Form	990
Departm	ent of the Treasury

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public.

► Inf . . . . - 1- -~~~ - - -- --- 4 . / . . . .

2 Open to Public

OMB No. 1545-0047

		enue Serv		Information a	bout Form 990 and its instruction	is is at www.irs	s.gov/for	m990.		Inspection	1 I
A F	or th	e 201	4 calen	dar year, or tax year begi	nning 10/01, 201	4, and endir	ng		09/	/30, <b>20</b> <sub>15</sub>	
_				e of organization				Employer id		= -	
B Cr	neck if ap	oplicable:		FOUNDATION FOR AI	DS RESEARCH						
	Addre	ess		Business As AIDS RESEAR		13-3163817					
	1 1	e change	-	per and street (or P.O. box if mail is		Room/suite	E	Telephone n	umber		
	+	return	120	) WALL STREET 13TH	(	(212) 80	6-10	500			
	+	inated		or town, state or province, country,		, ,	-				
	Amen	nded	NEW	V YORK, NY 10005-39		Gross receip	ts \$	72,911,8	385.		
		cation		e and address of principal officer:	KEVIN FROST		н	(a) Is this a gro			X No
L	_ pendi	ing			FLOOR NEW YORK, NY 10	005	н	subordinates (b) Are all subord			No
	Tax-ex	empt st		X 501(c)(3) 501(c) (	)					(see instructions)	
		-		AMFAR.ORG				(c) Group exem			
				X Corporation Trust	Association Other	I Year o				of legal domicile:	NY
	art I		nmary				Tormation		otate e	n legar donnene.	
					or most significant activities: AMFA	P TS DEDT	CATED	TO FNDT	NC 7	THE CLOBAL	
æ	•			DEMIC THROUGH INNO							
nc			<u> </u>								
Governance	2	Chock		x	liscontinued its operations or dispo	cod of more the		f its not assot			
Š									s. 3		19.
	3 ⊿	Numb		dependent voting members of	body (Part VI, line 1a)		• • • •		4		$\frac{19.}{19.}$
ies					the governing body (Part VI, line 1b)				5		88.
Activities &					endar year 2014 (Part V, line 2a)				5 6		57.
Acti	6	Total	number	of volunteers (estimate if neces	sary)				-		<u> </u>
					/III, column (C), line 12				7a		(
	a	Net ur	nrelated	business taxable income from	Form 990-T, line 34	<u></u>		Prior Year	7b	Current Yea	
								7,556,51	~		
Revenue	8									56,251,	<u>128</u> .
ven	9	Progra	am servi	ce revenue (Part VIII, line 2g)		1 005 40	0	1 500	100		
Re	10	mvest	ment m	come (Part VIII, column (A), im				1,225,46		1,528,	
	11				, 6d, 8c, 9c, 10c, and 11e)			0,881,86		-10,047,	
	12				t equal Part VIII, column (A), line 12)			7,900,11		47,731,	
					umn (A), lines 1-3)			9,928,38	4.	9,528,	<u>182</u> .
					ımn (A), line 4)		0 500 05	0	10 200		
ses				er compensation, employee ben		9,582,85		10,307,			
Expenses					n (A), line 11e)			569,00	94.	739,	793.
ЧЦ					D), line 25) ▶ 5 , 533 , 45					1 - 0 0 0	
	17				a-11d, 11f-24e)			4,312,87		17,000,	
	18			es. Add lines 13-17 (must equa				4,393,12		37,576,	
<u>ـ ۵</u>	19	Rever	ue less	expenses. Subtract line 18 from	n line 12			3,506,99		10,155,	404.
nce o	20 21 22							ng of Current		End of Year	
ssei 3ala	20							7,895,97		71,251,	
nd E	21							3,585,62		18,212,	
					1 from line 20	<u></u>	4	4,310,34	7.	53,038,	622.
	rt II			e Block							
Unc	der per e. corre	nalties c ect. and	of perjury, complete	, I declare that I have examined the Declaration of preparer (other that	is return, including accompanying schen n officer) is based on all information of w	edules and stater hich preparer ha	ments, and as anv kno	l to the best of wledae.	my kr	nowledge and belie	ef, it is
							, -	Ī			
Sig	n		0	e of officer							
Her			Signatur	e or onicer				Date			
				print name and title					-	<b>T</b> 15.1	
Paid	I			parer's name	Preparer's signature	Date		Check		TIN	
	barer	SC0'	TT T	HOMPSETT	Sett Shampett	06/02		self-employ		P00741490	
-	Only	Firm's	name	► GRANT THORNTON I	ЪЪ		F	ïrm's EIN 🕨			
				▶ 757 THIRD AVE., 4TH FLC			P	hone no.	212-	-599-0100	
100	tho	DC dia	ouce thi	ic roturn with the property chow	in above? (coo instructions)					VV	

may the fire discuss this return with the preparer shown above: (see instructions)	/ fes No
For Paperwork Reduction Act Notice, see the separate instructions.	Form <b>990</b> (2014)

Foi	m 990 (2014) Pa	ge <b>2</b>
Ρ	art III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	Х
1		
	ATTACHMENT 1	
_		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	No
		NO
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program	
3	services?	No
	If "Yes," describe these changes on Schedule O.	NO
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	l by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth	
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$including grants of \$, (Revenue \$) (Revenue \$)	
	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 U.S. NATIONAL INSTITUTES OF HEALTH. FOR	
	FURTHER DETAILS, SEE SCHEDULE O.	
46	(Code: ) (Expenses \$ 5.807.363, including grants of \$ 2.833.778, ) (Revenue \$ 0)	
41	(Code:) (Expenses \$ <sub>5,807,363.</sub> including grants of \$ <sub>2,833,778.</sub> ) (Revenue \$) TREAT ASIA: AMFAR'S TREAT ASIA (THERAPEUTICS RESEARCH, EDUCATION,	
	AND AIDS TRAINING IN ASIA) PROGRAM IS A NETWORK OF HOSPITALS,	
	CLINICS, AND RESEARCH INSTITUTIONS WORKING WITH CIVIL SOCIETY TO	
	ENSURE THE SAFE AND EFFECTIVE DELIVERY OF HIV TREATMENTS TO ADULTS	
	AND CHILDREN ACROSS THE ASIA-PACIFIC THROUGH RESEARCH, EDUCATION,	
	AND ADVOCACY OF EVIDENCE-BASED HIV-RELATED POLICIES. THE TREAT	
	ASIA NETWORK ENCOMPASSES 21 ADULT AND 18 PEDIATRIC SITES	
	THROUGHOUT THE REGION, WHICH COLLABORATE ON A VARIETY OF PROJECTS.	
	FOR FURTHER DETAILS, SEE SCHEDULE O.	
4c	(Code:) (Expenses \$4,236,913. including grants of \$0) (Revenue \$0)	
	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 INCREASE BROAD AWARENESS AND KNOWLEDGE OF THE PANDEMIC. AMFAR	
	ALSO PUBLISHES A WIDE RANGE OF EDUCATIONAL MATERIALS, MAINTAINS AN	
	INFORMATIVE WEBSITE, AND ENGAGES RESPECTED PUBLIC FIGURES,	
	HIV/AIDS SCIENTISTS, AND POLICYMAKERS IN COMMUNICATING THE NEED	
	FOR CONTINUED RESEARCH TO DEVELOP NEW METHODS OF PREVENTION,	
	TREATMENT, AND, ULTIMATELY, A CURE FOR AIDS. FOR FURTHER DETAILS,	
	SEE SCHEDULE O.	
4	Other program services (Describe in Schedule O.) ATTACHMENT 2	
40	Other program services (Describe in Schedule O.) ATTACHMENT 2	

(Expenses \$ 4,404,551 including grants of \$ 1,363,596 ) (Revenue \$ <sub>0</sub>) 
 4e Total program service expenses ►
 29,589,440.

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THE FOUNDATION FOR AIDS RESEARCH

Form 9	90 (2014)		Р	age 3
Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		37	
F	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	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,	5		х
6	Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	5		
U	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10	Х	
11	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		37	
h	complete Schedule D, Part VI	11a	Х	
ŭ	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i>	11b		Х
c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	110		
Ŭ	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
a	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			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
15	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	10		
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	-		
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	
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Form 99	0 (2014)		F	Page <b>4</b>
Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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		v	
	employees? If "Yes," complete Schedule J	23	X	
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 through 24d and complete Schedula K. If "Ne," go to line 25c.	24a		х
h	through 24d and complete Schedule K. If "No," go to line 25a. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
b c	Did the organization mointain an escrow account other than a refunding escrow at any time during the year	240		
U	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
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			37
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
-	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	28a		х
a h	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	200		
b	Schedule L. Part IV	28b		х
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
Ŭ	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	25h		
26	controlled entity within the 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	35b		
36	related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	55		
51	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
-		Form	990	(2014)

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THE FOUNDATION FOR AIDS RESEARCH

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Par				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	- No
1 9	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 142		162	NU
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
-	reportable gaming (gambling) winnings to prize winners?	1c	Х	
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 88			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
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			
	account)?	4a	X	
b	If "Yes," enter the name of the foreign country:  THAILAND			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
-	(FBAR).	<b>5</b> -		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
0a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or	00		
N	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a h	Initiation fees and capital contributions included on Part VIII, line 1210aGross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities10b			
11	Section 501(c)(12) organizations. Enter:	-		
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
2	against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	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 13b			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		Í

Form 9	390 (2014) THE FOUNDATION FOR AIDS RESEARCH 13-316	3817	F	Page <b>6</b>
Par	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See in	struc	tions.
	Check if Schedule O contains a response or note to any line in this Part VI	• • •	• • •	X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1	1		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body 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>1b</b> 1!	a		
b		1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2		x
•	any other officer, director, trustee, or key employee?	2		21
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		x
4	supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
-+ 5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization become aware during the year of a significant diversion of the organization's assets :	6		Х
7a	Did the organization have members of stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		x
b	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	Х	
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		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	: Code		T
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
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	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	A	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	Х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	120	21	
D	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	12b	х	
•	rise to conflicts?	120		
U	describe in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	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			
0	organization's exempt status with respect to such arrangements?	16b		
	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 available for public inspection. Indicate how you made these available. Check all that apply.           X         Own website         Another's website         X         Upon request         Other (explain in Schedule O)	1501(d	c)(3)s	only)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interview of the second seco	erest	policy	y, and
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and record BRADLEY JENSEN 120 WALL STREET 13TH FLOOR NEW YORK, NY 10005-3908 212-806-1703	ls:►		

13-3163817

Page 7

	. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
	Check if Schedule O contains a response or note to any line in this Part VII									
	Independent Contractors									
Part VII										

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.

				(0	C)					
(A)	(B)	Position					(D)	(E)	(F)	
Name and Title	Average	(do not check more than o						Reportable	Reportable	Estimated
	hours per					is both		compensation	compensation from	amount of other
	week (list any hours for		_			or/trust		from the	related organizations	compensation
	related	Individual trustee or director	Institutional trustee	Officer	Key employee	High	Former	organization	(W-2/1099-MISC)	from the
	organizations	/idua	tutic	ĕr	emp	loye	ner	(W-2/1099-MISC)		organization and related
	below dotted	or tr	nal		loye	e				organizations
	line)	Istee	trus		ē	pen				-
			:ee			Highest compensated employee				
						d				
(1)MATHILDE KRIM, PH.D.	1.00									
FOUNDING CHAIRMAN	0	x		Х				0	0	0
(2)KENNETH_COLE	1.00									
CHAIRMAN OF THE BOARD	0	x		Х				0	0	0
(3) PATRICIA J. MATSON	1.00									
VICE CHAIRMAN	0	Х		Х				0	0	0
(4)JOHN C. SIMONS	1.00									
VICE CHAIRMAN	0	Х		Х				0	0	0
(5) WALLACE SHEFT, C.P.A.	1.00									
TREASURER (THRU 09/2015)	0	Х		Х				0	0	0
(6)MERVYN F. SILVERMAN, M.D., M.P.	1.00									
SECRETARY	0	Х		Х				0	0	0
(7) ARLEN H. ANDELSON	1.00	-								
TRUSTEE	0	Х						0	0	0
(8)HARRY BELAFONTE	1.00	-								
TRUSTEE (NON-VOTING)	0	Х						0	0	0
(9)DAVID_BOHNETT	1.00									
TRUSTEE	0	Х						0	0	0
(10)ZEV BRAUN	1.00	-								
TRUSTEE (NON-VOTING)	0	Х						0	0	0
(11)JONATHAN S. CANNO	1.00									
TRUSTEE	0	Х						0	0	0
(12)DONALD CAPOCCIA	1.00									
TRUSTEE	0	Х						0	0	0
(13)R. MARTIN CHAVEZ, PH.D.	1.00									
TRUSTEE	0	Х						0	0	0
(14)JANE B. EISNER	1.00									
TRUSTEE (NON-VOTING)	0	Х						0	0	0

JSA

#### THE FOUNDATION FOR AIDS RESEARCH

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(A) Name and title	<b>(B)</b> Average hours per week (list any hours for	box, office	unles er and	ss pe d a d	ition more rson lirect	e than o is both or/trusto	an ee)	<b>(D)</b> Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
) T. RYAN GREENAWALT	1.00	37							0	
TRUSTEE 5) REGAN HOFMANN	0	Х						0	0	
TRUSTEE	0	x						0	0	
7) MICHAEL J. KLINGENSMITH	1.00									
TRUSTEE	0	x						0	0	
) KEVIN MCCLATCHY	1.00									
TRUSTEE	0	X						0	0	
) MICHELE V. MCNEILL, PHARM.D.	1.00	37								
TRUSTEE (NON-VOTING) )) EDWARD MILSTEIN	0	X						0	0	
TRUSTEE	0	x						0	0	
.) CINDY RACHOFSKY	1.00									
TRUSTEE	0	х						0	0	
2) VINCENT A. ROBERTI	1.00	-								
TRUSTEE	0	X						0	0	
) BILL ROEDY TRUSTEE	1.00	v							0	
ROSTEE A) RAYMOND F. SCHINAZI, PH.D. TRUSTEE	1.00	X						0	0	
5) ALAN D. SCHWARTZ	1.00									
TRUSTEE (NON-VOTING)	0	X						0	0	
b Sub-total							►	0	0	
c Total from continuation sheets to Part VII, S	-		••	• •	• •			2,731,457.	0	494,48
d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization	limited to tl			d al	bove	e) who	o re	2,731,457. ceived more than	-	494,48
Did the organization list any former offic employee on line 1a? If "Yes," complete Schede										3
For any individual listed on line 1a, is the solution organization and related organizations grain individual.	eater than	\$15	50,0	00?	If	"Yes	," (	complete Schedu	le J for such	4 X
Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue col	mpen	sati	on f	from	n any	uni	related organization	on or individual	5
Section B. Independent Contractors								hat man the t		4
Complete this table for your five highest com compensation from the organization. Report c year.										
(A) Name and business add	ress							<b>(B)</b> Description of se	ervices C	(C) ompensation
ATTACHMENT 4								,		• • • •

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 ▶ 9

	(A)	(B)			(C	;)			(D)	(E)		(	F)	
	Name and title	Average hours per week (list any hours for	box, office	iot ch unles: r and	s pei I a di	more rson irect	e than o is both or/truste	an ee)	Reportable compensation from the	Reportable compensation from related organizations		Estir amo ot compe	nated unt of her ensatio	
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-I		organ	elated	ł
26)	DIANA L. TAYLOR TRUSTEE (NON-VOTING)	1.00 0	х						0		0			
27)	KEVIN WENDLE TRUSTEE (NON-VOTING)	1.00 0	Х						0		0			
8)	KEVIN FROST CHIEF EXECUTIVE OFFICER	40.00 0			х				520,359.		0	8	6,8	0
9)	BRADLEY JENSEN ASSISTANT TREASURER, CFO	40.00 0			x				236,484.		0	5	3,3	0
0)	JOHN F. LOGAN, J.D., PH.D. ASST SEC, VP, GEN COUNSEL	40.00 0			х				219,864.		0	2	7,4	1
1)	ROWENA JOHNSTON ASST SECRETARY, VICE PRESIDENT	40.00 0			х				180,441.		0	2	4,6	0
2)	EDWARD DONNELLY ASST TREASURER, CONTROLLER	40.00 0			х				145,201.		0	2	1,5	2
3)	ERIC MUSCATELL VICE PRESIDENT OF DEVELOPMENT	40.00 0				х			197,610.		0	2	5,9	13
4)	ANNETTE SOHN VICE PRESIDENT, TREAT ASIA PGM	40.00 0				х			225,322.		0	2	1,4	: 0
5)	ANNMARIE SHANNAHAN VICE PRESIDENT, PUBLIC INFO.	40.00 0				х			208,911.		0	2	6,6	;3
6)	GREGORIO MILLET VICE PRESIDENT, PUBLIC POLICY	40.00 0				х			112,119.		0		7,7	2
c d	Sub-total Total from continuation sheets to Part VII, Se Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization	ection A		isteo		• •		re	ceived more than	\$100,000 o	f			
3	Did the organization list any <b>former</b> offic employee on line 1a? If "Yes," complete Schedu											3	(es	1
4	For any individual listed on line 1a, is the sorganization and related organizations grain individual.	eater than	\$15	0,00	)0?	lf	"Yes	," (	complete Schedu	le J for s	uch	4	x	
5	Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue cor	npen	satic	on f	rom	n any	uni	related organization	on or individ	lual	5		
	ction B. Independent Contractors Complete this table for your five highest com compensation from the organization. Report c year.											s tax		
	(A) Name and business add	ress							<b>(B)</b> Description of se	ervices	Со	<b>(C)</b> mpensa	tion	-

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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	(A) Name and title	(B) (C) Average Position hours per (do not check more than or week (list any hours for check more than officer and a director/trust)					oth an ustee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensatio
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	employee Kev employee	Former Highest compensated	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
7)	ANDREW MCINNESS	40.00						140,460		45.05
0 \	DIRECTOR, PUBLICATIONS	0			_	X		148,469.	0	47,25
8)	ANTHONY ANCONA VICE PRESIDENT, HUMAN RESOURCE	40.00				x		167,055.	0	23,73
9)	SUSAN DOSTER	40.00			+					
	CHIEF TECHNOLOGY OFFICER	0				X		136,579.	0	38,13
0)	BENNAH SERFATY SR DIRECTOR OF COMMUNICATION	40.00 0				x		118,344.	0	45,06
1)	RAOUL NORMAN TENAZAS CREATIVE DIRECTOR	40.00 0				x		114,699.	0	44,93
c d	Sub-total Total from continuation sheets to Part VII, Se Total (add lines 1b and 1c) Total number of individuals (including but not l	ection A			•••		. 🕨	eceived more than	\$100.000 of	
	reportable compensation from the organization		20							Vee
3	Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu									Yes I 3
4	For any individual listed on line 1a, is the sorganization and related organizations greated by the state of	eater than	\$15	0,00	)?	lf "	′es,"	nd other compension complete Schedu	sation from the le J for such	
5	<i>individual</i> Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue cor	npen	satior	n fro	om a	ny ur			4 X 5
Sec	ction B. Independent Contractors		000	Saule	, 0 1	51 30	n pe		<u> </u>	
1	Complete this table for your five highest com compensation from the organization. Report c year.									
	(A) Name and business add	ress						<b>(B)</b> Description of se	ervices C	<b>(C)</b> Compensation

Form	990	(201	4)

Par	t VII	Statement of Revenue Check if Schedule O contains a respo	nso or noto to an	ling in this Part VII			
				(A) Total revenue	<b>(B)</b> Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c	Federated campaigns   1a     Membership dues   1b     Fundraising events   1c	288,202.				
ibutions, G ther Simila	d e f	Related organizations       1d         Government grants (contributions).       1e         All other contributions, gifts, grants, and similar amounts not included above       1f	10,220,999.				
	g h	and similar amounts not included above . 11 Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f	631,638.	56,251,128.			
Program Service Revenue	2a b		Business Code				
am Servic	c d e						
Progr	f g	All other program service revenue <b>Total</b> . Add lines 2a-2f	· · · · · · · · •	0			
	3	Investment income (including divider and other similar amounts) Income from investment of tax-exempt bond		1,597,243.			1,597,243.
	5	Royalties		55,532.			55,532.
	6a b c	Gross rents					
	d 7a	Net rental income or (loss)         Gross amount from sales of assets other than inventory         12,906,804.	(ii) Other	0			
	b	Less: cost or other basis and sales expenses <u>12,975,867.</u> Gain or (loss) <u>-69,063.</u>					
anu	d	Net gain or (loss)		-69,063.			-69,063
Other Revenue		events (not including \$ <u>34,114,106.</u> of contributions reported on line 1c). See Part IV, line 18 a					
Othe	b c	Less: direct expenses <b>b</b> Net income or (loss) from fundraising events		-10,286,746.			-10,286,746.
	9a b	Gross income from gaming activities. See Part IV, line 19 a Less: direct expenses b					
	с 10а	Net income or (loss) from gaming activities	· · · · · · · · •	0			
	b c	Less: cost of goods sold <b>b</b> Net income or (loss) from sales of inventory	<u>45,609.</u> ►	167,033.			167,033.
		Miscellaneous Revenue	Business Code				
	11a	LIST RENTALS	900099	4,637.			4,637.
	b	STORE SALES	900099	2,411.			2,411.
	C	MISCELLANEOUS INCOME	900099	9,603.			9,603.
	d	All other revenue		16 651			
	е 12	Total. Add lines 11a-11d Total revenue. See instructions		16,651.			-8,519,350

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#### THE FOUNDATION FOR AIDS RESEARCH

Section 501(c)(3) and 501(c)(4) organizations mu				
Check if Schedule O contains a resp		in this Part IX		
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4,135,665.	4,135,665.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	5,392,517.	5,392,517.		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors,				
trustees, and key employees	2,507,490.	1,825,227.	324,827.	357,43
6 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	5,683,653.	3,788,075.	590,969.	1,304,60
8 Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)	349,208.	234,458.	41,865.	72,88
9 Other employee benefits	1,246,045.	795,117.	168,706.	282,22
0 Payroll taxes	521,172.	339,231.	62,228.	119,71
1 Fees for services (non-employees):	0			
a Management b Legal	91,139.	66,900.	24,239.	
-	198,754.		198,754.	
c Accounting	49,547.	49,547.	10077011	
d Lobbying	739,793.	1775171		739,79
e Professional fundraising services. See Part IV, line 17 f Investment management fees	249,454.		249,454.	, 35 , 15
	219 / 13 11		210 / 10 11	
g Other. (If line 11g amount exceeds 10% of line 25, column	2,057,215.	1,561,504.	38,500.	457,21
(A) amount, list line 11g expenses on Schedule O.).	306,946.	305,602.	1,344.	10,721
3 Office expenses	70,929.	40,284.	6,124.	24,52
4 Information technology	265,528.	193,685.	32,626.	39,21
	0	19370031	5270201	55721
5 Royalties 6 Occupancy	1,226,763.	886,102.	144,137.	196,52
	1,022,253.	522,799.	2,698.	496,75
<ul> <li>7 Travel</li> <li>8 Payments of travel or entertainment expenses</li> <li>for any fortunal extension local multiple</li> </ul>	0	522,755.	2,000	190,75
for any federal, state, or local public officials	953,805.	829,472.	15,061.	109,27
9 Conferences, conventions, and meetings	42.	020,172.	42.	109,27
0 Interest			12.	
1 Payments to affiliates	376,133.	273,099.	44,424.	58,61
2 Depreciation, depletion, and amortization	283,781.	206,045.	33,516.	44,22
3 Insurance	203,701.	200,045.	33,310.	11,22
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.)				
aPROGRAM_MATERIALS	6,100,273.	6,100,273.		
bPROGRAM_TECHNICAL_SUPPORT	878,543.	878,543.		
cPOSTAGE & SHIPPING	778,733.	357,116.	4,661.	416,95
dPRINTING	710,268.	185,971.	492.	523,80
e All other expenses	1,380,725.	622,208.	468,811.	289,70
<ul> <li>25 Total functional expenses. Add lines 1 through 24e</li> <li>26 Joint costs. Complete this line only if the</li> </ul>	37,576,374.	29,589,440.	2,453,478.	5,533,45
organization reported in column (B) joint costs from a combined educational campaign and functions religibility of the cost of				

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Form 990 (2014)

625,211.

fundraising solicitation. Check here

following SOP 98-2 (ASC 958-720)

X if

902,280.

