

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

- ▶ Do not enter Social Security numbers on this form as it may be made public.
- ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2018

Open to Public Inspection

A For the **2018** calendar year, or tax year beginning **10/01, 2018**, and ending **09/30, 2019**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE FOUNDATION FOR AIDS RESEARCH			D Employer identification number 13-3163817
	Doing Business As AIDS RESEARCH FOUNDATION OR AMFAR			E Telephone number (212) 806-1600
	Number and street (or P.O. box if mail is not delivered to street address) 120 WALL STREET 13TH FLOOR		Room/suite	G Gross receipts \$ 67,171,723.
	City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10005-3908			
F Name and address of principal officer: KEVIN FROST 120 WALL STREET 13TH FLOOR, NEW YORK, NY 10005			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	J Website: ▶ WWW.AMFAR.ORG			H(c) Group exemption number ▶
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	L Year of formation: 1983		M State of legal domicile: NY	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: AMFAR IS DEDICATED TO ENDING THE GLOBAL AIDS EPIDEMIC THROUGH INNOVATIVE RESEARCH.	
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3 Number of voting members of the governing body (Part VI, line 1a)	3 12.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 12.
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5 94.
	6 Total number of volunteers (estimate if necessary)	6 0.
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.
b Net unrelated business taxable income from Form 990-T, line 34	7b 0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 42,784,390. Current Year 40,275,703.
	9 Program service revenue (Part VIII, line 2g)	0. 0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,668,073. 2,262,943.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-12,144,387. -11,197,256.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	32,308,076. 31,341,390.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	12,574,033. 10,109,752.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	11,259,330. 11,146,319.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	735,053. 747,847.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 5,823,450.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,468,481. 12,968,286.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	39,036,897. 34,972,204.
19 Revenue less expenses. Subtract line 18 from line 12	-6,728,821. -3,630,814.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 69,536,136. End of Year 64,157,103.
	21 Total liabilities (Part X, line 26)	16,985,457. 14,672,542.
	22 Net assets or fund balances. Subtract line 21 from line 20.	52,550,679. 49,484,561.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	TAXPAYER COPY	7/6/2020
	Signature of officer Bradley Jensen Chief Financial Officer	Date
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name SCOTT THOMPSETT	Preparer's signature	Date 7/6/2020	Check <input type="checkbox"/> if self-employed	PTIN P00741490
	Firm's name ▶ GRANT THORNTON LLP	Firm's EIN ▶ 36-605558		Phone no. 212-599-0100	
	Firm's address ▶ 757 THIRD AVENUE, 3RD FLOOR NEW YORK, NY 10017-2013				

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2018)

Application for Automatic Extension of Time To File an Exempt Organization Return

► **File a separate application for each return.**
► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Enter filer's identifying number, see instructions	
	Name of exempt organization or other filer, see instructions. THE FOUNDATION FOR AIDS RESEARCH	Employer identification number (EIN) or 13-3163817
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 120 WALL STREET 13TH FLOOR	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10005-3908	

Enter the Return Code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

BRADLEY JENSEN

• The books are in the care of ► 120 WALL STREET 13TH FLOOR NEW YORK NY 10005-3908

Telephone No. ► 212 806-1703 Fax No. ►

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until 08/15, 2019, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► calendar year 20__ or
► tax year beginning 10/01, 2017, and ending 09/30, 2018.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:

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? [] Yes [X] No

[] Yes [X] No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

[] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 15,340,994. including grants of \$ 8,045,603.) (Revenue \$ 0.)

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 GRANTEEES 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.

4b (Code:) (Expenses \$ 4,670,239. including grants of \$ 1,891,311.) (Revenue \$ 0.)

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. FOR FURTHER DETAILS, SEE SCHEDULE O.

4c (Code:) (Expenses \$ 4,097,084. including grants of \$ 0.) (Revenue \$ 0.)

