate of nondeductible le | obbyi | ng | | | | |
| _ | and political expend | | | | 4 | | | |
| 5 | | bbying and political expenditures (see instructions) | | | 5 | | | |
| Con | nplete this part to pro | ntal Information vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line t for any additional information. | | | | | B, line | ; |
| SE | E PAGE 4 | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
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Schedule C (Form 990 or 990-EZ) 2011

JSA 1E1266 1.000

Schedule C (Form 990 or 990-EZ) 2011 Page **4**

Part IV Supplemental Information (continued)

LOBBYING EXPENSES

PART II-B

THE FOUNDATION FOR AIDS RESEARCH DEVELOPED AN ACTION AGENDA TO END AIDS
THAT IDENTIFIED CRITICAL DECISIONS THAT NEED TO BE MADE TO ADVANCE
EVIDENCE BASED AIDS POLICIES. WE CREATED A VARIETY OF ISSUE BRIEFS ON
TOPICS SUCH AS THE POTENTIAL IMPACT OF VARIOUS BUDGET SCENARIOS ON GLOBAL
HEALTH SERVICES, AND POLICY PRIORITIES TO ADDRESS THE HIV EPIDEMIC AMONG
GAY MEN IN THE US. THESE ISSUE BRIEFS WERE SHARED WITH CAPITOL HILL STAFF
AND MEMBERS OF THE ADMINISTRATION. AMFAR MET REGULARLY WITH STAFF TO
MEMBERS OF CONGRESS AND WITH ADMINISTRATION STAFF, AND WE PROVIDED INPUT
TO THE ADMINISTRATION ON DEVELOPMENT OF THE PEPFAR BLUEPRINT FOR AN AIDS
FREE GENERATION. AMFAR SPONSORED SEVERAL BRIEFINGS ON CAPITOL HILL ON
AIDS POLICY AND RESEARCH ISSUES. AMFAR USES THESE BRIEFINGS AS AN
EDUCATIONAL TOOL.

Schedule C (Form 990 or 990-EZ) 2011

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization

Employer identification number

| THE | FOUNDATION FOR AIDS RESEARCH | 13-3163817 |
|------------|--|---|
| Par | | r Accounts. Complete if the |
| | organization answered "Yes" to Form 990, Part IV, line 6. | |
| | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | |
| 2 | Aggregate contributions to (during year) | |
| 3 | Aggregate grants from (during year) | |
| 4 | Aggregate value at end of year | |
| 5 | Did the organization inform all donors and donor advisors in writing that the assets held in | n donor advised |
| | funds are the organization's property, subject to the organization's exclusive legal control? . | Yes No |
| 6 | Did the organization inform all grantees, donors, and donor advisors in writing that grant fun | ds can be used |
| | only for charitable purposes and not for the benefit of the donor or donor advisor, or for any | |
| | conferring impermissible private benefit? | Yes No |
| Par | | form 990, Part IV, line 7. |
| 1 | Purpose(s) of conservation easements held by the organization (check all that apply). | |
| | Preservation of land for public use (e.g., recreation or education) | of an historically important land area |
| | | of a certified historic structure |
| | Preservation of open space | |
| 2 | Complete lines 2a through 2d if the organization held a qualified conservation contribution in | n the form of a conservation |
| | easement on the last day of the tax year. | Held at the End of the Tax Year |
| | | |
| а | Total number of conservation easements | |
| b | Total acreage restricted by conservation easements | |
| C | Number of conservation easements on a certified historic structure included in (a) | 2c |
| d | Number of conservation easements included in (c) acquired after 8/17/06, and not on a | |
| • | historic structure listed in the National Register | |
| 3 | Number of conservation easements modified, transferred, released, extinguished, or termin | nated by the organization during the |
| 4 | tax year ▶ Number of states where property subject to conservation easement is located ▶ | |
| 5 | Does the organization have a written policy regarding the periodic monitoring, inspection, have | |
| 3 | violations, and enforcement of the conservation easements it holds? | - |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation eas | |
| · | | sometic during the year |
| 7 | Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easeme | ents during the year |
| | ▶ \$ | 3 , |
| 8 | Does each conservation easement reported on line 2(d) above satisfy the requirements of so | ection 170(h)(4)(B) |
| | (i) and section 170(h)(4)(B)(ii)? | |
| 9 | In Part XIV, describe how the organization reports conservation easements in its revenue an | nd expense statement, and |
| | balance sheet, and include, if applicable, the text of the footnote to the organization's finance | cial statements that describes the |
| | organization's accounting for conservation easements. | |
| Pai | Organizations Maintaining Collections of Art, Historical Treasures, or Other | er Similar Assets. |
| | Complete if the organization answered "Yes" to Form 990, Part IV, line 8. | |
| 1a | If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its works of art, historical treasures, or other similar assets held for public exhibition, edu | revenue statement and balance sheet |
| | public service, provide, in Part XIV, the text of the footnote to its financial statements that de | scribes these items. |
| b | If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its i | |
| | works of art, historical treasures, or other similar assets held for public exhibition, edu | |
| | public service, provide the following amounts relating to these items: | |
| | (i) Revenues included in Form 990, Part VIII, line 1 | \$ |
| | | |
| 2 | If the organization received or held works of art, historical treasures, or other similar | • |
| _ | following amounts required to be reported under SFAS 116 (ASC 958) relating to these item | |
| a h | Revenues included in Form 990, Part VIII, line 1 | |
| _ <u>b</u> | Assets included in Form 330, Fait A | · · · · · · • • • • • • • • • • • • • • |

PAGE 29

Schedule D (Form 990) 2011 Page 2

| | t III Organizations Maintainin | a Collections of | Art. Historical Tre | easures. o | r Other | Similar Assets (d | continu | | age Z | |
|----------|--|------------------------|-------------------------------|--------------------------|------------|----------------------|-------------------|----------|----------|--|
| ı aı | Organizationo mantanii | ig conconono on | , i i, i ii oto i i oti i i i | Jacai co, c | 0 0 0 0 0 | Ommar 7.000to (| 201111111 | <u> </u> | | |
| 3 | Using the organization's acquisition collection items (check all that apply | | other records, chec | k any of th | ne follow | ring that are a sigr | nificant | use c | of its | |
| а | Public exhibition | | d Loa | an or excha | nge prog | rams | | | | |
| b | Scholarly research | | e X Oth | ner DONA | TED IT | EMS, INVENTOR | RY ET | Ξ. | | |
| С | Preservation for future ger | erations | | | | | | | | |
| 4 | Provide a description of the organi | zation's collections | and explain how | they furthe | r the org | ganization's exemp | t purpo | se in | Part | |
| | XIV. | | | | | | | | | |
| 5 | During the year, did the organization | n solicit or receive d | lonations of art, hist | orical treas | ures, or | other similar | | | | |
| | assets to be sold to raise funds rathe | er than to be mainta | ained as part of the | organizatio | n's collec | ction? • • • • • | X Yes | í | No | |
| Par | art IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. | | | | | | | | | |
| 1 a | Is the organization an agent, trustee | custodian or other | intermediary for co | ontributions | or other | assets not | | | | |
| ıa | included on Form 990, Part X? | | | | | | Yes | | No | |
| h | If "Yes," explain the arrangement in | | | | | | 1 63 | ' L |] NO | |
| | ii res, explain the arrangement in | art XIV and compi | ctc the following ta | | | Amount | | | | |
| С | Beginning balance | | | 10 | | 741104111 | | | | |
| | Additions during the year | | | | | | | | | |
| | Distributions during the year | | | | | | | | | |
| f | Ending balance | | | | | | | | | |
| | Did the organization include an amo | | | | | | Yes | | No | |
| | If "Yes," explain the arrangement in | | | | | | | |] | |
| Par | | | ization answered | "Yes" to F | orm 990 |). Part IV. line 10. | | | | |
| | | (a) Current year | (b) Prior year | (c) Two ye | | (d) Three years back | (e) Fou | ır years | back | |
| 1 a | Beginning of year balance | 464,356. | 561,083. | 516 | 5,826. | 470,065. | | | | |
| b | Contributions | 4,341. | 5,978. | 8 | 3,258. | 9,378. | | | | |
| С | Net investment earnings, gains, | | | | | | | | | |
| | and losses | 52,107. | -2,705. | 35 | 5,999. | 37,383. | | | | |
| d | Grants or scholarships | | | | | | | | | |
| е | Other expenditures for facilities . | | | | | | | | | |
| | and programs | | 100,000. | | | | | | | |
| f | Administrative expenses | | | | | | | | | |
| g | End of year balance | 520,804. | 464,356. | 561 | L,083. | 516,826. | | | | |
| 2 | Provide the estimated percentage o | f the current year e | nd balance (line 1g | , column (a) |) held as | : | | | | |
| а | Board designated or quasi-endowment | | _% | | | | | | | |
| b | Permanent endowment ► _ 64.8 | | | | | | | | | |
| С | Temporarily restricted endowment I | | | | | | | | | |
| _ | The percentages in lines 2a, 2b, and | • | | | | | | | | |
| 3a | Are there endowment funds not in t | he possession of th | ne organization that | are held a | nd admir | istered for the | | | | |
| | organization by: | | | | | | | Yes | No | |
| | (i) unrelated organizations | | | | | | 3a(i) | | X | |
| | (ii) related organizations | | | | | | 3a(ii) | | <u>X</u> | |
| _ | If "Yes" to 3a(ii), are the related orga | | • | | | | 3 b | | | |
| 4 | Describe in Part XIV the intended us | | | | | | | | | |
| Par | t VI Land, Buildings, and Equi | | | | | | | | | |
| | Description of property | (a) Cost or (invest | | or other basis other) | | eciation (0 | d) Book va | alue | | |
| 1a | Land | | | | | | | | | |
| b | Buildings | | | 701 005 | | 72 400 | | | | |
| С | Leasehold improvements | | | 781,297 | | 73,409. | | | 388. | |
| d | Equipment | | | 242,387 | | 35,458. | 4 ^ | | 929. | |
| <u>е</u> | Other | | | 866,891 | | 93,101. | | 73,7 | | |
| Tota | I. Add lines 1a through 1e. (Column | (d) must equal Form | n 990, Part X, colum | n (B), line 1 | 0(c).) | ▶ | 1,8 | 88,6 | 07. | |

Schedule D (Form 990) 2011 Page 3

| | 1 01111 330) 2011 | | | i age U |
|---------------|--|------------------------------|---|---------------------|
| Part VII | Investments - Other Securities. Se | e Form 990, Part X, line | 12. | |
| | (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valua Cost or end-of-year mar | |
| (1) Financi | al derivatives | | | |
| (2) Closely | -held equity interests | | | |
| (3) Other_ | | | | |
| <u>(A)</u> | | | | |
| <u>(B)</u> | | | | |
| <u>(C)</u> | | | | |
| (D) (E) | | | | |
| (F) | | | | |
| (G) | | | | |
| `-/ (H) | | - | | |
| (I) | | | | |
| Total. (Colum | nn (b) must equal Form 990, Part X, col. (B) line 12.) | • | | |
| Part VIII | Investments - Program Related. Se | e Form 990, Part X, line | : 13. | |
| | (a) Description of investment type | (b) Book value | (c) Method of valua Cost or end-of-year mar | |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| <u>(4)</u> | | | | |
| (5) (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| (10) | | | | |
| Total. (Colum | n (b) must equal Form 990, Part X, col. (B) line 13.) | • | | |
| Part IX | Other Assets. See Form 990, Part 2 | X, line 15. | | |
| | | (a) Description | | (b) Book value |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| (10) | | | | |
| Total. (Colum | n (b) must equal Form 990, Part X, col. (B) line 15.) | | <u></u> ▶ | |
| Part X | Other Liabilities. See Form 990, Pa | rt X, line 25. | | |
| 1. | (a) Description of liability | (b) Book value | | |
| | ral income taxes | 761 0 | 0.4 | |
| | ELLANEOUS | 761,8 | 84. | |
| (3) | | | | |
| (4) (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| (10) | | | | |
| (11) | | | | |
| Total. (Colui | mn (b) must equal Form 990, Part X, col. (B) line | 25.) ▶ 761,8 | 84. | |
| 2 FIN 48 / | ASC 740) Footpote In Part XIV provide to | he text of the footnote to t | he organization's financial statemer | te that reports the |

organization's liability for uncertain tax positions under FIN 48 (ASC 740). 1E1270 1.000 76004W 700J

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| Page | 4 |
|------|---|
|------|---|

| Part | XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem | ents | |
|----------------|---|----------------------|--|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 27,192,308. |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 28,702,803. |
| 3 | Excess or (deficit) for the year. Subtract line 2 from line 1 | 3 | -1,510,495. |
| 4 | Net unrealized gains (losses) on investments | 4 | 836,699. |
| 5 | Donated services and use of facilities | 5 | |
| 6 | Investment expenses | 6 | |
| 7 | Prior period adjustments | 7 | |
| 8 | Other (Describe in Part XIV.) | 8 | -14,185. |
| 9 | Total adjustments (net). Add lines 4 through 8 | 9 | 822,514. |
| 10 | () 1 | 10 | -687 , 981. |
| Part | XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Ret | | |
| 1 | Total revenue, gains, and other support per audited financial statements | . 1 | 28,278,897. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| а | Net unrealized gains on investments 2a 836, 69 | | |
| b | Donated services and use of facilities 264,07 | 5. | |
| C | Recoveries of prior year grants 2c | _ | |
| d | Other (Describe in Part XIV.) 2d -14,18 | _ | 1 000 500 |
| е | Add lines 2a through 2d | . 26 | |
| 3 | Subtract line 2e from line 1 | . 3 | 27,192,308. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | | |
| b | Other (Describe in Part XIV.) | - | |
| _ C | Add lines 4a and 4b | . 40 | |
| 5 Dor4 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | 27,192,308. |
| | Reconciliation of Expenses per Audited Financial Statements With Expenses per Ro Total expenses and losses per audited financial statements | | 28,966,878. |
| 1 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | • | 20,300,070. |
| a | | 5 | |
| a b | | <u>-</u> | |
| C | | | |
| d | | - | |
| e | | 26 | 264,075. |
| 3 | Add lines 2a through 2d Subtract line 2e from line 1 | 3 | |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| · | Investment expenses not included on Form 990, Part VIII, line 7b | | |
| | Other (Describe in Part XIV.) Add lines 45 and 45 | | |
| C | Add lines 4a and 4b | 40 | c |
| 5 | Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.) | . 5 | |
| | XIV Supplemental Information | | <u> </u> |
| Comp Part V | lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa , line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl ditional information. | t IV, lii ete thi | nes 1b and 2b; is part to provide |
| SEE | PAGE 5 | | |
| SEE | PAGE 5 | | |
| | | | |
| | | | |
| | | | - |
| | | | |
| | | | |

Page 5

Part XIV Supplemental Information (continued)

ENDOWMENTS

PART V, LINE 4

AMFAR'S ENDOWMENT FUND IS INTENDED TO FUND THE VARIOUS GENERAL RESEARCH PROGRAMS THE ORGANIZATION SPONSORS.

FIN 48

INCOME TAXES

AMFAR FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND GUIDANCE ON MEASUREMENT, CLASSIFICATION, INTEREST AND PENALTIES, AND DISCLOSURE. AS OF SEPTEMBER 30, 2012, AMFAR DOES NOT BELIEVE THAT THERE ARE ANY UNCERTAIN TAX POSITIONS WITHIN ITS FINANCIAL STATEMENTS. AMFAR HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS; TO IDENTIFY AND REPORT UNRELATED INCOME; TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS; AND TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. THE TAX YEARS ENDED 2009, 2010, AND 2012 ARE STILL OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES.

Part XIV Supplemental Information (continued)

COLLECTIONS OF ART, HISTOCIAL TREASURES, OR OTHER SIMILAR ASSETS

PART III, LINE 4

AMFAR HOLDS VARIOUS ITEMS OF JEWELRY, PHOTOGRAPHS AND OTHER ITEMS OF
ARTISTIC VALUE THAT HAVE BEEN DONATED TO THE ORGANIZATION FOR SALE AT
SPECIAL EVENTS. THE ORGANIZATION HAS MAINTAINED THESE ITEMS IN INVENTORY
FOR A FEW YEARS AND IS IN THE PROCESS OF SELLING THEM.

RECONCILIATION OF REVENUE

PART XII, LINE 2D

GAIN ON THIRD PARTY TRUST

(\$14,185)

RECONCILIATION OF EXPENSES

PART XIII, LINE 2D

ROUNDING \$4

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

(6) NORTH AMERICA

(7) NORTH AMERICA

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

THE FOUNDATION FOR AIDS RESEARCH

Employer identification number

13-3163817 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990. Part IV. line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other 1 assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the X Yes grants or assistance? No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (e) If activity listed in (d) is (a) Region (b) Number of (d) Activities conducted in (f) Total region (by type) (e.g., expenditures for offices in the employees, a program service, region agents, and fundraising, program services, describe specific type of and investments independent investments, service(s) in region in region contractors grants to recipients located in the region) in region (1) CENTRAL AMERICA/CARIBBEAN GRANTMAKING N/A 232,550. (2) EAST ASIA AND THE PACIFIC 1. 18. PROGRAM SERVICES THERAPEUTICS RESEARCH 1,555,494. (3) EAST ASIA AND THE PACIFIC 18. GRANTMAKING N/A 3,042,995. (4) EUROPE GRANTMAKING N/A 838,454. FUNDRAISING (5) EUROPE N/A 3,706,481.

GRANTMAKING

FUNDRATSING

| (8) RUSSIA/INDEPENDENT STATES | | | GRANTMAKING | N/A | 126,608. |
|--|----|-----|-------------|-----|-------------|
| (9) SOUTH AMERICA | | | GRANTMAKING | N/A | 163,935. |
| (10) SOUTH AMERICA | | | FUNDRAISING | N/A | 617,550. |
| (11) SOUTH ASIA | | | GRANTMAKING | N/A | 88,306. |
| (12) SUB-SAHARAN AFRICA | | | GRANTMAKING | N/A | 192,471. |
| (13) | | | | | |
| (14) | | | | | |
| (15) | | | | | |
| (16) | | | | | |
| (17) | | | | | |
| Sub-total Total from continuation sheets to Part I | 2. | 36. | | | 10,923,395. |
| | | • | | | |

Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2011

10,923,395.

N/A

N/A

220,615.

137,936.