277,069.

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Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Pa	rt X		
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	4,961,745.	1	18,387,580.
	2	Savings and temporary cash investments	323,338.	2	323,338.
	3	Pledges and grants receivable, net	0	3	369,693.
	4	Accounts receivable, net	5,045,656.	4	6,118,590.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section	0	5	0
	6	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers			
		and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary		-	
ts	_	organizations (see instructions). Complete Part II of Schedule L	0	•	0
Assets	7	Notes and loans receivable, net	213,295.	7	101 202
Š		Inventories for sale or use	1,475,828.	8	191,382.
	9	Prepaid expenses and deferred charges	1,4/5,020.	9	1,480,222.
	IVa	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D <b>10a</b> 6,133,384.			
	h	Less: accumulated depreciation <b>10b</b> 3,844,450.	2,230,700.	10c	2,288,934.
	11	Investments - publicly traded securities	40,982,916.	11	39,666,715.
	12	Investments - other securities. See Part IV, line 11	2,101,105.		1,069,137.
	13	Investments - program-related. See Part IV, line 11		13	0
	14	Intangible assets		14	0
	15	Other assets. See Part IV, line 11	561,388.	15	1,355,502.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	57,895,971.	16	71,251,093.
	17	Accounts payable and accrued expenses	2,132,495.	17	3,435,700.
	18	Grants payable	2,547,120.	18	3,049,552.
	19	Deferred revenue	7,166,426.	19	10,067,061.
	20	Tax-exempt bond liabilities	0		0
ies	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors,			
Liak		trustees, key employees, highest compensated employees, and	0	~~	0
_		disqualified persons. Complete Part II of Schedule L		22 23	0
	23 24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties		23 24	0
	24	Other liabilities (including federal income tax, payables to related third	0	24	0
	25	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	1,739,583.	25	1,660,158.
	26	Total liabilities. Add lines 17 through 25	13,585,624.	26	18,212,471.
es		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	38,819,754.	27	48,874,571.
Bal	28	Temporarily restricted net assets	5,143,351.	28	3,808,811.
- pu	29	Permanently restricted net assets	347,242.	29	355,240.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here  and complete lines 30 through 34.			
its (	30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
t A	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ne	33	Total net assets or fund balances	44,310,347.	33	53,038,622.
	34	Total liabilities and net assets/fund balances	57,895,971.	34	71,251,093.
					Form <b>990</b> (2014)

Form 990 (2014)

THE	FOUNDATION	FOR	AIDS	RESEARCH

Form 99	90 (2014)				Pa	ge <b>12</b>	
Part	XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>	<u></u>		Х	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4	7,7	31,'	778.	
2	Total expenses (must equal Part IX, column (A), line 25)	2				374.	
3	Revenue less expenses. Subtract line 2 from line 1	3		10,155,404.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		44,310,347.			
5	Net unrealized gains (losses) on investments	5		-1,429,685.			
6	6 Donated services and use of facilities 6					0	
7						0	
8	Prior period adjustments	8				0	
9	Other changes in net assets or fund balances (explain in Schedule O)	9			2,	556.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	33, column (B))	10	5	3,0	38,6	522.	
Part							
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>	<u></u>			
			F		Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		<u> </u>				
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	in				
-	Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled	or				
	reviewed on a separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis				37		
b	Were the organization's financial statements audited by an independent accountant?		· ·	2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted on	a				
	separate basis, consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o	-		2-	x		
	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, e	xplain	in				
-	Schedule O.						
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se			3a	x		
	the Single Audit Act and OMB Circular A-133?		•• –	Ja	- 22		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	0		3b	x		
	required addit of addits, explain why in Schedule O and describe any steps lakeli to undergo such ad	uits.		50			

**SCHEDULE A** (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

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-F7

	rtment of the Treasury al Revenue Service		(Form 990 or 990-EZ) a			is at www.irs.gov/form9	90. Inspection					
	e of the organization						tification number					
	FOUNDATION FOR AIDS	RESEARCH				13	-3163817					
Pa	t Reason for Public Cha	arity Status (All o	organizations must o	complet	e this pa	art.) See instructions						
The	organization is not a private fou	indation because it	t is: (For lines 1 throu	gh 11, ch	neck only	one box.)						
1	A church, convention of ch	urches, or associa	tion of churches desc	ribed in <b>s</b>	section 1	70(b)(1)(A)(i).						
2	A school described in sect	ion 170(b)(1)(A)(ii)	. (Attach Schedule E.)									
3	A hospital or a cooperative	hospital service o	rganization described	in <b>sectio</b>	on 170(b)	(1)(A)(iii).						
4	A medical research organi	zation operated in	conjunction with a ho	spital de	scribed i	n section 170(b)(1)(A)	(iii). Enter the					
	hospital's name, city, and s	tate:										
5	An organization operated section 170(b)(1)(A)(iv). (0		a college or universi	ty owne	d or ope	erated by a governme	ental unit described in					
6	A federal, state, or local go	overnment or gove	rnmental unit describe	d in <b>sect</b>	tion 170(	b)(1)(A)(v).						
7	X An organization that norm	X 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). (Compl	lete Part II.)									
8	A community trust describe	ed in section 170(I	o)(1)(A)(vi). (Complete	e Part II.)								
9	An organization that norm	ally receives: (1) n	nore than 331/3% of	its supp	ort from	contributions, memb	ership fees, and gross					
	receipts from activities re	lated to its exemp	t functions - subject	to certa	in excep	otions, and (2) no mo	re than 331/3% of its					
	support from gross inves						tax) from businesses					
	acquired by the organization				•	,						
10	An organization organized	-		-								
11	An organization organized	-		-								
	one or more publicly suppo	•										
-	the box in lines 11a throug											
а	<b>Type I</b> . A supporting org			-								
	the supported organization			elect a m	ajority o	if the directors of trus	tees of the supporting					
b	organization. You must c	-		nnoction	with ite	supported organizati	on(s) by baying					
D	control or management											
	organization(s). You mus		-	the barn								
с	Type III functionally inte	-		ated in c	onnectio	n with, and functiona	llv integrated with.					
	its supported organization						,,					
d	Type III non-functionally						ted organization(s)					
	that is not functionally int	egrated. The organ	nization generally mus	st satisfy	a distrib	oution requirement and	d an attentiveness					
	requirement (see instruct	tions). <b>You must co</b>	omplete Part IV, Sect	ions A a	ind D, an	d Part V.						
е	Check this box if the orga	anization received	a written determinatio	on from t	he IRS t	hat it is a Type I, Type	I, Type III					
	functionally integrated, o			porting o	organizat	tion.						
f	Enter the number of supported	-					••••					
g	Provide the following informati		<b>U</b> ()									
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9		organization our governing	(v) Amount of monetary support (see	(vi) Amount of other support (see					
			above or IRC section	docu	ment?	instructions)	instructions)					
			(see instructions))	Yes	No							
(A)												
(B)												
(B)												
(C)												
(D)												
(E)												
Tota												

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. JSA 4E1210 2.000 76004W 700J

OMB No. 1545-0047

14

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Schedule A (Form 990 or 990-EZ) 2014

Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (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.)

<u>Sec</u>	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	22,876,129.	33,247,849.	38,582,579.	57,556,516.	56,251,128.	208,514,201.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	22,876,129.	33,247,849.	38,582,579.	57,556,516.	56,251,128.	208,514,201.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						3,374,428.
6	Public support. Subtract line 5 from line 4.						205,139,773.
	tion B. Total Support	() 0040	(1) 0044	() 0040	( )) 0040	() 0044	(0 T / )
	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	22,876,129.	33,247,849.	38,582,579.	57,556,516.	56,251,128.	208,514,201.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	951,963.	897,974.	755,293.	804,366.	1,652,775.	5,062,371.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) ATCH. 1	1,735,330.	1,624,966.	1,467,184.	1,693,403.	2,101,178.	8,622,061.
11	Total support. Add lines 7 through 10						222,198,633.
12	Gross receipts from related activities, etc. (s	see instructions) .			l	12	
13	First five years. If the Form 990 is f organization, check this box and stop here	<u></u>	<u></u>				
Sec	tion C. Computation of Public Sup						
14	Public support percentage for 2014 (li					14	92.32%
15	Public support percentage from 2013						90.39%
16a	331/3% support test - 2014. If the o	-					
	this box and stop here. The organization						
b	331/3% support test - 2013. If the c	-					
	check this box and stop here. The orga	-					
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization						
	Part VI how the organization meets t			-	-		
b	organization <b>10%-facts-and-circumstances test</b> - 2						
	15 is 10% or more, and if the orga						
	Explain in Part VI how the organizati supported organization				-		
18	Private foundation. If the organization	did not check a	a box on line 13,	16a, 16b, 17a	, or 17b, check	this box and see	•
	instructions						

Schedule A (Form 990 or 990-EZ) 2014

 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.)

grants, contributions, and membership fees ved. (Do not include any "unusual grants.") is receipts from admissions, merchandise or services performed, or facilities shed in any activity that is related to the nization's tax-exempt purpose is receipts from activities that are not an ated trade or business under section 513 revenues levied for the nization's benefit and either paid expended on its behalf value of services or facilities ished by a governmental unit to the nization without charge and Add lines 1 through 5 munts included on lines 1, 2, and 3 ived from disqualified persons unts included on lines 2 and 3 ved from other than disqualified must hat exceed the greater of \$5,000 % of the amount on line 13 for the year lines 7a and 7b ic support (Subtract line 7c from 6.) B. Total Support year (or fiscal year beginning in) ►						
s receipts from admissions, merchandise or services performed, or facilities shed in any activity that is related to the nization's tax-exempt purpose s receipts from activities that are not an ated trade or business under section 513 revenues levied for the nization's benefit and either paid expended on its behalf value of services or facilities ished by a governmental unit to the nization without charge II. Add lines 1 through 5 ounts included on lines 1, 2, and 3 ived from disqualified persons unts included on lines 2 and 3 ved from other than disqualified ons that exceed the greater of \$5,000 % of the amount on line 13 for the year lines 7a and 7b. ic support (Subtract line 7c from 6.)						
or services performed, or facilities shed in any activity that is related to the nization's tax-exempt purpose is receipts from activities that are not an ated trade or business under section 513 revenues levied for the nization's benefit and either paid expended on its behalf value of services or facilities ished by a governmental unit to the nization without charge I. Add lines 1 through 5 bunts included on lines 1, 2, and 3 ived from disqualified persons unts included on lines 2 and 3 ved from other than disqualified ons that exceed the greater of \$5,000 % of the amount on line 13 for the year lines 7a and 7b. ic support (Subtract line 7c from 6.)						
shed in any activity that is related to the nization's tax-exempt purpose is receipts from activities that are not an lated trade or business under section 513 revenues levied for the nization's benefit and either paid expended on its behalf value of services or facilities ished by a governmental unit to the nization without charge II. Add lines 1 through 5 bunts included on lines 1, 2, and 3 ived from disqualified persons unts included on lines 2 and 3 ved from other than disqualified ons that exceed the greater of \$5,000 % of the amount on line 13 for the year lines 7a and 7b ic support (Subtract line 7c from 6.) <b>B. Total Support</b>						
nization's tax-exempt purpose s receipts from activities that are not an ated trade or business under section 513 revenues levied for the nization's benefit and either paid expended on its behalf value of services or facilities ished by a governmental unit to the nization without charge II. Add lines 1 through 5 unts included on lines 1, 2, and 3 ived from disqualified persons unts included on lines 2 and 3 ved from other than disqualified ons that exceed the greater of \$5,000 % of the amount on line 13 for the year lines 7a and 7b. ic support (Subtract line 7c from 6.)						
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s receipts from activities that are not an ated trade or business under section 513 revenues levied for the nization's benefit and either paid expended on its behalf value of services or facilities ished by a governmental unit to the nization without charge II. Add lines 1 through 5 sunts included on lines 1, 2, and 3 ived from disqualified persons unts included on lines 2 and 3 ved from other than disqualified nus that exceed the greater of \$5,000 % of the amount on line 13 for the year lines 7a and 7b. ic support (Subtract line 7c from 6.)						
revenues levied for the nization's benefit and either paid expended on its behalf value of services or facilities ished by a governmental unit to the nization without charge I. Add lines 1 through 5 munts included on lines 1, 2, and 3 ived from disqualified persons unts included on lines 2 and 3 ved from other than disqualified ons that exceed the greater of \$5,000 % of the amount on line 13 for the year lines 7a and 7b. <b>ic support</b> (Subtract line 7c from 6.)						
nization's benefit and either paid expended on its behalf value of services or facilities ished by a governmental unit to the nization without charge I. Add lines 1 through 5 munts included on lines 1, 2, and 3 ived from disqualified persons unts included on lines 2 and 3 ved from other than disqualified ons that exceed the greater of \$5,000 % of the amount on line 13 for the year lines 7a and 7b. ic support (Subtract line 7c from 6.)						
expended on its behalf value of services or facilities ished by a governmental unit to the nization without charge II. Add lines 1 through 5 unts included on lines 1, 2, and 3 ived from disqualified persons unts included on lines 2 and 3 ved from other than disqualified ons that exceed the greater of \$5,000 % of the amount on line 13 for the year lines 7a and 7b. <b>ic support</b> (Subtract line 7c from 6.)						
expended on its behalf value of services or facilities ished by a governmental unit to the nization without charge II. Add lines 1 through 5 unts included on lines 1, 2, and 3 ived from disqualified persons unts included on lines 2 and 3 ved from other than disqualified ons that exceed the greater of \$5,000 % of the amount on line 13 for the year lines 7a and 7b. <b>ic support</b> (Subtract line 7c from 6.)						
value of services or facilities ished by a governmental unit to the nization without charge II. Add lines 1 through 5 unts included on lines 1, 2, and 3 ived from disqualified persons unts included on lines 2 and 3 ved from other than disqualified ons that exceed the greater of \$5,000 % of the amount on line 13 for the year lines 7a and 7b. ic support (Subtract line 7c from 6.) B. Total Support						
ished by a governmental unit to the nization without charge II. Add lines 1 through 5 unts included on lines 1, 2, and 3 ived from disqualified persons unts included on lines 2 and 3 ved from other than disqualified ons that exceed the greater of \$5,000 % of the amount on line 13 for the year lines 7a and 7b. ic support (Subtract line 7c from 6.) B. Total Support						
nization without charge I. Add lines 1 through 5 punts included on lines 1, 2, and 3 ived from disqualified persons unts included on lines 2 and 3 ved from other than disqualified ons that exceed the greater of \$5,000 % of the amount on line 13 for the year lines 7a and 7b. Ic support (Subtract line 7c from 6.)						
I. Add lines 1 through 5 unts included on lines 1, 2, and 3 ived from disqualified persons unts included on lines 2 and 3 ved from other than disqualified ons that exceed the greater of \$5,000 % of the amount on line 13 for the year lines 7a and 7b ic support (Subtract line 7c from 6.) B. Total Support						
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lines 7a and 7b. ic support (Subtract line 7c from 6.) B. Total Support						
ic support (Subtract line 7c from 6.) B. Total Support						
6.) B. Total Support						
B. Total Support						
year (or riscar year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 20 <sup>-</sup>	14 (f) Total
ounts from line 6	(4) 2010	(4) = 0 + 1	(0) = 0 = 1	() = 0 : 0	(0) = 0	
s income from interest, dividends, nents received on securities loans, s, royalties and income from similar						
elated business taxable income (less						
ion 511 taxes) from businesses						
ired after June 30, 1975						
lines 10a and 10b						
income from unrelated business rities not included in line 10b, ther or not the business is regularly ed on						
er income. Do not include gain or						
from the sale of capital assets						
lain in Part VI.)						
I support. (Add lines 9, 10c, 11,						
12.)						
		on's first. second	l, third. fourth. or	fifth tax vear as	s a sectio	 n 501(c)(3)
	-			•		
•			umn (f))		15	%
						%
					10	/0
•			12 column (f))		17	%
simeni moome percentage for <b>2014</b> (i						
						%
stment income percentage from 2013	-					
stment income percentage from 2013 /3% support tests - 2014. If the o	us oox and <b>sto</b>				•••	
stment income percentage from <b>2013</b> /3% support tests - 2014. If the o is not more than 331/3%, check th		τ check a box on				
stment income percentage from 2013 /3% support tests - 2014. If the o is not more than 331/3%, check th /3% support tests - 2013. If the org	anization did no			es as a publicly	••	-
stment income percentage from 2013 /3% support tests - 2014. If the o is not more than 331/3%, check th /3% support tests - 2013. If the org	panization did no k this box and s	stop here. The o	•			
in lic	five years. If the Form 990 is for hization, check this box and stop here C. Computation of Public Su c support percentage for 2014 (line a c support percentage from 2013 Sch D. Computation of Investme thment income percentage for 2014 ( thment income percentage from 2013 3% support tests - 2014. If the o	five years. If the Form 990 is for the organization ization, check this box and stop here	five years. If the Form 990 is for the organization's first, second nization, check this box and stop here. C. Computation of Public Support Percentage c support percentage for 2014 (line 8, column (f) divided by line 13, colu- c support percentage from 2013 Schedule A, Part III, line 15 D. Computation of Investment Income Percentage truent income percentage for 2014 (line 10c, column (f) divided by line truent income percentage from 2013 Schedule A, Part III, line 17 3% support tests - 2014. If the organization did not check the box is not more than 331/3%, check this box and stop here. The organization 3% support tests - 2013. If the organization did not check a box on	five years. If the Form 990 is for the organization's first, second, third, fourth, or hization, check this box and stop here. C. Computation of Public Support Percentage c support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) c support percentage from 2013 Schedule A, Part III, line 15. D. Computation of Investment Income Percentage truent income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) truent income percentage from 2013 Schedule A, Part III, line 17 3% support tests - 2014. If the organization did not check the box on line 14, and a not more than 331/3%, check this box and stop here. The organization qualifie 3% support tests - 2013. If the organization did not check a box on line 14 or line 15	five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a sization, check this box and stop here.         C. Computation of Public Support Percentage         c support percentage for 2014 (line 8, column (f) divided by line 13, column (f))         c support percentage from 2013 Schedule A, Part III, line 15.         D. Computation of Investment Income Percentage         tment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))         .tment income percentage from 2013 Schedule A, Part III, line 17         3% support tests - 2014. If the organization did not check the box on line 14, and line 15 is more is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly state as a support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is	five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section ization, check this box and stop here.         C. Computation of Public Support Percentage         c support percentage for 2014 (line 8, column (f) divided by line 13, column (f))         c support percentage from 2013 Schedule A, Part III, line 15         D. Computation of Investment Income Percentage

V 14-7.16

Yes No

1

#### Part IV **Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status 2 under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If 4a "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 5a answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- Type I or Type II only. Was any added or substituted supported organization part of a class already b designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? С
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 6 anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disgualified person (as defined in section 4958) not described in line 7? 8 If "Yes," complete Part I of Schedule L (Form 990).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disgualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which b the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
  - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to b determine whether the organization had excess business holdings.)