PUBLIC INFORMATION: AMFAR SEEKS TO TRANSLATE AND DISSEMINATE INFORMATION ON IMPORTANT HIV-RELATED RESEARCH, TREATMENT, PREVENTION, AND POLICY ISSUES FOR DIVERSE AUDIENCES AND TO INCREASE AWARENESS AND KNOWLEDGE OF THE PANDEMIC. AMFAR 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 HIV. FOR FURTHER DETAILS, SEE SCHEDULE O.

4d Other program services (Describe in Schedule O.) ATTACHMENT 2 (Expenses \$ 2,317,480. including grants of \$ 172,838.) (Revenue \$ 0.)

4e Total program service expenses 26,425,797.

Part IV 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)? <i>If "Yes," complete Schedule A.</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	X	
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? <i>If "Yes," complete Schedule C, Part III.</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>	X	
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? <i>If "Yes," complete Schedule D, Part IV.</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>	X	
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	X	
b 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 "Yes," complete Schedule D, Part VII.</i>		X
c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		X
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? <i>If "Yes," complete Schedule D, Part IX.</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X.</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV.</i>	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>		X
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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions).	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II.</i>	X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various IRS requirements like grants, compensation, tax-exempt bonds, and business transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V. []

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, W-2G forms, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
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 94		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	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).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders 11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b		
c	Enter the amount of reserves on hand 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (12), 1b (12), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section 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 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 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 records

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

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BILL ROEDY CHAIRMAN OF THE BOARD	1.00 0.	X		X				0.	0.	0.
(2) CINDY RACHOFSKY VICE CHAIRMAN	1.00 0.	X		X				0.	0.	0.
(3) ARLEN H. ANDELSON SECRETARY	1.00 0.	X		X				0.	0.	0.
(4) RAYMOND F. SCHINAZI, PH.D. TREASURER (AS OF 03/19)	1.00 0.	X		X				0.	0.	0.
(5) MICHAEL J. KLINGENSMITH TREASURER (THRU 03/19)	1.00 0.	X		X				0.	0.	0.
(6) DAVID BOHNETT TRUSTEE	1.00 0.	X						0.	0.	0.
(7) ZEV BRAUN TRUSTEE (NON-VOTING)	1.00 0.	X						0.	0.	0.
(8) JONATHAN S. CANNO TRUSTEE (THRU 02/19)	1.00 0.	X						0.	0.	0.
(9) JAY ELLIS TRUSTEE	1.00 0.	X						0.	0.	0.
(10) AILEEN GETTY TRUSTEE	1.00 0.	X						0.	0.	0.
(11) T. RYAN GREENWALT TRUSTEE (AS OF 2/19)	1.00 0.	X						0.	0.	0.
(12) MICHELE V. MCNEILL, PHARM.D. TRUSTEE (NON-VOTING)	1.00 0.	X						0.	0.	0.
(13) EDWARD MILSTEIN TRUSTEE	1.00 0.	X						0.	0.	0.
(14) ALAN D. SCHWARTZ TRUSTEE	1.00 0.	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) MARIO STEVENSON ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(16) PHILL WILSON ----- TRUSTEE (AS OF 2/19)	1.00 ----- 0.	X						0.	0.	0.
(17) KEVIN FROST ----- CHIEF EXECUTIVE OFFICER	40.00 ----- 0.			X				480,408.	0.	93,432.
(18) BRADLEY JENSEN ----- ASSISTANT TREASURER, CFO	40.00 ----- 0.			X				268,290.	0.	62,167.
(19) ROWENA JOHNSTON ----- ASST SEC, VP, RESEARCH	40.00 ----- 0.			X				207,188.	0.	32,709.
(20) EDWARD DONNELLY ----- ASST TREASURER, CONTROLLER	40.00 ----- 0.			X				165,914.	0.	33,007.
(21) ERIC MUSCATELL ----- VICE PRESIDENT OF DEVELOPMENT	40.00 ----- 0.				X			219,278.	0.	34,529.
(22) ANNETTE SOHN ----- VICE PRESIDENT, TREAT ASIA PGM	40.00 ----- 0.				X			235,284.	0.	25,131.
(23) ANNMARIE SHANNAHAN ----- VICE PRESIDENT, PUBLIC INFO.	40.00 ----- 0.				X			237,680.	0.	45,538.
(24) GREGORIO MILLET ----- VICE PRESIDENT, PUBLIC POLICY	40.00 ----- 0.				X			186,211.	0.	56,072.
(25) ANDREW MCINNESS ----- DIRECTOR, PUBLICATIONS	40.00 ----- 0.					X		170,102.	0.	67,984.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								2,876,091.	0.	659,396.
d Total (add lines 1b and 1c)								2,876,091.	0.	659,396.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 28