Schedule F (Form 990) 2011

| 1 | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV appraisal, other) |
|------|--------------------------|--|-------------------|----------------------|--------------------------|---------------------------------|---|--|--|
| (1) | | | EAST ASIA/PACIFIC | BASIC RESEAR | 62,499. | WIRE TRANSFE | | | |
| (2) | | | EUROPE | BASIC RESEAR | 50,000. | WIRE TRANSFE | | | |
| (3) | | | EUROPE | BASIC RESEAR | 62,496. | WIRE TRANSFE | | | |
| (4) | | | EAST ASIA/PACIFIC | BASIC RESEAR | 62,501. | WIRE TRANSFE | | | |
| (5) | | | EAST ASIA/PACIFIC | TREAT ASIA | 21,550. | WIRE TRANSFE | | | |
| (6) | | | EAST ASIA/PACIFIC | TREAT ASIA | 14,210. | WIRE TRANSFE | | | |
| (7) | | | EAST ASIA/PACIFIC | TREAT ASIA | 10,650. | WIRE TRANSFE | | | |
| (8) | | | EAST ASIA/PACIFIC | TREAT ASIA | 14,377. | WIRE TRANSFE | | | |
| (9) | | | EAST ASIA/PACIFIC | TREAT ASIA | 14,630. | WIRE TRANSFE | | | |
| (10) | | | EAST ASIA/PACIFIC | TREAT ASIA | 18,640. | WIRE TRANSFE | | | |
| (11) | | | EAST ASIA/PACIFIC | TREAT ASIA | 15,250. | WIRE TRANSFE | | | |
| (12) | | | EAST ASIA/PACIFIC | TREAT ASIA | 6,874. | WIRE TRANSFE | | | |
| (13) | | | EAST ASIA/PACIFIC | TREAT ASIA | 5,374. | WIRE TRANSFE | | | |
| (14) | | | EAST ASIA/PACIFIC | TREAT ASIA | 6,874. | WIRE TRANSFE | | | |
| (15) | | | EAST ASIA/PACIFIC | TREAT ASIA | 8,126. | WIRE TRANSFE | | | |
| (16) | | | EAST ASIA/PACIFIC | TREAT ASIA | 7,125. | WIRE TRANSFE | | | |

Schedule F (Form 990) 2011

JSA

1E1275 1.000

Schedule F (Form 990) 2011

| 1 | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method valuation (book, FMV appraisal, other) |
|------|--------------------------|--|--------------------------|----------------------|--------------------------|---------------------------------------|---|--|---|
| (1) | | | EAST ASIA/PACIFIC | TREAT ASIA | 7,275. | WIRE TRANSFE | | | |
| (2) | | | EUROPE | BASIC RESEAR | 180,000. | WIRE TRANSFE | | | |
| (3) | | | EUROPE | BASIC RESEAR | 53,276. | WIRE TRANSFE | | | |
| (4) | | | NORTH AMERICA (EXCL USA) | BASIC RESEAR | 80,000. | WIRE TRANSFE | | | |
| (5) | | | EAST ASIA/PACIFIC | TREAT ASIA | 5,100. | WIRE TRANSFE | | | |
| (6) | | | EAST ASIA/PACIFIC | TREAT ASIA | 5,625. | WIRE TRANSFE | | | |
| (7) | | | EAST ASIA/PACIFIC | TREAT ASIA | 5,775. | WIRE TRANSFE | | | |
| (8) | | | EAST ASIA/PACIFIC | TREAT ASIA | 6,525. | WIRE TRANSFE | | | |
| (9) | | | EAST ASIA/PACIFIC | TREAT ASIA | 6,525. | WIRE TRANSFE | | | |
| (10) | | | EAST ASIA/PACIFIC | TREAT ASIA | 6,600. | WIRE TRANSFE | | | |
| (11) | | | EAST ASIA/PACIFIC | TREAT ASIA | 6,600. | WIRE TRANSFE | | | |
| (12) | | | EAST ASIA/PACIFIC | TREAT ASIA | 7,275. | WIRE TRANSFE | | | |
| (13) | | | EAST ASIA/PACIFIC | TREAT ASIA | 7,500. | WIRE TRANSFE | | | |
| (14) | | | EAST ASIA/PACIFIC | TREAT ASIA | 19,000. | WIRE TRANSFE | | | |
| (15) | | | EAST ASIA/PACIFIC | TREAT ASIA | 19,830. | WIRE TRANSFE | | | |
| (16) | | | EAST ASIA/PACIFIC | TREAT ASIA | 20,000. | WIRE TRANSFE | | | |

Schedule F (Form 990) 2011

JSA

| 1 | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method valuation (book, FMV appraisal, other) |
|-----|--------------------------|--|-------------------|----------------------|--------------------------|---------------------------------------|---|--|---|
| 1) | | | EAST ASIA/PACIFIC | TREAT ASIA | 15,000. | WIRE TRANSFE | | | |
| 2) | | | SOUTH ASIA | TREAT ASIA | 20,000. | WIRE TRANSFE | | | |
| 3) | | | SOUTH ASIA | TREAT ASIA | 18,900. | WIRE TRANSFE | | | |
| 4) | | | EAST ASIA/PACIFIC | TREAT ASIA | 17,533. | WIRE TRANSFE | | | |
| 5) | | | EAST ASIA/PACIFIC | TREAT ASIA | 18,850. | WIRE TRANSFE | | | |
| 6) | | | EAST ASIA/PACIFIC | TREAT ASIA | 15,550. | WIRE TRANSFE | | | |
| 7) | | | EAST ASIA/PACIFIC | TREAT ASIA | 17,700. | WIRE TRANSFE | | | |
| 8) | | | EAST ASIA/PACIFIC | TREAT ASIA | 12,500. | WIRE TRANSFE | | | |
| 9) | | | EAST ASIA/PACIFIC | TREAT ASIA | 20,000. | WIRE TRANSFE | | | |
| 10) | | | EAST ASIA/PACIFIC | TREAT ASIA | 14,325. | WIRE TRANSFE | | | |
| 11) | | | EAST ASIA/PACIFIC | TREAT ASIA | 15,000. | WIRE TRANSFE | | | |
| 12) | | | EAST ASIA/PACIFIC | TREAT ASIA | 20,000. | WIRE TRANSFE | | | |
| 13) | | | EAST ASIA/PACIFIC | TREAT ASIA | 20,000. | WIRE TRANSFE | | | |
| 14) | | | EAST ASIA/PACIFIC | TREAT ASIA | 20,000. | WIRE TRANSFE | | | |
| 15) | | | EAST ASIA/PACIFIC | TREAT ASIA | 20,000. | WIRE TRANSFE | | | |
| 16) | | | EAST ASIA/PACIFIC | TREAT ASIA | 20,000. | WIRE TRANSFE | | | |

Schedule F (Form 990) 2011

JSA

| 1 | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method valuation (book, FMV appraisal, other) |
|------|--------------------------|--|-------------------|----------------------|--------------------------|---------------------------------------|-----------------------------------|--|---|
| (1) | | | EAST ASIA/PACIFIC | TREAT ASIA | 15,000. | WIRE TRANSFE | | | |
| (2) | | | SOUTH ASIA | TREAT ASIA | 5,625. | WIRE TRANSFE | | | |
| (3) | | | EAST ASIA/PACIFIC | TREAT ASIA | 5,625. | WIRE TRANSFE | | | |
| (4) | | | EAST ASIA/PACIFIC | TREAT ASIA | 5,625. | WIRE TRANSFE | | | |
| (5) | | | EAST ASIA/PACIFIC | TREAT ASIA | 5,625. | WIRE TRANSFE | | | |
| (6) | | | EAST ASIA/PACIFIC | TREAT ASIA | 5,625. | WIRE TRANSFE | | | |
| (7) | | | EAST ASIA/PACIFIC | TREAT ASIA | 11,250. | WIRE TRANSFE | | | |
| (8) | | | EAST ASIA/PACIFIC | TREAT ASIA | 11,250. | WIRE TRANSFE | | | |
| (9) | | | EAST ASIA/PACIFIC | TREAT ASIA | 11,250. | WIRE TRANSFE | | | |
| (10) | | | EAST ASIA/PACIFIC | TREAT ASIA | 11,250. | WIRE TRANSFE | | | |
| (11) | | | EAST ASIA/PACIFIC | TREAT ASIA | 15,000. | WIRE TRANSFE | | | |
| (12) | | | EAST ASIA/PACIFIC | TREAT ASIA | 5,625. | WIRE TRANSFE | | | |
| (13) | | | EAST ASIA/PACIFIC | TREAT ASIA | 27,000. | WIRE TRANSFE | | | |
| (14) | | | EAST ASIA/PACIFIC | TREAT ASIA | 34,985. | WIRE TRANSFE | | | |
| (15) | | | EAST ASIA/PACIFIC | TREAT ASIA | 35,000. | WIRE TRANSFE | | | |
| (16) | | | EAST ASIA/PACIFIC | TREAT ASIA | 100,000. | WIRE TRANSFE | | | |

Schedule F (Form 990) 2011

JSA

1E1275 1.000

| 1 | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method o valuation (book, FMV, appraisal, other) |
|------|--------------------------|--|-------------------|----------------------|--------------------------|---------------------------------------|---|--|--|
| (1) | | | EAST ASIA/PACIFIC | TREAT ASIA | 270,471. | WIRE TRANSFE | | | |
| (2) | | | EAST ASIA/PACIFIC | TREAT ASIA | 20,000. | WIRE TRANSFE | | | |
| (3) | | | EAST ASIA/PACIFIC | TREAT ASIA | 7,731. | WIRE TRANSFE | | | |
| (4) | | | EAST ASIA/PACIFIC | TREAT ASIA | 178,698. | WIRE TRANSFE | | | |
| (5) | | | EAST ASIA/PACIFIC | TREAT ASIA | 174,457. | WIRE TRANSFE | | | |
| (6) | | | EAST ASIA/PACIFIC | TREAT ASIA | 43,108. | WIRE TRANSFE | | | |
| (7) | | | EAST ASIA/PACIFIC | TREAT ASIA | 57,547. | WIRE TRANSFE | | | |
| (8) | | | EAST ASIA/PACIFIC | TREAT ASIA | 20,000. | WIRE TRANSFE | | | |
| (9) | | | EAST ASIA/PACIFIC | TREAT ASIA | 40,809. | WIRE TRANSFE | | | |
| (10) | | | EAST ASIA/PACIFIC | TREAT ASIA | 244,844. | WIRE TRANSFE | | | |
| (11) | | | EAST ASIA/PACIFIC | TREAT ASIA | 21,401. | WIRE TRANSFE | | | |
| (12) | | | EAST ASIA/PACIFIC | TREAT ASIA | 39,706. | WIRE TRANSFE | | | |
| (13) | | | EAST ASIA/PACIFIC | GMT INITIATI | 19,970. | WIRE TRANSFE | | | |
| (14) | | | EAST ASIA/PACIFIC | GMT INITIATI | 12,000. | WIRE TRANSFE | | | |
| (15) | | | SOUTH ASIA | GMT INITIATI | 15,567. | WIRE TRANSFE | | | |
| (16) | | | EAST ASIA/PACIFIC | GMT INITIATI | 19,958. | WIRE TRANSFE | | | |

Schedule F (Form 990) 2011

JSA

1E1275 1.000

| art IV, line 15, for any re art II can be duplicated if | | | Check this bo | ox if no one recipie | ent received n | nore than \$5,00 | 0 | ▶ 🗌 |
|--|--|--------------------------|--|---|--|--|---|---|
| (a) Name of | additional space i | is needed. | | | | | | |
| ` ' | | | | | | | | |
| organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
| | | EUROPE | BASIC RESEAR | 46,872. | WIRE TRANSFE | | | |
| | | EAST ASIA/PACIFIC | TREAT ASIA | 58,630. | WIRE TRANSFE | | | |
| | | EAST ASIA/PACIFIC | BASIC RESEAR | 110,000. | WIRE TRANSFE | | | |
| | | EUROPE | BASIC RESEAR | 110,000. | WIRE TRANSFE | | | |
| | | EAST ASIA/PACIFIC | BASIC RESEAR | 31,248. | WIRE TRANSFE | | | |
| | | EUROPE | BASIC RESEAR | 164,743. | WIRE TRANSFE | | | |
| | | EAST ASIA/PACIFIC | TREAT ASIA | 8,470. | WIRE TRANSFE | | | |
| | | SOUTH AMERICA | GMT INITIATI | 20,000. | WIRE TRANSFE | | | |
| | | SOUTH AMERICA | GMT INITIATI | 20,000. | WIRE TRANSFE | | | |
| | | SOUTH AMERICA | GMT INITIATI | 19,530. | WIRE TRANSFE | | | |
| | | SOUTH AMERICA | GMT INITIATI | 19,920. | WIRE TRANSFE | | | |
| | | CARIBBEAN/CENTRAL AMERIC | GMT INITIATI | 20,000. | WIRE TRANSFE | | | |
| | | CARIBBEAN/CENTRAL AMERIC | GMT INITIATI | 19,450. | WIRE TRANSFE | | | |
| | | NORTH AMERICA (EXCL USA) | GMT INITIATI | 15,615. | WIRE TRANSFE | | | |
| | | CARIBBEAN/CENTRAL AMERIC | GMT INITIATI | 20,000. | WIRE TRANSFE | | | |
| | | SOUTH AMERICA | GMT INITIATI | 20,000. | WIRE TRANSFE | | | |
| | Il number of recipient organ | . • | EAST ASIA/PACIFIC EUROPE EAST ASIA/PACIFIC EUROPE EAST ASIA/PACIFIC SOUTH AMERICA SOUTH AMERICA SOUTH AMERICA CARIBBEAN/CENTRAL AMERIC NORTH AMERICA (EXCL USA) CARIBBEAN/CENTRAL AMERIC SOUTH AMERICA CARIBBEAN/CENTRAL AMERIC NORTH AMERICA CARIBBEAN/CENTRAL AMERIC | EAST ASIA/PACIFIC EAST ASIA/PACIFIC BASIC RESEAR EUROPE BASIC RESEAR EAST ASIA/PACIFIC BASIC RESEAR EUROPE BASIC RESEAR EUROPE BASIC RESEAR EAST ASIA/PACIFIC TREAT ASIA SOUTH AMERICA GMT INITIATI SOUTH AMERICA GMT INITIATI SOUTH AMERICA GMT INITIATI CARIBBEAN/CENTRAL AMERIC GMT INITIATI | EAST ASIA/PACIFIC TREAT ASIA 58,630. EAST ASIA/PACIFIC BASIC RESEAR 110,000. EUROPE BASIC RESEAR 110,000. EAST ASIA/PACIFIC BASIC RESEAR 31,248. EUROPE BASIC RESEAR 31,248. EUROPE BASIC RESEAR 164,743. EAST ASIA/PACIFIC TREAT ASIA 8,470. SOUTH AMERICA GMT INITIATI 20,000. SOUTH AMERICA GMT INITIATI 19,530. SOUTH AMERICA GMT INITIATI 19,530. CARIBBEAN/CENTRAL AMERIC GMT INITIATI 20,000. CARIBBEAN/CENTRAL AMERIC GMT INITIATI 19,450. NORTH AMERICA (EXCL USA) GMT INITIATI 15,615. CARIBBEAN/CENTRAL AMERIC GMT INITIATI 20,000. SOUTH AMERICA (EXCL USA) GMT INITIATI 20,000. | BAST ASIA/PACIFIC TREAT ASIA 58,630. WIRE TRANSFE BAST ASIA/PACIFIC BASIC RESEAR 110,000. WIRE TRANSFE BUROPE BASIC RESEAR 110,000. WIRE TRANSFE BASIC RESEAR 31,248. WIRE TRANSFE BUROPE BASIC RESEAR 31,248. WIRE TRANSFE BUROPE BASIC RESEAR 164,743. WIRE TRANSFE BASIC RESEAR 110,000. WIRE TRANSFE BASIC RESEAR 1 | EAST ASIA/PACIFIC TREAT ASIA 58,630. WIRE TRANSFE EAST ASIA/PACIFIC BASIC RESEAR 110,000. WIRE TRANSFE BURDPE BASIC RESEAR 110,000. WIRE TRANSFE BASIC RESEAR 110,000. WIRE TRANSFE BASIC RESEAR 110,000. WIRE TRANSFE BASIC RESEAR 164,743. WIRE TRANSFE BASIC RESEAR 164,743. WIRE TRANSFE BASIC RESEAR SOUTH AMERICA GOT INITIATI 20,000. WIRE TRANSFE SOUTH AMERICA GOT INITIATI 19,530. WIRE TRANSFE SOUTH AMERICA GOT INITIATI 19,530. WIRE TRANSFE CARIBBEAN/CENTRAL AMERIC GOT INITIATI 19,450. WIRE TRANSFE CARIBBEAN/CENTRAL AMERIC GOT INITIATI 19,450. WIRE TRANSFE CARIBBEAN/CENTRAL AMERIC GOT INITIATI 15,615. WIRE TRANSFE CARIBBEAN/CENTRAL AMERIC GOT INITIATI 20,000. WIRE TRANSFE | MAST ASIA/PACIFIC TREAT ASIA 58,630. WIRE TRANSFE RAST ASIA/PACIFIC BASIC RESEAR 110,000. WIRE TRANSFE BURDOPE BASIC RESEAR 110,000. WIRE TRANSFE BASIC RESEAR 110,000. WIRE TRANSFE BASIC RESEAR 110,000. WIRE TRANSFE BASIC RESEAR 164,743. WIRE TRANSFE SOUTH AMERICA GMT INITIATI 20,000. WIRE TRANSFE SOUTH AMERICA GMT INITIATI 19,920. WIRE TRANSFE CARIBBEAN/CENTRAL AMERIC GMT INITIATI 20,000. WIRE TRANSFE CARIBBEAN/CENTRAL AMERIC GMT INITIATI 19,450. WIRE TRANSFE CARIBBEAN/CENTRAL AMERIC GMT INITIATI 15,615. WIRE TRANSFE CARIBBEAN/CENTRAL AMERIC GMT INITIATI 20,000. WIRE TRANSFE CARIBBEAN/CENTRAL AMERIC GMT INITIATI 20,000. WIRE TRANSFE SOUTH AMERICA (EXCL USA) GMT INITIATI 20,000. WIRE TRANSFE CARIBBEAN/CENTRAL AMERIC GMT INITIATI 20,000. WIRE TRANSFE SOUTH AMERICA GMT INITIATI 20,000. WIRE TRANSFE AND CARIBBEAN/CENTRAL AMERIC GMT INITIATI 20,000. WIRE TRANSFE CARIBBEAN/CENTRAL AMERICA GMT INITIATI 20,000. WIRE TRANSFE |

Schedule F (Form 990) 2011

JSA

| 1 | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV appraisal, other) |
|------|--------------------------|--|--------------------------|----------------------|--------------------------|---------------------------------------|---|--|--|
| (1) | | | SOUTH AMERICA | GMT INITIATI | 20,000. | WIRE TRANSFE | | | |
| (2) | | | SOUTH AMERICA | GMT INITIATI | 10,985. | WIRE TRANSFE | | | |
| (3) | | | SOUTH AMERICA | GMT INITIATI | 14,500. | WIRE TRANSFE | | | |
| (4) | | | EAST ASIA/PACIFIC | TREAT ASIA | 39,149. | WIRE TRANSFE | | | |
| (5) | | | EUROPE | BASIC RESEAR | 83,200. | WIRE TRANSFE | | | |
| (6) | | | SUB-SAHARAN AFRICA | GMT INITIATI | 12,080. | WIRE TRANSFE | | | |
| (7) | | | SUB-SAHARAN AFRICA | GMT INITIATI | 12,500. | WIRE TRANSFE | | | |
| (8) | | | SUB-SAHARAN AFRICA | GMT INITIATI | 20,100. | WIRE TRANSFE | | | |
| (9) | | | SUB-SAHARAN AFRICA | GMT INITIATI | 20,000. | WIRE TRANSFE | | | |
| (10) | | | SUB-SAHARAN AFRICA | GMT INITIATI | 10,173. | WIRE TRANSFE | | | |
| (11) | | | SUB-SAHARAN AFRICA | GMT INITIATI | 15,000. | WIRE TRANSFE | | | |
| (12) | | | SUB-SAHARAN AFRICA | GMT INITIATI | 17,456. | WIRE TRANSFE | | | |
| (13) | | | EAST ASIA/PACIFIC | TREAT ASIA G | 6,000. | WIRE TRANSFE | | | |
| (14) | | | EAST ASIA/PACIFIC | TREAT ASIA G | 17,000. | WIRE TRANSFE | | | |
| (15) | | | CARIBBEAN/CENTRAL AMERIC | GMT INITIATI | 10,000. | WIRE TRANSFE | | | |
| (16) | | | CARIBBEAN/CENTRAL AMERIC | GMT INITIATI | 19,697. | WIRE TRANSFE | | | |