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2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b Schedule A (Form 990 or 990-EZ) 2014 PAGE 18

(C)	le A (Form 990 or 990-EZ) 2014		F	Page 5
Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
а	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b>	11c		
	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>	2		
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Yes	No
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If</i> "Yes," <i>describe in</i> <b>Part VI</b> <i>the role the organization's supported organizations played in this regard.</i>	3		
Section	on E. Type III Functionally-Integrated Supporting Organizations			
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruct		ŗ	
			Yes	No
2 a	Activities Test. <i>Answer (a) and (b) below.</i> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <i>Part VI identify</i> <i>those supported organizations and explain</i> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If</i> "Yes," <i>explain in</i> <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		
JSA	Schedule A (Form		990-E2	2) 2014

JSA 4E1230 2.000

Schedule /	A (Form	990	or	99	0-EZ)	) 2014		
1								

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

1 Net short-term capital gain       1         2 Recoveries of prior-year distributions       2         3 Other gross income (see instructions)       3         4 Add lines 1 through 3       5         5 Depreciation and depletion       5         6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)       6         7 Other expenses (see instructions)       7       8         8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)       8         Section B - Minimum Asset Amount       (A) F         1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):       1a         a Average monthly value of securities       1a         b Average monthly value of securities       1b         c Fair market value of other non-exempt-use assets       1c         d Total (add lines 1a, 1b, and 1c)       1d         e Discount claimed for blockage or other factors (explain in detail in Part VI):       2         2 Acquisition indebtedness applicable to non-exempt-use assets       2         3 Subtract line 2 from line 1d       3         4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).       4         5 Net va		
3 Other gross income (see instructions)       3         4 Add lines 1 through 3       4         5 Depreciation and depletion       5         6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)       6         7 Other expenses (see instructions)       7         8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)       8         Section B - Minimum Asset Amount       (A) F         1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):       1a         a Average monthly value of securities       1a         b Average monthly cash balances       1b         c Fair market value of other non-exempt-use assets       1c         d Total (add lines 1a, 1b, and 1c)       1d         e Discount claimed for blockage or other factors (explain in detail in Part VI):       2         2 Acquisition indebtedness applicable to non-exempt-use assets       2         3 Subtract line 2 from line 1d       3         4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).       5         6 Multiply line 5 by .035       6         7 Recoveries of prior-year distributions       7         8 Minimum Asset Amount (add line 7		
4 Add lines 1 through 3       4         5 Depreciation and depletion       5         6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)       6         7 Other expenses (see instructions)       7         8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)       8         Section B - Minimum Asset Amount       (A) F         1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):       1a         a Average monthly value of securities       1a         b Average monthly cash balances       1b         c Fair market value of other non-exempt-use assets       1c         d Total (add lines 1a, 1b, and 1c)       1d         e Discount claimed for blockage or other factors (explain in detail in Part VI):       2         2 Acquisition indebtedness applicable to non-exempt-use assets       2         3 Subtract line 2 from line 1d       3         4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).       5         6 Multiply line 5 by .035       6         7 Recoveries of prior-year distributions       7         8 Minimum Asset Amount (add line 7 to line 6)       8		
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a Average monthly value of securities1ab Average monthly cash balances1bc Fair market value of other non-exempt-use assets1cd Total (add lines 1a, 1b, and 1c)1de Discount claimed for blockage or other factors (explain in detail in Part VI):1d2 Acquisition indebtedness applicable to non-exempt-use assets23 Subtract line 2 from line 1d34 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).45 Net value of non-exempt-use assets (subtract line 4 from line 3)56 Multiply line 5 by .03567 Recoveries of prior-year distributions78 Minimum Asset Amount (add line 7 to line 6)8		
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3 Subtract line 2 from line 1d       3         4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).       4         5 Net value of non-exempt-use assets (subtract line 4 from line 3)       5         6 Multiply line 5 by .035       6         7 Recoveries of prior-year distributions       7         8 Minimum Asset Amount (add line 7 to line 6)       8         Section C - Distributable Amount       1		
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7 Recoveries of prior-year distributions       7         8 Minimum Asset Amount (add line 7 to line 6)       8         Section C - Distributable Amount		
Section C - Distributable Amount		
1 Adjusted net income for prior year (from Section A, line 8, Column A)		Current Year
2 Enter 85% of line 1 2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3		
4 Enter greater of line 2 or line 3 4		
5 Income tax imposed in prior year 5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		
emergency temporary reduction (see instructions) 6		

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2014

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Part		Supporting Organizat		<b>O</b>			
	ion D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish ex						
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed				
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purpo	zations					
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in <b>Part VI</b> ). See instructions.						
7	Total annual distributions. Add lines 1 through 6.						
8							
	(provide details in <b>Part VI</b> ). See instructions.						
9	Distributable amount for 2014 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount						
:	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014			
1	Distributable amount for 2014 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2014						
	(reasonable cause required-see instructions)						
3	Excess distributions carryover, if any, to 2014:						
а							
b							
С							
d							
е	From 2013						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
h	Applied to 2014 distributable amount						
	Carryover from 2009 not applied (see instructions)						
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2014 from Section						
•	D, line 7: \$						
а							
b	Applied to 2014 distributable amount						
c	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2014, if						
J	any. Subtract lines 3g and 4a from line 2 (if amount						
6	greater than zero, see instructions).						
6	Remaining underdistributions for 2014. Subtract lines 3h						
	and 4b from line 1 (if amount greater than zero, see						
-	instructions).						
7	Excess distributions carryover to 2015. Add lines 3j						
	and 4c.						
8	Breakdown of line 7:						
а							
b							
С							
d	Excess from 2013						
е	Excess from 2014						

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#### Schedule A (Form 990 or 990-EZ) 2014

Part VI Supplemental Information. 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).

SCHEDULE A, PART II -	OTHER INCOM	Ε			ATTACHMENT 1	
DESCRIPTION	2010	2011	2012	2013	2014	TOTAL
MISCELLANEOUS	13,257.	2,261.	917.	1,495.	12,014.	29,944.
LIST RENTALS	26,881.	17,365.	5,477.	3,116.	4,637.	57,476.
INVENTORY	242,362.	215,910.	103,590.	239,927.	212,642.	1,014,431.
SPECIAL EVENTS	1,452,830.	1,389,430.	1,357,200.	1,448,865.	1,871,885.	7,520,210.
TOTALS	1,735,330.	1,624,966.	1,467,184.	1,693,403.	2,101,178.	8,622,061.

### Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

OMB No. 1545-0047

Attach to Form 990, Form 990-EZ, or Form 990-PF.
· Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

2014

Name of the organization

THE FOUNDATION FOR AIDS RESEARCH

Employer identification number

13-3163817

Organization	type	(check	one)	):
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Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( <sup>3</sup> ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> 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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### **Special Rules**

For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$5,000 or more during the year

**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 its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization THE FOUNDATION FOR AIDS RESEARCH

Employer identification number 13-3163817

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1 _		\$3,735,600.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 2 _		\$7,611,736.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$1,920,011.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 4 _		\$2,720,226.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5 _		\$1,300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6 _		\$1,456,662.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

0176982-00003

Name of organization THE FOUNDATION FOR AIDS RESEARCH

Employer identification number 13-3163817

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
- 7		\$1,939,528.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		  \$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Part II

(a) No.

Name of organization THE FOUNDATION FOR AIDS RESEARCH

Employer identification number 13-3163817

(c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$\_ (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$\_ (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$\_ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ Schedule B (Form 990, 990-EZ, or 990-PF) (2014) JSA

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

me of organ	NIZATION THE FOUNDATION FOR AIDS F	RESEARCH		Employer identification number			
				13-3163817			
th fol co បទ	<b>Aclusively religious, charitable, etc., co</b> <b>at total more than \$1,000 for the year</b> Ilowing line entry. For organizations co partributions of <b>\$1,000 or less</b> for the year se duplicate copies of Part III if additiona	r <b>from any one contril</b> mpleting Part III, enter ear. (Enter this informa	<b>butor.</b> Complete the total of <i>exclu</i>	columns (a) through (e) and th sively religious, charitable, etc.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
-							
	(e) Transfer of gift						
	Transferee's name, address, and Z	P + 4	Relationship	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) Transfer of gif	 't				
	Transferee's name, address, and ZIP + 4 Relationship 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) Transfer of gift						
-	Transferee's name, address, and Z	P+4	Relationship	of transferor to transferee			
(a) No. from							
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
· <b></b>   -							
	(e) Transfer of gift						
	Transferee's name, address, and Z	P + 4	Relationship of transferor to transferee				
-							
-							
			Sch	nedule B (Form 990, 990-EZ, or 990-PF) (2			

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Page **4** 

Department of the Treasury Internal Revenue Service	<ul> <li>Complete if the organization is</li> <li>Information about Schedule C (F</li> </ul>		ach to Form 990 or Form 990- structions is at <i>www.irs.gov/for</i>	
	ed "Yes," to Form 990, Part IV, lin		ne 46 (Political Campaign Activit	ties), then
	anizations: Complete Parts I-A and B.	•		
	than section 501(c)(3)) organization	is: Complete Parts I-A and C belo	ow. Do not complete Part I-B.	
•	ions: Complete Part I-A only.			
•	red "Yes," to Form 990, Part IV, lin			
	anizations that have filed Form 5768	( ),	•	•
	anizations that have NOT filed Form red "Yes," to Form 990, Part IV, li tions), then			
	, or (6) organizations: Complete Part II	И.		
Name of organization			Employer ide	ntification number
THE FOUNDATION F	OR AIDS RESEARCH		13-31	63817
Part I-A Complete	e if the organization is exen	npt under section 501(c)	or is a section 527 orga	nization.
	on of the organization's direct a	• • • •		
	es			
J volunteer nours				
	e if the organization is exem			
1 Enter the amount of	of any excise tax incurred by the	organization under section	4955 ▶ \$	
2 Enter the amount of	of any excise tax incurred by org	anization managers under s	section 4955 🚬 🕨 \$	
3 If the organization	incurred a section 4955 tax, did	it file Form 4720 for this year	ar?	Yes No
4a Was a correction m	ade?			Yes No
<b>b</b> If "Yes," describe in				
Part I-C Complete	e if the organization is exen	npt under section 501(c)	), except section 501(c)(3	3).
	directly expended by the filing			
2 Enter the amount of	of the filing organization's funds on activities	contributed to other organ	izations for section	
3 Total exempt fund	tion expenditures. Add lines 1	and 2. Enter here and or	Form 1120-POL,	
	ization file Form 1120-POL for the second			
	addresses and employer identific			
	payments. For each organization			
	tical contributions received that			
as a separate segre	egated fund or a political action o	committee (PAC). If additiona	al space is needed, provide	information in Part IV.
<b>(a)</b> Name	(b) Address	(c) EIN	(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)				
(4)				
(5)				
(6)				
For Paperwork Reduction	Act Notice, see the Instructions fo	r Form 990 or 990-EZ.	Schedul	e C (Form 990 or 990-EZ) 2014

## 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

JSA 4E1264 1.000 76004W 700J



OMB No. 1545-0047

Sch	edule C (Form 990 or 990-EZ) 2014 THE FO	UNDATION FOR AIDS RESEARCH	13-33	163817 Page <b>2</b>
Pa	art II-A Complete if the organization section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768 (elec	tion under
Α		belongs to an affiliated group (and list in Pa enses, and share of excess lobbying expend		oup member's
в	Check ► if the filing organization	checked box A and "limited control" provisi	ons apply.	
		ying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
t c	<ul> <li>Total lobbying expenditures to influence</li> <li>Total lobbying expenditures (add lines 1)</li> <li>Other exempt purpose expenditures</li> <li>Total exempt purpose expenditures (add</li> </ul>	public opinion (grass roots lobbying) a legislative body (direct lobbying) a and 1b) d lines 1c and 1d) e amount from the following table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
ç	Grassroots nontaxable amount (enter 25	i% of line 1f)		
ł		ess, enter -0-		
i	Subtract line 1f from line 1c. If zero or le	ss, enter -0-		
j	If there is an amount other than zero reporting section 4911 tax for this year?	on either line 1h or line 1i, did the organiza		Yes No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> Total		
2a Lobbying nontaxable amount							
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))							
<b>c</b> Total lobbying expenditures							
d Grassroots nontaxable amount							
e Grassroots ceiling amount (150% of line 2d, column (e))							
f Grassroots lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2014

Scho	THE FOUNDATION FOR AIDS RESEARCH		13	-310.	381/		Page <b>3</b>
	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T file	d For	m 576	8		
For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(	a)		(b)	)	
	cription of the lobbying activity.	Yes	No		Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local						
	legislation, including any attempt to influence public opinion on a legislative matter or						
	referendum, through the use of:						
а	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X				
b		X					
С	Media advertisements?		X				
d	Mailings to members, legislators, or the public?		X				
е	Publications, or published or broadcast statements?		X				
f	Grants to other organizations for lobbying purposes?		X				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		X				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	37	X			100	720
i	Other activities?	X					,739 ,739
J	Total. Add lines 1c through 1i		x			199	, 139
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b C	If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912		-				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		x				
-	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)		ection			
T G	501(c)(6).	(0)(0)	, 01 3	ection	•		1
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?						
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?				3		
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"					2 10	
	answered "Yes."		ырга	11 11-74	, inte	5, 15	
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou						
-	political expenses for which the section 527(f) tax was paid).						
а	Current year			2a			
b	Carryover from last year		•••	2b			
с	Total		••••	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	es		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion	-					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible le						
	and political expenditure next year?		[	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	<u> </u>		5			
	rt IV Supplemental Information						
	vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate	d gro	up list	); Part	II-A, li	nes 1	and
2 (s	ee instructions); and Part II-B, line 1. Also, complete this part for any additional information.						

SEE PAGE 4

#### Schedule C (Form 990 or 990-EZ) 2014

#### 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.

0176982-00003

	EDULE D	Supplem	ental Financial S	tatomonts		OMB No. 1545-0047
(Foi	Complete if the organization answered "Yes" to Form 990,					୬ <b>ଲ</b> 1/
	Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.					
	tment of the Treasury al Revenue Service	Information about Schedule	Attach to Form 990. D (Form 990) and its instruction	ons is at www.irs.o	nov/form990	Open to Public Inspection
	of the organization				Employer identificat	
THE	FOUNDATION F	FOR AIDS RESEARCH			13-316381	.7
Ра		tions Maintaining Donor Adv			Accounts.	
	Complete	e if the organization answered				
			(a) Donor advised fu	unds	(b) Funds and	other accounts
1		nd of year				
2 3		of contributions to (during year) of grants from (during year)				
3 4		at end of year				
5		ion inform all donors and donor	advisors in writing that th	ne assets held in	donor advised	
-	-	inization's property, subject to the	-			Yes No
6	Did the organizati	on inform all grantees, donors, a	and donor advisors in writir	ng that grant fund	ds can be used	
	-	e purposes and not for the bene		-		
		issible private benefit?		<u></u>		Yes No
Pa		tion Easements.	"Voo" to Form 000 Dort	N/ line 7		
1		e if the organization answered servation easements held by the				
•		n of land for public use (e.g., rec			a historically imp	ortant land area
		of natural habitat			a certified histor	
	Preservatio	n of open space				
2		through 2d if the organization h	eld a qualified conservation	contribution in th	ne form of a cons	ervation
	easement on the	ast day of the tax year.			Held at the	End of the Tax Year
а		onservation easements			2a	
b	-	tricted by conservation easement			2b	
C		vation easements on a certified			2c	
d		rvation easements included in (			2d	
3		isted in the National Register . rvation easements modified, trar				ization during the
5			isieneu, reieuseu, eximguie		ied by the organ	ization during the
4		where property subject to conse	ervation easement is located	▶		
5	Does the organiz	ation have a written policy re	garding the periodic mon	itoring, inspectio	on, handling of	
	violations, and enf	orcement of the conservation ea	sements it holds?			Yes No
6	Staff and voluntee	er hours devoted to monitoring, in	nspecting, and enforcing co	nservation easer	ments during the y	rear
_	►					
7	Amount of expens ▶\$	es incurred in monitoring, inspec	cting, and enforcing conserv	ation easements	s during the year	
8		<pre> rvation easement reported on lin</pre>	e 2(d) above satisfy the rec	wirements of sect	ion 170(h)(4)(B)(i)	
U		)(4)(B)(ii)?				Yes No
9	In Part XIII, descri	be how the organization reports	conservation easements in	its revenue and e	expense statemen	
		d include, if applicable, the text of		ization's financial	statements that o	describes the
		counting for conservation easeme				
Ра		tions Maintaining Collections e if the organization answered			Similar Assets.	
1a	works of art, hist public service, pro	n elected, as permitted under Si orical treasures, or other simila vide, in Part XIII, the text of the f	AS 116 (ASC 958), not to ar assets held for public e potnote to its financial state	exhibition, educa ments that descr	venue statement ition, or researcl ibes these items.	and balance sheet n in furtherance of
b	works of art, hist	n elected, as permitted under orical treasures, or other simila vide the following amounts relat	ar assets held for public e	exhibition, educa	ation, or researcl	n in furtherance of
	(i) Revenue inclu	vide the following amounts relat ded in Form 990, Part VIII, line 1 d in Form 990, Part X			▶\$_	
	(,				***	
2	•	n received or held works of a				I gain, provide the
~		s required to be reported under S in Form 990, Part VIII, line 1				
a b		in Form 990, Part VIII, line 1				
		Act Notice, see the Instructions fo				dule D (Form 990) 2014
JSA 4E126	8 1.000					
0	76004W 700J		V 14-7.16	0176982-	-00003	PAGE 3

THE FOUNDATION FOR AIDS RESEARCH

Sche Par	dule D (Form 990) 2014 t III Organizations Maintainir	ng Collections of	Art Historical 7	Trageuras	or Oth	er Similar Ass	ets (co		$\frac{2}{2}$		
Fai		ig conections of	Art, Historical	i easui es,		ei Jiiiiidi A55	<b>eis</b> (00	minue	<del>5</del> u)		
3	Using the organization's acquisitic collection items (check all that app		other records, chec	k any of th	e followi	ng that are a sig	gnificant	use c	of its		
а	Public exhibition		d 🗌 Loan	or exchange	e program	IS					
b	Scholarly research		e X Other	DONATED	ITEMS	, INVENTORY	ETC.				
С	Preservation for future gene										
4	Provide a description of the organ XIII.	nization's collections	s and explain how	they furthe	the org	anization's exem	pt purpo	se in	Part		
5	During the year, did the organization assets to be sold to raise funds rath						X Yes				
Par	TTIV Escrow and Custodial Ar								No ne 9.		
	or reported an amount or							,			
1a	Is the organization an agent, truste	e custodian or oth	er intermediary for d	contributions	s or other	assets not					
iu	included on Form 990, Part X?						Yes	<b>5</b>	No		
b	If "Yes," explain the arrangement in	n Part XIII and com	plete the following ta	ble:							
						Amount					
c	Beginning balance										
d	Additions during the year										
e f	Distributions during the year										
f 2a	Ending balance Did the organization include an am					ecount liability?	Yes		No		
	If "Yes," explain the arrangement in					-		<b>`</b>			
	t V Endowment Funds. Com										
T al	Endownent Funds. Com	(a) Current year	(b) Prior year	(c) Two yea		(d) Three years back		ur years	back		
1a	Beginning of year balance	490,979.			,804.	464,356			,083		
	Contributions	7,998.									,978
	Net investment earnings, gains,										
	and losses	-5,941.	40,550.	20	,742.	52,107			-2,705.		
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs			100	,871.			100,	,000		
f	Administrative expenses										
g	End of year balance	493,036.	-		,886.	520,804	•	464,	,356		
2	Provide the estimated percentage			, column (a)	held as:						
а	Board designated or quasi-endown		_%								
b	Permanent endowment  72.0										
С	Temporarily restricted endowment										
•	The percentages in lines 2a, 2b, and					the second for so the s					
3a	Are there endowment funds not in	the possession of t	ne organization that	are neid ar	ia adminis	stered for the		Vee			
	organization by:						2=(:)	Yes	No		
	(i) unrelated organizations						3a(i)		X		
b	(ii) related organizations If "Yes" to 3a(ii), are the related or						3a(ii) 3b		<u> </u>		
4	Describe in Part XIII the intended u	•									
	t VI Land, Buildings, and Equi Complete if the organiza	0			110 50		unt V line	. 10			
	Description of property			or other basis	(c) Accu		(d) Book v				
		(inves		other)	depre	ciation	( <b>u</b> ) Book (				
1a	Land										
b	Buildings										
C	Leasehold improvements			215,917.		7,847.	1,3	38,0			
d	Equipment			309,029.		9,288.		29,7			
	Other			508,438.		37,315.		21,1			
Tota	I. Add lines 1a through 1e. (Column	(d) must equal For	n 990, Part X, colum	п (В), line 10	J(C).)		2,2	88,9			

Schedule D (Form 990) 2014

#### Schedule D (Form 990) 2014 Page 3 **Investments - Other Securities.** Part VII Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (c) Method of valuation: (including name of security) Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests (3) Other\_\_ (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Investments - Program Related. Part VIII Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (b) Book value (a) Description of investment (c) Method of valuation: Cost or end-of-year market value (1)(2) (3)(4) (5) (6)(7)(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1)(2) (3)(4)(5)(6) (7)(8)(9)Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ► Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability 1. (b) Book value (1) Federal income taxes 1,513,795 (2) LONG TERM LEASE LIABILITY (3) SECTION 457 RETIREMENT LIABILITIES 146,363 (4)(5) (6)(7)(8)(9)

 Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)
 1,660,158.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2014

Х

Schedu	le D (Form 990) 2014		Page <b>4</b>
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	46,610,198.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1	40,010,190.
- a	Net unrealized gains (losses) on investments     2a     -1,429,685.		
b	Za1,425,005Donated services and use of facilities2b305,549		
c	Recoveries of prior year grants 2c		
d			
e		2e	-1,121,580.
3	Add lines 2a through 2d Subtract line 2e from line 1	<u>2</u> e 3	47,731,778.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3	±7,751,770.
a			
a b			
		4c	
5	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 12.</i> )	4C 5	47,731,778.
Part		-	17,751,770.
i ai t	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	37,881,923.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	-	
a	Donated services and use of facilities <b>2a</b> 305,549.		
b	Drier voor odiustmente		
c			
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	305,549.
3	Subtract line 2e from line 1	3	37,576,374.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	4c	
5	Total expenses. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 18.</i> )	5	37,576,374.
Part	XIII Supplemental Information.	-	<u> </u>
Provid	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa		
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	nation	
SEE	PAGE 5		

Schedule D (Form 990) 2014

#### ENDOWMENTS

Part XIII

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. THIS GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN ONLY BE RECOGNIZED IN THE FINANCIAL STATEMENTS IF THE POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED.