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
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 **▶** 13

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A) Total revenue	(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 Federated campaigns	1a	90,281.				
	b Membership dues	1b					
	c Fundraising events	1c	27,896,470.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	6,017,798.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	6,271,154.				
	g Noncash contributions included in lines 1a-1f: \$		63,158.				
	h Total. Add lines 1a-1f		40,275,703.				
	Program Service Revenue	2a _____	Business Code				
b _____							
c _____							
d _____							
e _____							
f All other program service revenue							
g Total. Add lines 2a-2f				0.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts).			1,492,677.			1,492,677.
	4 Income from investment of tax-exempt bond proceeds			0.			
	5 Royalties			45,654.			45,654.
		(i) Real	(ii) Personal				
	6a Gross rents						
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)			0.			
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		23,533,474.	1,455.				
	b Less: cost or other basis and sales expenses			22,764,663.			
	c Gain or (loss)			768,811.	1,455.		
	d Net gain or (loss)			770,266.			770,266.
	8a Gross income from fundraising events (not including \$ <u>27,896,470.</u> of contributions reported on line 1c). See Part IV, line 18	a		1,794,170.			
	b Less: direct expenses	b		13,056,389.			
c Net income or (loss) from fundraising events			-11,262,219.			-11,262,219.	
9a Gross income from gaming activities. See Part IV, line 19	a		0.				
b Less: direct expenses	b		0.				
c Net income or (loss) from gaming activities			0.				
10a Gross sales of inventory, less returns and allowances	a		25,294.				
b Less: cost of goods sold	b		9,281.				
c Net income or (loss) from sales of inventory			16,013.			16,013.	
Miscellaneous Revenue		Business Code					
11a STORE SALES		900099		1,859.			1,859.
b LIST RENTALS		900099		170.			170.
c MISCELLANEOUS INCOME		900099		1,267.			1,267.
d All other revenue							
e Total. Add lines 11a-11d				3,296.			
12 Total revenue. See instructions.				31,341,390.			-8,934,313.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	6,879,084.	6,879,084.		
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	3,230,668.	3,230,668.		
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	2,522,218.	1,837,955.	326,246.	358,017.
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	6,087,863.	4,025,651.	676,870.	1,385,342.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	378,518.	247,419.	43,798.	87,301.
9 Other employee benefits	1,637,261.	1,057,777.	229,336.	350,148.
10 Payroll taxes	520,459.	336,756.	65,216.	118,487.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	-4,808.	-9,150.	4,324.	18.
c Accounting	196,725.		196,725.	
d Lobbying	123,466.	123,466.		
e Professional fundraising services. See Part IV, line 17.	747,847.			747,847.
f Investment management fees	277,449.		277,449.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,366,933.	907,234.	34,283.	425,416.
12 Advertising and promotion	346,932.	309,763.	1,993.	35,176.
13 Office expenses	68,296.	41,715.	7,387.	19,194.
14 Information technology	205,549.	155,635.	21,016.	28,898.
15 Royalties	0.			
16 Occupancy	1,517,346.	1,086,453.	171,818.	259,075.
17 Travel	1,236,674.	476,254.	2,221.	758,199.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	510,065.	493,801.	4,190.	12,074.
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	446,165.	324,244.	51,322.	70,599.
23 Insurance	364,337.	264,776.	41,910.	57,651.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PROGRAM MATERIALS	2,230,607.	2,230,607.		
b PROGRAM TECHNICAL SUPPORT	836,863.	836,863.		
c BAD DEBT EXPENSE	631,150.	458,679.	72,601.	99,870.
d PRINTING	550,024.	121,353.	1,072.	427,599.
e All other expenses _____	2,064,513.	988,794.	493,180.	582,539.
25 Total functional expenses. Add lines 1 through 24e	34,972,204.	26,425,797.	2,722,957.	5,823,450.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> X if following SOP 98-2 (ASC 958-720)	518,072.	156,353.		361,719.

