Our Mission: amfAR, The Foundation for AIDS Research, is dedicated to ending the global AIDS epidemic through innovative research.
amfAR’s revered Founding Chairman Mathilde Krim, Ph.D., died at her home on Long Island on January 15, 2018. She was 91.

Dr. Krim was at the forefront of philanthropic and scientific responses to HIV/AIDS long before the world fully understood its catastrophic global reach. In April 1983, along with Dr. Joseph Sonnabend and a small group of associates, Dr. Krim founded the AIDS Medical Foundation (AMF), the first private organization concerned with fostering and supporting AIDS research.

In 1985, AMF merged with a like-minded group based in California to form the American Foundation for AIDS Research (amfAR), which soon became the preeminent national nonprofit organization devoted to mobilizing the public’s generosity in support of trailblazing laboratory and clinical AIDS research, HIV prevention, and advocacy.

“Dr. Krim had such a profound impact on the lives of so many,” said amfAR Chief Executive Officer Kevin Robert Frost. “While we all feel a penetrating sadness at the loss of someone we loved so deeply, it is important to remember how much she gave us and the millions for whom she dedicated her life. There is joy to be found in knowing that so many people alive today literally owe their lives to this great woman.”

“AIDS has taught us a lesson that we should have learned long ago, namely that there is a high price to be paid whenever prejudice prevails over human solidarity.”

— Mathilde Krim, Ph.D.
RESEARCH

Countdown to a Cure for AIDS

In 2015, amfAR launched a multiyear $100 million investment strategy to support its Countdown to a Cure for AIDS initiative, which is aimed at developing the scientific basis for a cure by the end of 2020. To date, amfAR has awarded 73 Countdown grants totaling more than $47 million to support research conducted by more than 270 scientists working at 92 institutions in 16 countries. Structured to provide sustained support for a wide range of studies that advance both emerging and established ideas, the strategy comprises the following components:

► The amfAR Institute for HIV Cure Research was established in 2015 with a $20 million grant over five years to the University of California, San Francisco. Researchers at the Institute have been laying the groundwork for a complex clinical study employing a three-pronged approach to eradicating HIV. A therapeutic vaccine will be combined with an immune adjuvant—a drug often used to boost the efficacy of vaccines—that has been shown in clinical trials to have additional anti-HIV effects. The third component combines two broadly neutralizing antibodies, the source of much optimism in the cure field for their ability not only to kill viruses that are produced by infected cells, but also to direct the immune system to kill the very cells producing those viruses.

► Investment Grants, awarded over a four-year period, are aimed at recruiting the experience and expertise of scientists from outside the field of HIV. Grantees may have expertise in fields such as cancer, neuroscience, or inflammatory disease that can directly inform efforts to cure HIV. In February 2018, amfAR announced a pair of Investment grants totaling nearly $1 million to allow two collaborative teams of HIV researchers and bioengineers to continue amfAR-funded projects into a second phase.

In the first phase of their study, one pair of researchers—Drs. Hui Zhang and Weiming Yang of Johns Hopkins University in Baltimore—used mass spectrometry to identify molecules on the surface of cells that differentiate latent reservoirs from uninfected cells. In Phase II, they are determining whether these newly identified proteins are able to distinguish the reservoir in patient samples.

In Phase I of their project, the other pair—Drs. Kim Woodrow and Keith Jerome of the University of Washington in Seattle—formulated new drug combinations loaded onto nanoparticles targeting the latent HIV reservoir. The nanoparticles preferentially delivered latency reversing agents to CD4 T cells, which reawakened the reservoir. In phase II, the researchers are testing the loaded nanoparticles and measuring their effects on the reservoir in a preclinical study.

► Impact Grants of up to $2 million each over four years support the in-depth development of concepts already underpinned by preliminary data showing genuine potential for achieving a cure.
In September 2018, amfAR awarded grants totaling $828,000 to advance two critical areas of HIV cure research. Five grants support efforts to understand the mechanisms and predictors of post-treatment control, and three support researchers studying HIV-positive populations in low- and middle-income countries to look for differences in how the persistent viral reservoir forms and changes over time.

**ARCHE, the amfAR Research Consortium on HIV Eradication**, supports collaborative teams of scientists in the U.S. and around the world working on a range of HIV cure strategies. In September 2018, amfAR awarded $800,000 in new funding through ARCHE to six teams of researchers developing an ambitious gene therapy-based approach to curing HIV, launching a critical new phase of a study initiated in 2017.