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 SEPTEMBER 30, 2012, 2013, 2014 AND 2015 ARE STILL OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES. AMFAR HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

Schedule D (Form 990) 2014

RECONCILIATION OF REVENUE

PART XI, LINE 2D

CHANGE IN VALUE FOR THIRD PARTY TRUST \$2,556

COLLECTIONS OF ART, HISTORICAL 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.

Schedule D (Form 990) 2014

SCH		Staten	nent of A	ctivities	Outside the Uni	ted St	ates 🖂	DMB No. 1545-0047
(Foi	rm 990)	► Complete	e if the organiza	tion answered	"Yes" on Form 990, Part IV	, line 14b, 1	5, or 16.	2014
	tment of the Treasury al Revenue Service	► Informatio	on about Sched		to Form 990. )) and its instructions is at <i>w</i> i	ww.irs.gov/		Open to Public
	of the organization						Employer identifie	
-	FOUNDATION F						13-316381	
Par		nformation of Part IV, line 14		Outside the l	Jnited States. Complete	if the org	anization answ	ered "Yes" on
1					substantiate the amount o			
	-	-			e, and the selection criter		award the	
	grants or assistance	ə?						X Yes No
2	For grantmakers. assistance outside			ganization's p	rocedures for monitoring	the use	of its grants	and other
3	Activities per Regio	on. (The follow	ing Part I, line	3 table can be	e duplicated if additional sp	bace is nee	eded.)	
	(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If act a pro describ	ivity listed in (d) is ogram service, e specific type of ce(s) in region	(f) Total expenditures for and investments in region
(1)	CENTRAL AMERICA/CA	ARIBBEAN			GRANTMAKING	N/A		35,000.
(2)						27.62		2 050 007
(2)	EAST ASIA AND THE	PACIFIC			GRANTMAKING	N/A		3,258,027.
(3)	EUROPE				GRANTMAKING	N/A		874,724.
(4)	NORTH AMERICA				GRANTMAKING	N/A		610,913.
(5)	SOUTH AMERICA				GRANTMAKING	N/A		398,624.
(6)	SOUTH ASIA				GRANTMAKING	N/A		100,684.
(7)	SUB-SAHARAN AFRICA	ł			GRANTMAKING	N/A		114,545.
(8)	EAST ASIA AND THE	PACIFIC	1.	22.	PROGRAM SERVICES	THERAPEU	JTICS, TRAINING	5,108,145.
(9)	EUROPE				FUNDRAISING	N/A		12,944,557.
<u>(10)</u>	SOUTH AMERICA				FUNDRAISING	N/A		549,245.
<u>(11)</u>	SOUTH ASIA				FUNDRAISING	N/A		1,943,338.
<u>(12)</u>								
<u>(13)</u>								
<u>(14)</u>								
<u>(15)</u>								
(16)								
(17)								
3a b	Sub-total Total from sheets to Part I	continuation	1.	22.				25,937,802.
c	Totals (add lines		1.	22.				25,937,802.
	aperwork Reduction						Schedu	lle F (Form 990) 2014

For Paperwork Reduction Act Notice, see the Instructions for Form 990. JSA 4E1274 1.000 76004W 700J V 14

Schedule F (Form 990) 2014

1	(a) Name of organization	(b) IRS code section and EIN	ved more than \$5,000. F (c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash	(g) Amount of non-cash	(h) Description of non-cash	(i) Method o valuation (book, FMV,
	organization	(if applicable)				disbursement	assistance	assistance	appraisal, other)
(1)			CARIBBEAN/CENTRAL AMERIC	GMT INITIATI	25,000.	WIRE TRANSFE			
(2)			EAST ASIA/PACIFIC	BASIC RESEAR	60,000.	WIRE TRANSFE			
(3)			EAST ASIA/PACIFIC	BASIC RESEAR	47,240.	WIRE TRANSFE			
(4)			EAST ASIA/PACIFIC	BASIC RESEAR	124,983.	WIRE TRANSFE			
(5)			EAST ASIA/PACIFIC	GMT INITIATI	25,000.	WIRE TRANSFE			
(6)			EAST ASIA/PACIFIC	GMT INITIATI	25,000.	WIRE TRANSFE			
(7)			EAST ASIA/PACIFIC	GMT INITIATI	300,000.	WIRE TRANSFE			
(8)			EAST ASIA/PACIFIC	GMT INITIATI	13,271.	WIRE TRANSFE			
(9)			EAST ASIA/PACIFIC	TREAT ASIA	47,338.	WIRE TRANSFE			
(10)			EAST ASIA/PACIFIC	TREAT ASIA	985,866.	WIRE TRANSFE			
(11)			EAST ASIA/PACIFIC	TREAT ASIA	20,320.	WIRE TRANSFE			
(12)			EAST ASIA/PACIFIC	TREAT ASIA	46,800.	WIRE TRANSFE			
(13)			EAST ASIA/PACIFIC	TREAT ASIA	32,890.	WIRE TRANSFE			
(14)			EAST ASIA/PACIFIC	TREAT ASIA	5,625.	WIRE TRANSFE			
(15)			EAST ASIA/PACIFIC	TREAT ASIA	7,500.	WIRE TRANSFE			
(16)			EAST ASIA/PACIFIC	TREAT ASIA	6,000.	WIRE TRANSFE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt \_\_\_\_\_

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 

3 Enter total number of other organizations or entities.

Schedule F (Form 990) 2014

1	<b>(a)</b> 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	<b>(g)</b> 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	6,450.	WIRE TRANSFE			
(2)			EAST ASIA/PACIFIC	TREAT ASIA	6,300.	WIRE TRANSFE			
(3)			EAST ASIA/PACIFIC	TREAT ASIA	6,375.	WIRE TRANSFE			
1									
4)			EAST ASIA/PACIFIC	TREAT ASIA	5,775.	WIRE TRANSFE			
(5)			EAST ASIA/PACIFIC	TREAT ASIA	71,092.	WIRE TRANSFE			
6)			EAST ASIA/PACIFIC	TREAT ASIA	32,607.	WIRE TRANSFE			
7)					107 015				
(7)			EAST ASIA/PACIFIC	TREAT ASIA	127,215.	WIRE TRANSFE			
(8)			EAST ASIA/PACIFIC	TREAT ASIA	11,200.	WIRE TRANSFE			
(9)			EAST ASIA/PACIFIC	TREAT ASIA	9,500.	WIRE TRANSFE		_	
(10)									
10)			EAST ASIA/PACIFIC	TREAT ASIA	66,888.	WIRE TRANSFE			
11)			EAST ASIA/PACIFIC	TREAT ASIA	107,092.	WIRE TRANSFE			
12)			EAST ASIA/PACIFIC	TREAT ASIA	93,266.	WIRE TRANSFE			
13)			EAST ASIA/PACIFIC	TREAT ASIA	29,354.	WIRE TRANSFE			
,			EAST ASTA/PACIFIC	IREAT ASIA	29,334.	WIRE IRANSFE			
14)			EAST ASIA/PACIFIC	TREAT ASIA	15,550.	WIRE TRANSFE			
(15)			EAST ASIA/PACIFIC	TREAT ASIA	15,450.	WIRE TRANSFE			
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2014

13-3163817

Page 2

Schedule F (Form 990) 2014

1	(a) Name of	ny recipient who recei	(c) Region	(d) Purpose of	(e) Amount of	(f) Manner of	(g) Amount of	(h) Description	(i) Method o valuation
	organization	(b) IRS code section and EIN (if applicable)	(c) rogion	grant	cash grant	cash disbursement	non-cash assistance	of non-cash assistance	(book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	TREAT ASIA	46,717.	WIRE TRANSFE			
(2)			EAST ASIA/PACIFIC	TREAT ASIA	15,050.	WIRE TRANSFE			
(3)			EAST ASIA/PACIFIC	TREAT ASIA	20,000.	WIRE TRANSFE			
(4)			EAST ASIA/PACIFIC	TREAT ASIA	20,000.	WIRE TRANSFE			
(5)			EAST ASIA/PACIFIC	TREAT ASIA	20,000.	WIRE TRANSFE			
(6)			EAST ASIA/PACIFIC	TREAT ASIA	19,700.	WIRE TRANSFE			
(7)			EAST ASIA/PACIFIC	TREAT ASIA	73,650.	WIRE TRANSFE			
(8)			EAST ASIA/PACIFIC	TREAT ASIA	20,000.	WIRE TRANSFE			
(9)			EAST ASIA/PACIFIC	TREAT ASIA	7,310.	WIRE TRANSFE			
(10)			EAST ASIA/PACIFIC	TREAT ASIA	71,880.	WIRE TRANSFE			
(11)			EAST ASIA/PACIFIC	TREAT ASIA	10,000.	WIRE TRANSFE			
(12)			EAST ASIA/PACIFIC	TREAT ASIA	12,000.	WIRE TRANSFE			
(13)			EUROPE	BASIC RESEAR	75,000.	WIRE TRANSFE			
(14)			EUROPE	BASIC RESEAR	75,000.	WIRE TRANSFE			
(15)			EUROPE	BASIC RESEAR	60,000.	WIRE TRANSFE			
(16)			EUROPE	BASIC RESEAR	81,852.	WIRE TRANSFE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ►

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
3 Enter total number of other organizations or entities.

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014

1	<b>(a)</b> 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	<b>(g)</b> Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method o valuation (book, FMV, appraisal,
		(							other)
(1)			EUROPE	BASIC RESEAR	443,407.	WIRE TRANSFE			
(2)			EUROPE	BASIC RESEAR	74,798.	WIRE TRANSFE			
_,					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
(3)			EUROPE	BASIC RESEAR	59,983.	WIRE TRANSFE			
(4)			EUROPE	BASIC RESEAR	20,000.	WIRE TRANSFE			
(5)			EUROPE	BASIC RESEAR	9,362.	WIRE TRANSFE			
(6)			NORTH AMERICA (EXCL USA)	BASIC RESEAR	44,444.	WIRE TRANSFE			
			NORTH AMERICA (EACL USA)	BASIC RESEAR	11,111.	WIKE IKANSFE			
(7)			NORTH AMERICA (EXCL USA)	BASIC RESEAR	166,391.	WIRE TRANSFE			
(8)			NORTH AMERICA (EXCL USA)	BASIC RESEAR	400,078.	WIRE TRANSFE			
-									
(9)			SOUTH AMERICA	GMT INITIATI	292,226.	WIRE TRANSFE			
(10)			COUTU AMEDICA		0.6 200	MIDE EDINGEE			
10)			SOUTH AMERICA	GMT INITIATI	96,398.	WIRE TRANSFE			
(11)			SOUTH ASIA	PUBLIC POLIC	20,000.	WIRE TRANSFE			
12)			SOUTH ASIA	PUBLIC POLIC	21,025.	WIRE TRANSFE			
(13)			SOUTH ASIA	TREAT ASIA	19,450.	WIRE TRANSFE			
(14)									
14)			SOUTH ASIA	TREAT ASIA	11,595.	WIRE TRANSFE			
15)			SOUTH ASIA	TREAT ASIA	22,762.	WIRE TRANSFE			
(16)			SOUTH ASIA	TREAT ASIA	9,047.	WIRE TRANSFE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
3 Enter total number of other organizations or entities.

Schedule F (Form 990) 2014

Part II

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method ovaluation (book, FMV appraisal, other)
1)			SUB-SAHARAN AFRICA	GMT INITIATI	25,000.	WIRE TRANSFE			
2)			SUB-SAHARAN AFRICA	PREVENTION S	25,000.	WIRE TRANSFE			
3)			SUB-SAHARAN AFRICA	PUBLIC POLIC	39,945.	WIRE TRANSFE			
4)			SUB-SAHARAN AFRICA	PUBLIC POLIC	10,000.	WIRE TRANSFE			
5)			EAST ASIA/PACIFIC	TREAT ASIA	42,600.	WIRE TRANSFE			
6)			EAST ASIA/PACIFIC	TREAT ASIA	591,568.	WIRE TRANSFE			
7)			PADI ADIA/FACIFIC		551,500.	WIRE IRANSPE			
3)									
)									
,,  0)									
1)									
2)									
3)									
4)									
15)									
16)									<u> </u>

3 Enter total number of other organizations or entities.....

Schedule F (Form 990) 2014

# Page 2

Part III can be duplicated if ad (a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)
(1)							
2)							
3)							
4)							
5)							
6)							
7)							
8)							
9)							
0)							
1)							
2)							
3)							
4)							
5)							
6)							
7)							
8)							

Schedule F (Form 990) 2014

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

13-3163817

JSA

Schedu	le F (Form 990) 2014		Page <b>4</b>
Part	IV Foreign 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; do not file with Form 990)	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	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? <i>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)</i>	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	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; do not file with Form 990)	Yes X	No

Schedule F (Form 990) 2014

Page 5

### 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

V 14-7.16

Page 5

Schedule F (Form 990) 2014

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).

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 149 CHARITIES SUPPORTED ARE PRESUMED TO

BE THE EQUIVALENT OF U.S. CHARITIES.

	Supplemental information regarding runurals			
SCHEDULE G (Form 990 or 990-EZ)	Complete if the organization answered "Yes" to Form 990, Par organization entered more than \$15,000 on Form			
Department of the Treasury Internal Revenue Service	<ul> <li>Attach to Form 990 or Form 990-E</li> <li>Information about Schedule G (Form 990 or 990-EZ) and its instr</li> </ul>	opointe		
Name of the organization		Employer identification numbe		
THE FOUNDATION FO	THE FOUNDATION FOR AIDS RESEARCH 1			

3817 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part.

Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1

Х Mail solicitations а

- e X Solicitation of non-government grants
- X Internet and email solicitations b

X Solicitation of government grants f

- Х Phone solicitations С d
  - In-person solicitations
- X Special fundraising events
- g
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees X Yes or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

Supplemental Information Regarding Fundraising or Gaming Activities

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	<b>(vi)</b> Amount paid to (or retained by) organization
		Yes	No			
1	EVENTS					
AAB PRODUCTIONS, INC.	PRODUCTION		Х	23,129,015.	614,956.	22,514,059.
2	DIRECT					
EIDOLON COMMUNICATIONS, INC.	MAIL		Х	2,131,227.	270,650.	1,860,577.
3 PUBLIC INTEREST	TELE					
COMMUNICATIONS	MARKETING		Х	18,728.	32,099.	-13,371.
4	TELE					
DONOR SERVICES GROUP, LLC	MARKETING		Х	100.	6,588.	-6,488.
5	SPECIAL					
JOSH WOODS PRODUCTION	EVENT PROD.		Х	7,952,320.	528,000.	7,424,320.
6						
7						
8						
9						
10						
 Total				33,231,390.	1,452,293.	31,779,097.

<u>.....</u>.. 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL,

KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NV, NH, NJ, NM, NY, NC, ND, OH,

OK, OR, PA, RI, SC, TN, TX, UT, VA, WA, WV, WI,

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Schedule G (Form 990 or 990-EZ) 2014

OMB No. 1545-0047

Open to Public Inspection

No

0176982-00003

13-3163817

Part II 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.

		(a) Event #1 CANNES	<b>(b)</b> Event #2 DALLAS	(c) Other events 16.	(d) Total events (add col. (a) through
		(event type)	(event type)	(total number)	col. <b>(c)</b>
e		(event type)	(event type)	(total humber)	
evenue ۲	Gross receipts	15,990,176.	4,102,963.	15,892,852.	35,985,991
2	Less: Contributions	15,534,176.	3,978,678.	14,601,252.	34,114,106
3	Gross income (line 1 minus line 2).	456,000.	124,285.	1,291,600.	1,871,885
4	Cash prizes				
5	Noncash prizes				
6 Uses	Rent/facility costs	1,166,241.	261,520.	495,405.	1,923,166
6 Expenses	Food and beverages	164,025.	155,135.	960,466.	1,279,626
Direct	Entertainment	1,171,125.	73,913.	2,081,591.	3,326,629
9	Other direct expenses	2,236,215.	554,882.	2,838,113.	5,629,210
10	Direct expense summary. Add lines	4 through 9 in column (d)		►	12,158,631
11	Net income summary. Subtract line	10 from line 3, column (d	)		-10,286,746
Part		anization answered "Y			rted more

Revenue	_	<b>(a)</b> Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))						
Rev	1 Gross revenue										
ses	2 Cash prizes										
zpen	3 Noncash prizes										
Direct Expenses	4 Rent/facility costs										
	5 Other direct expenses										
	6 Volunteer labor	Yes%	Yes%	Yes%							
	7 Direct expense summary. Add lines 2 through 5 in column (d)										
	8 Net gaming income summary. Subtract	ct line 7 from line 1, col	umn (d)	<b>.</b>							
9	Enter the state(s) in which the organizati										
a	Is the organization licensed to conduct g				Yes No						
Ľ	If "No," explain:										

10 a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	Yes	No
	o If "Yes," explain:		

THE	FOUNDATION	FOR	ATDS	RESEARCH

Sched	lule G (Form 990 or 990-EZ) 2014			Page <b>3</b>				
11	Does the organization conduct 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	y		_				
	formed to administer charitable gaming?	• • • •	Yes	No				
13	Indicate the percentage of gaming activity conducted in:							
a	The organization's facility			<u>%</u>				
b 14	An outside facility Enter the name and address of the person who prepares the organization's gaming/special events book			%				
14	records:	sanu						
	Name ►							
	Address ►							
15 a	Does the organization have a contract with a third party from whom the organization receives g	amina						
	revenue?		Yes	No				
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$a	and the						
	amount of gaming revenue retained by the third party $\blacktriangleright$							
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:							
a	Is the organization required under state law to make charitable distributions from the gaming pro	ceeds to						
	retain the state gaming license?		Yes	No				
b	Enter the amount of distributions required under state law to be distributed to other exempt orga							
	or spent in the organization's own exempt activities during the tax year <b>&gt;</b> \$		·					
Par								
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition (see instructions).	nal mon	nation					
SCH	EDULE G, PART I							
THE	FOUNDATION FOR AIDS RESEARCH ACTUALLY PAID OUT \$739,793 IN							
FUN	DRAISING EXPENSES FOR THE YEAR ENDING SEPTEMBER 30, 2015. THIS AMOUNT							
IS :	REPORTED ON PART IX, LINE 11(E). FOR PURPOSES OF SCHEDULE G, THE							
FOU	FOUNDATION IS REPORTING ALL AMOUNTS PAID TO THE CONSULTANTS LISTED ON							
PAR	T I, REGARDLESS OF WHETHER SUCH AMOUNTS WERE PURE FUNDRAISING EXPENSES							
ΩR ·	EVENT PRODUCTION COSTS. ON SCHEDULE G, THE TOTAL AMOUNT PAID TO THE							
010	EVENT TRODUCTION COSTS: ON SCHEDOLE G, THE TOTAL AMOUNT TAID TO THE							

THE	FOUNDATION	FOR	ATDS	RESEARCH

Sched	lule G (Form 990 or 990-EZ) 2014			Page <b>3</b>
11	Does the organization conduct 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?		Yes	No
13	Indicate the percentage of gaming activity conducted in:			
a	The organization's facility			<u>%</u>
b	An outside facility			%
14	Enter the name and address of the person who prepares the organization's gaming/special events book records:	sanu		
	Name ►			
	Address ►			
15 a	Does the organization have a contract with a third party from whom the organization receives g	amina		
	revenue?		Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$	and the		
	amount of gaming revenue retained by the third party $\blacktriangleright$			
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:			
а	Is the organization required under state law to make charitable distributions from the gaming pro	ceeds to	<u></u>	
	retain the state gaming license?		Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt orga or spent in the organization's own exempt activities during the tax year <b>&gt;</b> \$	nizations	5	
Par				
	(see instructions).			
ORG	ANIZATIONS LISTED IS \$1,452,293. OF THAT \$1,452,293, ONLY \$739,793 WAS			
PAI	D FOR FUNDRAISING SERVICES, THE REMAINING \$712,500 WAS PAID FOR EVENT			
PRO	DUCTION SERVICES. IN THE INTERESTS OF CLARITY, THE FOUNDATION WOULD			
ALS	O LIKE TO MAKE CLEAR THAT THE COMPENSATION REPORTED AS HAVING BEEN			
PAI	D TO THE PROFESSIONAL FUNDRAISERS REPORTED ON SCHEDULE G IS REPORTED			
ON .	A FISCAL YEAR BASIS. SOME OF THOSE SAME FUNDRAISERS ARE REPORTED ON			
THE	FOUNDATION'S TOP 5 HIGHEST PAID INDEPENDENT CONTRACTORS LIST (IN			

THE F	OUNDATION	FOR	AIDS	RESEARCH

	THE FOUNDATION FOR ATDS RESEARCH IS STUDIE.
	ule G (Form 990 or 990-EZ) 2014 Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?
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? No
13	Indicate the percentage of gaming activity conducted in:
а	The organization's facility
b	An outside facility 13b %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Namo N
	Name ▶
	Address ►
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	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 ► \$
c	If "Yes," enter name and address of the third party:
Ŭ	
	Name ►
	Name ▶
	Address ►
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ► \$
	Description of services provided ►
	Director/officer Employee Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license? Yes No
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	Supplemental Information. 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 provide any additional information
	(see instructions).
SCH	EDULE O). IN COMPLIANCE WITH THE INSTRUCTIONS TO THE FORM 990,
COM	PENSATION REPORTED FOR PART VII (AND LISTED IN SCHEDULE O) IS REPORTED
0014	LENGHION ALIGNIE FOR THAT VIE (IND EIGIED IN DEMEDOLE O/ ID REFORTED
ON 1	A CALENDAR YEAR BASIS. ACCORDINGLY, AMOUNTS ON PART VII AND SCHEDULE G
<u>тат</u> тт -	L NOT RECONCILE.
W LL.	