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	5,477,346.	1	6,826,913.
	2 Savings and temporary cash investments	691,606.	2	1,423,450.
	3 Pledges and grants receivable, net	699,100.	3	867,952.
	4 Accounts receivable, net	6,388,976.	4	6,339,168.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.	5	0.
	6 Loans and other receivables from other disqualified persons (as defined under section 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 organizations (see instructions). Complete Part II of Schedule L	0.	6	0.
	7 Notes and loans receivable, net	0.	7	0.
	8 Inventories for sale or use	425,761.	8	413,307.
	9 Prepaid expenses and deferred charges	1,960,938.	9	2,003,877.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 7,298,048.		
	b Less: accumulated depreciation	10b 4,497,236.	2,921,534.	10c 2,800,812.
	11 Investments - publicly traded securities	48,872,134.	11	42,758,997.
	12 Investments - other securities. See Part IV, line 11	0.	12	0.
	13 Investments - program-related. See Part IV, line 11	0.	13	0.
	14 Intangible assets	0.	14	0.
	15 Other assets. See Part IV, line 11	2,098,741.	15	722,627.
16 Total assets. Add lines 1 through 15 (must equal line 34)	69,536,136.	16	64,157,103.	
Liabilities	17 Accounts payable and accrued expenses	3,655,122.	17	2,769,299.
	18 Grants payable	2,768,840.	18	2,086,068.
	19 Deferred revenue	8,596,427.	19	7,947,789.
	20 Tax-exempt bond liabilities	0.	20	0.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	1,965,068.	25	1,869,386.
	26 Total liabilities. Add lines 17 through 25	16,985,457.	26	14,672,542.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	48,668,968.	27	45,254,909.
	28 Temporarily restricted net assets	3,509,128.	28	3,850,319.
	29 Permanently restricted net assets	372,583.	29	379,333.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	52,550,679.	33	49,484,561.
34 Total liabilities and net assets/fund balances	69,536,136.	34	64,157,103.	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI.

1	Total revenue (must equal Part VIII, column (A), line 12)	1	31,341,390.
2	Total expenses (must equal Part IX, column (A), line 25)	2	34,972,204.
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,630,814.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	52,550,679.
5	Net unrealized gains (losses) on investments	5	564,696.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	49,484,561.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	X	

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

THE FOUNDATION FOR AIDS RESEARCH

Employer identification number

13-3163817

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**.
Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	56,251,128.	58,810,206.	50,842,378.	42,784,390.	40,275,703.	248,963,805.
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.	56,251,128.	58,810,206.	50,842,378.	42,784,390.	40,275,703.	248,963,805.
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).						0.
6 Public support. Subtract line 5 from line 4						248,963,805.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4.	56,251,128.	58,810,206.	50,842,378.	42,784,390.	40,275,703.	248,963,805.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,652,775.	1,316,372.	1,354,513.	1,590,672.	1,538,331.	7,452,663.
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	2,103,589.	2,246,081.	1,819,001.	2,097,498.	1,822,760.	10,088,929.
11 Total support. Add lines 7 through 10						266,505,397.