In a three-pronged attack on the HIV reservoir, the researchers are employing broadly neutralizing antibodies, CAR stem cells—cells genetically reprogrammed to recognize and attack disease cells—and molecular scissors targeting the virus. The grant was supported in part by the Bill and Melinda Gates Foundation. The investigators are Dr. Hildegard Büning of Hannover Medical School, Germany; Dr. Keith Jerome of the University of Washington, Seattle; Dr. Hans-Peter Kiem of Fred Hutchinson Cancer Research Center, Seattle; Dr. Scott Kitchen of UCLA; Dr. Yasuhiro Takeuchi of University College London; Dr. Drew Weissman of University of Pennsylvania in Philadelphia; and Dr. Richard Wyatt of The Scripps Research Institute in La Jolla, CA.

**The Mathilde Krim Fellowships in Basic Biomedical Research** support bright young scientists advancing innovative solutions to HIV/AIDS. In October 2017, amfAR announced three new Krim Fellows: Dr. Daniela Monaco, at Emory University in Atlanta; Dr. Gabriel Ozorowski, at The Scripps Research Institute in San Diego; and Dr. Jonathan Richard, at the University of Montreal, Canada. Another Krim fellow, Dr. Yen-Ting Lai of the Vaccine Research Center/National Institutes of Health in Bethesda, MD, was announced in September 2018. Each fellow is awarded approximately $150,000 over two years.

**Published Research**

Research studies make the greatest impact on the HIV field and on the broader scientific community when they are published in scientific journals. In FY2018, a record 80 scientific publications resulted from amfAR-funded research.

**IciStem**

Created and funded by amfAR through its Countdown to a Cure for AIDS initiative, IciStem is a consortium of European researchers that has been working to replicate the case of the “Berlin patient.” The researchers are following a cohort of patients with cancer and HIV who have received, or soon will receive, a stem cell transplant. (The “London patient,” reported in March 2019 by IciStem researcher Dr. Ravi Gupta, was the first of the group’s patients to go into HIV remission and possibly the second person to have been cured of HIV.)

**HIV Cure Summit**

In November 2017, amfAR held its fourth annual HIV Cure Summit at UCSF. Participants included director of the amfAR Institute Dr. Paul Volberding; Institute board members Drs. Steven Deeks, Warner Greene, Satish Pillai, Peter Hunt, and Nadia Roan; Dr. Judith Auerbach of UCSF; and amfAR Vice President and Director of Research Dr. Rowena Johnston. Treatment activists and amfAR Institute community advisory board members Lynda Dee, Jeff Taylor, Loren Jones and Rob Newells—as well as HIV cure research participants Clark Hawley and Luis Canales—also shared their perspectives. The summit was organized around three panel discussions, which focused on potentially curative agents and strategies that are currently being developed and tested, and the relative merits of cure, i.e., total eradication of the virus, versus post-treatment control.

In June, amfAR awarded a new round of funding through ARCHE (see above) to advance the crucial work of IciStem. The award of approximately $1.5 million over two years enabled the researchers to embark on the next phase of their scientific journey. To determine whether any of the patients in the cohort had been cured, they would withdraw antiretroviral therapy to test for evidence of viral rebound, the recurrence of persistent and detectable virus, in a strategic analytical treatment interruption trial.

**Sex and the HIV Reservoir**

A groundbreaking study published in 2018 revealed that the female hormone estrogen has a significant effect on the persistent HIV reservoir. It suggests that women may respond differently than men to some curative interventions that are currently under investigation or, perhaps, that an effective cure for women could differ from a cure for men.

The study concludes that further investigations into sex differences in latency reversal and HIV persistence “are mandatory to extend the benefits of the HIV cure effort to all men and women impacted by the global epidemic.” Published in the *Proceedings of the National Academy of Sciences*, the findings are the most recent outgrowth of a multi-year amfAR investigation into sex differences in HIV.

Dr. Eileen Scully of Massachusetts General Hospital was awarded an amfAR grant along with Dr. Jonathan Karn of Case Western Reserve University to study sex differences in HIV.
PUBLIC POLICY

Informed by thorough research and analysis, amfAR is a highly respected advocate of rational and compassionate HIV/AIDS-related public policy. Through its Public Policy Office in Washington, DC, the Foundation advocates a wide range of policies to advance progress in combating and ending the HIV/AIDS epidemic in the U.S. and around the world.

amfAR advocates a strong commitment to HIV research and robust funding for the National Institutes of Health, as well as expanded access to affordable medicines for both HIV and hepatitis C (HCV). The policy office tracks budgetary decision-making in the U.S. and advocates for domestic, bilateral, and multilateral funding for HIV; and performs research on strategic and programmatic targets and progress reporting to ensure that programs are delivering services to all populations in need.

The Global Epidemic and the Power of Data

amfAR is a leading advocate for continued robust U.S. support for the global HIV response through critical programs such as PEPFAR—the U.S. President’s Emergency Plan for AIDS Relief—and the Global Fund to Fight AIDS, Tuberculosis and Malaria.