SCHEDULE I	Grants and Other Assistance to Organizations,	ļ	OMB No. 1545-0047					
(Form 990)	Governments, and Individuals in the United States	2014						
	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.	Open to Public						
Department of the Treasury Internal Revenue Service	Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.		Inspection					
Name of the organization		Employer identification number						
THE FOUNDATION	FOR AIDS RESEARCH	13-3163	817					
Part I General Ir	Part I General Information on Grants and Assistance							
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? No								

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 Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BETH ISRAEL DEACONESS MEDICAL CENTER							
330 BROOKLINE AVENUE BOSTON, MA 02215	04-2103881	501(C)(3)	124,497.				BASIC RESEARCH
(2) BLOOD SYSTEMS, INC.							
270 MASONIC AVENUE	86-0098929	501(C)(3)	60,000.				BASIC RESEARCH
(3) CASE WESTERN RESERVE UNIVERSITY							
10900 EUCLID AVENUE, LC 4930	34-1018992	501(C)(3)	321,508.				BASIC RESEARCH
(4) CHARITIES AID FOUNDATION OF AMERICA (CAF AM							
KING STREET STATION 1800 DIAGONAL ROAD SUIT	43-1634280	501(C)(3)	301,163.				PREVENTION SCIENCE (
(5) COLD SPRING HARBOR LABORATORY							
1 BUNGOTWN ROAD COLD SPRING HABOR, NY 11724	11-2013303	501(C)(3)	12,000.				BASIC RESEARCH
(6) COLORADO STATE UNIVERSITY							
408 UNIVERSITY SVCS. CENTER	84-6000545	501(C)(3)	188,128.				BASIC RESEARCH
(7) DANA-FARBER CANCER INSTITUTE, INC.							
450 BROOKLINE AVENUE, CLS 1017	04-2263040	501(C)(3)	28,538.				BASIC RESEARCH
(8) EMORY UNIVERSITY							
1599 CLIFTON RD. ATLANTA, GA 30322-4250	58-0566256	501(C)(3)	342,000.				BASIC RESEARCH
(9) FRED HUTCHINSON CANCER RESEARCH CENTER							
1100 FAIRVIEW AVE N, C2-187	23-7156071	501(C)(3)	15,626.				BASIC RESEARCH
(10) ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI							
ONE GUSTAVE LEVY PLACE NEW YORK, NY 10029	13-6171197	501(C)(3)	60,000.				BASIC RESEARCH
(11) INTERCAMBIOS PUERTO RICO							
165 CALLE DIEGO ZALDUONDO (ALTOS)	66-0731885	501(C)(3)	20,000.				PUBLIC POLICY
(12) JOHNS HOPKINS UNIVERSITY							
733 N. BROADWAY MRB, SUITE 117	52-0595110		634,872.				BASIC RESEARCH, GMT
2 Enter total number of section 501(c)(3) and 3 Enter total number of other organizations I For Parameter Reduction Act Nation and the Instruction	sted in the lir	ne 1 table	listed in the line 1 t	able		<u></u>	

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

Schedule I (Form 990) (2014)

JSA

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990. ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.		OMB No. 1545-0047				
Name of the organization		Employer identi	fication number				
THE FOUNDATION	FOR AIDS RESEARCH	13-3163	3-3163817				
Part I General I	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     the selection criteria used to award the grants or assistance?     X Yes     No							

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part II Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	<b>(b)</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) MASSACHUSETTS GENERAL HOSPITAL							
55 FRUIT STREET BOSTON, MA 02114	04-2697983	501(C)(3)	177,482.				BASIC RESEARCH
(2) MOUNT SINAI BETH ISRAEL							
FIRST AVENUE AT 16TH STREET	13-5564934	501(C)(3)	22,500.				PUBLIC POLICY
(3) NEW HOPE FOR CAMBODIAN CHILDREN							
PO BOX 690597 KILLEEN, TX 76549	20-5301015	501(C)(3)	50,000.				TREAT ASIA
(4) NEW YORK UNIVERSITY							
545 FIRST AVENUE, GREENBERG HALL SC1-81	13-5562308	501(C)(3)	75,000.				BASIC RESEARCH
(5) NORTHWESTERN UNIVERSITY							
303E. SUPERIOR STREET, RM. 9-159	36-2167817	501(C)(3)	55,385.				BASIC RESEARCH
(6) OREGON HEALTH AND SCIENCE UNIVERSITY							
3181 SW SAM JACKSON PARK ROAD	93-1176109	501(C)(3)	179,872.				BASIC RESEARCH
(7) REGENTS OF THE UNIVERSITY OF CALIFORNIA, SA							
3333 CALIFORNIA STREET, SUITE 315	94-6036493	501(C)(3)	245,000.				BASIC RESEARCH
(8) THE GEORGE WASHINGTON UNIVERSITY							
2121 I STREET, N.W. SUITE 601	53-0196584	501(C)(3)	22,498.				BASIC RESEARCH
(9) THE ROCKEFELLER UNIVERSITY							
1230 YORK AVENUE NEW YORK, NY 10065	13-1624158	501(C)(3)	1,075,000.				BASIC RESEARCH
(10) THE SCRIPPS RESEARCH INSTITUTE							
10550 NORTH TORREY PINES ROAD	33-0435954	501(C)(3)	15,626.				BASIC RESEARCH
(11) THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL							
104 AIRPORT DRIVE, CB 1350	56-6001393	501(C)(3)	86,666.				BASIC RESEARCH
(12) TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA							
422 CURIE BLVD PHILADELPHIA, PA 19104	23-1352685		75,000.				BASIC RESEARCH
2 Enter total number of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 t	able			
3 Enter total number of other organizations I	isted in the lir	ne 1 table					

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

Schedule I (Form 990) (2014)

JSA

SCHEDULE I	Grants and Other Assistance to Organizations,		OMB No. 1545-0047	
(Form 990)	<b>Governments, and Individuals in the United States</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.		2014	
Department of the Treasury	Attach to Form 990.		Open to Public	
Internal Revenue Service	Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.		Inspection	
Name of the organization		Employer ident	ification number	
THE FOUNDATION FOR	R AIDS RESEARCH	13-3163817		
Part I General Info	rmation on Grants and Assistance			
=	on maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants	s or assistance,	and	

 the selection criteria used to award the grants or assistance?
 X
 Yes
 No

 2
 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.
 No

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) UNIVERSITY OF CALIFORNIA, LOS ANGELES							
11000 KINROSS AVENUE, SUITE 211	95-6006143	501(C)(3)	225,000.				BASIC RESEARCH
(2) UNIVERSITY OF NEBRASKA-LINCOLN							
151 WHITTIER RESEARCH CENTER, 2200 VINE ST.	47-0049123	501(C)(3)	60,000.				BASIC RESEARCH
(3) UNIVERSITY OF PITTSBURGH							
123 UNIVERSITY PLACE PITTSBURGH, PA 15213	25-0965591	501(C)(3)	163,804.				GMT INITIATIVE
(4) UNIVERSITY OF SOUTHERN CALIFORNIA							
2001 NORTH SOTO STREET	95-1642394	501(C)(3)	90,000.				BASIC RESEARCH
(5) UNIVERSITY OF UTAH							
15 NORTH MEDICAL DRIVE EAST JMRB 2100	87-6000525	501(C)(3)	60,000.				BASIC RESEARCH
(6) UNIVERSITY OF WASHINGTON							
4333 BROOKLYN AVE, NE, BOX 359472	91-6001537	501(C)(3)	60,000.				BASIC RESEARCH
(7) VACCINE AND GENE THERAPY INSTITUTE FLORIDA							
9801 SW DISCOVERY WAY	36-4631835	501(C)(3)	505,665.				BASIC RESEARCH
(8) VETERANS MEDICAL RESEARCH FOUNDATION							
3350 LA JOLLA VILLAGE DRIVE (151A)	33-0189397	501(C)(3)	60,000.				BASIC RESEARCH
(9) WORLDWIDE ORPHANS FOUNDATION							
515 VALLEY STREET SUITE 201	13-3968225	501(C)(3)	15,000.				TREAT ASIA
(10)	_						
(11)	_						
(12)	_						
2 Enter total number of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 t	able		· · · · · · · · · · · · · · · · · · • •	33.
3 Enter total number of other organizations For Paperwork Reduction Act Notice, see the Instruct					<u></u>		hedule I (Form 990) (201

(a) Type of grant or assistance	(b) Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
IV Supplemental Information. Complet information.	e this part to pro	vide the informa	ation required in	Part I, line 2, Part III, col	umn (b), and any other additional
information.	e this part to pro	vide the informa	ation required in	Part I, line 2, Part III, col	umn (b), and any other additional
information. NTS AND ASSISTANCE				Part I, line 2, Part III, col	umn (b), and any other additional
	AND FELLOWSH	HIPS TO INDE	PENDENT	Part I, line 2, Part III, col	umn (b), and any other additional
information. NTS AND ASSISTANCE T I, LINE 2 AMFAR PROVIDES GRANTS -FOR-PROFIT ORGANIZATIONS THROUGH	AND FELLOWSH	HIPS TO INDE EW PROCESS.	PENDENT GRANT		umn (b), and any other additional
information. NTS AND ASSISTANCE I I, LINE 2 AMFAR PROVIDES GRANTS -FOR-PROFIT ORGANIZATIONS THROUGH LICATIONS ARE FIRST REVIEWED BY T	AND FELLOWSH A PEER-REVIE THE FOUNDATION	HIPS TO INDE EW PROCESS. N'S VOLUNTEE	PENDENT GRANT R SCIENTIFIC		umn (b), and any other additional
information. NTS AND ASSISTANCE F I, LINE 2 AMFAR PROVIDES GRANTS -FOR-PROFIT ORGANIZATIONS THROUGH LICATIONS ARE FIRST REVIEWED BY T ISORY COMMITTEE, WHICH COMPRISES	AND FELLOWSH A PEER-REVIE THE FOUNDATION RECOGNIZED EX	HIPS TO INDE EW PROCESS. N'S VOLUNTEE KPERTS IN TH	PENDENT GRANT R SCIENTIFIC E MEDICAL,		umn (b), and any other additional
information. NTS AND ASSISTANCE T I, LINE 2 AMFAR PROVIDES GRANTS	AND FELLOWSH A PEER-REVIE THE FOUNDATION RECOGNIZED EX SIPLINES RELEV	HIPS TO INDE EW PROCESS. N'S VOLUNTEE KPERTS IN TH VANT TO HIV	PENDENT GRANT R SCIENTIFIC E MEDICAL, AND AIDS.		umn (b), and any other additional

THE THREE COMMITTEES (RESEARCH, GLOBAL INITIATIVES OR PUBLIC POLICY) OF

THE FOUNDATION'S PROGRAM BOARD, WHICH SERVES IN AN ADVISORY CAPACITY TO

THE BOARD OF TRUSTEES. AFTER A PROGRAM COMMITTEE HAS COMPLETED ITS

Schedule I (Form 990) (2014)

(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. Completing information.	ete this part to pro	vide the informa	ation required in	Part I, line 2, Part III, co	lumn (b), and any other additional
REVIEW OF THE APPLICATIONS, IT PRES	SENTS ITS FUND	ING RECOMMEN	DATIONS TO		
AMFAR'S EXECUTIVE COMMITTEE AND/OR	THE FULL BOARI	O OF TRUSTEE	S FOR FINAL		
APPROVAL AND FUNDING AUTHORIZATION	. GRANTS AND I	FELLOWSHIPS	ARE PAYABLE		
OVER A ONE-TO-THREE-YEAR PERIOD, AN	ND ARE REVOCABI	LE AT AMFAR'	S OPTION IF		
THE RECIPIENT'S PERFORMANCE OR USE	OF FUNDS IS NO	OT CONSISTEN	T WITH THE		
TERMS OF THE GRANT OR FELLOWSHIPS.	IN CERTAIN CA	ASES, THE AC	TUAL AMOUNTS	S	
PAID UNDER GRANTS AND FELLOWSHIP AV	VARDS MAY BE LI	ESS THAN THE	ORIGINAL		
AWARD IF THE RECIPIENT DOES NOT USP	E THE FULL AMOU	JNT AWARDED.	THEREFORE	,	
A RESERVE FOR UNEXPENDED GRANTS ANI	O FELLOWSHIPS H	HAS BEEN REC	ORDED.		
SUBAWARDS ARE GRANTS AWARDED TO NOT	G-FOR-PROFIT OF	RGANIZATIONS	TO SUPPORT		

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.

Schedule I (Form 990) (2014)

(a) Type of grant or assistance	<b>(b)</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

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.

information.

THE COSTS OF COLLABORATION AND PARTICIPATION IN HIV/AIDS-RELATED RESEARCH

PROJECTS FOR WHICH AMFAR HAS SECURED RESTRICTED FUNDS. SUBAWARDS ARE

PAYABLE OVER A ONE-YEAR PERIOD, ALTHOUGH ADVANCE PAYMENTS, IN FULL OR IN

PART, MAY BE ISSUED FOLLOWING EXECUTION OF THE SUBAWARD AGREEMENT.

SUBAWARDS ARE CONTINGENT UPON THE AVAILABILITY OF FUNDS AND ARE REVOCABLE

IF THE RECIPIENTS' PERFORMANCE OR USE OF FUNDS IS NOT CONSISTENT WITH THE

SUBAWARD TERMS.

SCHEDULE J (Form 990)		For certain Officers, Dire Cor ► Complete if the organization	ISation Information ectors, Trustees, Key Employees, and Highest mpensated Employees n answered "Yes" on Form 990, Part IV, line 23		мв No. 1 20 Ореп to	14	1
	nent of the Treasury Revenue Service		Attach to Form 990. orm 990) and its instructions is at <i>www.irs.gov/</i> /		Inspe		
	of the organization			Employer identification			
THE	FOUNDATIO	N FOR AIDS RESEARCH		13-316381	7		
Part		s Regarding Compensation					
						Yes	No
1a	990, Part VII,		provided any of the following to or for a pers provide any relevant information regarding Housing allowance or residence for	these items.			
		or companions	Payments for business use of persor	•			
		emnification and gross-up payments	Health or social club dues or initiatio				
		onary spending account	Personal services (e.g., maid, chauffe				
b	If any of the or reimburse	boxes on line 1a are checked, did th ment or provision of all of the ex	ne organization follow a written policy re repenses described above? If "No," com	egarding payment plete Part III to	1b		
2			to reimbursing or allowing expenses				
	-		D/Executive Director, regarding the items				
	1a?				2		
3	organization's related organ X Comper X Indepen	CEO/Executive Director. Check all that	nization used to establish the compensation at apply. Do not check any boxes for metho e CEO/Executive Director, but explain in Pa Written employment contract X Compensation survey or study X Approval by the board or compensa	ds used by a art III.			
4			Part VII, Section A, line 1a, with respect to				
	organization of	or a related organization:		-			
а			ayment?		4a		X
b			ntal nonqualified retirement plan?		4b	Х	L
С			ased compensation arrangement?		4c		X
5	For persons li compensatior	isted in Form 990, Part VII, Section A, n contingent on the revenues of:	rganizations must complete lines 5–9. line 1a, did the organization pay or accrue a	-	Fe		x
a b					5a 5b		X
U		e 5a or 5b, describe in Part III.			50		- 21
6	For persons li		line 1a, did the organization pay or accrue a	any			
а		<b>.</b>			6a		X
b	-				6b		X
~	-	e 6a or 6b, describe in Part III.			50		
7			n A, line 1a, did the organization provi	de any non-fixed			
8	payments not	described in lines 5 and 6? If "Yes," de	escribe in Part III		7		x
U			Regulations section 53.4958-4(a)(3)? If				
					8		x
9	If "Yes" to li	ine 8, did the organization also foll	low the rebuttable presumption proced	ure described in	9		
For Pa		ction Act Notice, see the Instructions for Fo			ule J (Fo	orm 990	0) 2014

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Schedule J (Form 990) 2014

# 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.

(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred in prior Form 990
KEVIN FROST	(i)	394,276.	C	126,083.	35,700.	51,109.	607,168.	59,500.
1 CHIEF EXECUTIVE OFFICER	(ii)	0	C	0	O	0	C	(
BRADLEY JENSEN	(i)	236,484.	C	0	16,732.	36,573.	289,789.	(
2 ASSISTANT TREASURER, CFO	(ii)	0	C	0	0	0	C	(
JOHN F. LOGAN, J.D., PH	(i)	219,864.	C	0	15,500.	11,914.	247,278.	(
3 ASST SEC, VP, GEN COUNSEL	(ii)	0	C	0	0	0	C	(
ROWENA JOHNSTON	(i)	180,441.	C	0	12,694.	11,914.	205,049.	(
<b>4</b> ASST SECRETARY, VICE PRESIDENT	(ii)	0	C	0	0	0	C	(
EDWARD DONNELLY	(i)	145,201.	C	0	10,596.	10,929.	166,726.	(
5 ASST TREASURER, CONTROLLER	(ii)	0	C	0	0	0	C	(
ERIC MUSCATELL	(i)	197,610.	C	0	14,024.	11,914.	223,548.	(
6 VICE PRESIDENT OF DEVELOPMENT	(ii)	0	C	0	0	0	C	(
ANNETTE SOHN	(i)	225,322.	C	0	15,373.	6,032.	246,727.	(
7 VICE PRESIDENT, TREAT ASIA PGM	(ii)	0	C	0	0	0	C	(
ANNMARIE SHANNAHAN	(i)	208,911.	C	0	14,716.	11,914.	235,541.	(
8 VICE PRESIDENT, PUBLIC INFO.	(ii)	0	C	0	0	0	C	(
ANDREW MCINNESS	(i)	148,469.	C	0	10,682.	36,573.	195,724.	(
9 DIRECTOR, PUBLICATIONS	(ii)	0	C	0	0	0	C	(
ANTHONY ANCONA	(i)	167,055.	C	0	11,828.	11,906.	190,789.	(
10 <sup>VICE PRESIDENT, HUMAN RESOURCE</sup>	(ii)	0	C	0	0	0	C	(
SUSAN DOSTER	(i)	136,579.	C	0	9,940.	28,193.	174,712.	(
11 <sup>CHIEF TECHNOLOGY OFFICER</sup>	(ii)	0	C	0	0	0	C	(
BENNAH SERFATY	(i)	118,344.	C	0	8,491.	36,573.	163,408.	(
12 <sup>SR DIRECTOR OF COMMUNICATION</sup>	(ii)	0	C	0	0	0	C	(
RAOUL NORMAN TENAZAS	(i)	114,699.	C	0	8,359.	36,573.	159,631.	(
13 <sup>CREATIVE DIRECTOR</sup>	(ii)	0	C	0	0	0	C	(
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2014

4E1291 1.000

Schedule J (Form 990) 2014

### Part ||| 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. IN CALENDAR YEAR 2014, AMFAR

CONTRIBUTED \$60,000 INTO MR. FROST'S NON-QUALIFIED RETIREMENT PLAN. THIS

AMOUNT IS NOT REPORTED IN SCHEDULE J, PART II, COLUMN (C) BECAUSE THE

CONTRIBUTED AMOUNT WAS DISTRIBUTED TO MR. FROST WITHIN THE SAME CALENDAR

YEAR. INCLUDED IN SCHEDULE J COLUMN (B)(III) IS MR. FROST'S 2014

EMPLOYER-FUNDED 457(F) CONTRIBUTION OF \$60,000 PLUS PAYOUTS OF PREVIOUSLY

CONTRIBUTED EMPLOYER-FUNDED 457(F) CONTRIBUTIONS (AND EARNINGS THEREON).

IN SCHEDULE J, PART II, COLUMN (F), AMFAR IS REPORTING \$59,500 OF 457(F) CONTRIBUTIONS THAT WERE RECORDED AS DEFERRED COMPENSATION ON A PREVIOUSLY FILED FORM 990.

Schedule J (Form 990) 2014

# SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

**Open To Public** 

Inspection

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

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service Name of the organization

# THE FOUNDATION FOR AIDS RESEARCH

Employer identification number 13-3163817

Par	t Types of Property			· · · · ·			
		<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	<b>(d)</b> Method of de noncash contrib	eterminin	
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	X	20.	631,638.	SALES PRICE	2	
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 20	Food inventory Drugs and medical supplies						
20 21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ►()						
26	Other ►()						
27	Other ►()						
28	Other ►()						
29	Number of Forms 8283 received	by the org	anization during the tax y	ear for contributions for			
	which the organization completed I	Form 8283,	Part IV, Donee Acknowledg	jement	29		
						Yes	No
30a	During the year, did the organizat	ion receive	by contribution any prope	rty reported in Part I, line	s 1 through		
	28, that it must hold for at least th	ree years fr	om the date of the initial c	contribution, and which is	not required		
	to be used for exempt purposes for		olding period?			Da	Х
b	If "Yes," describe the arrangement i						
31	Does the organization have a						
	contributions?					1 X	
32a	Does the organization hire or use	•	•	•		_	
	contributions?					2a	X
	If "Yes," describe in Part II.						
33	If the organization did not report ar describe in Part II.	n amount in	column (c) for a type of pro	operty for which column (a	) is checked,		

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

Schedule M (Form 990) (2014)

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**Part II** Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

FORM 990, SCHEDULE M, LINE 31

TO THE EXTENT THAT 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.

SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

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.



Department of the Treasury Internal Revenue Service Name of the organization

THE FOUNDATION FOR AIDS RESEARCH

Employer identification number

PROGRAM SERVICE ACCOMPLISHMENTS(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 U.S. 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 PURSUIT OF A CURE FOR HIV/AIDS.

# COUNTDOWN TO A CURE FOR AIDS

IN FEBRUARY 2015, AMFAR OUTLINED A \$100 MILLION INVESTMENT STRATEGY TO

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SUPPORT ITS COUNTDOWN TO A CURE FOR AIDS INITIATIVE, WHICH IS AIMED AT DEVELOPING THE SCIENTIFIC BASIS FOR A CURE BY 2020. THE STRATEGY REPRESENTS AN UNPRECEDENTED EXPANSION OF AMFAR'S GRANT MAKING AND IS DESIGNED TO PROVIDE SUPPORT TO ANY SCIENTIST OR TEAM OF INVESTIGATORS FOR ANY RESEARCH IDEA WITH THE POTENTIAL TO ADVANCE THE SEARCH FOR A CURE, AT ANY STAGE OF ITS DEVELOPMENT. IT IS STRUCTURED TO PROVIDE SUSTAINED SUPPORT FOR A WIDE RANGE OF STUDIES THAT ADVANCE BOTH EMERGING AND ESTABLISHED IDEAS. THE STRATEGY COMPRISES THE FOLLOWING COMPONENTS:

## - AMFAR INSTITUTE FOR HIV CURE RESEARCH

LAUNCHED AT THE END OF 2015 AT THE UNIVERSITY OF CALIFORNIA, SAN FRANCISCO, THE INSTITUTE WILL BE THE CORNERSTONE OF AMFAR'S CURE RESEARCH EFFORTS AND WILL BE SUPPORTED BY A \$20 MILLION GRANT OVER FIVE YEARS.

- INNOVATION GRANTS

THESE TWO-YEAR AWARDS OF UP TO \$200,000 EACH WILL ENABLE RESEARCHERS TO TEST INNOVATIVE IDEAS SUPPORTED BY LIMITED PRELIMINARY DATA.

- IMPACT GRANTS

THESE GRANTS OF UP TO \$2 MILLION EACH OVER FOUR YEARS WILL SUPPORT THE IN-DEPTH DEVELOPMENT OF CONCEPTS ALREADY UNDERPINNED BY PRELIMINARY DATA SHOWING GENUINE POTENTIAL FOR ACHIEVING A CURE.

- INVESTMENT GRANTS

AIMED AT RECRUITING THE EXPERIENCE AND EXPERTISE OF SCIENTISTS FROM OUTSIDE THE FIELD OF HIV, THESE \$1 MILLION GRANTS WILL BE AWARDED OVER A FOUR-YEAR PERIOD. GRANTEES MAY HAVE EXPERTISE IN FIELDS SUCH AS CANCER, NEUROSCIENCE OR INFLAMMATORY DISEASE THAT CAN DIRECTLY INFORM EFFORTS TO

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CURE HIV.

- ARCHE

LAUNCHED IN 2010, THE AMFAR RESEARCH CONSORTIUM ON HIV ERADICATION, OR ARCHE, SUPPORTS COLLABORATIVE TEAMS OF SCIENTISTS IN THE U.S. AND AROUND THE WORLD WORKING ON A RANGE OF HIV CURE STRATEGIES.

- OPPORTUNITY FUND

THIS FUNDING MECHANISM WILL ENABLE AMFAR TO RESPOND QUICKLY TO EMERGING AND UNFORESEEN RESEARCH OPPORTUNITIES.

## INNOVATION GRANTS

IN FEBRUARY 2015, AMFAR'S BOARD OF TRUSTEES APPROVED THE FIRST ROUND OF 11 INNOVATION GRANTS TOTALING CLOSE TO \$2 MILLION. AMONG THEM IS A STUDY BY DR. BENJAMIN BURWITZ OF OREGON HEALTH AND SCIENCE UNIVERSITY IN PORTLAND THAT COULD HELP DETERMINE THE PRECISE MECHANISM OF ACTION THAT LED TO THE FIRST AND ONLY KNOWN HIV CURE IN THE "BERLIN PATIENT." DR. BURWITZ AND COLLEAGUES PLAN TO GENERATE A NON-HUMAN PRIMATE THAT WILL ALLOW THE TESTING OF MANY HYPOTHESES CONCERNING THE BERLIN PATIENT'S CURE, AS WELL AS, FOR EXAMPLE, GENE THERAPY INTERVENTIONS DESIGNED TO CURE HIV.

ANOTHER OF THESE INNOVATION GRANTS WAS UNDERWRITTEN BY GENERATIONCURE, A GROUP OF YOUNG PROFESSIONALS DEDICATED TO SUPPORTING AMFAR'S CURE-FOCUSED RESEARCH. THIS INAUGURAL \$180,000 GENERATIONCURE GRANT WAS AWARDED TO DR. BRAD JONES, ASSISTANT PROFESSOR AT GEORGE WASHINGTON UNIVERSITY'S RESEARCH CENTER FOR THE CURE AND ERADICATION OF HIV, WHO IS STUDYING

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WHETHER A NOVEL COMBINATION THERAPY CAN ERADICATE THE LATENT RESERVOIRS OF HIV THAT PRESENT A MAJOR BARRIER TO FINDING A CURE.

### IMPACT GRANTS

IN JULY AMFAR AWARDED ITS FIRST EVER FOUR-YEAR GRANTS AT \$2 MILLION EACH. A TEAM OF RESEARCHERS LED BY DR. DAN BAROUCH OF BETH ISRAEL DEACONESS MEDICAL CENTER IN BOSTON IS INVESTIGATING THE ABILITY OF COMBINATIONS OF ANTIBODIES TO SPECIFICALLY KILL LATENTLY INFECTED CELLS IN THE LAB, IN MONKEYS, AND THEN IN PEOPLE. THE RESEARCHERS WILL TEST TWO PROMISING ANTIBODIES ALONE AND TOGETHER, IN COMBINATION WITH A NEWLY DESCRIBED DRUG THAT CAN "SHOCK" THE VIRUS OUT OF LATENTLY INFECTED CELLS AND POSSIBLY ENHANCE THE ABILITY OF THE ANTIBODIES TO LOCATE THE INFECTED CELLS.

DR. TIMOTHY HENRICH OF THE UNIVERSITY OF CALIFORNIA, SAN FRANCISCO, AND HIS COLLEAGUES ARE PURSUING A NOVEL INTERVENTION AIMED AT RESTORING NORMAL IMMUNE FUNCTION IN PEOPLE WITH HIV. THE TEAM IS TESTING WHETHER THE TRANSPLANT DRUG, SIROLIMUS, CAN INCREASE THE ACTIVITY OF BENEFICIAL COMPONENTS OF THE IMMUNE SYSTEM WHILE SUPPRESSING DETRIMENTAL ACTIVITY OF OTHER COMPONENTS. THE TEAM WILL THOROUGHLY ASSESS THE DRUG'S ACTIVITIES BEFORE MOVING ON TO TEST THE DRUG ON PERSISTENT HIV RESERVOIRS IN PEOPLE.

USING AN APPROACH THAT HAS ALREADY PROVED SUCCESSFUL IN CANCER THERAPY, DR. SHARON LEWIN OF THE UNIVERSITY OF MELBOURNE, AUSTRALIA, IS EXPLORING WHETHER DRUGS THAT BLOCK SO-CALLED IMMUNE CHECKPOINTS CAN ALSO BE

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EFFECTIVE AGAINST HIV. RESEARCHERS THEORIZE THAT THE IMMUNE SYSTEM CANNOT ELIMINATE INFECTED CELLS BECAUSE OF IMMUNE CHECKPOINTS, A SET OF MECHANISMS THAT LIMIT THE DURATION OF AN IMMUNE RESPONSE SO THAT THE IMMUNE SYSTEM DOES NOT BECOME EXHAUSTED. DR. LEWIN AND HER TEAM WILL TEST TWO DRUGS, ALONE AND TOGETHER, FOR THEIR ABILITY TO REVERSE IMMUNE EXHAUSTION AND RESTORE THE ABILITY OF THE IMMUNE SYSTEM TO ELIMINATE INFECTED CELLS.

### ARCHE

IN FEBRUARY THE BOARD APPROVED A \$1.5 MILLION ARCHE (AMFAR RESEARCH CONSORTIUM ON HIV ERADICATION) GRANT TO SUPPORT A TEAM OF RESEARCHERS FROM ROCKEFELLER UNIVERSITY IN NEW YORK, AARHUS UNIVERSITY HOSPITAL IN DENMARK, AND THE UNIVERSITY HOSPITAL OF COLOGNE, GERMANY. THE RESEARCHERS ARE TESTING THE ABILITY OF THE CANCER DRUG ROMIDEPSIN, WHICH HAS BEEN SHOWN TO BE EFFECTIVE AT "SHOCKING" HIV OUT OF HIDING, COMBINED WITH AN ANTIBODY TO ELIMINATE INFECTED CELLS AND THUS REDUCE THE SIZE OF THE PERSISTENT HIV RESERVOIR.

# MATHILDE KRIM FELLOWSHIPS

IN OCTOBER 2014, AMFAR AWARDED AN EIGHTH ROUND OF 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.

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DR. STYLIANOS BOURNAZOS OF THE ROCKEFELLER UNIVERSITY IN NEW YORK IS STUDYING A RANGE OF ANTIBODY FUNCTIONS THAT COULD INFORM FUTURE VACCINE DESIGN. DRS. DAVID SCHWEFEL OF MRC NATIONAL INSTITUTE FOR MEDICAL RESEARCH IN LONDON AND SPYRIDON STAVROU OF THE UNIVERSITY OF PENNSYLVANIA ARE FOCUSING ON ANTIVIRAL DEFENSES WITHIN CELLS CALLED RESTRICTION FACTORS, WHICH HIV HAS EVOLVED TO OVERCOME, THUS PROTECTING ITSELF FROM DESTRUCTION. AND DR. HENNING HOFFMAN OF NEW YORK UNIVERSITY IS STUDYING HARMFUL OVERACTIVITY OF THE IMMUNE SYSTEM OFTEN CAUSED BY HIV INFECTION, WHICH CAN INCREASE THE RISK OF HEART DISEASE AND OTHER CONDITIONS.

### 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, 44 SCIENTIFIC PUBLICATIONS RESULTED FROM AMFAR-FUNDED RESEARCH.

# THE EFFECTS OF EARLY TREATMENT

WRITING IN THE NOVEMBER 2014 ISSUE OF THE JOURNAL OF INFECTIOUS DISEASES, AMFAR GRANTEES DR. KATHERINE LUZURIAGA OF THE UNIVERSITY OF MASSACHUSETTS MEDICAL SCHOOL, DR. DEBORAH PERSAUD OF JOHNS HOPKINS UNIVERSITY, AND COLLEAGUES REPORTED ON EIGHT CHILDREN WHO WERE PERINATALLY INFECTED WITH HIV AND THEN FOLLOWED FOR UP TO 18 YEARS. FOUR WERE TREATED WITH ART SHORTLY AFTER BIRTH, WHILE THE OTHER FOUR, IN KEEPING WITH TREATMENT GUIDELINES IN PLACE AT THE TIME OF THEIR INFECTION, DID NOT RECEIVE ART

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UNTIL 6 TO 15 YEARS OF AGE. MOST STRIKING WAS THE FACT THAT ALL FOUR TREATED EARLY HAD LOWER LEVELS OF PROVIRAL DNA-ONE MEASURE OF HIV RESERVOIR SIZE-ALONG WITH DECREASED T-CELL ACTIVATION AND ABSENT OR MINIMAL ANTI-HIV IMMUNE RESPONSES, WHICH IS ANOTHER INDICATION OF VANISHINGLY SMALL LEVELS OF VIRUS IN THEIR BODIES. DRS. LUZURIAGA, PERSAUD, AND ASSOCIATES CONCLUDED THAT "LIFE-LONG THERAPY MAY NOT BE NECESSARY FOR ALL INDIVIDUALS, PARTICULARLY THOSE WHO INITIATE CART DURING PRIMARY INFECTION."

# WHEN IS THE RESERVOIR ESTABLISHED?

WRITING IN THE JANUARY ISSUE OF CURRENT OPINION IN HIV AND AIDS, DR. NICOLAS CHOMONT OF THE VACCINE AND GENE THERAPY INSTITUTE IN FLORIDA AND ASSOCIATES FROM THE U.S. MILITARY HIV RESEARCH PROGRAM AND THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL, REPORTED THAT THE HIV RESERVOIR IS PROBABLY ESTABLISHED IN LONG-LIVED CD4+ T MEMORY CELLS WITHIN THE FIRST THREE DAYS POST-INFECTION. FURTHERMORE, EARLY INITIATION OF ART HAS A MUCH GREATER IMPACT IN LIMITING THESE RESERVOIRS THAN LATER INITIATION OF TREATMENT. BUT REGARDLESS OF TIMING, THESE LATENTLY INFECTED CELLS ARE STILL THERE. THE AUTHORS CONCLUDED THAT "ADDITIONAL INTERVENTIONS WILL LIKELY BE REQUIRED TO ELIMINATE ALL CELLS CAPABLE OF PRODUCING VIRUS."

# STABILIZE OR STIMULATE?

THE MOST WIDELY STUDIED STRATEGY FOR WIPING OUT THE HIV RESERVOIR, DUBBED "KICK AND KILL," USES DRUGS TO SPUR LATENTLY INFECTED CELLS INTO PRODUCING VIRUS SO THAT THEY CAN BE IDENTIFIED AND DESTROYED BY THE

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IMMUNE SYSTEM OR ANTIRETROVIRALS. WRITING IN THE JULY ISSUE OF MBIO, AMFAR FELLOW DR. REMI FROMENTIN AND ARCHE GRANTEE DR. NICOLAS CHOMONT OF THE UNIVERSITY OF MONTREAL, FORMER AMFAR FELLOW DR. SUSANA VALENTE OF THE SCRIPPS RESEARCH INSTITUTE IN FLORIDA, AND COLLEAGUES DESCRIBED THEIR STUDY OF A NEW DRUG CALLED DIDEHYDRO-CORTISTATIN A (DCA) THAT DOES THE OPPOSITE: IT INHIBITS RESERVOIR ACTIVITY. THE AUTHORS CONCLUDED THAT THEIR RESULTS HIGHLIGHTED AN ALTERNATIVE APPROACH TO THE "KICK AND KILL" STRATEGY-STABILIZATION RATHER THAN ACTIVATION OF LATENT POOLS OF VIRUS-AND THAT DCA COULD BE A VALUABLE ADJUNCT TO CURRENT ART REGIMENS. WITH RESERVOIR ACTIVITY (I.E., REPLICATION, REACTIVATION, AND REPLENISHMENT) HALTED, THE NATURAL DEATH OF THE INFECTED CELLS COULD OCCUR, RESULTING IN THE "CONTINUOUS DECAY OF THE POOL OVER TIME, POSSIBLY CULMINATING IN THE LONG-AWAITED STERILIZING CURE."

### HIV CURE SUMMIT

IN NOVEMBER 2014, AMFAR HELD ITS FIRST ANNUAL HIV CURE SUMMIT AT THE NEW YORK ACADEMY OF SCIENCES, WHERE LEADING AMFAR-FUNDED HIV CURE RESEARCHERS REPORTED ON THEIR PROGRESS AND DISCUSSED THE SCIENTIFIC CHALLENGES THAT CONTINUE TO STAND IN THE WAY OF A CURE. FOUR SCIENTISTS EACH ADDRESSED ONE OF THE FOUR PILLARS OF HIV CURE RESEARCH: CHARTING THE LOCATIONS OF LATENT HIV RESERVOIRS; UNDERSTANDING HOW THESE POCKETS OF VIRUS ARE ESTABLISHED AND MAINTAINED; RECORDING THE AMOUNT OF VIRUS THEY CONTAIN; AND FINDING A WAY TO ELIMINATE THEM.

DR. PAULA CANNON OF THE UNIVERSITY OF SOUTHERN CALIFORNIA DISCUSSED HER

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EFFORTS TO DETERMINE WHETHER RESERVOIRS FORM IN THE BRAIN. SHE IS USING GENETICALLY ENGINEERED MICE TO LOOK AT BRAIN CELLS CALLED MICROGLIA, WHICH DIFFER FROM THE T CELL VIRAL RESERVOIRS FOUND IN THE REST OF THE BODY.

DR. EILEEN SCULLY OF HARVARD UNIVERSITY AND MASSACHUSETTS GENERAL HOSPITAL REPORTED ON HER INVESTIGATION OF SEX-BASED DIFFERENCES IN RESERVOIR SIZE AND THE POTENTIAL FOR THESE DIFFERENCES TO AFFECT THE WAY HIV MIGHT BE CURED.

DR. TIMOTHY HEINRICH OF HARVARD MEDICAL SCHOOL AND BRIGHAM AND WOMEN'S HOSPITAL IN BOSTON TALKED ABOUT THE NEED TO DEVELOP MORE SENSITIVE TECHNIQUES FOR DETECTING AND RECORDING THE AMOUNT OF VIRUS IN THE RESERVOIRS. ACCURATELY MEASURING THE AMOUNT OF VIRUS IN THE BODY IS CENTRAL TO DETERMINING THE EFFICACY OF FUTURE CURE STRATEGIES, AND ULTIMATELY, CONFIRMING IF AN INDIVIDUAL IS FREE OF HIV. AND DR. STEVEN DEEKS OF THE UNIVERSITY OF CALIFORNIA, SAN FRANCISCO, DISCUSSED HOW RESEARCHERS ARE ATTEMPTING TO ELIMINATE VIRAL RESERVOIRS WITH METHODS INCLUDING "SHOCK AND KILL," WHICH INVOLVES REACTIVATING THE VIRUS SO IT CAN BE DESTROYED; VACCINES AND OTHER IMMUNE-BASED STRATEGIES; AND GENE AND CELL THERAPY.

IN MARCH 2015, 12 LEADING PEDIATRIC HIV RESEARCHERS, IMMUNOLOGISTS, AND OTHER SCIENTISTS CAME TOGETHER IN LAS VEGAS, NEVADA, FOR A SECOND AMFAR THINK TANK TO DISCUSS PROGRESS IN THE SEARCH FOR A CURE FOR CHILDREN LIVING WITH HIV. PARTICIPANTS SOUGHT TO COLLECTIVELY IDENTIFY NEW AVENUES

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OF INVESTIGATION THAT CAN BEST BUILD UPON RECENT BREAKTHROUGHS.

PROGRAM SERVICE ACCOMPLISHMENTS (2)

LINE 4B: TREAT ASIA: AMFAR'S TREAT ASIA (THERAPEUTICS RESEARCH, EDUCATION, AND AIDS TRAINING IN ASIA) PROGRAM IS A NETWORK OF HOSPITALS, CLINICS, AND RESEARCH INSTITUTIONS WORKING WITH CIVIL SOCIETY TO ENSURE THE SAFE AND EFFECTIVE DELIVERY OF HIV TREATMENTS TO ADULTS AND CHILDREN ACROSS THE ASIA-PACIFIC THROUGH RESEARCH, EDUCATION, AND ADVOCACY OF EVIDENCE-BASED HIV-RELATED POLICIES. THE TREAT ASIA NETWORK ENCOMPASSES 21 ADULT AND 18 PEDIATRIC SITES THROUGHOUT THE REGION, WHICH COLLABORATE ON A VARIETY OF PROJECTS. TREAT ASIA SCIENTISTS PUBLISHED 28 PUBLICATIONS IN PEER-REVIEWED MEDICAL JOURNALS IN FY2015.

## 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 APPROXIMATELY 9,000 PATIENTS AT 21 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.

## TAHOD-LITE

WHILE TAHOD CONTINUES TO BE AN ESSENTIAL RESOURCE FOR ASSESSING TREATMENT OUTCOMES IN ASIAN POPULATIONS, ITS MODEL OF IN-DEPTH DATA COLLECTION LIMITS THE SIZE OF THE COHORT TO A SUBSET OF THOSE LIVING WITH HIV WHO ARE CARED FOR AT THE PARTICIPATING CLINICS. IN FY2015, TREAT ASIA

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LAUNCHED A NEW DATABASE CALLED TAHOD-LITE THAT INCLUDES MORE BASIC DATA BUT FROM A MUCH LARGER PROPORTION OF THE HIV-POSITIVE PATIENTS SEEN AT PARTICIPATING SITES.

## 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. IN FY2015, THE IEDEA CONSORTIUM LAUNCHED A NEW STUDY AIMING TO DEVELOP AND VALIDATE A STANDARDIZED TOOL TO MEASURE AND BETTER UNDERSTAND ADHERENCE AMONG YOUNG PEOPLE. THE STUDY IS BUILDING ON RESEARCH ALREADY DONE BY AN IEDEA SITE IN KENYA. TREAT ASIA IS WORKING WITH HIV-NAT AT THE THAI RED CROSS AIDS RESEARCH CENTRE TO CONDUCT A THAI COMPONENT. THE STUDY WILL EMPLOY AND EVALUATE A BRIEF STANDARD QUESTIONNAIRE THAT CAN ACCURATELY ASSESS YOUNG PEOPLE'S ADHERENCE TO TREATMENT. IT WILL ALSO EXAMINE CURRENT ADHERENCE AMONG CHILDREN AT THE THREE PARTICIPATING IEDEA SITES IN KENYA, SOUTH AFRICA, AND THAILAND, EVALUATE FACTORS THAT INCREASE THE RISK OF NON-ADHERENCE, AND ASSESS THE IMPACT OF NON-ADHERENCE ON TREATMENT FAILURE AND CLINIC DROPOUT.