12 Gross receipts from related activities, etc. (see instructions) **12**

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)).	14	93.42%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	93.34%

16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization.

b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here**. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

b 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here**. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 10 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)),	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .

b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
c 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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," 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).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11 a	
b A family member of a person described in (a) above?	11 b	
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>	11 c	

Section 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? <i>If "No," describe in Part VI 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.</i>	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 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>	1	

Section D. All Type III Supporting Organizations

	Yes	No
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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
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 "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3	

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
a 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? <i>If "Yes," then in Part VI identify those supported organizations and explain 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.</i>	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 "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a 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? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b		

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 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
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.	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) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
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 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 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			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
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 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 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-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2014	2015	2016	2017	2018	TOTAL
MISCELLANEOUS	12,014.	796.	3,788.	396.	1,267.	18,261.
LIST RENTALS	4,637.	9,117.	3,691.	2,793.	170.	20,408.
INVENTORY	212,642.	169,839.	13,222.	48,094.	25,294.	469,091.
SPECIAL EVENTS	1,871,885.	2,065,725.	1,797,050.	2,043,540.	1,794,170.	9,572,370.
STORE SALES	2,411.	604.	1,250.	2,675.	1,859.	8,799.
TOTALS	<u>2,103,589.</u>	<u>2,246,081.</u>	<u>1,819,001.</u>	<u>2,097,498.</u>	<u>1,822,760.</u>	<u>10,088,929.</u>

Schedule of Contributors

2018

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Go to www.irs.gov/Form990 for the latest information.

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

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization
- Form 990-PF 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, 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 for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), 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. Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization **THE FOUNDATION FOR AIDS RESEARCH**

Employer identification number
13-3163817

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 3,413,574.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 2,813,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 2,221,991.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 1,957,222.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 1,277,309.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 1,117,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization **THE FOUNDATION FOR AIDS RESEARCH**

Employer identification number
13-3163817

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 820,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 808,669.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE FOUNDATION FOR AIDS RESEARCH

Employer identification number

13-3163817

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization THE FOUNDATION FOR AIDS RESEARCH

Employer identification number
13-3163817

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ _____
Use duplicate copies of Part III if additional space is needed.

(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 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 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 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 ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2018

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

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

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) 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 for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2018

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
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.		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a. If zero or less, enter -0-			
i Subtract line 1f from line 1c. If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> 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)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
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:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e 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?		X	
i Other activities?	X		391,838.
j Total. Add lines 1c through 1i			391,838.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c 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	

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	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?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year.	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SEE PAGE 4

Part IV Supplemental Information (continued)

LOBBYING EXPENSES

PART II-B

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

THE FOUNDATION ENGAGED AN INDEPENDENT CONSULTANT TO ENGAGE IN LOBBYING ACTIVITIES ON ITS BEHALF. FEES PAID TO THIS CONSULTANT TOTALED \$123,466 IN THE FISCAL YEAR ENDING SEPTEMBER 30, 2019.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Employer identification number

THE FOUNDATION FOR AIDS RESEARCH

13-3163817

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. (2a Total number of conservation easements, 2b Total acreage restricted by conservation easements, 2c Number of conservation easements on a certified historic structure included in (a), 2d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register), 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1. b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2018

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other DONATED ITEMS, INVENTORY ETC.
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	684,111.	593,133.	541,231.	493,036.	490,979.
b Contributions	6,750.	4,100.	5,950.	7,293.	7,998.
c Net investment earnings, gains, and losses	10,507.	86,877.	45,952.	40,902.	-5,941.
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	701,368.	684,110.	593,133.	541,231.	493,036.