In 2018, amfAR launched a new website—mer.amfar.org—designed to support PEPFAR advocates by displaying data visualizations, maps, downloadable PDFs, district-level data, and implementing partner data, with descriptions of what each indicator means, how the results are measured, and how the data can be interpreted. The new website displays the full suite of programmatic data released by PEPFAR, including the targets and results for 30 monitoring and evaluation indicators.

The new data-driven site complements amfAR’s PEPFAR Country/Regional Operational Plans database—copsdata.amfar.org—which contains budget and target information from publicly released documents that enable advocates to better understand who is being funded by PEPFAR in their countries. It highlights funding and targeted results by program area, country, and organization for each year.

amfAR funded a study with Johns Hopkins University, gay social network Hornet, MSM-GF, and Emory University to compare the number of gay and bisexual men using Hornet or Facebook in various countries to UNAIDS population size estimates. A resulting infographic shows that the study produced a much more accurate estimate (triple the official estimate) of the number of men who have sex with men (MSM) in Tanzania. More accurate estimates help PEPFAR and the Global Fund set HIV prevention targets and budgets sufficient for the needs of key populations.

Funding and Policy Threats

In March 2018, amfAR published an infographic showing that the Trump Administration’s proposed FY2019 budget—including a 17% cut (of $800 million) in funding for PEPFAR—could disrupt the supply of lifesaving antiretroviral therapy to more than a million adults living with HIV, and lead to close to 100,000 new HIV infections and hundreds of thousands of preventable AIDS-related deaths.

In July, amfAR Vice President and Director of Public Policy Greg Millett coauthored a Lancet report warning that UNAIDS targets to end the HIV epidemic by 2030 can only be met with stronger combined health service integration and by incorporating HIV into global health policy. This report on the “dangerous complacency” threatening the global HIV response coincided with a UNAIDS report warning of new HIV infections increasing in some 50 countries, AIDS-related deaths not falling fast enough, and insufficient resources to sustain progress.

Also in July, amfAR published an updated issue brief outlining serious potential impacts on global AIDS funding of the Mexico City Policy, which has historically prohibited U.S. family planning funding for non-U.S. nongovernmental organizations performing or promoting abortion. The policy was revived and expanded by the Trump Administration in January 2017.

HIV and the Opioid Epidemic

amfAR is committed to reducing the risk of acquiring HIV and hepatitis C through the sharing of contaminated needles/syringes and advocating for harm reduction policies to improve outcomes for people who inject drugs.

The policy office maintains an interactive online database of epidemiological, policy, and funding data on opioid use, HIV, and hepatitis C. Maps from this highly effective advocacy tool have appeared in The New York Times and have been used in Congressional briefings and meetings, and at the National Academy of Sciences, as well as in local news broadcasts.

In January 2018, amfAR published an analysis in Health Affairs detailing the national availability of medication-assisted treatment (MAT) for opioid use disorder, specifically where drug treatment facilities offer several of the three currently available drugs. The authors report that many areas heavily affected by the opioid epidemic have no facilities that provide all three forms of MAT and accept Medicaid.

A subsequent infographic showed that nearly 30% of Americans live more than 10 miles from a facility providing MAT and nearly 80% live more than 10 miles from a syringe services program. At the Conference on Retroviruses and Opportunistic Infections in Boston in March, an amfAR poster showed that while there has been some progress in increasing access to syringe services facilities in vulnerable counties, overall access remains low.
In April 2018, amfAR published the report Toward an Effective Strategy to Combat HIV, Hepatitis C and the Opioid Epidemic: Recommendations for Policy Makers, which proposes a multifaceted approach to increase access to treatment, reduce HIV and HCV acquisition, and lower the risk of fatal drug overdoses.

amfAR also published an analysis in the American Journal of Public Health assessing the impact of Medicaid expansion on the opioid epidemic. The study found that that Medicaid expansion increased access to addiction treatment, and was not associated with higher opioid prescription rates.

Hepatitis C

Driven by rising rates of injection drug use, the incidence of hepatitis C (HCV) in the U.S. has tripled in the last five years. The amfAR policy office advocates for increased access to prevention and treatment services for people living with, or at risk for, HCV, and maintains a database of epidemiologic, policy, and funding data on opioid use, HIV, and HCV (opioid.amfar.org—see above).

Ending the Domestic HIV Epidemic

In July 2018, amfAR published a series of reports to advance the difficult process of developing and deploying long-acting HIV treatment and prevention products currently in the pipeline. Long-Acting HIV Treatment and Prevention Are Coming: Preparing for Potential Game Changers describes the critical issues (e.g., FDA review and approval, payer coverage, and access decisions) that must be navigated by policy makers to make these new products available for people living with HIV or vulnerable to infection.