## TREAT ASIA PEDIATRIC NETWORK

TREAT ASIA'S PEDIATRIC NETWORK INCLUDES 18 SITES IN SIX 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

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INCLUDES DATA FROM APPROXIMATELY 5,500 PEDIATRIC PATIENTS IN CAMBODIA, INDIA, INDONESIA, MALAYSIA, THAILAND, AND VIETNAM.

TREAT ASIA HAS BEEN FOLLOWING A PROSPECTIVE COHORT STUDY OF 248 HIV-INFECTED ADOLESCENTS TO EVALUATE MULTIPLE SOCIAL, CULTURAL, AND BEHAVIORAL FACTORS THAT AFFECT ART ADHERENCE USING AN AUDIO COMPUTER-ASSISTED SELF-INTERVIEW (ACASI) INSTRUMENT AT NINE TAPHOD SITES IN MALAYSIA, THAILAND, AND VIETNAM. AMONG THE STUDY FINDINGS WERE THAT ADOLESCENTS WITH EFFECTIVE VIROLOGIC SUPPRESSION WERE LESS LIKELY TO REPORT HIGH-RISK SEXUAL BEHAVIORS, SUCH AS INCONSISTENT CONDOM USE. THIS EMPHASIZES THE NEED TO PROMOTE AND SUPPORT STRATEGIES TO ACHIEVE VIRAL SUPPRESSION AS A KEY PRIORITY FOR ADOLESCENTS WHO ARE STRUGGLING TO REMAIN ADHERENT TO ART. THIS STUDY WAS SUPPORTED BY THE AIDS LIFE FOUNDATION.

## ADDITIONAL ADOLESCENT RESEARCH

IN FY2015, TREAT ASIA CONDUCTED AND CONTINUED SEVERAL STUDIES AIMED AT IMPROVING THE HEALTH AND WELL-BEING OF ADOLESCENTS LIVING WITH HIV. HIV-NAT/THAI RED CROSS AIDS RESEARCH CENTRE, IN COLLABORATION WITH THREE OTHER CLINICAL SITES IN THAILAND, CONDUCTED A STUDY OF WHETHER TECHNOLOGY-BASED INTERVENTIONS, IN THIS CASE SHORT MESSAGING SERVICE (SMS) REMINDERS, CAN INCREASE ADHERENCE TO ANTIRETROVIRAL THERAPY AMONG ADOLESCENTS. THIS STUDY RECEIVED SUPPORT FROM VIIV HEALTHCARE. TREAT ASIA CONDUCTED THE THIRD YEAR OF ITS STUDY TO EVALUATE THE NATURAL HISTORY OF HPV INFECTION AND RISK FACTORS FOR HPV ACQUISITION AND

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PERSISTENCE AMONG PERINATALLY HIV-INFECTED INDIVIDUALS COMPARED TO UNINFECTED FEMALE AND MALE ADOLESCENTS IN THAILAND AND VIETNAM. THE FINDINGS, WHICH WERE PRESENTED AT THE INTERNATIONAL WORKSHOP ON HIV PEDIATRICS IN JULY 2015, SUPPORT THE NEED FOR GREATER INTEGRATION OF PREVENTIVE SEXUAL HEALTH SERVICES INTO HIV CARE PROGRAMS FOR YOUNG WOMEN WITH HIV, AND MORE EFFECTIVE LINKAGES BETWEEN EXISTING HEALTHCARE PROGRAMS SUPPORTING ADOLESCENTS. THIS STUDY WAS SUPPORTED BY THE AIDS LIFE FOUNDATION.

EXPANDING PRE-EXPOSURE PROPHYLAXIS (PREP) FOR HIV IN THAILAND IN 2015, IN AN EFFORT TO ENHANCE NATIONAL HIV PREVENTION EFFORTS, THE THAI RED CROSS AIDS RESEARCH CENTRE AND ADAM'S LOVE, THAILAND'S LEADING INTERNET AND SOCIAL MEDIA-BASED HIV OUTREACH INITIATIVE, BEGAN WORKING ON TWO GROUNDBREAKING EFFORTS TO BRING ORAL PRE-EXPOSURE PROPHYLAXIS (PREP) TO MSM IN THAILAND. BOTH PROJECTS ARE SUPPORTED IN PART BY TREAT ASIA. ADAM'S LOVE'S PREP-30 CAMPAIGN IS THAILAND'S FIRST MAJOR EFFORT TO SPREAD AWARENESS ABOUT PREP AND HOW IT WORKS AND ENCOURAGE MSM WHO ARE AT HIGHER RISK OF HIV INFECTION TO CONSIDER USING IT. DR. NITTAYA PHANUPHAK IS LEADING A THAI RED CROSS STUDY ON THE UPTAKE AND EFFICACY OF PREP AMONG THAI MSM AND HOPES THE FINDINGS FROM HER RESEARCH WILL ENCOURAGE THE THAI GOVERNMENT TO COVER THE COST OF PREP UNDER THAILAND'S NATIONAL HEALTH INSURANCE.

# EXPLORING LINKS BETWEEN HIV AND CANCER BECAUSE MSM LIVING WITH HIV ARE TWICE AS LIKELY AS THOSE WITHOUT HIV TO DEVELOP THE ANAL CANCER ASSOCIATED WITH HUMAN PAPILLOMAVIRUS (HPV), THE

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ANONYMOUS CLINIC OF THE THAI RED CROSS AIDS RESEARCH CENTRE, A TREAT ASIA NETWORK MEMBER IN BANGKOK, STARTED SCREENING ITS PATIENTS FOR ANAL PRECANCERS. USING FUNDING FROM AMFAR'S GMT INITIATIVE, THEY PURCHASED THE HIGH-RESOLUTION ANOSCOPY MICROSCOPE NECESSARY TO DIAGNOSE AND TREAT BOTH ANAL WARTS AND PRECANCEROUS ANAL LESIONS, AND BEGAN PROVIDING ANAL PAP SMEARS AND TREATMENT FREE OF CHARGE. THIS NOT ONLY BENEFITED THEIR PATIENTS, IT ALSO GENERATED SOME OF THE FIRST DATA ABOUT HPV AND ANAL NEOPLASIA-THE FINAL STAGE THE LESIONS REACH BEFORE DEVELOPING INTO CANCER-AMONG MSM IN A RESOURCE-LIMITED SETTING IN THE ASIA-PACIFIC. WITH SUPPORT FROM TREAT ASIA, THE AIDS LIFE FOUNDATION, THE U.S. NATIONAL INSTITUTES OF HEALTH, AND THE UNIVERSITY OF CALIFORNIA, SAN FRANCISCO, THREE ADDITIONAL TREAT ASIA SITES IN INDONESIA AND MALAYSIA HAVE ESTABLISHED SIMILAR PROGRAMS.

BUILDING COMMUNITY TREATMENT LITERACY AND PROMOTING ADVOCACY FOR TREATMENT ACCESS

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 2015, WITH SUPPORT FROM VIIV HEALTHCARE'S NEW POSITIVE ACTION FOR ADOLESCENTS PROGRAM, TREAT ASIA LAUNCHED A PROGRAM CALLED YOUTH ACATA (ASIA COMMUNITY FOR AIDS TREATMENT AND ADVOCACY) IN AN EFFORT TO MOBILIZE HIV-POSITIVE YOUTH ACROSS THE REGION. IT HELD THREE YOUTH ACATA WORKSHOPS FOR YOUNG PEOPLE LIVING WITH HIV FROM CAMBODIA, INDONESIA, THAILAND, AND

VIETNAM IN AN EFFORT TO MOBILIZE YOUTH HIV ADVOCACY ACROSS THE REGION, AMONG OTHER TRAININGS.

TREAT ASIA ALSO RELEASED A POLICY BRIEF URGING GOVERNMENTS, PUBLIC HEALTH AUTHORITIES, HEALTHCARE PROVIDERS, AND CIVIL SOCIETY IN ASIA TO ADDRESS PERSISTENT GAPS IN WOMEN'S ACCESS TO REPRODUCTIVE HEALTH SERVICES, ESPECIALLY FOR WOMEN LIVING WITH HIV IN THE REGION. SEXUAL AND REPRODUCTIVE HEALTH OF HIV-POSITIVE WOMEN IN ASIA: A POLICY FRAMEWORK FOR THE FUTURE PROVIDES RECOMMENDATIONS AIMED AT CLOSING GAPS IN THE DELIVERY OF HIV PREVENTION AND CARE IN ASIA.

IN AUGUST 2015, ADAM'S LOVE LAUNCHED ADAM'S LOVE TAIWAN, ITS FOURTH COUNTRY-SPECIFIC HIV OUTREACH CAMPAIGN TARGETING AT-RISK POPULATIONS THROUGH ITS UNIQUE ONLINE EDUTAINMENT APPROACH THAT COMBINES EDUCATIONAL HIV RESOURCES WITH VIDEOS AND SOCIAL MEDIA POSTS FROM NATIONAL CELEBRITIES. (ADAM'S LOVE IS SUPPORTED BY VIIV AND AMFAR, AND SPONSORED BY THE THAI RED CROSS AIDS RESEARCH CENTRE.) ADAM'S LOVE'S OTHER THREE EDUTAINMENT PROJECTS-ADAM'S LOVE THAILAND AND TEMANTEMAN.ORG INDONESIA AND MALAYSIA-HAVE ALL BEEN HIGHLY SUCCESSFUL, GARNERING A TOTAL OF NEARLY THREE MILLION UNIQUE VISITORS TO THEIR WEBSITES. ADAM'S LOVE IS PARTNERING WITH THREE ADDITIONAL GMT-FRIENDLY CLINICS IN THE COUNTRY TO HELP INDIVIDUALS IN TAIWAN ACCESS CONVENIENT, DISCRIMINATION-FREE VCT SERVICES. THEY AIM TO CONTINUE TO EXPAND ACROSS THE REGION, WITH PLANS TO LAUNCH WEBSITES IN SOUTH KOREA IN 2016 AND JAPAN BY 2017.

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IN ADDITION, TREAT ASIA CONTINUED TO PUBLISH LAY-LANGUAGE ARTICLES ON AIDS RESEARCH, POLICY, AND COMMUNITY ISSUES FACING THE TREAT ASIA NETWORK AND THE ASIA-PACIFIC AS A WHOLE. IT ALSO BEGAN PUBLISHING INFORMATIONAL PIECES ON THE NEW HEPATITIS C MEDICINES. THE ARTICLES AND EDUCATIONAL PIECES APPEAR IN THE TREAT ASIA REPORT, A BIMONTHLY E-NEWSLETTER, AND ON TREAT ASIA'S WEBSITE, WWW.TREATASIA.ORG.

## 14TH ANNUAL NETWORKING MEETING

THE 2014 TREAT ASIA ANNUAL NETWORK MEETING TOOK PLACE OCTOBER 8-12 IN SIEM REAP, CAMBODIA. OVER 100 PARTICIPANTS ASSEMBLED FOR A FIVE-DAY PROGRAM THAT INCLUDED SESSIONS ON TREAT ASIA'S ADULT (TAHOD) AND PEDIATRIC (TAPHOD) COHORT DATABASES; HEPATITIS C SCREENING AND TREATMENT STUDIES; A PEDIATRIC TREATMENT FAILURE AND RESISTANCE STUDY; AN AUDIO COMPUTER-ASSISTED SURVEY TO EVALUATE BEHAVIORAL RISK FACTORS, STIGMA, AND TREATMENT ADHERENCE AMONG HIV-POSITIVE ADOLESCENTS; AND THE TREAT ASIA NETWORK AS A WHOLE, INCLUDING ITS ADVOCACY AND EDUCATIONAL PROGRAMS. THE KIRBY INSTITUTE, UNSW, AUSTRALIA, WHICH SERVES AS THE NETWORK'S MAIN DATA MANAGEMENT AND BIOSTATISTICS CENTER, PROVIDED UPDATES ON RECENT AND CURRENT STUDIES. ADDITIONAL PARTICIPANTS INCLUDED REPRESENTATIVES FROM THE U.S. NATIONAL INSTITUTES OF HEALTH, VIIV HEALTHCARE, MERCK AND CO., AND ABBOTT MOLECULAR-ALL RESEARCH SPONSORS AND PARTNERS FOR TREAT ASIA'S WORK IN THE ASIA-PACIFIC REGION.

## INTERNATIONAL AIDS SOCIETY CONFERENCE

TREAT ASIA WAS WELL REPRESENTED AT THE EIGHTH ANNUAL INTERNATIONAL AIDS

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SOCIETY (IAS) CONFERENCE ON HIV PATHOGENESIS, TREATMENT AND PREVENTION IN JULY 2015 IN VANCOUVER, CANADA. TREAT ASIA NETWORK MEMBER DR. THANYAWEE PUTHANAKIT, FROM HIV-NAT IN BANGKOK, GAVE A PRESENTATION TITLED "COMORBIDITIES IN CHILDREN AND ADOLESCENTS." THE TREAT ASIA NETWORK STUDY "TREATMENT AND RESISTANCE OUTCOMES OF ASIAN CHILDREN ON SECOND-LINE ANTIRETROVIRAL THERAPY" WAS PRESENTED AT THE PAEDIATRICS: GROWING UP ON ART SESSION. A PANEL ON THE TRANS-PACIFIC PARTNERSHIP FEATURING AMFAR SENIOR RESEARCH ADVISOR BRIAN HONERMANN ACCOMPANIED A SCREENING OF THE DOCUMENTARY "FIRE IN THE BLOOD" AT THE SCOTIABANK THEATRE VANCOUVER. THE EVENT, HELD EVERY OTHER YEAR, IS THE LARGEST OPEN SCIENTIFIC CONFERENCE ON HIV/AIDS.

#### TREATING HCV AMONG PEOPLE WHO INJECT DRUGS

IN DECEMBER 2014, TREAT ASIA, THE OPEN SOCIETY FOUNDATIONS (OSF), AND THE INTERNATIONAL NETWORK ON HEPATITIS IN SUBSTANCE USERS CO-HOSTED A SEMINAR ON TREATING HCV AMONG PEOPLE WHO INJECT DRUGS (PWID). THE THREE-DAY EVENT WAS ONE OF THE FIRST INITIATIVES IN THE ASIA-PACIFIC TO BRING LEADING PHYSICIANS WHO TREAT HCV TOGETHER WITH HCV TREATMENT ADVOCATES TO DISCUSS CHALLENGES AND SUCCESSFUL METHODS FOR PROVIDING QUALITY HEPATITIS C TREATMENT TO PEOPLE WHO USE DRUGS. THE 35 SEMINAR PARTICIPANTS CAME FROM 11 COUNTRIES IN ASIA AND EASTERN EUROPE-THE TWO REGIONS WITH THE LARGEST NUMBERS OF PWID.

## PROGRAM SERVICE ACCOMPLISHMENTS (3) LINE 4C: EDUCATION AND INFORMATION: AMFAR SEEKS TO TRANSLATE AND DISSEMINATE INFORMATION ON IMPORTANT AIDS-RELATED RESEARCH, TREATMENT,

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PREVENTION, AND POLICY ISSUES FOR DIVERSE AUDIENCES AND TO INCREASE BROAD AWARENESS AND KNOWLEDGE OF THE PANDEMIC. AMFAR ALSO PUBLISHES A WIDE RANGE OF EDUCATIONAL MATERIALS, MAINTAINS AN INFORMATIVE WEBSITE, AND ENGAGES RESPECTED PUBLIC FIGURES, HIV/AIDS SCIENTISTS, AND POLICYMAKERS 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 45,000 PEOPLE; THE TREAT ASIA REPORT, AN E-MAIL NEWSLETTER DISTRIBUTED SIX TIMES A YEAR TO MORE THAN 4,000 READERS IN THE INTERNATIONAL HEALTH COMMUNITY; AND A MONTHLY E-MAIL NEWSLETTER DISTRIBUTED TO NEARLY 100,000 PEOPLE. THE FOUNDATION'S WEBSITE FEATURES NEWS, INTERVIEWS, BLOG POSTS, AND OTHER ORIGINAL ARTICLES COVERING SCIENCE, POLICY, THE GLOBAL EPIDEMIC, AND AMFAR PROGRAMS AND ACTIVITIES. THE WEBSITE ATTRACTS AN AVERAGE 30,000 VISITORS PER MONTH.

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 POLICYMAKERS, HEALTHCARE PROFESSIONALS, PEOPLE LIVING WITH HIV/AIDS, AND THE GENERAL PUBLIC.

SOCIAL MEDIA

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AMFAR VIGOROUSLY EXPANDED ITS PRESENCE IN THE SOCIAL MEDIA ARENA, REACHING LARGE NUMBERS OF PEOPLE, INCLUDING A YOUNGER DEMOGRAPHIC THAT IS OFTEN LESS EDUCATED ABOUT HIV AND THE AIDS EPIDEMIC. THE FOUNDATION REGULARLY ADDED CONTENT TO ITS FACEBOOK PAGE AND LIVE TWEETED AND POSTED IMAGES ON INSTAGRAM FROM FUNDRAISING AND PROGRAM EVENTS. AMFAR HAS 67,000 LIKES ON FACEBOOK, 35,400 TWITTER FOLLOWERS, AND MORE THAN 81,000 INSTAGRAM 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-RELATED PRESS COVERAGE. ARTICLES AND REPORTS INVOLVING AMFAR-MANY OF WHICH INCLUDED INTERVIEWS WITH AMFAR STAFF AND SPOKESPEOPLE-WERE CARRIED IN NUMEROUS MEDIA OUTLETS, INCLUDING THE NEW YORK TIMES, THE WALL STREET JOURNAL, THE WASHINGTON POST, AND THE HUFFINGTON POST, AND NEWS AGENCIES SUCH AS THE ASSOCIATED PRESS, CNN, BLOOMBERG NEWS, AND REUTERS.

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 CAMPAIGN CHAIR SHARON STONE.

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IN FY2015 SCARLETT JOHANSSON DONATED HER TIME TO RECORD A VOICEOVER FOR AN AMFAR VIDEO PROMOTING ITS COUNTDOWN TO A CURE FOR AIDS INITIATIVE. OTHER CELEBRITY SUPPORTERS INCLUDED AMFAR AMBASSADORS MILLA JOVOVICH AND MICHELLE YEOH, MILEY CYRUS, DITA VON TEESE, RIHANNA, JUSTIN TIMBERLAKE, TOM FORD, GWYNETH PALTROW, CHIARA FERRAGNI, RYAN MURPHY, LISA KUDROW, ROSE MCGOWAN, JAY ELLIS, EDDIE REDMAYNE, LEA MICHELE, MICHELLE RODRIGUEZ, ROSARIO DAWSON, WHOOPI GOLDBERG, CHRIS ROCK, AMFAR TRUSTEE HARRY BELAFONTE, NAOMI CAMPBELL, IMAN, HEIDI KLUM, BROOKE SHIELDS, COCO ROCHA, KATE MOSS, CHER, KYLIE MINOGIE, RICCARDO TISCI, ADRIEN BRODY, EVA LONGORIA, HARVEY KEITEL, HARVEY WEINSTEIN, LEONARDO DICAPRIO, ROBIN THICKE, RITA ORA, ANDREA BOCELLI, DEAN AND DAN CATEN, CHRIS TUCKER, MARIO TESTINO, CARINE ROITFELD, AISHWARYA RAI BACHCHAN, LAVERNE COX, ANDERSON COOPER, SANDRA BERNHARD, ANDY COHEN AND MR. ERAINWASH.

## PROGRAM SERVICE ACCOMPLISHMENTS (4)

LINE 4D: THE GMT 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 GMT INITIATIVE. THROUGH SMALL, TARGETED GRANTS TO GRASSROOTS GROUPS, AMFAR HAS EXPANDED ACCESS TO HIV EDUCATION AND PREVENTION SERVICES; SUPPORTED ADVOCACY AIMED AT INCREASING FUNDING FOR PREVENTION AND TREATMENT SERVICES; AND WORKED TO END THE STIGMA, DISCRIMINATION, AND VIOLENCE THAT THREATEN THE LIVES OF GMT AND FUEL THE SPREAD OF HIV/AIDS.

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IN JANUARY 2015, AMFAR SUPPORTED A STUDY AT INSTITUTO PESQUISA CLINICA EVANDRO CHAGAS (IPEC) IN RIO DE JANEIRO, BRAZIL, ONE OF 16 CLINICAL SITES PARTICIPATING IN THE OPPOSITES ATTRACT STUDY, AN ONGOING INTERNATIONAL STUDY THAT EXPLORES THE EFFECTIVENESS OF "TREATMENT AS PREVENTION" IN GAY MALE SERODISCORDANT RELATIONSHIPS (ONE SEXUAL PARTNER IS LIVING WITH HIV AND THE OTHER IS NOT). THE STUDY IS LED BY DR. BEATRIZ GRINSZTEJN, DIRECTOR OF THE STD/AIDS CLINICAL RESEARCH LABORATORY AT IPEC, WHO IS MONITORING AS MANY AS 70 GAY MALE SERODISCORDANT COUPLES IN BRAZIL AND EXAMINING HIV TREATMENT, VIRAL LOADS, AND HIV TRANSMISSION TO FIND OUT IF HIV INCIDENCE IS ASSOCIATED WITH WHETHER THE HIV-POSITIVE PARTNER IS ON ANTIRETROVIRAL THERAPY.