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment _____ %
 - b** Permanent endowment 54.0800 %
 - c** Temporarily restricted endowment 45.9200 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------------------------|-------------------------------------|
| (i) unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		2,542,490.	585,427.	1,957,063.
d Equipment		304,826.	303,430.	1,396.
e Other		4,450,732.	3,608,379.	842,353.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,800,812.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: 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.) ►		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(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" on 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" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) LONG TERM LEASE LIABILITY	1,572,406.	
(3) SEC. 457 RETIREMENT LIABILITY	296,980.	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►		1,869,386.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	31,715,076.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	564,696.	
b	Donated services and use of facilities	2b	87,894.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	-1,455.	
e	Add lines 2a through 2d	2e	651,135.	
3	Subtract line 2e from line 1	3	31,063,941.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	277,449.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	277,449.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	31,341,390.	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	34,781,194.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	87,894.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	-1,455.	
e	Add lines 2a through 2d	2e	86,439.	
3	Subtract line 2e from line 1	3	34,694,755.	
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	277,449.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	277,449.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	34,972,204.	

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

Part XIII Supplemental Information (continued)

ENDOWMENTS

PART V, LINE 4

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

RECONCILIATION OF REVENUE & EXPENSES

PART XI & PART XII, LINE 2D

LOSS/GAIN ON DISPOSAL OF FIXED ASSETS \$-1,455

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 IS EXEMPT FROM FEDERAL INCOME TAX UNDER IRC SECTION 501(C)(3), THOUGH IT IS SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE CODE. 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

Part XIII Supplemental Information (continued)

OBLIGATIONS IN JURISDICTIONS FOR WHICH IT WAS NEXUS; AND TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. AMFAR HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

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 F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

THE FOUNDATION FOR AIDS RESEARCH

Employer identification number

13-3163817

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) EAST ASIA AND THE PACIFIC	0.	0.	GRANTMAKING	N/A	1,885,978.
(2) EUROPE	0.	0.	GRANTMAKING	N/A	1,031,960.
(3) NORTH AMERICA	0.	0.	GRANTMAKING	N/A	75,000.
(4) SOUTH ASIA	0.	0.	GRANTMAKING	N/A	63,568.
(5) SUB-SAHARAN AFRICA	0.	0.	GRANTMAKING	N/A	174,161.
(6) EAST ASIA AND THE PACIFIC	1.	15.	PROGRAM SERVICES	THERAPEUTICS, TRAINING	1,855,984.
(7) EAST ASIA AND THE PACIFIC	0.	0.	FUNDRAISING	N/A	1,563,509.
(8) EUROPE	0.	0.	FUNDRAISING	N/A	8,408,176.
(9) SOUTH AMERICA	0.	0.	FUNDRAISING	N/A	290,459.
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	1.	15.			15,348,795.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	1.	15.			15,348,795.

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

Schedule F (Form 990) 2018

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	BASIC RESEAR	249,961.	WIRE TRANSFE			
(2)			EAST ASIA/PACIFIC	BASIC RESEAR	24,828.	WIRE TRANSFE			
(3)			EAST ASIA/PACIFIC	BASIC RESEAR	37,500.	WIRE TRANSFE			
(4)			EAST ASIA/PACIFIC	GMT INITIATI	46,153.	WIRE TRANSFE			
(5)			EAST ASIA/PACIFIC	TREAT ASIA	31,251.	WIRE TRANSFE			
(6)			EAST ASIA/PACIFIC	TREAT ASIA	20,848.	WIRE TRANSFE			
(7)			EAST ASIA/PACIFIC	TREAT ASIA	6,245.	WIRE TRANSFE			
(8)			EAST ASIA/PACIFIC	TREAT ASIA	19,995.	WIRE TRANSFE			
(9)			EAST ASIA/PACIFIC	TREAT ASIA	14,925.	WIRE TRANSFE			
(10)			EAST ASIA/PACIFIC	TREAT ASIA	15,450.	WIRE TRANSFE			
(11)			EAST ASIA/PACIFIC	TREAT ASIA	9,861.	WIRE TRANSFE			
(12)			EAST ASIA/PACIFIC	TREAT ASIA	21,208.	WIRE TRANSFE			
(13)			EAST ASIA/PACIFIC	TREAT ASIA	16,700.	WIRE TRANSFE			
(14)			EAST ASIA/PACIFIC	TREAT ASIA	20,490.	WIRE TRANSFE			
(15)			EAST ASIA/PACIFIC	TREAT ASIA	22,686.	WIRE TRANSFE			
(16)			EAST ASIA/PACIFIC	TREAT ASIA	21,688.	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 ▶ _____