Schedule F (Form 990) 2011

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| 1 | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV appraisal, other) |
|------|--------------------------|--|--------------------------|----------------------|--------------------------|---------------------------------------|---|--|--|
| (1) | | | CARIBBEAN/CENTRAL AMERIC | GMT INITIATI | 19,908. | WIRE TRANSFE | | | |
| (2) | | | CARIBBEAN/CENTRAL AMERIC | GMT INITIATI | 20,000. | WIRE TRANSFE | | | |
| (3) | | | CARIBBEAN/CENTRAL AMERIC | GMT INITIATI | 20,000. | WIRE TRANSFE | | | |
| (4) | | | CARIBBEAN/CENTRAL AMERIC | GMT INITIATI | 12,495. | WIRE TRANSFE | | | |
| (5) | | | CARIBBEAN/CENTRAL AMERIC | GMT INITIATI | 10,000. | WIRE TRANSFE | | | |
| (6) | | | CARIBBEAN/CENTRAL AMERIC | GMT INITIATI | 10,000. | WIRE TRANSFE | | | |
| (7) | | | CARIBBEAN/CENTRAL AMERIC | GMT INITIATI | 15,000. | WIRE TRANSFE | | | |
| (8) | | | EAST ASIA/PACIFIC | BASIC RESEAR | 57,288. | WIRE TRANSFE | | | |
| (9) | | | EAST ASIA/PACIFIC | TREAT ASIA | 5,040. | WIRE TRANSFE | | | |
| (10) | | | SUB-SAHARAN AFRICA | GMT INITIATI | 16,200. | WIRE TRANSFE | | | |
| (11) | | | EAST ASIA/PACIFIC | TREAT ASIA G | 6,000. | WIRE TRANSFE | | | |
| (12) | | | SOUTH ASIA | TREAT ASIA G | 14,250. | WIRE TRANSFE | | | |
| (13) | | | SOUTH ASIA | GMT INITIATI | 11,960. | WIRE TRANSFE | | | |
| (14) | | | SUB-SAHARAN AFRICA | GMT INITIATI | 12,000. | WIRE TRANSFE | | | |
| (15) | | | CARIBBEAN/CENTRAL AMERIC | GMT INITIATI | 12,000. | WIRE TRANSFE | | | |
| (16) | | | CARIBBEAN/CENTRAL AMERIC | GMT INITIATI | 24,000. | WIRE TRANSFE | | | |

Schedule F (Form 990) 2011

JSA

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| 1 | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV appraisal, other) |
|------|--------------------------|--|--------------------------|----------------------|--------------------------|---------------------------------------|---|--|--|
| (1) | | | SOUTH AMERICA | GMT INITIATI | 24,000. | WIRE TRANSFE | | | |
| (2) | | | RUSSIA/NEWLY INDEPENDENT | GMT INITIATI | 12,000. | WIRE TRANSFE | | | |
| (3) | | | EAST ASIA/PACIFIC | TREAT ASIA | 6,538. | WIRE TRANSFE | | | |
| (4) | | | EAST ASIA/PACIFIC | TREAT ASIA | 12,917. | WIRE TRANSFE | | | |
| (5) | | | EAST ASIA/PACIFIC | TREAT ASIA | 17,089. | WIRE TRANSFE | | | |
| (6) | | | EUROPE | BASIC RESEAR | 79,867. | WIRE TRANSFE | | | |
| (7) | | | EAST ASIA/PACIFIC | TREAT ASIA | 8,013. | WIRE TRANSFE | | | |
| (8) | | | EAST ASIA/PACIFIC | TREAT ASIA | 5,393. | WIRE TRANSFE | | | |
| (9) | | | EAST ASIA/PACIFIC | TREAT ASIA | 5,251. | WIRE TRANSFE | | | |
| (10) | | | EAST ASIA/PACIFIC | TREAT ASIA | 5,859. | WIRE TRANSFE | | | |
| (11) | | | EAST ASIA/PACIFIC | TREAT ASIA | 6,085. | WIRE TRANSFE | | | |
| (12) | | | EAST ASIA/PACIFIC | TREAT ASIA | 5,876. | WIRE TRANSFE | | | |
| (13) | | | RUSSIA/NEWLY INDEPENDENT | GMT INITIATI | 19,970. | WIRE TRANSFE | | | |
| (14) | | | RUSSIA/NEWLY INDEPENDENT | GMT INITIATI | 19,663. | WIRE TRANSFE | | | |
| (15) | | | RUSSIA/NEWLY INDEPENDENT | GMT INITIATI | 19,975. | WIRE TRANSFE | | | |
| (16) | | | EUROPE | GMT INITIATI | 8,000. | WIRE TRANSFE | | | |

Schedule F (Form 990) 2011

JSA

Schedule F (Form 990) 2011

Page

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Ves" to Form 990

| 1 | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|------|--------------------------|--|--------------------------|----------------------|--------------------------|---------------------------------------|---|--|---|
| (1) | | | RUSSIA/NEWLY INDEPENDENT | GMT INITIATI | 20,000. | WIRE TRANSFE | | | |
| (2) | | | RUSSIA/NEWLY INDEPENDENT | GMT INITIATI | 15,000. | WIRE TRANSFE | | | |
| (3) | | | RUSSIA/NEWLY INDEPENDENT | GMT INITIATI | 20,000. | WIRE TRANSFE | | | |
| (4) | | | EAST ASIA/PACIFIC | GMT INITIATI | 25,000. | WIRE TRANSFE | | | |
| (5) | | | EAST ASIA/PACIFIC | TREAT ASIA | 100,000. | WIRE TRANSFE | | | |
| (6) | | | EAST ASIA/PACIFIC | BASIC RESEAR | 26,006. | WIRE TRANSFE | | | |
| (7) | | | SUB-SAHARAN AFRICA | PUBLIC POLIC | 60,555. | WIRE TRANSFE | | | |
| (8) | | | EAST ASIA/PACIFIC | TREAT ASIA | 10,922. | WIRE TRANSFE | | | |
| (9) | | | EAST ASIA/PACIFIC | TREAT ASIA | 10,000. | WIRE TRANSFE | | | |
| (10) | | | EAST ASIA/PACIFIC | TREAT ASIA | 175,000. | WIRE TRANSFE | | | |
| (11) | | | EAST ASIA/PACIFIC | TREAT ASIA | 175,004. | WIRE TRANSFE | | | |
| (12) | | | EAST ASIA/PACIFIC | TREAT ASIA | 8,333. | WIRE TRANSFE | | | |
| (13) | | | EAST ASIA/PACIFIC | TREAT ASIA | 50,000. | WIRE TRANSFE | | | |
| (14) | | | NORTH AMERICA (EXCL USA) | BASIC RESEAR | 125,000. | WIRE TRANSFE | | | |
| (15) | | | | | | | | | |
| (16) | | | | | | | | | |

Schedule F (Form 990) 2011

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III Part III can be duplicated if additional space is needed. (h) Method of (a) Type of grant or assistance (b) Region (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description valuation recipients cash grant cash non-cash of non-cash (book, FMV, disbursement appraisal, other) assistance assistance (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)(11) (12) (13)(14)(15)(16)(17)

Schedule F (Form 990) 2011

(18)

| Part | roreign Forms | | |
|------|--|-----|------|
| 1 | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) | Yes | X No |
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) | Yes | X No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471) | Yes | X No |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) | Yes | X No |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865) | Yes | X No |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713) | Yes | X No |

Schedule F (Form 990) 2011

Don't V Ocean I o

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

FOREIGN ACTIVITIES

PART I, LINE 2

INTERNATIONAL ORGANIZATIONS ARE RECOMMENDED FOR FUNDING BASED UPON THE RESULTS OF COMMUNITY-BASED PEER REVIEW AND/OR PROGRAM STAFF ASSESSMENT OF PROPOSAL MERIT AND ORGANIZATION CAPACITY TO UNDERTAKE PROPOSED PROJECTS THAT ARE CHARITABLE IN PURPOSE. PRE-AWARD DUE-DILIGENCE FOR NEW INTERNATIONAL GRANTEES INCLUDES REVIEW OF ORGANIZATION DOCUMENTS AND REGISTRATIONS TO VERIFY THAT THE ORGANIZATION OPERATES FOR A CHARITABLE PURPOSE AND THAT BASIC CAPACITY FOR PROJECT OVERSIGHT AND GOVERNANCE HAS BEEN ESTABLISHED. ALL INTERNATIONAL GRANTEES ARE REQUIRED TO REPORT SEMI-ANNUALLY ON PROJECT PROGRESS AND EXPENDITURES; CONTINUED REPORTING IS REQUIRED UNTIL SUCH TIME AS GRANT FUNDS ARE EXPENDED IN FULL. REPORTS ARE REVIEWED BY ADMINISTRATIVE AND PROGRAM STAFF. ADDITIONAL OVERSIGHT IS PROVIDED AS NECESSARY BY MEANS OF ONGOING, INFORMAL CONTACT WITH SITES REGARDING PROGRESS AND TECHNICAL ISSUES AND SITE VISITS WHERE FEASIBLE. INTERNATIONAL RESEARCH GRANT RECIPIENTS SUBMIT AN INTERIM AND A FINAL PROGRESS REPORTING ADDITION TO EXPENDITURES REPORTS DUE FOLLOWING THE ENDS OF THE 2ND, 3RD AND FINAL QUARTERS OF THE PERFORMANCE PERIOD.

FOREIGN ACTIVITIES

PART I, LINE 3, COLUMN D

THE FOUNDATION FOR AIDS RESEARCH CONDUCTS MANY OF ITS GRANT-MAKING PROGRAM SERVICES (SEE PART III OF FORM 990) IN U.S. AND FOREIGN JURISDICTIONS. IN COLUMN D, THE ORGANIZATION HAS REPORTED THE BASIC PROGRAM THESE GRANTS SUPPORT; PLEASE REFER TO PART III FOR MORE

Part V S

Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

INFORMATION ABOUT THESE PROGRAMS/INITIATIVES.

FOREIGN ACTIVITIES - STATUS OF GRANTEES

THE FOUNDATION FOR AIDS RESEARCH SUPPORTS MANY NON-U.S. ORGANIZATIONS IN

THE FIGHT AGAINST AIDS AND HIV-RELATED DISEASES. FOR PURPOSES OF

SCHEDULE F, PART II, LINE 2 - ALL 158 CHARITIES SUPPORTED ARE PRESUMED TO

BE THE EQUIVALENT OF U.S. CHARITIES.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection Employer identification number

| THE FOUNDATION FOR AIDS RESI | EARCH | | | | 13-316381 | <u>/</u> |
|---|------------------------|-------------|------------------------------------|-----------------------------------|--|---|
| Part I Fundraising Activities. Co Form 990-EZ filers are no | | | | "Yes" to Form 9 | 90, Part IV, line | 17. |
| _ | <u> </u> | | | antiviting Charles | II that apply | |
| 1 Indicate whether the organization ra | _ | | - | | | |
| a X Mail solicitations | е | | | non-government g | | |
| b X Internet and email solicitations | | | | government grants | 3 | |
| c X Phone solicitations | g | X Spec | cial fundra | ising events | | |
| d In-person solicitations | | | | | | |
| 2a Did the organization have a written | | | | | | |
| or key employees listed in Form 99 | 0, Part VII) or entity | in connec | tion with p | professional fundrai | sing services? | X Yes No |
| b If "Yes," list the ten highest paid in compensated at least \$5,000 by the | | (fundraise | rs) pursua | ant to agreements | under which the | fundraiser is to be |
| (i) Name and address of individual or entity (fundraiser) | (ii) Activity | custody o | draiser have r control of outions? | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col. (i) | (vi) Amount paid to (or retained by) organization |
| | | Yes | No | | | |
| 1 | FUNDRAISING | | | | | |
| AAB PRODUCTIONS | EVENT/PROD | | Х | 11,113,567. | 253,625. | 10,859,942. |
| 2 | DIRECT | | | | | |
| JOHN MINI CONSULTING INC | MAIL | | X | 2,012,934. | 120,750. | 1,892,184. |
| 3 PUBLIC INTEREST | TELE | | | | == 400 | 22.25 |
| COMMUNICATIONS | MARKETING | | Х | 52,634. | 75,489. | -22,855. |
| 4 | EVENT | | | 440 001 | 26 000 | 410 001 |
| SGR CONSULTING | PRODUCTION | | Х | 448,891. | 36,000. | 412,891. |
| 5 TELEFUND | TELE MARKETING | | x | 60 001 | 55 O60 | 12 041 |
| 6 | FUNDRAISING | | Λ | 69,901. | 55,960. | 13,941. |
| SANKY COMMUNICATIONS, INC. | COUNSEL | | x | 389,524. | 102,792. | 286,732. |
| 7 | COOMBE | | | 303/324. | 102,732 | 2007732. |
| • | | | | | | |
| 8 | | | | | | |
| 9 | | | | | | |
| 10 | | | | | | |
| | | | | | | |
| Total | | | | 14,087,451. | 644,616. | 13,442,835. |
| 3 List all states in which the organiz registration or licensing. | ation is registered of | or licensed | l to solicit | | | |
| AL, AK, AZ, AR, CA, CO, CT, DC, FL, C | GA, HI, IL, | | | | | |
| KS, KY, LA, ME, MD, MA, MI, MN, MS, N | MO, NH, NJ, NM, NY | ,NC,ND | ,OH, | | | |
| OK, OR, PA, RI, SC, TN, TX, UT, VA, V | WA,WV,WI, | | | | | |
| | | | | | | |
| | | | | | | |
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| | | | | | | |

Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2011 Page 2

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

| | | gross receipts greater than \$5,0 | 00. | | | |
|-----------------|------|--|---------------------------|--|------------------------|--|
| | | | (a) Event #1 CANNES | (b) Event #2 DALLAS | (c) Other Events | (d) Total events (add col. (a) through |
| 4. | | | (event type) | (event type) | (total number) | col. (c)) |
| Revenue | | Gross receipts | 8,115,663. | 5,117,246. | 7,111,797. | 20,344,706 |
| ď | 2 | Less: Charitable contributions | 7,672,663. | 5,016,846. | 6,265,767. | 18,955,276 |
| | 3 | Gross income (line 1 minus line 2). | 443,000. | 100,400. | 846,030. | 1,389,430 |
| | 4 | Cash prizes | | | 0 | |
| | 5 | Noncash prizes | | | 0 | |
| sesus | 6 | Rent/facility costs | 969,399. | 70,611. | 298,109. | 1,338,119 |
| Direct Expenses | 7 | Food and beverages | 2,090,342. | 2,727,966. | 2,824,860. | 7,643,168 |
| Dire | 8 | Entertainment | | | 0 | |
| | 9 | Other direct expenses | | | 0 | |
| | 10 | Direct expense summary. Add lines 4 | through 9 in column (d) |) | | (8,981,287.) |
| | | Net income summary. Combine line | | | | -7 , 591 , 857 |
| Pa | rt I | Gaming. Complete if the orgathan \$15,000 on Form 990-E | | es" to Form 990, Par | t IV, line 19, or repo | rted more |
| Revenue | | | (a) Bingo | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col. (a) through col. (c)) |
| Re | 1 | Gross revenue | | | | |
| es | | Cash prizes | | | | |
| Expens | 3 | Noncash prizes | | | | |
| Direct Expenses | 4 | Rent/facility costs | | | | |
| | 5 | Other direct expenses | | | | |
| | | Volunteer labor | Yes% | Yes% No | Yes% No | |
| | 7 | Direct expense summary. Add lines 2 | 2 through 5 in column (d) |) | | () |
| | 8 | Net gaming income summary. Comb | ine line 1, column d, and | d line 7 | | |
| 9 a | ls | nter the state(s) in which the organizate the organization licensed to operate of "No," explain: | | of these states? | | YesNo |
| | | /ere any of the organization's gaming "Yes," explain: | licenses revoked, suspe | | | . — — |

THE FOUNDATION FOR AIDS RESEARCH

| Sched | ule G (Form 990 or 990-EZ) 2011 Page 3 |
|-------|---|
| 11 | Does the organization operate gaming activities with nonmembers? Yes No |
| 12 | Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity |
| | formed to administer charitable gaming? |
| 13 | Indicate the percentage of gaming activity operated in: |
| а | The organization's facility |
| b | An outside facility |
| 14 | Enter the name and address of the person who prepares the organization's gaming/special events books and |
| | records: |
| | |
| | Name ► |
| | Address |
| | Address ▶ |
| 15a | Does the organization have a contract with a third party from whom the organization receives gaming |
| ···u | revenue? |
| b | If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the |
| | amount of gaming revenue retained by the third party ▶ \$ |
| С | If "Yes," enter name and address of the third party: |
| | |
| | Name ▶ |
| | |
| | Address ► |
| 16 | Gaming manager information: |
| 10 | Gaming manager information. |
| | Name ▶ |
| | |
| | Gaming manager compensation ▶ \$ |
| | |
| | Description of services provided |
| | |
| | Director/officer Employee Independent contractor |
| 17 | Mandatary distributions: |
| ı, | Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to |
| | |
| b | retain the state gaming license?YesNo Enter the amount of distributions required under state law to be distributed to other exempt organizations |
| | or spent in the organization's own exempt activities during the tax year ▶ \$ |
| Part | Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, |
| | columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this |
| | part to provide any additional information (see instructions). |
| SCH | EDULE G, PART I |
| mur | FOUNDATION FOR AIDS RESEARCH ACTUALLY PAID OUT \$491,117 IN |
| 100 | FOUNDATION FOR AIDS RESEARCH ACTUALLY PAID OUT \$491,117 IN |
| FUN | DRAISING EXPENSES FOR THE YEAR ENDING SEPTEMBER 30, 2012. THIS AMOUNT |
| 2 021 | Diditorno Entended for the fam. Engino dell'eneer ooy 2012. This intoin |
| IS | REPORTED ON PART IX, LINE 11(E). FOR PURPOSES OF SCHEDULE G, THE |
| | |
| FOU | NDATION IS REPORTING ALL AMOUNTS PAID TO THE CONSULTANTS LISTED ON |
| | |
| PAR' | T I, REGARDLESS OF WHETHER SUCH AMOUNTS WERE PURE FUNDRAISING EXPENSES |
| _ | |
| OR I | EVENT PRODUCTION COSTS. ON SCHEDULE G, THE TOTAL AMOUNT PAID TO THE |