#### IMPLEMENTATION SCIENCE AWARDS

IN FY2015, THE FOCUS OF AMFAR'S GRANT MAKING THROUGH THE GMT INITIATIVE EVOLVED FROM THE DISTRIBUTION OF SMALL GRANTS TO COMMUNITY-BASED ORGANIZATIONS TO THE SUPPORT OF LARGER IMPLEMENTATION SCIENCE PROJECTS AIMED AT IDENTIFYING BARRIERS TO HIV TESTING, TREATMENT AND CARE, AND STUDYING THE IMPACT OF INNOVATIVE HIV SERVICE DELIVERY MODELS FOR GMT IN LOW- AND MIDDLE-INCOME COUNTRIES. AMFAR AWARDED \$2.6 MILLION OVER THREE YEARS TO SUPPORT THREE SUCH STUDIES.

DR. CHRIS BEYRER OF JOHNS HOPKINS UNIVERSITY IS LEADING A TEAM OF RESEARCHERS AND COMMUNITY-BASED SERVICES (IN COLLABORATION WITH THE INTERNATIONAL HIV/AIDS ALLIANCE MYANMAR) IN EVALUATING THE EFFECTIVENESS OF PROMISING INTERVENTIONS FOR GMT IN MYANMAR, WHERE INCREASED HIV

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TESTING AND TREATMENT OPPORTUNITIES ARE BECOMING AVAILABLE. THE RESEARCHERS WILL ASSESS THE EFFECTIVENESS OF HIV SELF-TESTING DONE IN THE PRIVACY OF ONE'S HOME, POINT-OF-CARE CD4 TESTING, AND THE USE OF "PEER NAVIGATORS" FAMILIAR WITH THE LOCAL HEALTH SYSTEM TO HELP THOSE NEWLY DIAGNOSED GAIN ACCESS TO HIV TREATMENT AND CARE.

IN LIMA, PERU, DR. JAVIER LAMA OF ASOCIACIÓN CIVIL IMPACTA SALUD Y EDUCACIÓN AND HIS TEAM AIM TO IMPROVE THE CONTINUUM OF CARE AMONG TRANSGENDER WOMEN BY USING AN INNOVATIVE MODEL THAT INTEGRATES HIV PREVENTION AND TREATMENT SERVICES WITH TRANSGENDER-AFFIRMING MEDICAL CARE. WORKING IN COLLABORATION WITH THE BOSTON-BASED FENWAY INSTITUTE AND TWO COMMUNITY GMT ORGANIZATIONS, IMPACTA AND EPICENTRO, DR. LAMA AND HIS TEAM WILL INTEGRATE ROUTINE CROSS-SEX HORMONE THERAPY INTO HIV AND SEXUALLY TRANSMITTED INFECTION PREVENTION, TESTING AND TREATMENT SERVICES, AND WILL IMPLEMENT HEALTH SERVICES AND PEER CASE MANAGEMENT FOR 200 TRANSGENDER WOMEN.

AND IN BANGKOK, THAILAND, DR. NITTAYA PHANUPHAK AND HER TEAM AT THE THAI RED CROSS AIDS RESEARCH CENTRE AIM TO SHOW HOW INNOVATIVE TECHNOLOGIES SUCH AS GMT-TARGETED WEBSITES USING ONLINE COUNSELING AND SUPPORT CAN BE UTILIZED TO INCREASE RATES OF HIV TESTING AND REFERRALS TO PREVENTION AND TREATMENT PROGRAMS. WORKING IN COLLABORATION WITH ADAM'S LOVE, A WEB-BASED HEALTH PLATFORM FOR GMT INDIVIDUALS, AND TWO COMMUNITY-BASED ORGANIZATIONS (SERVICE WORKERS IN GROUP/SWING AND THE RAINBOW SKY ASSOCIATION OF THAILAND), THE TEAM WILL COMPARE THE EFFECTIVENESS OF

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ONLINE SERVICES AND SUPPORT INTERVENTIONS WITH TRADITIONAL CLINIC-BASED HIV SERVICES, AND A HYBRID MODEL THAT COMBINES ELEMENTS OF BOTH STRATEGIES.

#### "IN ACTION" AWARDS

IN 2015 AMFAR SUPPORTED FIVE COMMUNITY-BASED ORGANIZATIONS IN AFRICA AND LATIN AMERICA IN CONDUCTING FORMALIZED EVALUATIONS OF THEIR EFFORTS TO IMPROVE HIV TREATMENT AND CARE AMONG GMT INDIVIDUALS AS PART OF THE GMT INITIATIVE'S 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.

AMFAR ALSO SUPPORTED FOUR YOUNG RESEARCHERS FROM BELIZE, CHINA, PAKISTAN, AND SOUTH AFRICA UNDERGOING FIVE MONTHS OF GRADUATE-LEVEL PUBLIC HEALTH STUDY AT THE CENTER FOR LGBT HEALTH RESEARCH OF THE GRADUATE SCHOOL OF PUBLIC HEALTH AT THE UNIVERSITY OF PITTSBURGH AS PART OF THE AMFAR HIV SCHOLARS PROGRAM. THE PROGRAM AIMS TO STRENGTHEN GMT COMMUNITY-BASED RESEARCH AND RESPONSES TO HIV, OFTEN IN AREAS WHERE LITTLE DATA ABOUT HIV AMONG GMT CURRENTLY EXIST AND WHERE STIGMA AND DISCRIMINATION DETER MANY GMT FROM SEEKING HIV TESTING AND SERVICES.

THE 2015 AMFAR HIV SCHOLARS INCLUDED SHERYAR KAZI WITH THE NAZ MALE HEALTH ALLIANCE, PAKISTAN; LIESL THERON, A CONSULTANT SUPPORTED BY GENDER DYNAMIX, SOUTH AFRICA; ERIKA CASTELLANOS FROM THE COLLABORATIVE NETWORK

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OF PERSONS LIVING WITH HIV (C-NET+), BELIZE; AND WEIBIN CHENG FROM THE CHINESE CENTER FOR DISEASE CONTROL AND PREVENTION AND GZTZ.ORG.

#### PUBLICATIONS

AS PART OF ITS EFFORTS TO RAISE AWARENESS AMONG GOVERNMENTS, DONORS, AND INTERNATIONAL NONGOVERNMENTAL ORGANIZATIONS ABOUT THE SPREAD OF HIV AMONG GMT INDIVIDUALS AND TO ADVOCATE FOR EFFECTIVE STRATEGIES TO ADDRESS IT, AMFAR PUBLISHES A RANGE OF REPORTS ON HIV AND GMT.

IN FY2015, THE FOUNDATION PUBLISHED LESSONS FROM THE FRONT LINES: TRANS HEALTH AND RIGHTS. THE REPORT, PRODUCED IN COLLABORATION WITH GLOBAL ACTION FOR TRANS EQUALITY (GATE), PROFILED 10 DYNAMIC COMMUNITY ORGANIZATIONS WITH STRONG TRANSGENDER LEADERSHIP IN NINE DIVERSE COUNTRIES-BOLIVIA, CHINA, THE DOMINICAN REPUBLIC, ECUADOR, EL SALVADOR, GEORGIA, PERU, SOUTH AFRICA, AND UKRAINE-THAT ARE WORKING HARD TO CHANGE THE STATUS QUO IN TRANSGENDER HEALTH AND RIGHTS.

WITH SUPPORT FROM THE ARCUS FOUNDATION, THE REPORT EXAMINED DATA ON ACCESS TO HEALTH SERVICES AND LEGAL PROTECTIONS FOR TRANSGENDER INDIVIDUALS IN DIFFERENT SETTINGS AND DETAILED HOW SOCIETAL STIGMA AND INSTITUTIONALIZED DISCRIMINATION COME TOGETHER TO CREATE NEARLY INSURMOUNTABLE CHALLENGES FOR THESE POPULATIONS AND THE ORGANIZATIONS THAT SERVE THEM. MORE IMPORTANTLY, HOWEVER, THE REPORT DESCRIBED HOW THESE GRASSROOTS GROUPS HAVE CONFRONTED, RESPONDED TO, AND IN SOME CASES SOLVED, MANY OF THE MYRIAD CHALLENGES THEY FACE. 2

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THE GMT INITIATIVE ALSO CREATED A SERIES OF FACT SHEETS IN ENGLISH, FRENCH, AND SPANISH ON EMERGING HIV PREVENTION TECHNOLOGIES THAT EXPLAIN EACH TECHNOLOGY AND SERVE AS A TOOL TO HELP GMT ADVOCATE FOR THE INTERVENTIONS' INCREASED AVAILABILITY WORLDWIDE.

## PROGRAM SERVICE ACCOMPLISHMENTS (5)

LINE 4D: 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 U.S. 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

IN MARCH 2015, AMFAR HELD A CONGRESSIONAL BRIEFING IN WASHINGTON, D.C., TO ILLUMINATE THE WORK THAT REMAINS TO BE DONE TO ACHIEVE AN AIDS-FREE GENERATION AMONG WOMEN AND GIRLS IN THE U.S. AND GLOBALLY. THE CAPITOL HILL BRIEFING DREW LEADERS FROM GOVERNMENT, ACADEMIA, AND THE NONPROFIT SECTOR, INCLUDING HOUSE DEMOCRATIC LEADER NANCY PELOSI, JEANNETTE KAGAME, FIRST LADY OF RWANDA AND COFOUNDER OF THE ORGANIZATION OF AFRICAN FIRST LADIES AGAINST HIV/AIDS, AND DR. DEBORAH BIRX, U.S. GLOBAL AIDS COORDINATOR.

THE PROGRAM ALSO ADDRESSED MEDICAL RESEARCH AIMED AT IMPROVING HIV PREVENTION FOR WOMEN. DR. SHARON HILLIER OF THE UNIVERSITY OF PITTSBURGH

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SCHOOL OF MEDICINE SHARED EXCITING PROGRESS ON FEMALE-CONTROLLED HIV PREVENTION METHODS, INCLUDING VAGINAL RINGS CONTAINING ANTIRETROVIRAL (ARV) MEDICINES, WHICH HAVE BEEN SHOWN TO REDUCE INFECTION RATES IN WOMEN 25 YEARS OF AGE AND OLDER.

OTHER ATTENDEES INCLUDED REPS. NITA M. LOWEY AND BARBARA LEE, DOUGLAS BROOKS, DIRECTOR OF THE WHITE HOUSE OFFICE OF NATIONAL AIDS POLICY, AND MARIA CUOMO COLE, CHAIRMAN OF HELP USA, WHICH PROVIDES HOUSING AND OTHER SERVICES TO THE HOMELESS.

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 1.2 MILLION PEOPLE ARE LIVING WITH THE VIRUS.

IN JULY 2015, AMFAR ISSUED A REPORT TITLED BOLSTERING STATE EFFORTS TO IMPLEMENT THE NATIONAL HIV/AIDS STRATEGY: KEY INDICATORS AND RECOMMENDATIONS FOR POLICYMAKERS AND COMMUNITY STAKEHOLDERS. THE REPORT OUTLINED RECOMMENDATIONS FOR HOW STATES ACROSS THE U.S. CAN IMPROVE THEIR HIV PREVENTION AND CARE RESPONSES. IT WAS RELEASED TO COINCIDE WITH THE WHITE HOUSE'S 2015 UPDATE TO THE STRATEGY.

IN FY2015, THE FOUNDATION ALSO PRODUCED ISSUE BRIEFS, FACT SHEETS, SPECIAL REPORTS, AND INFOGRAPHICS ON MULTIPLE CRITICAL ISSUES, INCLUDING ADDRESSING HIV AMONG WOMEN, BETTER RESPONDING TO HIV AMONG BLACK GAY MEN

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IN THE U.S., ADVOCATING HARM REDUCTION INTERVENTIONS TO PREVENT THE SPREAD OF HIV AMONG PWID, AND MAKING THE CASE FOR BETTER ACCESS TO HEPATITIS C TREATMENT.

#### KEY POPULATIONS

IN FEBRUARY 2015, AMFAR PUBLISHED AN ISSUE BRIEF SHOWING THAT EFFORTS TO ADDRESS THE HIV EPIDEMIC AMONG BLACK GAY MEN HAVE BEEN CONSISTENTLY INADEQUATE AND THAT IMMEDIATE STEPS MUST BE TAKEN TO REDUCE NEW HIV INFECTIONS AMONG THIS UNDERSERVED POPULATION. THE REPORT, TITLED HIV AND THE BLACK COMMUNITY: DO #BLACK (GAY) LIVES MATTER? DESCRIBED THE UNDERLYING FACTORS CONTRIBUTING TO ELEVATED INFECTION RATES AMONG BLACK MEN AND PROVIDED A LIST OF STEPS THAT CAN BE TAKEN TO MITIGATE THIS STARK AND PERSISTENT RACIAL DISPARITY.

IN CONJUNCTION WITH ITS CAPITOL HILL BRIEFING ON WOMEN AND HIV IN MARCH, AMFAR RELEASED A PAIR OF ISSUE BRIEFS ON WOMEN AND HIV/AIDS IN THE UNITED STATES AND AROUND THE WORLD. THE BRIEFS OUTLINED POLICY ACTION STEPS TO ACHIEVE AN AIDS-FREE GENERATION AND HELP MORE WOMEN LIVING WITH THE DISEASE IN THE U.S. TO SURVIVE AND THRIVE.

## HARM REDUCTION/SYRINGE SERVICES PROGRAMS

AS ONE OF THE EARLIEST SUPPORTERS OF COMPREHENSIVE HARM REDUCTION PROGRAMS FOR PEOPLE WHO INJECT DRUGS (PWID), INCLUDING SYRINGE EXCHANGE, AMFAR HAS PLAYED A LEADING ROLE IN ADVOCATING THE IMPLEMENTATION OF THESE LIFESAVING HIV PREVENTION PROGRAMS.

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IN APRIL 2015, AMFAR ISSUED A BRIEF TITLED PREVENTING HIV AND HEPATITIS C AMONG PEOPLE WHO INJECT DRUGS: PUBLIC FUNDING FOR SYRINGE SERVICES PROGRAMS MAKES THE DIFFERENCE. IN IT, AMFAR UNDERSCORED THE IMPORTANCE OF SYRINGE SERVICE PROGRAMS (SSPS) AS A HIGHLY EFFECTIVE TOOL IN THE FIGHT AGAINST THE SPREAD OF HIV AND HEPATITIS C. CEO KEVIN ROBERT FROST ALSO AUTHORED AN OP-ED ON THE ISSUE FOR CNN.COM.

ANOTHER ISSUE BRIEF PUBLISHED IN MAY AND TITLED A CLEAR CASE FOR SUPPORTING SYRINGE SERVICES PROGRAMS: NEW STUDY SHOWS RELATIONSHIP BETWEEN PUBLIC FUNDING AND LOWER HIV INCIDENCE, WAS BASED ON A STUDY THAT FOUND A RELATIONSHIP BETWEEN PUBLIC FUNDING OF SYRINGE SERVICES PROGRAMS, REDUCING HIV INCIDENCE (THE NUMBER OF NEW INFECTIONS IN A GIVEN YEAR), AND MAINTAINING ALREADY LOW HIV INCIDENCE AMONG PWID.

IN ITS HARM REDUCTION AND GLOBAL HIV EPIDEMIC REPORT, RELEASED IN SEPTEMBER 2015, AMFAR ASSESSED THE STATE OF HARM REDUCTION WORLDWIDE BY FOCUSING ON THE STEPS THAT FIVE SAMPLE COUNTRIES-KENYA, KYRGYZSTAN, NIGERIA, UKRAINE, AND VIETNAM-HAVE, OR HAVE NOT, TAKEN TO ADDRESS THE EPIDEMIC AMONG PWID.

## TREATMENT ACCESS

IN TRANS-PACIFIC PARTNERSHIP: CURBING ACCESS TO MEDICINES NOW AND IN THE FUTURE, AN ISSUE BRIEF PUBLISHED IN MAY 2015, AMFAR STRONGLY OPPOSED THE PROPOSED TERMS OF THE TRANS-PACIFIC PARTNERSHIP, WARNING THAT EXPANDING

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EXISTING INTELLECTUAL PROPERTY PROTECTIONS COULD RESULT IN A DECLINE IN GENERIC COMPETITION AND AN INCREASE IN DRUG COSTS, WHILE SETTING AN UNACCEPTABLE PRECEDENT FOR FUTURE FREE TRADE AGREEMENTS. TWO AGREEMENTS BEING NEGOTIATED THREATEN THE FUTURE AVAILABILITY OF AFFORDABLE GENERIC MEDICINES FOR DISEASES SUCH AS HIV/AIDS, CANCER, TUBERCULOSIS, AND HEPATITIS C, AND COULD UNDERMINE THE GLOBAL HEALTH RESPONSE IN DEVELOPING COUNTRIES.

IN A FEBRUARY 2015 POLICY BRIEF TITLED HEPATITIS C AND DRUG PRICING: THE NEED FOR BETTER BALANCE, AMFAR CALLED FOR STRUCTURAL CHANGES THAT ALTER THE PRICING INCENTIVES FOR PHARMACEUTICAL COMPANIES IN SUCH A WAY THAT THEY CANNOT CHARGE EXTORTIONATE PRICES FOR THEIR PRODUCTS, HOWEVER EFFECTIVE THEY MAY BE. NEW PHARMACEUTICAL BREAKTHROUGHS HAVE MADE CURING HEPATITIS C INFECTION EASIER AND MORE EFFECTIVE, BUT THEY HAVE BEEN PRICED AT AGGRESSIVELY HIGH RATES THAT BEAR NO RELATION TO THE COST OF RESEARCH AND DEVELOPMENT.

## GLOBAL HEALTH

IN FY 2015, AMFAR LAUNCHED ITS PEPFAR COUNTRY/REGIONAL OPERATIONAL PLAN DATABASE, A COMPREHENSIVE, NAVIGABLE DATABASE OF PEPFAR'S PLANNED FUNDING OF HIV/AIDS ACTIVITIES FROM 2007 TO 2014. PEPFAR (THE U.S. PRESIDENT'S EMERGENCY PLAN FOR AIDS RELIEF), ESTABLISHED IN 2003, IS THE LARGEST INTERNATIONAL PROGRAM RESPONDING TO THE GLOBAL HIV/AIDS EPIDEMIC AND THE LARGEST COMMITMENT ONE NATION HAS EVER MADE TO COMBAT A DISEASE INTERNATIONALLY. THE DATABASE ENABLES USERS TO ANALYZE PLANNED FUNDING

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DATA EXTRACTED FROM PEPFAR'S PUBLICLY RELEASED COUNTRY AND REGIONAL OPERATIONAL PLAN (COP/ROP) DOCUMENTS. IT'S DESIGNED TO HELP CIVIL SOCIETY ORGANIZATIONS, MINISTRIES OF HEALTH AND FINANCE, RESEARCHERS, AND OTHER STAKEHOLDERS TO ACCESS AND UNDERSTAND PEPFAR'S PROGRAMS AND PRIORITIES AT A DEEPER LEVEL THAN IS CURRENTLY POSSIBLE USING OTHER PLATFORMS.

## 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.

LINE 15 -AMFAR ("FOUNDATION FOR AIDS RESEARCH") UNDERTAKES A THOROUGH PROCESS TO ENSURE THAT THE COMPENSATION IT PAYS TO ITS TOP MANAGEMENT OFFICIAL AND ALL OF ITS OFFICERS AND KEY EMPLOYEES IS REASONABLE GIVEN

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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

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CONSUMING. THEREFORE, AMOUNTS REPORTED ON PART IX, LINE 1 WILL NOT TIE TO TOTAL GRANTS ON SCHEDULE I; AMOUNTS REPORTED ON PART IX, LINE 3 WILL NOT TIE TO TOTAL GRANTS ON SCHEDULE F.

OTHER CHANGES IN NET ASSETS FORM 990, SECTION XI, LINE 5 CHANGE IN VALUE OF THIRD PARTY TRUST......\$2,556

TOTAL LINE 9 \$2,556

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 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 FOUNDATION HAS SECURED APPROVAL FOR DOING BUSINESS AS (DBA) THE

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

- 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.

	ATTACHMENT 2		
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVIC	ES		
DESCRIPTION	GRANTS	EXPENSES	REVENUE
GMT INITIATIVE	1,231,676.	2,360,664.	0
PUBLIC POLICY	131,920.	2,043,887.	0

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		ACHMENT 2 (CONT'D)
FORM 990, PART III, LINE 4D - OTHER PROGRAM	<u>SERVICES</u>	
DESCRIPTION	GRANTS EXPENS	ESREVENUE
TOTALS	1,363,596. 4,404	,551. 0
FORM 990, PART VI, LINE 17 - STATES	ATTAC	HMENT 3
AL, AK, AR, CA, CO, CT,		
FL,GA,HI,IL,KS,KY,LA,ME,MD,MA,MI,		
MN,MS,NH,NJ,NM,NY,NC,OH,OK,OR,PA,		
RI,SC,TN,UT,VA,WV,WI,		
	ን ጥጥ አ ርገ	HMENT 4
	ATTAC	AMENI 4
990, PART VII- COMPENSATION OF THE FIVE HIGH	EST PAID IND. CONTRACTORS	
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NAME AND ADDRESS	DESCRIPTION OF SERVICE	S COMPENSATION
AAB PRODUCTION, INC. 64 ALLEN STREET, 5TH FLOOR NEW YORK, NY 10002	EVENTS PRODUCTION	556,354.
JOSH WOODS PRODUCTION 39 WEST 14TH STREET, SUITE 504 NEW YORK, NY 10011	EVENTS PRODUCTION	522,240.
EIDOLON COMMUNICATIONS, INC. 15 MAIDEN LANE, SUITE 1401 NEW YORK, NY 10038	DIRECT MAIL/CONSULT.	257,093.
CHANGING OUR WORLD, INC. 220 EAST 42ND STREET, 5TH FLOOR NEW YORK, NY 10017	PHILANTHROPIC ADVISO	210,000.
KING + COMPANY 101 FIFTH AVENUE, 8TH FLOOR NEW YORK, NY 10003	PUBLIC RELATIONS	194,450.

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