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	TREAT ASIA	21,582.	WIRE TRANSFE			
(2)			EAST ASIA/PACIFIC	TREAT ASIA	23,528.	WIRE TRANSFE			
(3)			EAST ASIA/PACIFIC	TREAT ASIA	20,993.	WIRE TRANSFE			
(4)			EAST ASIA/PACIFIC	TREAT ASIA	21,236.	WIRE TRANSFE			
(5)			EAST ASIA/PACIFIC	TREAT ASIA	15,570.	WIRE TRANSFE			
(6)			EAST ASIA/PACIFIC	TREAT ASIA	23,212.	WIRE TRANSFE			
(7)			EAST ASIA/PACIFIC	TREAT ASIA	21,368.	WIRE TRANSFE			
(8)			EAST ASIA/PACIFIC	TREAT ASIA	21,228.	WIRE TRANSFE			
(9)			EAST ASIA/PACIFIC	TREAT ASIA	79,383.	WIRE TRANSFE			
(10)			EAST ASIA/PACIFIC	TREAT ASIA	7,500.	WIRE TRANSFE			
(11)			EAST ASIA/PACIFIC	TREAT ASIA	7,350.	WIRE TRANSFE			
(12)			EAST ASIA/PACIFIC	TREAT ASIA	6,450.	WIRE TRANSFE			
(13)			EAST ASIA/PACIFIC	TREAT ASIA	6,150.	WIRE TRANSFE			
(14)			EAST ASIA/PACIFIC	TREAT ASIA	6,600.	WIRE TRANSFE			
(15)			EAST ASIA/PACIFIC	TREAT ASIA	7,500.	WIRE TRANSFE			
(16)			EAST ASIA/PACIFIC	TREAT ASIA	7,425.	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 ▶ _____

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	TREAT ASIA	7,500.	WIRE TRANSFE			
(2)			EAST ASIA/PACIFIC	TREAT ASIA	7,500.	WIRE TRANSFE			
(3)			EAST ASIA/PACIFIC	TREAT ASIA	7,500.	WIRE TRANSFE			
(4)			EAST ASIA/PACIFIC	TREAT ASIA	235,373.	WIRE TRANSFE			
(5)			EAST ASIA/PACIFIC	TREAT ASIA	199,262.	WIRE TRANSFE			
(6)			EAST ASIA/PACIFIC	TREAT ASIA	79,357.	WIRE TRANSFE			
(7)			EAST ASIA/PACIFIC	TREAT ASIA	7,500.	WIRE TRANSFE			
(8)			EAST ASIA/PACIFIC	TREAT ASIA	7,500.	WIRE TRANSFE			
(9)			EAST ASIA/PACIFIC	TREAT ASIA	15,000.	WIRE TRANSFE			
(10)			EAST ASIA/PACIFIC	TREAT ASIA	14,988.	WIRE TRANSFE			
(11)			EAST ASIA/PACIFIC	TREAT ASIA	7,500.	WIRE TRANSFE			
(12)			EAST ASIA/PACIFIC	TREAT ASIA	24,500.	WIRE TRANSFE			
(13)			EAST ASIA/PACIFIC	TREAT ASIA	20,000.	WIRE TRANSFE			
(14)			EAST ASIA/PACIFIC	TREAT ASIA	10,705.	WIRE TRANSFE			
(15)			EAST ASIA/PACIFIC	TREAT ASIA	8,110.	WIRE TRANSFE			
(16)			EAST ASIA/PACIFIC	TREAT ASIA	7,154.	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 ▶ _____