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 treatments for HIV and its co-infections 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 20 pediatric sites throughout the region, which collaborate on a variety of projects. TREAT Asia scientists produced 20 publications in peer-reviewed medical journals in FY2018.

Gathering Critical Information

TREAT Asia pioneered the region’s first adult observational database for HIV/AIDS, which now includes anonymous data from nearly 10,000 patients at 21 clinical sites in 12 countries. The information gathered informs the development of more effective research and treatment programs and helps define treatment standards specific to HIV/AIDS in Asia. The TAHO-D-LITE database, an extension of TAHO-D, contains data from over 37,000 HIV-positive patients across 10 TREAT Asia network sites and aims to increase the scope of adult data collection by gathering a subset of core variables from all HIV-infected patients who have sought care at selected TAHO-D sites.

A Global Collaboration

Since 2006, TREAT Asia has managed the Asia-Pacific section of the International Epidemiology Databases to Evaluate AIDS (iDEA), a global collaboration established by the U.S. National Institute of Allergy and Infectious Diseases. In FY2018 iDEA funded many TREAT Asia studies, including (along with Viiv Healthcare) the third year of STAY (Study of Transitioning Asian Youth), which is documenting the experience of HIV-infected young adults who are transitioning from pediatric to adult care.

Since 2016 iDEA and Viiv Healthcare have also funded the TREAT Asia Study to Evaluate Resistance 2 (TASER-2) to improve assessment of virologic failure and associated HIV drug resistance in HIV-infected adults on second-line ART. The study’s goal is to better predict the need for third-line ART regimens in the region, as well as to facilitate advocacy efforts for inclusion of third-line options in national treatment guidelines and expansion of routine viral load testing capacities.

In FY2018 iDEA also funded the second year of GRADUATE: a Global fRAmework of Data collection Used for Adolescent HIV Transition Evaluation, which aims to improve how clinical and program data on adolescents living with HIV are organized and studied in resource-limited settings. Led by amfAR Vice President and TREAT Asia Director Dr. Annette Sohn and Dr. Mary-Ann Davies of the University of Cape Town, South Africa. GRADUATE is being conducted in Malawi, South Africa, and Thailand.
As part of TREAT Asia’s initiative to address the mental health concerns of adolescents living with HIV in Asia, an IeDEA-funded study begun in early 2018 is evaluating the prevalence and clinical course of depression and anxiety in Thai adolescents with HIV. Dr. Tavitiya Sudjaritruk of Chiang Mai University, Thailand, is leading the study.

Improving Care for Children

The TREAT Asia Pediatric HIV Observational Database (TApHOD) is a regional pediatric HIV study begun in 2006. It was modeled after the adult database and includes data from more than 6,400 children and adolescents at 18 clinical sites in Cambodia, India, Indonesia, Malaysia, Thailand, and Vietnam.

Empowering Youth Advocates

The second class of TREAT Asia’s Youth ACATA—Asia Community for AIDS Treatment and Advocacy—continued its two-year leadership training program in FY2018. With support from Viiv Healthcare’s Positive Action for Adolescents program, Youth ACATA has educated participants about HIV and antiretroviral therapy and connected them to other HIV-positive youth in the region. Its members have participated in global youth programs, including SPARK17 and the International AIDS Society’s Adolescent Treatment Coalition.

Helping Adolescents Transition to Adult Care

In January 2018, in collaboration with young people living with HIV, social workers, and pediatricians in the Asia-Pacific region, TREAT Asia developed tools to help providers manage the transition of adolescents from pediatric to adult HIV clinics. They include a flipchart, available in English and five regional languages, for use during provider-patient discussions. Production was supported by the Thai Red Cross AIDS Research Centre and Viiv Healthcare.

A presentation on these tools was included in trainings that TREAT Asia and regional partners conducted in Cambodia, Indonesia, Malaysia, Thailand, and Vietnam for clinicians who work with HIV-positive children and adolescents, to help them better prepare their patients for the move to adult care.

Addressing Adult Mental Health

In January 2018, TREAT Asia organized a think tank in Bangkok on mental health concerns in adults living with HIV in Asia. Like children and adolescents, adults living with HIV have a higher prevalence of anxiety and depression compared with their uninfected peers, and these issues have been inadequately studied and treated. The think tank brought together researchers, clinicians, and psychologists from across Asia and from Columbia University in New York City, who considered research, policy, and capacity development activities that might help address gaps in mental health management in HIV care settings in the region.