THE FOUNDATION FOR AIDS RESEARCH

| Does the organization operate gaming activities with nonmembers? |
|--|
| set the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? |
| formed to administer charitable gaming? |
| Indicate the percentage of gaming activity operated in: a The organization's facility |
| a The organization's facility |
| b An outside facility |
| Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name ▶ Address ▶ 5a Does the organization have a contract with a third party from whom the organization receives gaming revenue? |
| Name ▶ |
| Address ► 5 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? |
| Address ► 5 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? |
| 5a Does the organization have a contract with a third party from whom the organization receives gaming revenue? |
| revenue? |
| b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ |
| amount of gaming revenue retained by the third party ▶ \$ c If "Yes," enter name and address of the third party: Name ▶ Address ▶ 6 Gaming manager information: Name ▶ Gaming manager compensation ▶ \$ Description of services provided ▶ Director/officer |
| amount of gaming revenue retained by the third party ▶ \$ c If "Yes," enter name and address of the third party: Name ▶ Address ▶ 6 Gaming manager information: Name ▶ Gaming manager compensation ▶ \$ Description of services provided ▶ Director/officer |
| c If "Yes," enter name and address of the third party: Name ▶ Address ▶ Gaming manager information: Name ▶ Gaming manager compensation ▶ \$ Description of services provided ▶ Director/officer |
| Address ▶ Gaming manager information: Name ▶ Gaming manager compensation ▶ \$ Description of services provided ▶ Director/officer |
| Address ▶ Gaming manager information: Name ▶ Gaming manager compensation ▶ \$ Description of services provided ▶ Director/officer |
| Gaming manager information: Name ▶ Gaming manager compensation ▶ \$ Description of services provided ▶ Director/officer |
| Name ► |
| Description of services provided ▶ Director/officer |
| Director/officer |
| Director/officer |
| 7 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ Part IV Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this |
| a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? |
| a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ Part IV Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this |
| retain the state gaming license? |
| b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ Part IV Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this |
| or spent in the organization's own exempt activities during the tax year ▶ \$ Part IV Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this |
| Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this |
| columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this |
| |
| |
| part to provide any additional information (see instructions). |
| ORGANIZATIONS LISTED IS \$644,617. OF THAT \$644,617, ONLY \$491,117 WAS |
| DATE FOR BUNDDATOING GERVICES. MUE DEMAINING \$152 500 MAG DAID FOR BUENM |
| PAID FOR FUNDRAISING SERVICES, THE REMAINING \$153,500 WAS PAID FOR EVENT |
| PRODUCTION SERVICES |
| PRODUCTION SERVICES. |
| |
| |
| IN THE INTERESTS OF CLARITY, THE FOUNDATION WOULD ALSO LIKE TO MAKE CLEAR |
| IN IND INIDADIO OF CHARITY THE FOUNDATION WOULD ADDO DIKE TO MAKE CHEAR |
| THAT THE COMPENSATION REPORTED AS HAVING BEEN PAID TO THE PROFESSIONAL |
| Int the contained has an invended in the transfer in the trans |
| FUNDRAISERS REPORTED ON SCHEDULE G IS REPORTED ON A FISCAL YEAR BASIS. |

THE FOUNDATION FOR AIDS RESEARCH

| Sched | ule G (Form 990 or 990-EZ) 2011 Page 3 |
|-------|--|
| 11 | Does the organization operate gaming activities with nonmembers? Yes No |
| 12 | Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity |
| | formed to administer charitable gaming? |
| 13 | Indicate the percentage of gaming activity operated in: |
| а | The organization's facility |
| b | An outside facility |
| 14 | Enter the name and address of the person who prepares the organization's gaming/special events books and |
| | records: |
| | |
| | Name ► |
| | Address ▶ |
| 152 | Does the organization have a contract with a third party from whom the organization receives gaming |
| ısa | revenue? |
| b | If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the |
| - | amount of gaming revenue retained by the third party \$\bigs\ \bigs\ \bigs\ |
| С | If "Yes," enter name and address of the third party: |
| | Name ▶ |
| | |
| | Address ► |
| 16 | Gaming manager information: |
| | Name ▶ |
| | Gaming manager compensation ▶ \$ |
| | Description of services provided ▶ |
| | |
| | Director/officer Employee Independent contractor |
| 17 | Mandatory distributions: |
| ı, | Is the organization required under state law to make charitable distributions from the gaming proceeds to |
| a | retain the state gaming license? |
| b | Enter the amount of distributions required under state law to be distributed to other exempt organizations |
| | or spent in the organization's own exempt activities during the tax year ▶ \$ |
| Par | Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, |
| | columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this |
| | part to provide any additional information (see instructions). |
| SOM | E OF THOSE SAME FUNDRAISERS ARE REPORTED ON THE FOUNDATION'S TOP 5 |
| HIG | HEST PAID INDEPENDENT CONTRACTORS LIST (IN SCHEDULE O). IN COMPLIANCE |
| | W MUE INGERVACETONS TO THE FORM AND COMPENSATION REPORTED FOR THE |
| W I T | H THE INSTRUCTIONS TO THE FORM 990, COMPENSATION REPORTED FOR PART VII |
| (AN | D LISTED IN SCHEDULE O) IS REPORTED ON A CALENDAR YEAR BASIS. |
| ACC | ORDINGLY, AMOUNTS ON PART VII AND SCHEDULE G WILL NOT RECONCILE. |
| | |
| | |
| | Schedule G (Form 990 or 990-EZ) 2011 |

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2011

Open to Public

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Employer identification number Name of the organization THE FOUNDATION FOR AIDS RESEARCH 13-3163817 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and X the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed (f) Method of valuation (a) Name and address of organization (b) EIN (e) Amount of non-(h) Purpose of grant (book, FMV, appraisal, or government if applicable non-cash assistance or assistance cash assistance (1) WEILL MEDICAL COLLEGE OF CORNELL 575 LEXINGTON AVE, 9TH FLOOR 13-1623978 501(C)(3) 15,626. BASIC RESEARCH (2) UNIVERSITY OF TEXAS SOUTHWESTERN GRANTS MAN 17-5600286 501(C)(3) PO BOX 841753 DALLAS, TX 75284-1753 15,626. BASIC RESEARCH (3) UNIVERSITY OF CALIFORNIA-DAVIS PO BOX 989062 WEST SACRAMENTO, CA 95798 94-6036494 501(C)(3) 26,043. BASIC RESEARCH (4) CALIFORNIA INSTITUTE OF TECHNOLOGY 95-1643307 501(C)(3) 26,043. BASIC RESEARCH 1200 E CALIFORNIA BD M/C 201-15 (5) UNIVERSITY OF MINNESOTA 41-6007513 501(C)(3) 200 OAK STREET SE MINNEAPOLIS, MN 55455 26,043. BASIC RESEARCH (6) DANA FARBER CANCER INSTITUTE 44 BINNEY STREET BP412 BOSTON, MA 02115 04-2263040 501(C)(3) 5,208. BASIC RESEARCH (7) THE BOARD OF REGENTS OF THE UNIVERSITY OF W 21 NORTH PARK STREET, SUITE 6401 39-6006492 501(C)(3) 18,507. BASIC RESEARCH (8) AARON DIAMOND AIDS RESEARCH CENTER 455 FIRST AVENUE, 7TH FLOOR 13-3540234 501(C)(3) 62,499. BASIC RESEARCH (9) VGTI-FLORIDA 11350 SW VILLAGE PARKWAY, 3RD FLOOR 36-4618350 501(C)(3) 50,000. BASIC RESEARCH (10) THE REGENTS OF THE UNIVERSITY OF CALIFORNIA 405 HILGARD AVE, BOX 951432 1125 MURPHY HAL 95-6006143 501(C)(3) 42,857. BASIC RESEARCH (11) UNIVERSITY OF UTAH RESEARCH ACCOUNTING PRESIDENTS CIRCLE, RM 406 87-6000525 501(C)(3) 49,978. BASIC RESEARCH (12) THE UNIVERSITY OF ALABAMA BIRMINGHAM 1530 THIRD AVE SOUTH AB990 16-3605396 501(C)(3) BASIC RESEARCH 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (2011)

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

2011

Department of the Treasury
Internal Revenue Service
Name of the organization

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Open to Public Inspection

THE FOUNDATION FOR AIDS RESEARCH 13-3163817 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and X the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash (f) Method of valuation (a) Name and address of organization (e) Amount of non-(h) Purpose of grant (book, FMV, appraisal, or government if applicable non-cash assistance or assistance cash assistance (1) GEORGE MASON UNIVERSITY 4400 UNIVERSITY DR, MS4C6 FAIRFAX, VA 22030 54-0836354 501(C)(3) 61,540. BASIC RESEARCH (2) JOHNS HOPKINS UNIVERSITY 1830 E MONUMENT STREET, STE 8074 52-0595110 501(C)(3) 56,001. BASIC RESEARCH (3) THE REGENTS UNIVERSITY OF CALIFORNIA 946036493 BASIC RESEARCH 1855 FOLSOM ST, MCB 425 BOX 0897 501(C)(3) 108,000. (4) UNIVERSITY OF PENNSYLVANIA 23-1352685 501(C)(3) 80,000. BASIC RESEARCH 4351 WALNUT STREET (5) JOHNS HOPKINS UNIVERSITY CENTRAL LOCKBOX/DE 12529 COLLECTIONS CENTER DRIVE 520595110 501(C)(3) 180,000. BASIC RESEARCH (6) CASE WESTERN RESERVE UNIVERSITY SCHOOL OF M 10900 EUCLID AVE., LC 4960, WOOD BLDG 34-1018992 501(C)(3) 46,863. BASIC RESEARCH (7) AARON DIAMOND AIDS RESEARCH CENTER 455 FIRST AVE, 7TH FLOOR 13-3540234 501(C)(3) 46,872. BASIC RESEARCH (8) NEW ENGLAND PRIMATE RESEARCH CENTER, HAVARD 1 PINE HILL DR, RSB6 ROOM 607 10-4210358 501(C)(3) 46,872. BASIC RESEARCH (9) THE REGENTS OF THE UNIVERSITY OF CALIFORNIA 1855 FOLSOM STREET, MCB 425, BOX 0897 94-6036493 501(C)(3) 110,000. BASIC RESEARCH (10) THE REGENTS OF THE UNIVERSITY OF CALIFORNIA 1855 FOLSOM STREET, MCB 425, BOX 0897 94-6036493 501(C)(3) 110,000. BASIC RESEARCH (11) THE REGENTS OF THE UNIVERSITY OF CALIFORNIA 1855 FOLSOM STREET, MCB 425, BOX 0897 94-6036493 501(C)(3) 110,000. BASIC RESEARCH (12) JOHNS HOPKINS UNIVERSITY SCHOOL OF MEDICINE 200 NORTH WOLFE STREET BALTIMORE, MD 21205 52-0595110 501(C)(3) BASIC RESEARCH Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2011)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2011 Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Inspection Employer identification number Name of the organization THE FOUNDATION FOR AIDS RESEARCH 13-3163817 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and X the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed (f) Method of valuation (a) Name and address of organization (b) EIN (e) Amount of non-(h) Purpose of grant (book, FMV, appraisal, or government if applicable non-cash assistance or assistance cash assistance (1) CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVE. BRB 919 34-1018992 501(C)(3) 110,000. BASIC RESEARCH (2) THE SALK INSTITUTE FOR BIOLOGICAL STUDIES 10010 NORTH TORREY PINES ROAD 95-2160097 501(C)(3) 110,000. BASIC RESEARCH (3) VACCINE AND GENE THERAPY INSTITUTE OF FLORI 36-4631835 501(C)(3) BASIC RESEARCH 11350 SW VILLAGE PARKWAY 57,289. (4) UNIVERSITY OF WASHINGTON 91-6001537 501(C)(3) 57,289. BASIC RESEARCH ROSEN BUILDING BOX 35870 SEATTLE, WA 98109 (5) VACCINE AND GENE THERAPY INSTITUTE OF FLORI 36-4631835 501(C)(3) BASIC RESEARCH 11350 SW VILLAGE PARKWAY 3RD FLOOR 57,289. (6) CASE SCHOOL OF MEDICINE 10900 EUCLID AVE, LC4960 34-1018992 501(C)(3) 57,289. BASIC RESEARCH (7) THE REGENTS OF THE UNIVERSITY OF CALIFORNIA 1855 FOLSOM ST. MCBH 425 BOX 0897 94-6036493 501(C)(3) 47,410. BASIC RESEARCH (8) THE REGENTS OF THE UNIVERSITY OF CALIFORNIA 1001 PORTRERO AVENUE 94-6036493 501(C)(3) 79,952. BASIC RESEARCH (9) TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA 3451 WALNUT STREET, SUITE P221 23-1352685 501(C)(3) 96,000. BASIC RESEARCH (10) JOHNS HOPKINS UNIVERSITY CENTRAL LOCKBOX/DE 733 NORTH BROADWAY, BRB-871 52-0595110 501(C)(3) 120,000. BASIC RESEARCH (11) BETH ISRAEL MEDICAL CENTER 160 WATER STREET 24TH FLOOR 13-5564934 501(C)(3) 52,354. PUBLIC POLICY (12) THE FENWAY INSTITUTE 1340 BOYLSTON STREET 8TH FLOOR 04-2510564 501(C)(3) GMT INITIATIVES 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2011)

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2011

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Open to Public Inspection

Employer identification number Name of the organization THE FOUNDATION FOR AIDS RESEARCH 13-3163817 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and X the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed (f) Method of valuation (a) Name and address of organization (b) EIN (e) Amount of non-(h) Purpose of grant (book, FMV, appraisal, or government if applicable non-cash assistance or assistance cash assistance (1) CALIFORNIA INSTITUTE OF TECHNOLOGY 1200 E. CALIFORNIA BLVD PASADENA, CA 91125 95-1643307 501(C)(3) 83,200. BASIC RESEARCH (2) CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVENUE CLEVELAND, OH 44106 34-1018992 501(C)(3) 83,336. BASIC RESEARCH (3) MASSACHUSETTS GENERAL HOSPITAL 04-2697983 501(C)(3) BASIC RESEARCH 55 FRUIT STREET BOSTON, MA 02114 83,336. (4) WILLIAM J. CLINTON FOUNDATION 31-1580204 501(C)(3) 50,000. PREVENTION SCIENCE 1200 PRESIDENT CLINTON AVENUE (5) BETH ISRAEL MEDICAL CENTER - EDMOND DE ROTH 160 WATER STREET, 24TH FLOOR 13-5564934 501(C)(3) 67,500. PUBLIC POLICY (6) TULANE UNIVERSITY 18703 THREE RIVERS ROAD COVINGTON, LA 70433 72-0423889 501(C)(3) 46,667. BASIC RESEARCH (7) JOHN HOPKINS UNIVERSITY 733 N. BROADWAY BALTIMORE, MD 21205-1832 52-0595110 501(C)(3) 40,000. BASIC RESEARCH (8) JOHN HOPKINS UNIVERSITY DEPARTMENT OF MEDICINE 733 NORTH BROADWAY 520595110 501 (C) (3) 40,000. BASIC RESEARCH (9) NATIONAL MINORITY AIDS COUNCIL 1931 13TH STREET, NW 52-1578289 501(C)(3) 25,000. PUBLIC POLICY (10) THE BRIGHAM AND WOMEN'S HOSPITAL, INC. 75 FRANCIS STREET BOSTON, MA 02115 04-2312909 501(C)(3) 8,763. BASIC RESEARCH (11) JOHNS HOPKINS UNIVERSITY 733 NORTH BROADWAY, SUITE 117 52-0595110 501(C)(3) 31,930. BASIC RESEARCH (12) END OF AIDS, INC. 1000 N. WEST STREET WILMINGTON, DE 19801 45-4389547 501(C)(3) PUBLIC POLICY 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2011)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

2011

Open to Public Inspection

Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Department of the Treasury ► Attach to Form 990.

| lame of the organization | | | | | | Employer identificat | ion number |
|--|---------------|-------------------------------|-----------------------------|---------------------------------------|---|--|------------------------------------|
| THE FOUNDATION FOR AIDS RESEARCH | | | | | | 13-316381 | 7 |
| Part I General Information on Grants and | Assistance |) | | | | • | |
| Does the organization maintain records to suthe selection criteria used to award the grantsDescribe in Part IV the organization's proced | or assistance | e? | | | eligibility for the grants | | X Yes No |
| Part II Grants and Other Assistance to G to Form 990, Part IV, line 21, for an Part II can be duplicated if additional | ny recipient | that received | I more than \$5,00 | 00. Check this be | plete if the organiza ox if no one recipie | nt received more th | nan \$5,000. |
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| (1) UNIVERSITY OF PITTSBURGH 123 UNIVERSITY PLACE | 25-0965591 | 501(C)(3) | 125,000. | | | | GMT INITIATIVES |
| (2) THE BLACK AIDS INSTITUTE 1833 WEST EIGHTH STREET, #200 | 95-4742741 | 501(C)(3) | 75,000. | | | | PUBLIC POLICY |
| (3) | _ | | | | | | |
| (4) | | | | | | | |
| (5) | | | | | | | |
| (6) | | | | | | | |
| (7) | | | | | | | |
| (8) | | | | | | | |
| (9) | | | | | | | |
| 10) | | | | | | | |
| 11) | | | | | | | |
| 12) | | | | | | | |
| 2 Enter total number of section 501(c)(3) and g 3 Enter total number of other organizations liste | | | | | | | 50. |
| For Paperwork Reduction Act Notice, see the In | | | <u> </u> | | | | ule I (Form 990) (2011 |

THE FOUNDATION FOR AIDS RESEARCH 13-3163817

Schedule I (Form 990) (2011)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|--|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

GRANTS AND ASSISTANCE

PART I, LINE 2

ALL U.S. 501(C)(3) GRANT AND AWARD RECIPIENTS ARE REQUIRED TO REPORT AT LEAST ONCE ON ACTIVITIES SUPPORTED WITH AMFAR FUNDS; ALL U.S. RESEARCH GRANT RECIPIENTS (WHICH INCLUDE 501(C)(3) ORGANIZATIONS AND OTHER NONPROFIT ENTITIES SUCH AS STATE UNIVERSITIES) ARE REQUIRED TO SUBMIT AN INTERIM AND A FINAL PROGRESS REPORT IN ADDITION TO EXPENDITURE REPORTS DUE FOLLOWING THE ENDS OF THE 2ND, 3RD AND FINAL QUARTERS OF THE PERFORMANCE PERIODS. REPORTS ARE REVIEWED BY GRANT ADMINISTRATION AND PROGRAM STAFF PRIOR TO PAYMENT AND/OR CLOSEOUT.

Schedule I (Form 990) (2011)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service
Name of the organization

THE FOUNDATION FOR AIDS RESEARCH

Department of the Treasury

► Attach to Form 990. ► See separate instructions. Inspec

13-3163817

| Part | Questions Regarding Compensation | | | |
|------|--|----------|-----|----|
| | | | Yes | No |
| 1a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form | | | |
| | 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. | | | |
| | First-class or charter travel Housing allowance or residence for personal use | | | |
| | Travel for companions Payments for business use of personal residence | | | |
| | Tax indemnification and gross-up payments Health or social club dues or initiation fees | | | |
| | Discretionary spending account Personal services (e.g., maid, chauffeur, chef) | | | |
| h | If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment | | | |
| D | or reimbursement or provision of all of the expenses described above? If "No," complete Part III to | | | |
| _ | explain | 1b | | |
| 2 | | _ | | |
| | directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | 2 | | |
| • | Indicate which if any of the fellowing the filling agreement of the search block the search of the | | | |
| 3 | Indicate which, if any, of the following the filing organization used to establish the compensation of the | | | |
| | organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a | | | |
| | related organization to establish compensation of the CEO/Executive Director. Explain in Part III. | | | |
| | X Compensation committee Written employment contract | | | |
| | X Independent compensation consultant X Compensation survey or study | | | |
| | Form 990 of other organizations X Approval by the board or compensation committee | | | |
| 4 | During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: | | | |
| _ | | 4.0 | | Х |
| a | Receive a severance payment or change-of-control payment? Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4a 4b | х | Λ |
| b | Participate in, or receive payment from, a supplemental hondualined retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? | 40 4c | | Х |
| С | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. | 46 | | 21 |
| | in res to any or lines 44-6, list the persons and provide the applicable amounts for each item in rait in. | | | |
| | Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. | | | |
| 5 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any | | | |
| • | compensation contingent on the revenues of: | | | |
| а | The organization? | 5a | | Х |
| b | Any related organization? | 5b | | Х |
| | If "Yes" to line 5a or 5b, describe in Part III. | | | |
| 6 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any | | | |
| | compensation contingent on the net earnings of: | | | |
| а | The organization? | 6a | | Х |
| b | Any related organization? | 6b | | Х |
| | If "Yes" to line 6a or 6b, describe in Part III. | | | |
| 7 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed | | | |
| | payments not described in lines 5 and 6? If "Yes," describe in Part III | 7 | | Х |
| 8 | Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject | | | |
| | to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe | | | |
| | in Part III | 8 | | Х |
| 9 | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in | | | |

Schedule J (Form 990) 2011

9

THE FOUNDATION FOR AIDS RESEARCH 13-3163817

Schedule J (Form 990) 2011 Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| | (B) Breakdown | of W-2 and/or 1099-MIS | C compensation | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation |
|---------------------------|---|---|----------------|-----------------------------|----------------|----------------------|--|
| (A) Name | (i) Base compensation | (ii) Bonus & incentive compensation (iii) Other reportable compensation | | other deferred compensation | benefits | (B)(i)-(D) | reported as deferred in prior Form 990 |
| | i) 361,481. | . (| | 27,150. | 27,007. | 415,638. | |
| | i) |) (|) | q | | | |
| | i) 219,053. | . (| | 14,977. | 29,757. | 263,787. | |
| 2 BRADLEY JENSEN | i) (|) (| | 0 | | | |
| (| | |) | 13,907. | 9,361. | 223,789. | |
| 3 JOHN F. LOGAN, J.D. PH. | i) (|) | | 0 | | | |
| | 155,658. | . |) | 10,965. | 9,361. | 175,984. | |
| | i) (| | | 0 | | | |
| | 137,426. | | | 9,419. | 8,636. | 155,481. | |
| | i) (|) | | 0 | | 0.40 500 | |
| | 223,561 | | | 15,667. | 9,361. | 248,589. | |
| | i) (|) | | 0 10 000 | 10 100 | 014 050 | |
| | 184,540. | | | 12,230. | 18,182. | 214,952. | |
| | i) (|) | | 0 12 541 | 2 004 | 010 045 | |
| | 193,480. | ļ; | | 13,541. | 3,824. | 210,845. | |
| | i) (|) | | 0 10 043 | 9,361. | 170 156 | |
| | i) 151,952. | | | 0 10,843. | | 172 , 156. | |
| | i) (a) (b) (b) (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d | , | | 0 9,584. | 28,757. | 175,973. | |
| | ´ | \\- | | 0 | 20,737. | | |
| | i) (a) (b) (b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d | | | 0 10,514. | 535. | 159,234. | |
| | ´ | } | { | d | · | | |
| | i) (i) 187,799. | | | 13,209. | 9,346. | 210,354. | |
| | i)(| } | } | d | | | |
| - | i) | | | | | | |
| 13 | F | | | | | | |
| - | i) | | | | | | |
| 14 | F | <u> </u> | | | | | |
| 14 | | | | | | | |
| | i) | † | † | | | | |
| | i) | | | | | | |
| | i) | | | | | | |

V 11-6.5

THE FOUNDATION FOR AIDS RESEARCH 13-3163817

Schedule J (Form 990) 2011

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

COMPENSATION

PART I, LINE 4

CHIEF EXECUTIVE OFFICER, KEVIN FROST, PARTICIPATED IN A SUPPLEMENTAL

NONQUALIFIED RETIREMENT PLAN; HOWEVER, HE DID NOT RECEIVE A DISTRIBUTION

IN 2011.

Noncash Contributions

OMB No. 1545-0047

2011

Open To Public

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Employer identification number

THE FOUNDATION FOR AIDS RESEARCH

13-3163817

| Par | t I Types of Property | | | | | | | |
|-------|---|-------------------------------|--|---|--|--|--|--|
| | | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts | | | |
| 1 | Art - Works of art | | | | | | | |
| 2 | Art - Historical treasures | | | | | | | |
| 3 | Art - Fractional interests | | | | | | | |
| 4 | Books and publications | | | | | | | |
| 5 | Clothing and household | | | | | | | |
| • | goods | | | | | | | |
| 6 | Cars and other vehicles | | | | | | | |
| 7 | Boats and planes | | | | | | | |
| 8 | Intellectual property | | | | | | | |
| 9 | Securities - Publicly traded | Х | | 18,387. | SALES PRICE | | | |
| 10 | Securities - Closely held stock | | | | | | | |
| 11 | Securities - Partnership, LLC, | | | | | | | |
| | or trust interests | | | | | | | |
| 12 | Securities - Miscellaneous | | | | | | | |
| 13 | Qualified conservation | | | | | | | |
| . • | contribution - Historic | | | | | | | |
| | structures | | | | | | | |
| 14 | Qualified conservation | | | | | | | |
| | contribution - Other | | | | | | | |
| 15 | Real estate - Residential | | | | | | | |
| 16 | Real estate - Commercial | | | | | | | |
| 17 | Real estate - Other | | | | | | | |
| 18 | Collectibles | | | | | | | |
| 19 | Food inventory | | | | | | | |
| 20 | Drugs and medical supplies | | | | | | | |
| 21 | Taxidermy | | | | | | | |
| 22 | Historical artifacts | | | | | | | |
| 23 | Scientific specimens | | | | | | | |
| 24 | Archeological artifacts | | | | | | | |
| 25 | Other ►(AIRLINE TICKETS) | Х | 16. | 197,793. | FAIR MARKET VALUE | | | |
| 26 | Other ►() | | | | | | | |
| 27 | Other ►() | | | | | | | |
| 28 | Other ►() | | | | | | | |
| 29 | | by the orga | nization during the tax ve | ar for contributions for | | | | |
| | which the organization completed F | - | | | 29 | | | |
| | 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | , | , | , | Yes No | | | |
| 30 a | During the year, did the organizat | ion receive | by contribution any prope | erty reported in Part I, line | es 1-28 that | | | |
| | it must hold for at least three yea | rs from the | date of the initial contribu | ition, and which is not red | quired to be | | | |
| | used for exempt purposes for the e | ntire holding | period? | | | | | |
| b | If "Yes," describe the arrangement i | | | | | | | |
| 31 | Does the organization have a | gift accept | tance policy that require | s the review of any r | non-standard | | | |
| | contributions? | | | | | | | |
| 32 a | a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash | | | | | | | |
| | contributions? | | - | | 32a X | | | |
| b | If "Yes," describe in Part II. | | | · · | | | | |
| 33 | If the organization did not report ar | amount in | column (c) for a type of pro | perty for which column (a |) is checked, | | | |
| | describe in Part II. | | <u> </u> | | | | | |
| For P | Paperwork Reduction Act Notice, see th | ne Instruction | s for Form 990. | | Schedule M (Form 990) (2011) | | | |

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

FORM 990, SCHEDULE M

1E1508 2.000

LINE 31: TO THE EXTENT AMFAR RECEIVES NON-STANDARD CONTRIBUTIONS, THE ORGANIZATION'S POLICY IS TO LIQUIDATE THOSE ITEMS INTO CASH FOR EVENTUAL USE IN SUPPORT OF THE ORGANIZATION'S MISSION.

LINE 32A: WHEN THE ORGANIZATION RECEIVES CONTRIBUTIONS OF SECURITIES, IT
USES ITS INVESTMENT BROKER TO LIQUIDATE THOSE HOLDINGS TO FUND AMFAR'S
VARIOUS RESEARCH PROGRAM ACTIVITIES.

Schedule M (Form 990) (2011)

76004W 700J V 11-6.5 0176982-00003 PAGE 65

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2011
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization

Employer identification number

13-3163817

PROGRAM SERVICE ACCOMPLISHMENTS (1)

THE FOUNDATION FOR AIDS RESEARCH

PART III, LINE 4A-4D (1)

LINE 4A: RESEARCH: AMFAR SUPPORTS RESEARCH PROJECTS THAT EXPLORE NOVEL APPROACHES TO SCIENTIFICALLY SOUND BUT UNTESTED HYPOTHESES IN ALL AREAS OF RESEARCH ON HIV/AIDS, FUNDING GOAL-ORIENTED STUDIES THAT OFTEN LACK THE PRELIMINARY DATA REQUIRED FOR SUPPORT FROM TRADITIONAL GRANT-MAKERS. THE FOUNDATION PLAYS A VITAL ROLE IN HIV/AIDS RESEARCH, IDENTIFYING CRITICAL GAPS IN KNOWLEDGE AND PROVIDING ESSENTIAL SEED MONEY THAT ENABLES GRANTEES AND FELLOWS TO TEST THE MERITS OF NEW CONCEPTS OR TECHNOLOGIES THAT SUBSEQUENTLY CAN BE VALIDATED THROUGH LARGE-SCALE STUDIES, SUCH AS THOSE FUNDED BY THE NATIONAL INSTITUTES OF HEALTH. AMFAR FELLOWSHIPS ALLOW TALENTED YOUNG INVESTIGATORS TO CONDUCT ORIGINAL INVESTIGATIONS UNDER THE GUIDANCE OF EXPERIENCED SCIENTISTS, HELPING TO ENSURE THE LONG-TERM VITALITY OF AIDS RESEARCH.

NEW GRANTS AND FELLOWSHIPS

GRANTS AND FELLOWSHIPS ARE AWARDED THROUGH A RIGOROUS PROCESS OF PEER REVIEW BY A TEAM OF INDEPENDENT HIV/AIDS EXPERTS DRAWN LARGELY FROM THE VOLUNTEER SCIENTISTS ON AMFAR'S SCIENTIFIC ADVISORY COMMITTEE. GUIDED BY ITS SCIENTIFIC ADVISORS AND WITH THE APPROVAL OF ITS BOARD OF TRUSTEES, AMFAR PURSUES A STRATEGIC RESEARCH PLAN THAT FOCUSES ON THE TREATMENT, PREVENTION, AND CURE OF HIV/AIDS. IN 2012, AMFAR AWARDED MORE THAN \$5 MILLION IN GRANTS AND FELLOWSHIPS TO SUPPORT 34 RESEARCH PROJECTS.

FIVE RESEARCHERS RECEIVED MATHILDE KRIM FELLOWSHIPS IN BASIC BIOMEDICAL RESEARCH, AN INITIATIVE THAT PROVIDES FUNDING FOR EXCEPTIONAL YOUNG RESEARCHERS WHO ARE NEW TO THE FIELD OF HIV/AIDS RESEARCH. THE INITIATIVE HAS ALREADY ACHIEVED SPECTACULAR RESULTS, INCLUDING NUMEROUS PUBLISHED STUDIES IN MAJOR SCIENTIFIC JOURNALS. THE 2012 KRIM FELLOWS-EACH OF WHOM RECEIVED BETWEEN \$80,000 AND \$125,000-ARE WORKING ON NEW WAYS TO TREAT HIV/AIDS AND ITS ASSOCIATED CONDITIONS, AS WELL AS AN HIV VACCINE.

AMONG THE 2012 FELLOWS IS MATTIAS FORSELL, PH.D., OF THE KAROLINSKA
INSTITUTE IN STOCKHOLM, SWEDEN, WHO IS AIMING TO MAKE PROGRESS TOWARDS
THE DESIGN OF A VACCINE AGAINST HIV INFECTION. DESPITE A CONCERTED EFFORT
TO DESIGN AN AIDS VACCINE, SEVERAL CHARACTERISTICS OF THE VIRUS, SUCH AS
ITS ABILITY TO PRESENT "DECOYS" TO GUIDE THE IMMUNE SYSTEM AWAY FROM
MAKING THE MOST EFFECTIVE IMMUNE RESPONSES, HAVE MADE THE TASK IMPOSSIBLE
SO FAR. DR. FORSELL PLANS TO ELUCIDATE THE MECHANISMS WHEREBY THE IMMUNE
CELLS THAT MAKE ANTIBODIES GENERATE RESPONSES TO DIFFERENT REGIONS OF THE
VIRUS, AND HOW THESE CELLS MIGHT ULTIMATELY BE GUIDED TOWARDS MAKING
ANTIBODIES AGAINST THE MOST VULNERABLE REGIONS OF THE VIRUS.

CURE-FOCUSED STUDIES

PLACING THE SEARCH FOR A CURE FOR HIV/AIDS AT THE CENTER OF ITS RESEARCH EFFORTS, THE FOUNDATION LAUNCHED THE AMFAR RESEARCH CONSORTIUM ON HIV ERADICATION (ARCHE) IN 2010. IN 2012, MORE THAN \$1.5 MILLION IN FUNDING WENT TO SEVEN COLLABORATIVE TEAMS OF RESEARCHERS WORKING IN THREE AREAS CONSIDERED CENTRAL TO HIV ERADICATION: THE SEARCH FOR A STERILIZING CURE

TO ELIMINATE HIV FROM THE BODY; THE SEARCH FOR A FUNCTIONAL CURE TO SUPPRESS THE VIRUS WITHOUT TREATMENT; AND THE CHARACTERIZATION OF VIRAL RESERVOIRS, WHICH PRESENT AN OBSTACLE TO A CURE.

A SERIES OF STUDIES BY DR. SARAH PALMER OF THE SWEDISH INSTITUTE FOR INFECTIOUS DISEASE

CONTROL AND KAROLINSKA INSTITUTE IS BUILDING ON AN INTRIGUING FINDING
MADE DURING YEAR TWO OF ARCHE: THE DISCOVERY OF IDENTICAL CLONES OF
LATENT VIRUS. DR. PALMER IS WORKING WITH DR. FREDERICK HECHT OF THE
UNIVERSITY OF CALIFORNIA AT SAN FRANCISCO TO UNDERSTAND HOW SUCH CLONES
MIGHT ARISE AND WHAT THEY MEAN FOR EFFORTS TO RID THE BODY OF THE VIRUS.
DR. DANIEL DOUEK OF THE NATIONAL INSTITUTES OF HEALTH IS ALSO APPLYING
HIS EXPERTISE ON T CELLS TO HELP EXPLAIN THE FINDINGS.

ONE OF THE PRINCIPAL STRATEGIES BEING INVESTIGATED IN THE SEARCH FOR A CURE INVOLVES USING DRUGS THAT CAN ACTIVATE HIV OUT OF A LATENT STATE, ALLOWING IT TO BE TARGETED BY ANTIRETROVIRAL THERAPY (ART). WORKING AT JOHNS HOPKINS UNIVERSITY, DR. ROBERT SILICIANO'S PREVIOUS ARCHE RESEARCH HAS IDENTIFIED AGENTS-NOTABLY, A DRUG CALLED DISULFIRAM-THAT MIGHT ACHIEVE SUCH REACTIVATION. DR. SILICIANO AIMS TO DETERMINE WHETHER ALL OF THE LATENT VIRUS CAN BE REACTIVATED. IF SOME VIRUS REMAINS DORMANT, HE WILL ATTEMPT TO UNDERSTAND THE MECHANISMS WHEREBY IT REMAINS LATENT DESPITE INTERACTIONS WITH DRUGS THAT ARE INTENDED TO REVERSE THAT LATENCY. UNDERSTANDING THE ABILITY OF THE VIRUS TO REMAIN STUBBORNLY LATENT WILL HAVE IMPORTANT RAMIFICATIONS FOR THE DESIGN OF HIV CURE

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Page 2

STRATEGIES.

PROGRAM SERVICE ACCOMPLISHMENTS (2)

PART III, LINE 4A-4D (2)

LINE 4A, CONTINUED:

DR. TIMOTHY HENRICH OF HARVARD IS STUDYING TWO HIV-POSITIVE INDIVIDUALS WHO HAD BEEN ON LONG-TERM ART WHEN THEY DEVELOPED LYMPHOMAS. TO TREAT THESE CANCERS, BOTH UNDERWENT TYPICAL STEM-CELL TRANSPLANTS FROM NORMAL DONORS, WHO HAD BEEN SELECTED ONLY FOR THE USUAL TISSUE-TYPE MATCH. DR. HENRICH FOUND THAT NOT ONLY WERE THESE INDIVIDUALS CURED OF THEIR CANCER, BUT HE COULD FIND NO EVIDENCE OF HIV. THIS WAS TRUE DESPITE THE FACT THAT-UNLIKE "THE BERLIN PATIENT," WHO WAS CURED OF HIV FOLLOWING TRANSPLANT WITH CELLS FROM A DONOR SELECTED FOR THE CCR5 DELTA32 MUTATION, AND THUS RESISTANT TO HIV INFECTION-NO EXTRAORDINARY MEASURES WERE USED HERE. FOR THE MOMENT, THESE TWO INDIVIDUALS REMAIN ON ART. BUT WITH AMFAR FUNDING, DR. HENRICH IS INTERRUPTING THEIR ART IN A SEARCH FOR HIV IN THEIR BLOOD AND OTHER TISSUES.

CURRENT ANTIRETROVIRAL THERAPY CAN IN MANY CASES REDUCE LEVELS OF HIV TO SUCH AN EXTENT THAT SENSITIVE EQUIPMENT IS REQUIRED TO DETECT IT, BUT THE VIRUS CAN ALMOST ALWAYS BE FOUND. DEMONSTRATING WITH CONFIDENCE THAT A CURE HAS BEEN ACHIEVED WILL REQUIRE HIGHLY SENSITIVE METHODS OF DETECTING HIV AT SUBSTANTIALLY LOWER LEVELS THAN IS CURRENTLY POSSIBLE. ARCHE GRANTEE DR. DAVID MARGOLIS OF THE UNIVERSITY OF NORTH CAROLINA IS DEVELOPING JUST SUCH AN ULTRA-SENSITIVE METHODOLOGY THAT COULD BE USED IN THE TEST TUBE AS WELL AS IN SUBJECTS PARTICIPATING IN CLINICAL TRIALS.

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13-3163817

PUBLISHED RESEARCH

RESEARCH STUDIES MAKE THE GREATEST IMPACT ON THE AIDS FIELD AND ON THE BROADER SCIENTIFIC COMMUNITY WHEN THEY ARE PUBLISHED IN SCIENTIFIC JOURNALS. IN THE PAST YEAR, AT LEAST 40 SCIENTIFIC PUBLICATIONS RESULTED FROM AMFAR-FUNDED RESEARCH.