Advocating for HIV and Co-Infection Treatment Access

In October 2017, amfAR’s Public Policy Office and TREAT Asia organized a consultation in Bangkok with experts from local, national, regional, and international organizations in Asia, Europe, Africa, and North America to draft “essential standards” for voluntary licenses—arrangements whereby a patent holder allows others to manufacture, import, and/or distribute its patented drug.

In the same month, TREAT Asia and the international association Coalition PLUS began a partnership to improve hepatitis C diagnosis and treatment access in Asia through the Unitaid-funded “HIV/HCV drug affordability project.” The partnership’s goal is to build local movements towards implementing national treatment programs by engaging with local civil society organizations and policy makers.

In November and December 2017, TREAT Asia organized two trainings on hepatitis B and C and the importance of addressing these diseases in the context of HIV co-infection. The trainings, for community members, treatment advocates, and clinicians, focused on the World Health Organization (WHO) hepatitis B and C screening and treatment guidelines and on implementing them at the national level.

In collaboration with the WHO South East Asia and Western Pacific Regional Offices, TREAT Asia organized a roundtable discussion in Bangkok in September 2018 titled “Enhancing access to newer HIV and hepatitis C medicines.” Managers from intellectual property offices, national regulatory bodies, and HIV programs in nine Asian countries attended, along with representatives from the Clinton Health Access Initiative, Medicines Patent Pool, Drugs for Neglected Diseases initiative, and UNAIDS.

In June 2018, TREAT Asia produced a policy brief titled Hepatitis C: Policy Recommendations for Addressing a Growing Epidemic. The brief spells out specific steps that national governments should take to improve access to care and treatment.

Providing PrEP in the Philippines

In FY2018, Project PrEPYY, a two-year pilot project being conducted in Manila, the Philippines, completed enrollment and began evaluating community-based, peer-driven delivery of antiretroviral pre-exposure prophylaxis (PrEP). Project PrEPYY aims to curb the rapid spread of HIV among MSM and transgender individuals in the Philippines. amfAR is among several organizations involved in the study, a multiagency collaboration with experts from government, academia, and multilateral and nongovernmental organizations. Based on results from the first year of the project, the Philippines is expanding PrEP services to other parts of the country.
amfAR disseminates information on important HIV-related research, treatment, prevention, and policy issues for diverse audiences to increase awareness and knowledge of the pandemic. amfAR publishes a wide range of educational materials 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 HIV.

Educational Materials

amfAR produces periodicals in both print and electronic formats, including its newsletter Innovations, published twice a year and distributed to about 40,000 people; the TREAT Asia Report, an email 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 70,000 people. The Foundation’s websites—www.amfAR.org and www.curecountdown.org—feature news, interviews, and original articles covering HIV research, policy, the global epidemic, and amfAR programs and activities. The websites attract a combined average of 45,000 visitors per month.

amfAR also creates and distributes 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 public.

Epic Voices

In FY2018, amfAR added eight new Epic Voices to the original four posted on curecountdown.org. Launched in 2017, Epic Voices is an online video series aimed at reenergizing the response to HIV among millennial and LGBTQ communities. The goals of the campaign are to renew awareness of the persistent threat of HIV, underscore the urgent need to advance HIV research, and support amfAR’s leadership in the search for a cure. Along with activists and people living with HIV, the campaign features leading researchers and public health professionals.

Social Media

amfAR has 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. The Foundation regularly adds content to its Facebook page, live tweets from events, and posts images on Instagram from fundraising and programmatic events. amfAR has 73,000 likes on Facebook, 43,000 Twitter followers, and more than 155,000 Instagram followers.

Media Outreach


Celebrity Support

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, amfAR’s Founding International Chairman, and others have followed in her footsteps.

Heidi Klum was featured in amfAR’s public service awareness campaign about safe sex, which garnered significant media coverage. Other celebrity supporters included amfAR Ambassadors Milla Jovovich and Michelle Yeoh, Edward Enninful, Angela Missoni, Dean and Dan Caten, Kate Hudson, Donatella Versace, Katy Perry, Sienna Miller, Karolina Kurkova, Grace Jones, Ellie Goulding, Jason Derulo, Neymar Jr., Pierce Brosnan, Jean-Paul Gaultier, Kate Moss, Lee Daniels, Stefano Tonchi, Halsey, Taraji P. Henson, Alan Cumming, Whoopi Goldberg, Iman, Scarlett Johansson, Queen Latifah, Laura Linney, Julia Roberts, Tom Hanks, James Corden, Fergie, Charlize Theron, Adrien Brody, Jessica Chastain, Matt Bomer, Gwyneth Paltrow, Diana Ross, Katie Holmes, Uma Thurman, Zoe Saldana, Lea Michele, Michelle Rodriguez, Naomi Campbell, Jon Hamm, Eva Longoria, Chris Tucker, Jennifer Garner, Victoria Justice, and Carine Roitfeld.
All projects listed below were awarded funding during the period October 1, 2017, through September 30, 2018.