DEFINING HIV RESERVOIRS

DRS. SARA PALMER AND FREDERICK HECHT (SEE ABOVE) COLLABORATED WITH COLLEAGUES TO EXAMINE EIGHT HIV-POSITIVE INDIVIDUALS AND PUBLISHED THEIR FINDINGS IN THE JULY ISSUE OF THE JOURNAL OF INFECTIOUS DISEASES. FIVE OF THE PATIENTS HAD STARTED ART EITHER DURING ACUTE INFECTION OR EARLY THEREAFTER. THREE ELECTED TO WAIT UNTIL AT LEAST ONE YEAR FOLLOWING INITIAL INFECTION. ALL HAD RECEIVED ART FOR AT LEAST THREE YEARS AT THE TIME OF STUDY. STEM CELLS WERE EXTRACTED FROM BONE MARROW SAMPLES USING A MARKER PROTEIN KNOWN AS CD34. THE DNA FORM OF HIV WAS SEARCHED FOR IN THESE CELLS BY AN ULTRA-SENSITIVE ASSAY DR. PALMER DEVELOPED YEARS AGO, ALSO WITH AMFAR FUNDING. RESULTS WITH THESE STEM CELLS WERE COMPARED TO STUDIES OF CD4+ T CELLS OBTAINED FROM THE BONE MARROW AND BLOOD OF THE SAME EIGHT SUBJECTS. DRS. PALMER AND HECHT FOUND THAT, "A LARGER POOL OF HIV-1-INFECTED CD4+ T CELLS HAD BEEN ESTABLISHED IN PATIENTS DURING CHRONIC INFECTION." THIS IS A POINT CRITICAL TO THE ARGUMENT THAT ART SHOULD BE STARTED AS EARLY AS POSSIBLE AFTER IDENTIFYING AN HIV INFECTION.

IN THE MARCH ISSUE OF THE JOURNAL CELL STEM CELL, THREE CURRENT AND

FORMER ARCHE GRANTEES, DR. KEITH JEROME OF THE FRED HUTCHINSON CANCER

RESEARCH CENTER IN SEATTLE AND DRS. STEVEN DEEKS AND JOSEPH MCCUNE OF THE

UNIVERSITY OF CALIFORNIA, SAN FRANCISCO-WHO MET AND FIRST DISCUSSED THE

IDEA FOR THEIR PAPER AT A STEM CELL THINK TANK ORGANIZED BY AMFAR IN

SEPTEMBER 2011-SUGGESTED THAT ONE MIGHT BE ABLE TO CREATE AN

HIV-RESISTANT IMMUNE SYSTEM IN AN INFECTED PERSON BY GENETICALLY

ENGINEERING A PERSON'S OWN STEM CELLS. THE AUTHORS ADMIT THAT SUCH "GENE

MODIFICATION OF STEM CELLS WILL BE AN EXPENSIVE INTERVENTION" BUT SUGGEST

THAT "IT MAY PROVE TO BE COST-EFFECTIVE GIVEN THAT DECADES-LONG

ADMINISTRATION OF ANTIRETROVIRAL THERAPY WOULD COST SEVERAL HUNDRED

THOUSAND DOLLARS PER PERSON."

"SHOCK AND KILL" STRATEGY HOLDS PROMISE IN THE SEARCH FOR A CURE
WORKING ON THE "SHOCK AND KILL" APPROACH, ANOTHER ARCHE MEMBER, DR.

SILICIANO (SEE ABOVE), DESCRIBED HIS NEWEST FINDINGS IN THE MARCH ISSUE

OF THE JOURNAL OF ANTIMICROBIAL CHEMOTHERAPY. THE "SHOCK AND KILL"

APPROACH INVOLVES AWAKENING LATENT VIRUS AND THEN KILLING IT WITH ARVS,
ENHANCED IMMUNE ATTACK, OR A COMBINATION OF THESE METHODS. USING A MODEL

FOR LATENTLY INFECTED T CELLS THAT THEY DEVELOPED, DR. SILICIANO AND

COLLEAGUES TESTED A LARGE NUMBER OF CHEMICAL COMPOUNDS TO SEE WHICH, IF
ANY, MIGHT ACTIVATE GROWTH OF HIV WITHOUT CAUSING HARM. THEY DISCOVERED

TWO TYPES OF CHEMICALS THAT NOT ONLY COULD AWAKEN HIV BUT DID SO WITHOUT

BROADLY STIMULATING THE CELLS TO PRODUCE POTENTIALLY HARMFUL IMMUNE

Employer identification number

HORMONES (CYTOKINES). SUPPORTING THE POSSIBILITY OF TURNING SUCH
CHEMICALS INTO USEFUL DRUGS WAS THE FACT THAT THEY HAD CHARACTERISTICS OF
KNOWN DRUGS THAT ARE READILY ABSORBED BY THE BODY AND TAKEN UP BY CELLS.

NEW TARGETED RFP

AMFAR ISSUED A REQUEST FOR PROPOSALS (RFP) IN SEPTEMBER 2012 FOR
BIOMEDICAL RESEARCH PROJECTS RELEVANT TO EXPLORING THE MECHANISMS FOR HIV
PERSISTENCE AND THE POTENTIAL FOR HIV ERADICATION.

THINK TANKS, SYMPOSIA, AND CONFERENCES

AN AMFAR SYMPOSIUM IN NOVEMBER 2011 BROUGHT TOGETHER LEADING SCIENTISTS, ADVOCATES, JOURNALISTS, AND ONE EXTRAORDINARY "PATIENT" TO DISCUSS THE HOLY GRAIL OF AIDS RESEARCH: A CURE. THE SYMPOSIUM, TITLED "MAKING AIDS HISTORY: CLOSING IN ON A CURE," FEATURED A CONVERSATION BETWEEN TIMOTHY BROWN, "THE BERLIN PATIENT," THE FIRST ADULT TO BE CURED OF HIV, GEORGE STEPHANOPOULOS OF ABC NEWS, AND JEFFREY LAURENCE, M.D., SENIOR SCIENTIFIC CONSULTANT FOR PROGRAMS AT AMFAR.

IN JUNE 2012, A THINK TANK ORGANIZED BY AMFAR IN SAN FRANCISCO BROUGHT TOGETHER 12 SCIENTISTS INVOLVED IN VARIOUS ASPECTS OF HIV CURE RESEARCH, ALONG WITH TWO BIOETHICISTS, TO EXPLORE THE POTENTIAL FOR AN HIV CURE IN INFANTS AND CHILDREN. AS A RESULT OF THE THINK TANK, IN SEPTEMBER AMFAR AWARDED A GRANT TO DR. DEBORAH PERSAUD OF JOHNS HOPKINS CHILDREN'S CENTER AND DR. KATHERINE LUZURIAGA OF THE UNIVERSITY OF MASSACHUSETTS MEDICAL SCHOOL, ENABLING THEM TO ESTABLISH A RESEARCH COLLABORATORY TO EXPLORE

AND DOCUMENT POSSIBLE PEDIATRIC HIV CURE CASES. THE FIRST CASE OF A CHILD CURED OF HIV WAS CONFIRMED BY RESEARCHERS IN THE COLLABORATORY AND ANNOUNCED BY DR. PERSAUD IN MARCH 2013.

AMFAR ALSO PLAYED A PROMINENT ROLE IN RESEARCH-FOCUSED PROGRAMMING AT THE XIX INTERNATIONAL AIDS CONFERENCE. VICE PRESIDENT AND DIRECTOR OF RESEARCH DR. ROWENA JOHNSTON PARTICIPATED IN A TWO-DAY PRE-CONFERENCE CURE SYMPOSIUM-TITLED "TOWARDS AND HIV CURE"-CO-CHAIRED BY NOBEL PRIZE-WINNING SCIENTIST DR. FRANÇOISE BARRÉ-SINOUSSI AND DR. STEVEN DEEKS. DR. JOHNSTON ALSO CO-CHAIRED A CONFERENCE SESSION TITLED "GENDER AND SCIENCE: SHIFTING THE PARADIGM IN HIV RESEARCH."

PROGRAM SERVICE ACCOMPLISHMENTS (3)

PART III, LINE 4A-4D (3)

LINE 4B: TREAT ASIA: AMFAR'S TREAT ASIA PROGRAM (THERAPEUTICS RESEARCH, EDUCATION, AND AIDS TRAINING IN ASIA) INVOLVES A NETWORK OF HOSPITALS, CLINICS, AND RESEARCH INSTITUTIONS WORKING WITH CIVIL SOCIETY TO ENSURE THE SAFE AND EFFECTIVE DELIVERY OF HIV/AIDS TREATMENTS ACROSS ASIA AND THE PACIFIC. THE TREAT ASIA NETWORK ENCOMPASSES 22 ADULT AND 21 PEDIATRIC SITES THROUGHOUT THE REGION, WHICH COLLABORATE ON A VARIETY OF PROJECTS.

TREAT ASIA HIV OBSERVATIONAL DATABASE (TAHOD)

TREAT ASIA PIONEERED THE REGION'S FIRST ADULT OBSERVATIONAL DATABASE FOR HIV/AIDS, WHICH NOW INCLUDES ANONYMOUS DATA COLLECTED FROM MORE THAN 8,385 PATIENTS AT 22 CLINICAL SITES IN 12 COUNTRIES. THE INFORMATION

GATHERED AND ANALYZED THROUGH THE DATABASE INFORMS THE DEVELOPMENT OF MORE EFFECTIVE RESEARCH AND TREATMENT PROGRAMS, AND HELPS DEFINE TREATMENT STANDARDS SPECIFIC TO HIV/AIDS IN ASIA.

IN EARLY 2012, THE TAHOD NETWORK BEGAN RECRUITING PARTICIPANTS FOR A REGIONAL STUDY OF HIV-TUBERCULOSIS CO-INFECTION-RELATED TO SOCIO-ECONOMIC DETERMINANTS OF TUBERCULOSIS AND ADVERSE TREATMENT OUTCOMES,

TUBERCULOSIS-ASSOCIATED IMMUNE RECONSTITUTION INFLAMMATORY SYNDROME, AND MULTI-DRUG RESISTANT TUBERCULOSIS. THE STUDY PROTOCOL AND RELATED MATERIALS WERE DEVELOPED UNDER THE LEADERSHIP OF TREAT ASIA.

TREAT ASIA PEDIATRIC NETWORK

REPRESENTING MORE THAN 5,000 HIV-POSITIVE CHILDREN IN ASIA, TREAT ASIA'S PEDIATRIC NETWORK INCLUDES 21 SITES IN SEVEN COUNTRIES; THESE SITES SHARE INFORMATION AND BEST PRACTICES IN AN EFFORT TO IMPROVE THE QUALITY OF PEDIATRIC CARE IN THE REGION. THE TREAT ASIA PEDIATRIC HIV OBSERVATIONAL DATABASE (TAPHOD) WAS MODELED ON THE ADULT DATABASE, AND INCLUDES DATA FROM APPROXIMATELY 4,400 PEDIATRIC PATIENTS AT 16 CLINICAL SITES IN CAMBODIA, INDIA, INDONESIA, MALAYSIA, THAILAND, AND VIETNAM.

INTERNATIONAL AIDS DATABASE

TREAT ASIA MANAGES THE ASIA-PACIFIC SECTION OF THE INTERNATIONAL EPIDEMIOLOGIC DATABASES TO EVALUATE AIDS (IEDEA), A GLOBAL COLLABORATION ESTABLISHED BY THE U.S. NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES.

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ADOLESCENT RESEARCH

IN 2012, TREAT ASIA COMPLETED TWO STUDIES THAT IT HOPES WILL INFORM AND IMPROVE ADOLESCENT HIV TREATMENT AND CARE IN SOUTHEAST ASIA. THIS FIRST STUDY EXAMINED THE INCIDENCE OF HUMAN PAPILLOMAVIRUS (HPV) INFECTION-A PRECURSOR TO CERVICAL AND ANAL CANCER-IN HIV-POSITIVE ADOLESCENTS. A SECOND STUDY ASSESSED BONE MINERAL DENSITY LEVELS IN CHILDREN LIVING WITH HIV AND FOUND PRELIMINARY CORRELATIONS BETWEEN THE USE OF ANTIRETROVIRAL THERAPY AND BONE DENSITY LOSS. IN ADDITION, AN ONGOING STUDY IS USING AN AUDIO-COMPUTER-ASSISTED SURVEY INSTRUMENT (ACASI) TO BETTER UNDERSTAND HOW ADOLESCENTS EXPERIENCE LIVING WITH HIV BY ALLOWING THEM TO ANONYMOUSLY RESPOND TO QUESTIONS USING A COMPUTER INTERFACE.

REACHING OUT TO MSM

THREE WORKSHOPS ON THE "TEST AND TREAT" APPROACH FOR PREVENTING HIV

TRANSMISSION AND INCREASING UPTAKE OF HIV TESTING AND TREATMENT SERVICES

AMONG MEN WHO HAVE SEX WITH MEN (MSM) AND TRANSGENDER WOMEN (TG) WERE

HELD IN THAILAND IN 2012. THE WORKSHOPS WERE HELD PARALLEL WITH A PILOT

STUDY PROVIDING ART TO MSM WITH NEWLY DIAGNOSED HIV, LED BY THE THAI RED

CROSS AIDS RESEARCH CENTRE.

EXPLORING LINKS BETWEEN HIV AND CANCER

AMONG HIV-POSITIVE MSM, THE RISK OF ANAL CANCER IS TWICE THE LEVEL OF THOSE WHO ARE HIV-NEGATIVE, BUT LITTLE RESEARCH HAS BEEN DONE ON THIS ISSUE IN ASIA. WITH FUNDING FROM IEDEA, IN 2009 TREAT ASIA BEGAN

SUPPORTING AN INNOVATIVE RESEARCH STUDY EXPLORING THE LINKS BETWEEN HIV

AND ANAL CANCER AND LOOKING AT CANCER BIOMARKERS IN AN ATTEMPT TO BETTER

IDENTIFY MSM WITH PRE-CANCEROUS ANAL LESIONS. RESEARCH ON HPV AND ANAL

CANCER RISK AMONG MSM IS ONGOING IN THE THREE ORIGINAL SITES IN BANGKOK,

BALI, AND JAKARTA.

BUILDING RESEARCH CAPACITY

TREAT ASIA HAS IMPLEMENTED A RESEARCH EDUCATION PROGRAM TO HELP NETWORK MEMBERS STRENGTHEN THEIR SKILLS IN CONDUCTING CLINICAL RESEARCH AND TO BOOST THE OVERALL QUALITY OF CARE IN THE REGION. TREAT ASIA ORGANIZED EIGHT WORKSHOPS AND TRAINING SESSIONS IN 2012, INCLUDING SESSIONS ON HIV TESTING AND COUNSELING SKILLS, BASIC RESEARCH SKILLS (E.G., MANUSCRIPT DEVELOPMENT AND SCIENTIFIC WRITING), AND CLINICAL MANAGEMENT OF HIV. BUILDING COMMUNITY TREATMENT LITERACY AND PROMOTING ADVOCACY FOR TREATMENT ACCESS

COMMUNICATING TREATMENT INFORMATION ABOUT A DISEASE AS COMPLEX AS
HIV/AIDS CAN BE DAUNTING, BUT PATIENTS' LIVES DEPEND ON IT. TREAT ASIA
WORKS CLOSELY WITH REGIONAL ORGANIZATIONS TO SUPPORT TREATMENT LITERACY
ACTIVITIES, INCLUDING THE PRODUCTION OF "COMMUNITY-FRIENDLY" EDUCATIONAL
BROCHURES ON HIV TREATMENT STANDARDS IN LOCAL LANGUAGES.

IN 2012, TREAT ASIA FUNDED THE DEVELOPMENT OF AN HIV DISCLOSURE BOOK FOR CHILDREN AND CAREGIVERS IN COLLABORATION WITH THE SOUTH EAST ASIA

RESEARCH COLLABORATION WITH HAWAII (SEARCH) AT THE THAI RED CROSS AIDS

RESEARCH CENTRE. THE BOOK PROVIDES BASIC INFORMATION ON HIV FOR CHILDREN

WHO HAVE RECENTLY BEEN TOLD ABOUT THEIR HIV DIAGNOSIS. THE LANGUAGE AND ILLUSTRATIONS ARE TARGETED FOR YOUNGER CHILDREN IN ORDER TO HELP THEM BETTER UNDERSTAND THE IMPLICATIONS OF HAVING HIV INFECTION.

TREAT ASIA CONTINUED TO PUBLISH LAY-LANGUAGE ARTICLES ABOUT NEW RESEARCH IN THE FIELDS OF PREVENTION, TREATMENT, AND BASIC SCIENCE. THE GOAL OF THESE ARTICLES IS TO EXPLAIN HIV/AIDS RESEARCH ADVANCES FOR PEOPLE LIVING WITH HIV/AIDS AND THEIR FAMILIES, COMMUNITIES, AND CAREGIVERS ACROSS ASIA. THE ARTICLES APPEAR IN THE TREAT ASIA REPORT AND ON TREAT ASIA'S WEBSITE, WWW.TREATASIA.ORG.

XIX INTERNATIONAL AIDS CONFERENCE

TREAT ASIA WAS WELL REPRESENTED AT THE CONFERENCE IN JULY 2012 IN WASHINGTON, D.C. IN ADDITION TO ACTIVITIES DURING THE MAIN CONFERENCE, TREAT ASIA STAFF AND NETWORK INVESTIGATORS PARTICIPATED IN PRE-CONFERENCE WORKSHOPS ON HIV PEDIATRIC AND CURE RESEARCH. TWO STUDIES ON RISK BEHAVIORS AND TREATMENT OUTCOMES OF ADOLESCENTS FROM TREAT ASIA'S PEDIATRIC HIV NETWORK WERE PRESENTED.

15TH BANGKOK SYMPOSIUM ON HIV MEDICINE

AMFAR CONTINUED ITS SUPPORT OF THIS ANNUAL REGIONAL SYMPOSIUM, WHICH WAS HELD IN JANUARY 2012. DR. ANNETTE SOHN, VICE PRESIDENT AND DIRECTOR OF THE TREAT ASIA PROGRAM, SPOKE ABOUT THE USE OF PRE-EXPOSURE ANTIRETROVIRAL PROPHYLAXIS IN MSM.

15TH INTERNATIONAL CONGRESS ON INFECTIOUS DISEASES (ICID)

TREAT ASIA NETWORK INVESTIGATORS PRESENTED FOUR STUDIES ON HIV-INFECTED

ADOLESCENTS AT THIS ANNUAL CONGRESS, WHICH WAS HELD IN JUNE 2012 IN

BANGKOK.

PROGRAM SERVICE ACCOMPLISHMENTS (4)

PART III, LINE 4A-4D (4)

LINE 4C: EDUCATION AND INFORMATION: AMFAR SEEKS TO TRANSLATE AND
DISSEMINATE INFORMATION ON IMPORTANT AIDS-RELATED RESEARCH, TREATMENT,
PREVENTION, AND POLICY ISSUES FOR DIVERSE AUDIENCES AND TO STIMULATE
BROAD AWARENESS OF THE NEED FOR BETTER TREATMENT AND PREVENTION METHODS.
AMFAR ALSO PUBLISHES A WIDE RANGE OF EDUCATIONAL MATERIALS, MAINTAINS AN
INFORMATIVE WEBSITE, AND ENGAGES RESPECTED PUBLIC FIGURES, HIV/AIDS
SCIENTISTS, AND POLICY MAKERS IN COMMUNICATING THE NEED FOR CONTINUED
RESEARCH TO DEVELOP NEW METHODS OF PREVENTION, TREATMENT, AND,
ULTIMATELY, A CURE FOR AIDS.

EDUCATIONAL MATERIALS

AMFAR PRODUCES A RANGE OF PERIODICALS IN BOTH PRINT AND ELECTRONIC

FORMATS, INCLUDING ITS NEWSLETTER INNOVATIONS, PUBLISHED TWICE A YEAR AND

DISTRIBUTED TO MORE THAN 40,000 PEOPLE; THE TREAT ASIA REPORT, PUBLISHED

AND DISTRIBUTED THREE TIMES A YEAR TO MORE THAN 4,000 READERS IN THE

INTERNATIONAL HEALTH COMMUNITY; AND A MONTHLY E-MAIL NEWSLETTER

DISTRIBUTED TO MORE THAN 40,000 PEOPLE. THE FOUNDATION'S NEWLY REDESIGNED

WEBSITE FEATURES NEWS, INTERVIEWS, AND ORIGINAL ARTICLES COVERING

SCIENCE, POLICY, THE GLOBAL EPIDEMIC, AND AMFAR PROGRAMS AND ACTIVITIES.

AMFAR ALSO CREATES AND DISTRIBUTES PROGRAM REPORTS, PRESS RELEASES, AND UPDATES ON MAJOR HIV/AIDS ISSUES, AND CONDUCTS PUBLIC SERVICE ADVERTISING CAMPAIGNS THAT HAVE BEEN INSTRUMENTAL IN EDUCATING POLICY MAKERS, HEALTHCARE PROFESSIONALS, PEOPLE LIVING WITH HIV/AIDS, AND THE GENERAL PUBLIC.

TOGETHER TO END AIDS

AMFAR AND GBCHEALTH HONORED BILL GATES AT A BENEFIT EVENT IN WASHINGTON,
D.C., ON THE EVE OF THE INTERNATIONAL AIDS CONFERENCE, PAYING TRIBUTE TO
THE SPIRIT OF GLOBAL COLLABORATION THAT HAS UNDERPINNED THE WORLD'S
PROGRESS IN THE FIGHT AGAINST AIDS. THE EVENT, TITLED "TOGETHER TO END
AIDS," WAS ATTENDED BY SHARON STONE, ANDERSON COOPER, JESSYE NORMAN, JOHN
CORBETT, EVE, M?A?C AIDS FUND CHAIRMAN JOHN DEMSEY, THE HONORABLE NANCY
PELOSI, UNAIDS EXECUTIVE DIRECTOR MICHEL SIDIBÉ, THE HONORABLE BARBARA
LEE, THE HONORABLE ED MARKEY, AND HEALTH AND HUMAN SERVICES SECRETARY
KATHLEEN SEBELIUS, AMONG MANY OTHERS.

GATES RECEIVED AMFAR'S AWARD OF COURAGE FOR HIS VISIONARY LEADERSHIP ON GLOBAL HEALTH AND HIV/AIDS. THE EVENING KICKED OFF THE FIRST INTERNATIONAL AIDS CONFERENCE TO BE HELD IN THE U.S. IN MORE THAN TWO DECADES.

SOCIAL MEDIA

AMFAR VIGOROUSLY EXPANDED ITS PRESENCE IN THE SOCIAL MEDIA ARENA,

REACHING LARGE NUMBERS OF A PEOPLE AND A GENERALLY YOUNGER DEMOGRAPHIC

THAT IS OFTEN LESS EDUCATED ABOUT HIV AND THE AIDS EPIDEMIC. THE

FOUNDATION REGULARLY ADDED CONTENT TO ITS FACEBOOK PAGE, MOUNTED A

CAMPAIGN TO INCREASE FACEBOOK FOLLOWERS, AND LIVE TWEETED FROM

FUNDRAISING AND PROGRAM EVENTS. AMFAR PASSED 40,000 LIKES ON FACEBOOK IN

2012 AND NOW HAS MORE THAN 15,000 TWITTER FOLLOWERS.

MEDIA OUTREACH

AMFAR CONTINUED TO WORK CLOSELY WITH THE MEDIA TO RAISE THE PROFILE OF HIV/AIDS, BOTH DOMESTICALLY AND INTERNATIONALLY, AND TO HELP ENSURE THE ACCURACY OF AIDS PRESS COVERAGE. ARTICLES AND REPORTS INVOLVING AMFAR-MANY OF WHICH INCLUDED INTERVIEWS WITH AMFAR SPOKESPEOPLE-WERE CARRIED IN NUMEROUS MEDIA OUTLETS, INCLUDING THE NEW YORK TIMES, THE WALL STREET JOURNAL, THE WASHINGTON POST, THE ASSOCIATED PRESS, REUTERS, BLOOMBERG NEWS, AND THE HUFFINGTON POST.

AMFAR'S LEADERSHIP ROLE IN AIDS RESEARCH WAS HIGHLIGHTED IN LATE JULY,

DURING AND AROUND THE INTERNATIONAL AIDS CONFERENCE IN WASHINGTON, D.C.,

WHEN MAJOR OUTLETS-INCLUDING THE WALL STREET JOURNAL, THE ASSOCIATED

PRESS, BLOOMBERG, AND REUTERS-SOUGHT COMMENTARY FROM AMFAR'S LEADERSHIP.

AMFAR'S PUBLIC AWARENESS EFFORTS ARE GREATLY ENHANCED BY THE COMMITTED SUPPORT OF PUBLIC FIGURES WHO LEND THEIR VOICES AND DONATE THEIR TIME, TALENTS, AND RESOURCES TO HELP SUSTAIN THE FOUNDATION'S MISSION. SUPPORT OF AMFAR BY PROMINENT PUBLIC FIGURES BEGAN WITH THE LATE DAME ELIZABETH

TAYLOR, AND OTHERS HAVE FOLLOWED IN HER FOOTSTEPS. AMFAR IS PROFOUNDLY GRATEFUL FOR THE CONTINUING STEADFAST SUPPORT OF GLOBAL FUNDRAISING CHAIRMAN SHARON STONE. IN 2012, CELEBRITY SUPPORTERS INCLUDED AMFAR AMBASSADORS CHEYENNE JACKSON, JANET JACKSON, MILLA JOVOVICH, LIZA MINNELLI, AND MICHELLE YEOH, AS WELL AS SARAH JESSICA PARKER, HEIDI KLUM, ALAN CUMMING, JOHN BENJAMIN HICKEY, JANELLE MONÁE, JENNIFER HUDSON, ELIZABETH HURLEY, DEBBIE HARRY, DIANE KRUGER, KYLIE MINOGUE, FUN., JESSIE J, THEOPHILUS LONDON, CHRIS TUCKER, ADRIEN BRODY, DITA VON TEESE, STANLEY TUCCI, CHELSEA HANDLER, AND KATY PERRY, AMONG MANY OTHERS.

PROGRAM SERVICE ACCOMPLISHMENTS (5)

PART III, LINE 4A-4D (5)

THE GMT INITIATIVE (FORMERLY MSM INITIATIVE): SINCE 2007, AMFAR HAS BEEN SERVING THE HIV-RELATED NEEDS OF GAY MEN, OTHER MEN WHO HAVE SEX WITH MEN (MSM), AND TRANSGENDER INDIVIDUALS (COLLECTIVELY, GMT) THROUGHOUT THE DEVELOPING WORLD THROUGH ITS MSM INITIATIVE. THE PROGRAM WAS RECENTLY RENAMED THE GMT INITIATIVE TO BETTER REFLECT THE DIVERSITY OF THE PEOPLE IT SERVES. THROUGH SMALL, TARGETED GRANTS TO GRASSROOTS GROUPS, AMFAR HELPS EXPAND ACCESS TO HIV EDUCATION AND PREVENTION SERVICES; SUPPORTS ADVOCACY AIMED AT INCREASING FUNDING FOR PREVENTION AND TREATMENT SERVICES; AND WORKS TO END THE STIGMA, DISCRIMINATION, AND VIOLENCE THAT THREATEN THE LIVES OF GMT AND FUEL THE SPREAD OF HIV/AIDS.

COMMUNITY AWARDS

IN 2012, AMFAR AWARDED MORE THAN \$650,000 TO 39 GROUPS IN AFRICA, ASIA AND THE PACIFIC, THE CARIBBEAN, EASTERN EUROPE AND CENTRAL ASIA, AND

LATIN AMERICA FOR A WIDE RANGE OF PROJECTS ADDRESSING HIV PREVENTION,

OUTREACH, EDUCATION, ADVOCACY, TESTING, RESEARCH, AND CAPACITY BUILDING.

SAMPLE FUNDED PROJECTS INCLUDE:

AFRICA

ESPOIR VIE TOGO (EVT) (LOMÉ, TOGO)

EVT IS HELPING TO CREATE THE FIRST EVER SAFE SPACE FOR LGBT PEOPLE AND OTHER MSM IN TOGO. AHOEFA-THE HOUSE OF PEACE-PROVIDES ACCESS TO PSYCHOSOCIAL SUPPORT, HIV TESTING AND COUNSELING, PREVENTION DISCUSSION GROUPS, CONDOMS, AND LUBRICANT. THE GROUP IS ALSO PROVIDING FINANCIAL SUPPORT FOR SCHOLARSHIPS FOR DESERVING STUDENTS, MICRO-CREDIT PROGRAMS, AND VOCATIONAL SKILLS TRAINING. EVT IS ENGAGING POLICY MAKERS, MEDIA REPRESENTATIVES, RELIGIOUS LEADERS, AND HEALTH CARE WORKERS IN DISCUSSIONS ABOUT STIGMA AND HOMOPHOBIA AND THEIR EFFECTS ON HIV VULNERABILITY AMONG MSM.

ASIA-PACIFIC

THE HUMAN RIGHTS EDUCATION INSTITUTE OF BURMA (HREIB) (CHIANG MAI/RANONG, THAILAND)

THIS DIRECT SERVICE PROJECT IS SUPPORTING PEER EDUCATORS WHO TEACH SEXUAL HEALTH-RELATED KNOWLEDGE AND RISK-REDUCTION SKILLS, INCREASING ACCESS TO HEALTHCARE AND VOCATIONAL TRAINING, AND PROMOTING BASIC HUMAN RIGHTS AMONG BURMESE MIGRANT MSM AND TRANSGENDER PERSONS LIVING IN RANONG, THAILAND.

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CARIBBEAN

GRUPO ESTE AMOR (LA ROMANA, DOMINICAN REPUBLIC)

THIS TRANSGENDER-SPECIFIC PROJECT IS HELPING TRANSGENDER WOMEN ACHIEVE ECONOMIC INDEPENDENCE BY PROVIDING HIV PREVENTION EDUCATION AND SMALL BUSINESS SKILLS. GRUPO ESTE AMOR IS TRAINING TRANSGENDER STYLISTS WHO DOUBLE AS HEALTH AGENTS TO THEIR CLIENTS, PROVIDING HIV PREVENTION INFORMATION AND CONDOMS, AND ENCOURAGING HIV TESTING AND REFERRALS.

EASTERN EUROPE AND CENTRAL ASIA

PENITENTIARY INITIATIVE (NIKOLAEV, UKRAINE)

BASED ON MULTIPLE PREVIOUS AMFAR AWARDS, THE GROUP ADVOCATES ON BEHALF
OF, AND PROVIDES SERVICES FOR, "OUTCAST" GMT IN PRISON SETTINGS,
INCLUDING PSYCHOLOGICAL SUPPORT GROUPS AND INDIVIDUAL COUNSELING. THE
ORGANIZATION, WHICH RECEIVED ITS FOURTH GRANT FROM AMFAR, IS ALSO
PILOTING NEW STRATEGIES (SUCH AS RAPID HIV TESTING) IN THREE PRISONS, AS
WELL AS CONTINUING TO HOLD TRAINING SEMINARS WITH MINISTRY OF JUSTICE
OFFICIALS ON BOTH MEDICAL AND NON-MEDICAL ASPECTS OF LIVING WITH HIV.

LATIN AMERICA

FUNDACIÓN LLANTO, VALOR Y ESFUERZO (LLAVES) (SAN PEDRO SULA, HONDURAS)

LLAVES IS TRAINING KEY TRANSGENDER LEADERS TO BECOME EDUCATED IN POLICY,

LAW, AND HUMAN RIGHTS IN ORDER TO AMEND THE HONDURAN SPECIAL LAW ON HIV

TO INCLUDE PROTECTION FOR ALL CITIZENS REGARDLESS OF SEXUAL ORIENTATION

AND GENDER IDENTITY. ADDITIONALLY, LLAVES IS WORKING WITH LOCAL MEDIA TO

INCREASE AWARENESS OF ISSUES SUCH AS HIV, HUMAN RIGHTS, AND SEXUAL

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DIVERSITY.

"IN ACTION" AWARDS

THE GMT INITIATIVE ALSO MADE FIVE AWARDS AS PART OF ITS ADVOCACY IN ACTION PROGRAM, WHICH SUPPORTS GMT-LED COMMUNITY-BASED ORGANIZATIONS THAT WISH TO INFLUENCE THE POLICIES OF GOVERNMENTS AND EXTERNAL DONORS. SIX ADDITIONAL AWARDS WERE MADE UNDER ITS EVIDENCE IN ACTION PROGRAM, WHICH DOCUMENTS AND EVALUATES THE IMPACT OF COMMUNITY-BASED PROGRAMS WITH THE ULTIMATE GOAL OF IMPLEMENTING THE MOST WORKABLE STRATEGIES FOR STOPPING THE SPREAD OF HIV/AIDS. EVIDENCE IN ACTION WAS DEVELOPED WITH SUPPORT FROM VIIV HEALTHCARE'S POSITIVE ACTION PROGRAM AND THE ELTON JOHN AIDS FOUNDATION. AWARDS FOR THESE TWO PROGRAMS IN 2012 TOTALED MORE THAN \$180,000.

PUBLICATIONS

AS PART OF ITS EFFORTS TO RAISE AWARENESS AMONG GOVERNMENTS, DONORS, AND INTERNATIONAL NONGOVERNMENTAL ORGANIZATIONS OF THE SPREAD OF HIV AMONG GMT AND TO ADVOCATE EFFECTIVE STRATEGIES FOR ADDRESSING IT, AMFAR PUBLISHES REPORTS ON HIV AND GMT. IN NOVEMBER 2011, AMFAR PUBLISHED A FUNDRAISING TOOLKIT FOR GMT-LED ADVOCACY IN LOW- AND MIDDLE-INCOME COUNTRIES, OFFERING GENERAL TIPS ON FUNDRAISING AND INFORMATION ABOUT WHO IS FUNDING GMT GROUPS. THE TOOLKIT IS AVAILABLE IN ENGLISH, RUSSIAN, AND SPANISH. AND WITH THE JOHNS HOPKINS BLOOMBERG SCHOOL OF PUBLIC HEALTH, AMFAR PUBLISHED ACHIEVING AN AIDS-FREE GENERATION FOR GAY MEN AND OTHER MSM, A NEW REPORT PROVIDING THE MOST COMPREHENSIVE ANALYSIS TO DATE OF

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HIV-RELATED FUNDING AND PROGRAMMING FOR THIS POPULATION.

XIX INTERNATIONAL AIDS CONFERENCE

LED BY DIRECTOR KENT KLINDERA, THE GMT INITIATIVE WAS WELL REPRESENTED AT THE XIX INTERNATIONAL AIDS CONFERENCE, WITH SEVERAL COMMUNITY PARTNERS PRESENTING DATA FROM AMFAR-SUPPORTED PROJECTS. HIGHLIGHTS INCLUDED A PRESENTATION ON SUSTAINABLE FUNDING DURING A GLOBAL FORUM ON MSM AND HIV PRE-CONFERENCE MEETING, AND A SKILLS-BUILDING SESSION ON COMMUNITY ENGAGEMENT IN GMT-RELATED RESEARCH.

PROGRAM SERVICE ACCOMPLISHMENTS (6)

PART III, LINE 4A-4D (6)

PUBLIC POLICY: INFORMED BY THOROUGH RESEARCH AND ANALYSIS, AMFAR IS A HIGHLY RESPECTED ADVOCATE OF RATIONAL AND COMPASSIONATE AIDS-RELATED PUBLIC POLICY. THE FOUNDATION IS ENGAGED IN EFFORTS TO SECURE NECESSARY INCREASES IN FUNDING FOR HIV/AIDS RESEARCH; IMPLEMENT THE NEW NATIONAL HIV/AIDS STRATEGY; EXPAND ACCESS TO CARE AND TREATMENT; AND PROTECT THE CIVIL RIGHTS OF ALL PEOPLE AFFECTED BY HIV/AIDS.

CAPITOL HILL BRIEFINGS

PEPFAR AND COMBINATION PREVENTION FOR AN AIDS-FREE GENERATION

FEBRUARY 1, 2012

AMFAR CO-HOSTED A BRIEFING-WITH THE IDSA CENTER FOR GLOBAL HEALTH POLICY

AND THE PRESIDENT'S EMERGENCY PLAN FOR AIDS RELIEF (PEPFAR)-TO DISCUSS

COMBINATION PREVENTION APPROACHES TO HIV. SPEAKERS WERE U.S. GLOBAL AIDS

COORDINATOR DR. ERIC GOOSBY, DR. DIANE HAVLIR OF THE UNIVERSITY OF
CALIFORNIA, SAN FRANCISCO, DR. CHRIS BEYRER OF THE JOHNS HOPKINS CENTER
FOR PUBLIC HEALTH AND HUMAN RIGHTS, DR. RJ SIMONDS OF THE ELIZABETH
GLASER PEDIATRIC AIDS FOUNDATION, AND DR. RENEE RIDZON OF THE BILL &
MELINDA GATES FOUNDATION.

BEGINNING TO END THE AIDS EPIDEMIC: WHAT'S THE RESEARCH AGENDA?

MAY 23, 2012

PANELISTS REVIEWED AND DISCUSSED CURRENT AND UPCOMING AREAS OF

HIV-RELATED RESEARCH, INCLUDING MICROBICIDES, PRE-EXPOSURE PROPHYLAXIS

(PREP), TREATMENT AS PREVENTION, VACCINES, AND THE SEARCH FOR A CURE.

SPEAKERS INCLUDED DR. CARL DIEFFENBACH OF THE NATIONAL INSTITUTE OF

ALLERGY AND INFECTIOUS DISEASES, DÁZON DIXON DIALLO OF SISTERLOVE, INC.

AND MOREHOUSE SCHOOL OF MEDICINE; AND DR. JARED BAETEN OF THE UNIVERSITY

OF WASHINGTON.

A CURE FOR HIV/AIDS: RECENT BREAKTHROUGHS AND NEW RESEARCH FRONTIERS
JUNE 20, 2012

IN ADDITION TO TWO PANELS OF TOP HIV/AIDS RESEARCHERS AND ADVOCATES, THE BRIEFING INCLUDED AN INTERVIEW BY JUDY WOODRUFF, CO-ANCHOR AND SENIOR CORRESPONDENT OF PBS NEWS HOUR, WITH TIMOTHY BROWN, "THE BERLIN PATIENT," THE FIRST PERSON KNOWN TO BE CURED OF HIV. DURING THE FIRST PANEL, AMFAR GRANTEE DR. ROBERT SILICIANO OF JOHNS HOPKINS UNIVERSITY SCHOOL OF MEDICINE, DESCRIBED HIS WORK STUDYING WAYS TO FORCE LATENT HIV THAT IS LYING DORMANT IN CELLS TO BECOME ACTIVE SO THAT IT CAN BE TARGETED BY

ANTIRETROVIRAL THERAPY. THE SECOND PANEL FEATURED AMFAR TRUSTEE REGAN HOFMANN, FORMER EDITOR OF POZ MAGAZINE, WHO URGED POLICYMAKERS TO SEIZE ON RECENT SCIENTIFIC ADVANCES NOW.

HARM REDUCTION

AS ONE OF THE EARLIEST SUPPORTERS OF COMPREHENSIVE HARM REDUCTION

PROGRAMS FOR INJECTION DRUG USERS (IDUS), INCLUDING SYRINGE EXCHANGE,

AMFAR HAS PLAYED A LEADING ROLE IN ADVOCATING THE IMPLEMENTATION OF THESE

LIFESAVING HIV PREVENTION PROGRAMS.