**amfAR RESEARCH CONSORTIUM ON HIV ERADICATION (ARCHE)**

Allogeneic stem cell transplant in HIV-1-infected individuals (third renewal)
Annemarie Wensing, MD, PhD
University Medical Center Utrecht, Utrecht, The Netherlands
Javier Martínez-Picado, PhD
AIDS Research Institute, IrsiCaixa, Barcelona, Spain
$1,560,000

**INVESTMENT GRANTS: BRINGING BIOENGINEERS TO CURE HIV—PHASE II**

Targeted nanocarriers to accelerate depletion of the HIV reservoir
Keith Jerome, MD, PhD
University of Washington
Seattle, WA
$500,000

Deciphering latency-associated sugar code to detect and eliminate latent reservoir
Weiming Yang, PhD
Johns Hopkins University
Baltimore, MD
$499,114

**MATHILDE KRIM FELLOWSHIPS IN BASIC BIOMEDICAL RESEARCH**

Impact of pre-adaptation on viral evolution and virus control in the newly infected individual
Daniela Monaco, PhD
Emory University
Atlanta, GA
$150,000

Exploiting dynamic conformational states of HIV-1 Env as targets for novel inhibitors
Gabriel Ozorowski, PhD
The Scripps Research Institute
La Jolla, CA
$150,000

Harnessing NK cell responses to eliminate HIV-1-infected cells
Jonathan Richard, PhD
Université de Montréal, Centre de Recherche du CHUM
Montreal, Canada
$150,000

**MATHILDE KRIM FELLOWSHIP GRANTS—PHASE II**

Identifying genetic determinants of latency establishment and maintenance
Judd Hultquist, PhD
Northwestern University
Chicago, IL
$76,416

A3G-induced virus evolution
Spyridon Stavrou, PhD
State University of New York at Buffalo
Amherst, NY
$50,000

Vaccines through the eyes of B cells
Marit van Gils, PhD
Academic Medical Center of the University of Amsterdam
Amsterdam, The Netherlands
$80,000

**MEETINGS AND CONFERENCES**

Advanced Course on HIV Pathogenesis, XIII Edition
Esper Kallás, MD, PhD
Fundação Faculdade de Medicina
São Paulo, Brazil
$15,000
All projects listed below were awarded funding during the period October 1, 2017, through September 30, 2018.

1Supported by National Institutes of Health cooperative agreement number U01AI069907 with funds from the National Institute of Allergy and Infectious Diseases, the Eunice Kennedy Shriver National Institute of Child Health and Human Development, the National Cancer Institute, the National Institute of Mental Health, and the National Institute on Drug Abuse

2Supported by National Institutes of Health grant number R01HD073972 funded by the Eunice Kennedy Shriver National Institute of Child Health and Human Development

3Supported with funds provided by ViiV Health Care

4Supported with funds provided by the Open Society Foundations

AUSTRALIA

University of New South Wales
Sydney
Matthew G. Law, PhD
IeDEA Asia-Pacific Research Collaboration: TREAT Asia HIV Observational Database & Australia HIV Observational Database $275,346

IeDEA Asia-Pacific Research Collaboration: TREAT Asia Pediatric HIV Observational Database & Australia HIV Observational Database $211,224

IeDEA Asia-Pacific Research Collaboration: Cancer Studies $95,982

AUSTRALIAN HIV RESEARCH COLLABORATION (AHOD) SITES

O’Brien Street Practice
Adelaide
William Donohue, MBBS $1,800

Sexual Health and HIV Service In Metro North Brisbane
Diane Rowling, MBBS, MTH, F(PhM), RACP, FACSHM $5,775

Cairns Sexual Health Service
Cairns
Darren Russell, MD $7,500

RPA Sexual Health Clinic
Camperdown
David Templeton, PhD $7,350

Melbourne Sexual Health Centre
Carlton
Tim Read, MBBS, DipVen, FRACGP, FAcChSM, EpDip $6,150

Monash Health - Clayton
Clayton
Ian Woolley, MBBS, FRACP $7,500

D.A. Ellis Pty Ltd
Coffs Harbour
David Ellis, MBBS $525

East Sydney Doctors
Darlinghurst
David Baker, MB, ChB, Dip Med (Sexual Health), DCH $6,225

St. Vincent’s Hospital Sydney Limited
Darlinghurst
David A. Cooper, MD $7,500

Taylor Square Private Clinic
Darlinghurst
Robert Finlayson, MBBS (Syd), Di $6,975

Northern Territory Dept of Health & Community Services, Sexual Health & Blood Borne Virus Program
Darwin
Manoji Gunathilake, MBBS, MD, FAcChSM $2,025