IMMEDIATELY PRIOR TO THE OPENING OF THE 2012 INTERNATIONAL AIDS

CONFERENCE, AMFAR AND THE INTERNATIONAL AIDS SOCIETY - WITH FINANCIAL AND

PLANNING SUPPORT FROM THE OPEN SOCIETY FOUNDATIONS - CONVENED A DAY-LONG

MEETING TO REVIEW AVAILABLE EVIDENCE ON EFFECTIVE STRATEGIES TO COMBAT

HIV AMONG PEOPLE WHO USE DRUGS. THE MEETING ATTRACTED APPROXIMATELY 200

PARTICIPANTS FROM 30 COUNTRIES, INCLUDING RESEARCHERS, CLINICIANS,

GOVERNMENT OFFICIALS, COMMUNITY-BASED ORGANIZATIONS, AIDS ADVOCATES,

PEOPLE WHO USE DRUGS, AND PEOPLE LIVING WITH HIV.

AMFAR FUNDS THE ONLY ANNUAL NATIONAL SURVEY OF U.S. SEPS, WHICH IS

TRADITIONALLY PUBLISHED IN THE CENTERS FOR DISEASE CONTROL AND

PREVENTION'S MORBIDITY AND MORTALITY WEEKLY REPORT (MMWR). UNDER CONTRACT

WITH THE NEW YORK STATE DEPARTMENT OF HEALTH'S AIDS INSTITUTE, AMFAR

CONTINUED TO ADMINISTER THE DISTRIBUTION OF HARM REDUCTION SUPPLIES TO

THE 21 AUTHORIZED SEPS STATEWIDE, WHICH HAVE SERVED MORE THAN 160,000

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REGISTERED PARTICIPANTS.

SHAPING THE DOMESTIC RESPONSE TO HIV/AIDS

AMFAR HAS LONG ADVOCATED THE IMPLEMENTATION OF A COMPREHENSIVE NATIONAL HIV/AIDS STRATEGY TO ADDRESS THE EPIDEMIC IN THE U.S., WHERE MORE THAN ONE MILLION PEOPLE ARE LIVING WITH THE VIRUS. IN MARCH, AMFAR SPEARHEADED A SUCCESSFUL CONSULTATION ON THE RESEARCH AGENDA FOR USE OF MODELING IN ADDRESSING THE DOMESTIC EPIDEMIC. MORE THAN 30 PLANNERS, AIDS DIRECTORS, ADVOCATES, AND MODELERS ATTENDED. PUBLIC POLICY STAFF MEMBERS MET WITH THE NEW OFFICE OF NATIONAL AIDS POLICY (ONAP) DIRECTOR GRANT COLFAX TO DISCUSS PRIORITIES, AND SET UP AND ATTENDED MEETINGS ON DOMESTIC APPROPRIATIONS WITH KEY CONGRESSIONAL STAFF.

GLOBAL HEALTH

AT THE INTERNATIONAL AIDS CONFERENCE, AMFAR RELEASED AN "ACTION AGENDA TO END AIDS," DEVELOPED WITH AVAC TO IDENTIFY FIVE MAJOR SHORT-TERM PRIORITIES FOR GLOBAL AIDS PROGRAMS TOGETHER WITH REALISTIC, ANNUAL TARGETS THROUGH 2015. THE REPORT WAS THE FOCUS OF A SATELLITE SESSION AT THE CONFERENCE TITLED "GETTING REAL ABOUT GETTING TO THE END OF AIDS." A PANEL DISCUSSION MODERATED BY RENOWNED JOURNALIST CHARLAYNE HUNTER-GAULT INCLUDED ANTHONY FAUCI, M.D., OF THE NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES; MIKE COHEN, M.D., OF THE UNIVERSITY OF NORTH CAROLINA; HELEN REES, M.D., OF THE WITS REPRODUCTIVE HEALTH AND HIV INSTITUTE IN SOUTH AFRICA; CHRIS COLLINS, AMFAR VICE PRESIDENT AND DIRECTOR OF PUBLIC POLICY; MITCHELL WARREN, EXECUTIVE DIRECTOR OF AVAC;

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AND OTHER LEADING AIDS EXPERTS.

GMT

GMT-GAY MEN, OTHER MEN WHO HAVE SEX WITH MEN, AND TRANSGENDER
INDIVIDUALS-REMAIN ONE OF THE HARDEST HIT AND MOST UNDERSERVED
POPULATIONS IN THE GLOBAL HIV/AIDS EPIDEMIC. AMFAR'S POLICY OFFICE WORKS
CLOSELY WITH THE FOUNDATION'S GMT INITIATIVE (FORMERLY MSM INITIATIVE) TO
ADVOCATE EXPANDED ACCESS TO HIV PREVENTION AND TREATMENT SERVICES FOR GMT
WORLDWIDE, AND TO FIGHT THE STIGMA AND DISCRIMINATION THAT MAKE GMT MORE
VULNERABLE TO HIV INFECTION AND INHIBIT EQUAL ACCESS TO CARE.

IN JANUARY, AMFAR RELEASED A NEW REPORT-TITLED "ACHIEVING AN AIDS-FREE GENERATION FOR GAY MEN AND OTHER MSM"-ON GLOBAL FUNDING AND POLICY RELATED TO TACKLING THE HIV EPIDEMIC AMONG GAY MEN AND OTHER MSM. THE REPORT PROVIDES THE MOST COMPREHENSIVE ANALYSIS TO DATE OF HIV-RELATED FUNDING AND PROGRAMMING FOR THIS POPULATION. FOCUSING ON EIGHT COUNTRIES, IT FINDS THAT NATIONAL GOVERNMENTS HAVE FAILED TO ADEQUATELY ADDRESS THE EPIDEMIC AMONG MSM, PARTICULARLY IN COUNTRIES THAT CRIMINALIZE SAME-SEX SEXUAL BEHAVIOR.

AT THE INTERNATIONAL AIDS CONFERENCE, AMFAR PLAYED A KEY ROLE IN A SYMPOSIUM SESSION TITLED "MEN WHO HAVE SEX WITH MEN AND HIV"-HOSTED BY THE LANCET, WHOSE JULY 28, 2012, ISSUE FEATURED A SERIES ON THE SAME THEME, INCLUDING TWO ARTICLES CO-AUTHORED BY AMFAR VICE PRESIDENT AND DIRECTOR OF PUBLIC POLICY CHRIS COLLINS. COLLINS PRESENTED ONE OF THE

ARTICLES, "A CALL TO ACTION FOR COMPREHENSIVE HIV SERVICES FOR MEN WHO HAVE SEX WITH MEN."

AN ISSUE BRIEF RELEASED BY AMFAR AND TRUST FOR AMERICA'S HEALTH (TFAH) IN SEPTEMBER-ENDING THE HIV EPIDEMIC AMONG GAY MEN IN THE UNITED STATES-ARGUES THAT MORE FREQUENT HIV TESTING AND LINKAGE TO APPROPRIATE CARE, IN COMBINATION WITH TRADITIONAL PREVENTION MEASURES SUCH AS CONSISTENT USE OF CONDOMS AND SAFER SEX PRACTICES, ARE NEEDED TO BRING DOWN HIV INCIDENCE AMONG GAY MEN. IT CALLED FOR SYSTEMATIC CHANGES TO REDUCE BARRIERS TO HIV TESTING AND TREATMENT FOR GAY MEN, INCLUDING EXPANDED PROVIDER EDUCATION AND TRAINING, INSURANCE COVERAGE, AND UTILIZATION OF NEW TESTING TECHNOLOGIES. THE REPORT ALSO URGED LIGHT COMMUNITY ORGANIZATIONS TO REDEDICATE THEMSELVES TO FIGHTING AIDS IN AMERICA.

PRE-EXPOSURE PROPHYLAXIS (PREP)

AS PART OF A COALITION OF AIDS ADVOCACY ORGANIZATIONS, AMFAR CALLED ON THE U.S. FOOD AND DRUG ADMINISTRATION (FDA) EARLY IN 2012 TO APPROVE THE ANTIRETROVIRAL DRUG TRUVADA AS PRE-EXPOSURE PROPHYLAXIS (PREP), AND, IN TESTIMONY BEFORE THE ADVISORY PANEL, EMPHASIZED THE NEED FOR DEMONSTRATION PROJECTS TO DETERMINE HOW PREP CAN BE USED FOR OPTIMAL PUBLIC HEALTH IMPACT.

IN JULY, AMFAR APPLAUDED THE FDA'S DECISION TO APPROVE USE OF TRUVADA AS AN OPTION FOR HIV PREVENTION. THE DECISION FOLLOWED A MAY 10

RECOMMENDATION BY AN ADVISORY PANEL TO THE AGENCY, WHICH SAID THAT
TRUVADA, CURRENTLY APPROVED FOR HIV TREATMENT, IS ALSO A SAFE AND
EFFECTIVE MEANS TO PREVENT INFECTION IN SEXUALLY ACTIVE ADULTS. THE DRUG,
MANUFACTURED BY GILEAD SCIENCES INC., WAS STUDIED IN SEVERAL MAJOR TRIALS
THAT DEMONSTRATED THE ONCE-DAILY PILL, WHEN TAKEN CONSISTENTLY,
SIGNIFICANTLY REDUCES THE CHANCES OF ACQUIRING HIV. AMFAR CONTINUES TO
ADVISE THE U.S. GOVERNMENT ON HOW TO INCORPORATE TRUVADA INTO GLOBAL
PREVENTION STRATEGIES AND GOALS.

POLICIES

FORM 990, PART VI, SECTION B

LINE 11 - THE FORM 990 WAS PREPARED BY A NATIONALLY RENOWNED ACCOUNTING

FIRM IN CONJUNCTION WITH THE ORGANIZATION'S FINANCIAL DEPARTMENT. A COPY

OF THE DRAFT FORM 990 WAS CIRCULATED TO THE FULL BOARD OF TRUSTEES FOR

DISCUSSION AND COMMENT. EACH BOARD MEMBER WAS PROVIDED AMPLE OPPORTUNITY

TO COMMENT ON THE INFORMATION CONTAINED IN THE 990 PRIOR TO ITS FILING

WITH THE INTERNAL REVENUE SERVICE.

LINE 12 - EACH OFFICER, DIRECTOR, TRUSTEE AND KEY EMPLOYEE OF AMFAR

("FOUNDATION") IS REQUIRED TO ANNUALLY DISCLOSE ANY CONFLICTS OF INTEREST

THAT ARISE BY VIRTUE OF EMPLOYMENT, BOARD SERVICE, OR POSITION WITH THE

FOUNDATION. THE FOUNDATION MONITORS COMPLIANCE WITH ITS CONFLICT OF

INTEREST POLICY THROUGH AN ANNUAL QUESTIONNAIRE/DISCLOSURE STATEMENT THAT

IS DISTRIBUTED TO THESE INDIVIDUALS. POTENTIAL CONFLICTS ARE

INVESTIGATED IMMEDIATELY.

Page 2

LINE 15 - AMFAR ("FOUNDATION FOR AIDS RESEARCH") UNDERTAKES A THOROUGH PROCCESS TO ENSURE THAT THE COMPENSATION IT PAYS TO ITS TOP MANAGEMENT OFFICIAL AND ALL OF ITS OFFICERS AND KEY EMPLOYEES IS REASONABLE GIVEN THE MARKET IN WHICH THE FOUNDATION OPERATES. AN INDEPENDENT CONSULTING FIRM QUALIFIED IN THE AREA OF NONPROFIT COMPENSATION PREPARES AN ANALYSIS OF MARKET COMPENSATION RANGES BY JOB FUNCTION AND PRESENTS IT TO THE COMPENSATION COMMITTEE OF THE BOARD. ON THE BASIS OF THIS INFORMATION, STAFF COMPENSATION IS DETERMINED ACCORDING TO SALARY RANGES APPROVED BY THE COMPENSATION COMMITTEE OF THE BOARD, IN CONSULTATION WITH THE CEO AND CFO. CEO COMPENSATION IS REVIEWED AND DETERMINED BY THE COMPENSATION COMMITTEE OF THE BOARD UTILIZING THE INDEPENDENT CONSULTANT ANALYSIS.

DISCLOSURE

FORM 990, PART VI, SECTION C

LINE 19 - AMFAR MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC BY RETAINING A COPY AT ITS PLACE OF BUSINESS AND ON ITS WEBSITE, WWW.AMFAR.ORG. THE FORM 990 IS LIKEWISE PUBLISHED ON THE INTERNET AT WWW.GUIDESTAR.ORG. THE FOUNDATION'S FINANCIAL STATEMENTS ARE MADE AVAILABLE IN ITS ANNUAL REPORT AND ON ITS WEBSITE. THE FOUNDATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT ORDINARILY MADE AVAILABLE TO THE PUBLIC, BUT, IF REQUESTED, WILL BE PROVIDED AT MANAGEMENT'S DISCRETION.

FUNCTIONAL EXPENSES

PART IX, LINES 1 & 3

THE FOUNDATION FOR AIDS RESEARCH REPORTS ITS GRANTS NET OF GRANT RETURNS
OR RECOVERIES. PERIODICALLY, GRANTS REMITTED TO CHARITABLE ORGANIZATIONS

ARE RETURNED TO AMFAR FOR A VARIETY OF REASON. ON SCHEDULES F & I,

GRANTS ARE REPORTED IRRESPECTIVE OF WHETHER THEY WERE ULTIMATELY RETURNED

TO AMFAR SINCE CATEGORIZING THE "RETURNED" AMOUNTS WOULD BE TIME

CONSUMING. THEREFORE, AMOUNTS REPORTED ON PART IX, LINE 1 MAY NOT

NECESSARILY TIE TO TOTAL GRANTS ON SCHEDULE I; AMOUNTS REPORTED ON PART

IX, LINE 3 MAY NOT NECESSARILY TIE TO TOTAL GRANTS ON SCHEDULE F.

OTHER CHANGES IN NET ASSETS

FORM 990, SECTION XI, LINE 5

UNREALIZED GAIN.....\$836,699

GAIN ON THIRD PARTY TRUST.... (14,185)

(\$822,514)

=======

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE FOUNDATION FOR AIDS RESEARCH IS AN INTERNATIONAL NOT-FOR-PROFIT ORGANIZATION INCORPORATED IN NEW YORK IN 1989. AMFAR WAS FORMED THROUGH THE UNIFICATION IN 1985 OF TWO NOT-FOR-PROFIT ORGANIZATIONS, THE AIDS MEDICAL FOUNDATION ("AMF"), INCORPORATED IN NEW YORK IN APRIL 1983, AND THE NATIONAL AIDS RESEARCH FOUNDATION, INCORPORATED IN CALIFORNIA IN AUGUST 1985. FIRST BASED IN CALIFORNIA, AMFAR TRANSFERRED ITS LEGAL DOMICILE TO NEW YORK IN 1989, USING THE INITIAL INCORPORATION DOCUMENTS OF AMF, MAKING IT AMF'S LEGAL SUCCESSOR.

AMFAR HAS OFFICES IN NEW YORK, NY, WASHINGTON, D.C., AND BANGKOK, THAILAND. ON MARCH 7, 2005, THE BOARD OF TRUSTEES OF THE AMERICAN FOUNDATION FOR AIDS RESEARCH APPROVED A CHANGE IN LEGAL NAME TO "THE

Employer identification number 13-3163817

ATTACHMENT 1 (CONT'D)

Page 2

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

FOUNDATION FOR AIDS RESEARCH." ON OCTOBER 18, 2005, THE NEW YORK STATE DEPARTMENT OF STATE APPROVED THIS CHANGE. IN ADDITION, THE FOUNDATION HAS SECURED APPROVAL FOR DOING BUSINESS AS (DBA) THE FOLLOWING:

- AMERICAN FOUNDATION FOR AIDS RESEARCH
- AMFAR
- AIDS RESEARCH FOUNDATION

AMFAR IS DEDICATED TO ENDING THE GLOBAL AIDS EPIDEMIC THROUGH INNOVATIVE RESEARCH. THE FOUNDATION ACCOMPLISHES THIS MISSION THROUGH:

- RESEARCH TO EXPLORE SCIENTIFIC APPROACHES TO HIV PREVENTION,
 TREATMENT, AND POTENTIAL CURES, AND TO ENHANCE THE HEALTH AND
 SURVIVAL OF PEOPLE WITH HIV/AIDS;
- INTERNATIONAL INITIATIVES TO FACILITATE THE DEVELOPMENT AND IMPLEMENTATION OF EFFECTIVE RESEARCH, TREATMENT, PREVENTION, AND EDUCATION STRATEGIES IN DEVELOPING COUNTRIES;
- PUBLIC POLICY ANALYSIS AND THE ADVOCACY OF RATIONAL AND
 COMPASSIONATE POLICIES THAT PROMOTE PUBLIC HEALTH AND PROTECT THE
 RIGHTS OF PEOPLE THREATENED BY HIV/AIDS;
- EDUCATIONAL INITIATIVES TO BUILD AWARENESS OF THE CONTINUED THREAT HIV/AIDS POSES AND TO PUBLISH UPDATES ABOUT THE LATEST MEDICAL, SCIENTIFIC, AND PREVENTION ADVANCES FOR PEOPLE WITH HIV/AIDS, HEALTHCARE PROFESSIONALS, AND THE PUBLIC.

Employer identification number Name of the organization THE FOUNDATION FOR AIDS RESEARCH 13-3163817 ATTACHMENT 2

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

| DESCRIPTION | | GRANTS | EXPENSES | REVENUE |
|----------------|--------|------------|------------|---------|
| MSM INITIATIVE | | 835,851. | 1,974,629. | 0 |
| PUBLIC POLICY | | 548,609. | 2,316,596. | 0 |
| | TOTALS | 1,384,460. | 4,291,225. | 0 |

ATTACHMENT 3

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CT,

FL, GA, HI, IL, KS, KY, ME, MD, MA, MI,

MN, MS, NH, NJ, NM, NY, NC, OK, OR, PA,

RI, SC, TN, UT, VA, WV, WI,

ATTACHMENT 4

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

| NAME AND ADDRESS | DESCRIPTION OF SERVICES | COMPENSATION |
|--|-------------------------|--------------|
| AAB PRODUCTION 64 ALLEN STREET, 5TH FLOOR NEW YORK, NY 10002 | EVENTS PRODUCTION | 237,400. |
| JOSH WOODS PRODUCTION 39 WEST 14THS STREET, SUITE 504 NEW YORK, NY 10011 | EVENTS PRODUCTION | 180,000. |
| GRANT THORNTON LLP 1901 W. MEYERS ROAD, SUITE 455 OAKBROOK TERRACE, IL 60181 | ACCOUNTING & AUDIT | 177,101. |
| THE MORRIS & KING COMPANY LLC 101 FIFTH AVENUE, 8TH FLOOR NEW YORK, NY 10003 | PUBLIC RELATIONS | 132,000. |
| JOHN MINI CONSULTING INC. 707 SAVANNAH ROAD LEWES, DE 19958 | DIRECT MAIL | 124,550. |

Schedule O (Form 990 or 990-EZ) 2011

0176982-00003

Schedule O (Form 990 or 990-EZ) 2011

Employer identification number Name of the organization THE FOUNDATION FOR AIDS RESEARCH 13-3163817

ATTACHMENT 4 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION

TOTAL COMPENSATION

851,051.

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Schedule O (Form 990 or 990-EZ) 2011

JSA

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