Gladstone Road Medical Centre
Highgate Hill
David Orth, MBBS, DIP Ven $6,225

Nepean Blue Mountains Local Health District, Blue Mountains Sexual Health and HIV Clinic Katoomba
Eva Jackson, MBBS, FAcChSM $2,175

Nepean Blue Mountains Local Health District, Nepean Sexual Health Clinic Kingswood
Eva Jackson, MBBS, FAcChSM $1,950

Sexual Health and AIDS Services (SHAIDS)
Lismore
David Smith, MBBS, DipVen, FAcChSM, GrapDip, BA $7,425

Victorian HIV Service, Infectious Diseases Department, The Alfred Hospital
Melbourne
Jennifer Hoy, MBBS $7,500

Sunshine Coast Hospital and Health Service
Nambour West
David Bowden, MBBS $7,500

Northside Clinic (Vic) Pty Ltd
North Fitzroy
Richard Moore, MBBS $7,500

Royal Perth Hospital
Perth
David Nolan, MBBS, FRACP, PhD $6,450

Prahran Market Clinic Pty Ltd
Prahran
Norman Roth, MBBS, FAcChSM $7,500

Holdsworth House Medical Practice
Sydney
Mark Bloch, MD $7,500

Sydney Sexual Health Centre, Sydney Hospital
Sydney
Rick Varma, MBBS, MRCP $6,600

Clinic 468, HNE Sexual Health, Hunter New England Local Health District
Tamworth
Nathan Ryder, MD $1,650

Illawarra Shoalhaven Local Health District
Warrawong
Katherine Brown, MD $1,875

CAMBODIA

National Center for HIV/AIDS, Dermatology & STDs / Cambodia National Institute of Public Health
Phnom Penh
Ly Penh Sun, MD, MSc
TREAT Asia HIV Observational Database (TAHOD) $20,800

TREAT Asia Pediatric HIV Observational Database (TApHOD) Site $25,000

CHINA

Beijing Ditan Hospital
Beijing
Fujie Zhang, MD, MSPH, PhD
TREAT Asia HIV Observational Database (TAHOD) $19,760

Queen Elizabeth Hospital
Hong Kong
Man Po Lee, MBBS
TREAT Asia HIV Observational Database (TAHOD) including NCD Data $23,920

INDIA

B.J. Government Medical College
Pune
Aarti Kinikar, MD, DCH; DNB; MRCP Pediatrics UK
TREAT Asia Pediatric HIV Observational Database (TApHOD) Site $20,000

Shashikala Sangle, MD
TREAT Asia HIV Observational Database (TAHOD) including NCD Data $23,712

Institute of Infectious Diseases
Pune
Sanjay Pujari, MD, AAHIVS, MBBS
TREAT Asia HIV Observational Database (TAHOD) including NCD Data $23,296

1Supported by National Institutes of Health grant number R01HD0073972 funded by the Eunice Kennedy Shriver National Institute of Child Health and Human Development

2Supported with funds provided by ViiV Health Care

3Supported with funds provided by the Open Society Foundations
Wide Angle Social Development Organization
Imphal
Rajkumar Nalinihanta
Improving HBV & HCV prevention & treatment access in Manipur—Phase V
$8,704

INDONESIA
Sanglah Hospital, Udayana University School of Medicine
Denpasar
Tuti Parwati Merati, MD, PhD
TREAT Asia Pediatric HIV Observational Database (TApHOD) Site
$23,296

Ketut Dewi Kumara Wati, MD
TREAT Asia Pediatric HIV Observational Database (TApHOD) Site
$7,500

Cipto Mangunkusumo General Hospital
Jakarta
Nia Kurniati, MD
TREAT Asia Pediatric HIV Observational Database (TApHOD) Site
$7,500

Evy Yunihastuti, MD, PhD
TREAT Asia HIV Observational Database (TAHOD) Site
$2,500

SOUTH KOREA
Yonsei University College of Medicine
Seoul
Jun Yong Choi, MD, PhD
TREAT Asia Pediatric HIV Observational Database (TApHOD) Site
$18,720

THAILAND
Chulalongkorn University
Bangkok
Thanawee Puthanakit, MD, MMBB, FRACP, FMM, FASC
TREAT Asia HIV Observational Database (TAHOD) Site
$15,000

Study of Transitioning Asian Youth (STAY) Cohort
Study Site
$4,763; $22,902 (supplement)

Prevalence and clinical course of mental health disorders among HIV-infected Thai adolescents
$8,310 (year 1); $8,457 (year 2)

HIV-NAT / Thai Red Cross AIDS Research Centre
Bangkok
Anchalree Avihingsanon, MD, PhD
TREAT Asia HIV Observational Database (TAHOD) Site
$24,960; $612 (supplement)
#### VIETNAM

<table>
<thead>
<tr>
<th>Hospital/Center</th>
<th>Location</th>
<th>Project Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bach Mai Hospital</td>
<td>Hanoi</td>
<td>Do Duy Cuong, MD, PhD; TREAT Asia HIV Observational Database (TAHOD) Site including NCD Data</td>
<td>$23,504</td>
</tr>
<tr>
<td>National Hospital of Pediatrics</td>
<td>Hanoi</td>
<td>Nguyen Van Lam, MD, MSc; TREAT Asia Pediatric HIV Observational Database (TApHOD) Site; Study of Transitioning Asian Youth (STAY) Cohort Study Site</td>
<td>$20,000</td>
</tr>
<tr>
<td>National Hospital of Pediatrics</td>
<td>Hanoi</td>
<td>Nguyen Van Kinh, MD, PhD; TREAT Asia HIV Observational Database (TAHOD) Site including NCD Data</td>
<td>$23,504</td>
</tr>
<tr>
<td>Children's Hospital 1</td>
<td>Ho Chi Minh City</td>
<td>Truong Huu Khanh, MD; TREAT Asia Pediatric HIV Observational Database (TAHOD) Site</td>
<td>$25,000</td>
</tr>
<tr>
<td>Children's Hospital 2</td>
<td>Ho Chi Minh City</td>
<td>Do Chau Viet, MD; TREAT Asia Pediatric HIV Observational Database (TApHOD) Site</td>
<td>$20,000</td>
</tr>
</tbody>
</table>

#### USA

<table>
<thead>
<tr>
<th>University</th>
<th>Location</th>
<th>Project Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Johns Hopkins University</td>
<td>Baltimore, CA</td>
<td>Vidya Mave, MD, MPH; Epidemiology of HIV/AIDS and associated comorbidities in a public antiretroviral treatment (ART) clinic in Pune, India</td>
<td>$212,982</td>
</tr>
<tr>
<td>Super Models for Global Health</td>
<td>Berkeley, CA</td>
<td>James Kahn, MD, MPH; CVD screening and management practices among HIV clinics in Asia—ieDEA</td>
<td>$20,000</td>
</tr>
</tbody>
</table>

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*Funded with support from the Ford Foundation

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The project listed below was awarded amfAR funding during the period October 1, 2017, through September 30, 2018.

**Increasing access to services for PLHIV who use drugs in the Philippines**

Project Director: Cara O'Connor

Sustained Health Initiatives of the Philippines, Mandaluyong City, Philippines

$24,989
## Financial Highlights
For the year ended September 30, 2018

### Public Support and Revenue
- **Public support**: $4,331,124
- **Special events**: $19,098,255
- **Planned giving**: $1,559,284
- **Government funding**: $5,761,067
- **Investment income and other revenue**: $1,221,687

**Total public support and revenue**: $31,971,417

### Expenses
- **Research**: $18,293,927
- **TREAT Asia**: $5,051,148
- **GMT Initiative**: $921,895
- **Public Policy**: $2,140,923
- **Public Information**: $4,141,818

**Total program services**: $30,549,711

- **Fundraising**: $6,014,275
- **Management and general**: $2,586,998

**Total supporting services**: $8,601,273

**Total expenses**: $39,150,984

**Change in net assets**: $(7,179,567)

**Net assets, beginning of year**: $59,730,246

**Net assets, end of year**: $52,550,679

## Statement of Financial Position

### Assets
- **Cash and investments**: $55,041,086
- **Pledges and receivables, net**: $7,088,076
- **Prepaid expenses and other assets**: $4,485,440
- **Furniture, equipment, and leasehold improvements, net**: $2,921,534

**Total Assets**: $69,536,136

### Liabilities
- **Accounts payable and accrued expenses**: $3,655,122
- **Grants and fellowships payable, net**: $2,768,840
- **Deferred support and refundable advances**: $8,596,427
- **Other long-term liabilities**: $1,965,068

**Total liabilities**: $16,985,457

**Total net assets**: $52,550,679

**Total liabilities and net assets**: $69,536,136
### Expenses

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fundraising</td>
<td>$6,014,275</td>
</tr>
<tr>
<td>Management and general</td>
<td>$2,586,998</td>
</tr>
<tr>
<td>Program</td>
<td>$30,549,711</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$39,150,984</strong></td>
</tr>
</tbody>
</table>

### Program Expenses

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Research</td>
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<td>$5,051,148</td>
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<td>$2,140,923</td>
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<tr>
<td>Public Information</td>
<td>$4,141,818</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$30,549,711</strong></td>
</tr>
</tbody>
</table>
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