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	TREAT ASIA	6,156.	WIRE TRANSFE			
(2)			EAST ASIA/PACIFIC	TREAT ASIA	7,928.	WIRE TRANSFE			
(3)			EAST ASIA/PACIFIC	TREAT ASIA	20,357.	WIRE TRANSFE			
(4)			EAST ASIA/PACIFIC	TREAT ASIA	7,820.	WIRE TRANSFE			
(5)			EAST ASIA/PACIFIC	TREAT ASIA	62,732.	WIRE TRANSFE			
(6)			EAST ASIA/PACIFIC	TREAT ASIA	9,242.	WIRE TRANSFE			
(7)			EAST ASIA/PACIFIC	TREAT ASIA	124,794.	WIRE TRANSFE			
(8)			EAST ASIA/PACIFIC	TREAT ASIA	8,999.	WIRE TRANSFE			
(9)			EAST ASIA/PACIFIC	TREAT ASIA	10,400.	WIRE TRANSFE			
(10)			EAST ASIA/PACIFIC	TREAT ASIA	7,900.	WIRE TRANSFE			
(11)			EAST ASIA/PACIFIC	TREAT ASIA	8,000.	WIRE TRANSFE			
(12)			EAST ASIA/PACIFIC	TREAT ASIA	5,832.	WIRE TRANSFE			
(13)			EAST ASIA/PACIFIC	TREAT ASIA	8,000.	WIRE TRANSFE			
(14)			EAST ASIA/PACIFIC	TREAT ASIA	8,000.	WIRE TRANSFE			
(15)			EAST ASIA/PACIFIC	TREAT ASIA	6,500.	WIRE TRANSFE			
(16)			EAST ASIA/PACIFIC	TREAT ASIA	5,625.	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 ▶ _____

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE	BASIC RESEAR	73,333.	WIRE TRANSFE			
(2)			EUROPE	BASIC RESEAR	45,000.	WIRE TRANSFE			
(3)			EUROPE	RESEARCH	141,077.	WIRE TRANSFE			
(4)			EUROPE	RESEARCH	365,143.	WIRE TRANSFE			
(5)			EUROPE	RESEARCH	60,000.	WIRE TRANSFE			
(6)			EUROPE	RESEARCH	429,468.	WIRE TRANSFE			
(7)			NORTH AMERICA (EXCL USA)	BASIC RESEAR	75,000.	WIRE TRANSFE			
(8)			SOUTH ASIA	TREAT ASIA	19,078.	WIRE TRANSFE			
(9)			SOUTH ASIA	TREAT ASIA	19,974.	WIRE TRANSFE			
(10)			SOUTH ASIA	TREAT ASIA	7,500.	WIRE TRANSFE			
(11)			SOUTH ASIA	TREAT ASIA	17,016.	WIRE TRANSFE			
(12)			SUB-SAHARAN AFRICA	BASIC RESEAR	24,998.	WIRE TRANSFE			
(13)			SUB-SAHARAN AFRICA	BASIC RESEAR	24,698.	WIRE TRANSFE			
(14)			SUB-SAHARAN AFRICA	BASIC RESEAR	24,998.	WIRE TRANSFE			
(15)			SUB-SAHARAN AFRICA	PUBLIC POLIC	30,000.	WIRE TRANSFE			
(16)			SUB-SAHARAN AFRICA	TREAT ASIA	64,351.	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 ▶ _____

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	TREAT ASIA	5,041.	WIRE TRANSFE			
(2)			SUB-SAHARAN AFRICA	TREAT ASIA	7,647.	WIRE TRANSFE			
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(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 **82.**

3 Enter total number of other organizations or entities

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.
Part III can be duplicated if additional space is needed.

(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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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 No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately 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; don't file with Form 990)* Yes 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? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes 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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

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

Part V **Supplemental Information**

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).

JURISDICTIONS. IN COLUMN D, THE ORGANIZATION HAS REPORTED THE BASIC PROGRAM THESE GRANTS SUPPORT; PLEASE REFER TO PART III FOR MORE INFORMATION ABOUT THESE PROGRAMS/INITIATIVES.

FOREIGN ACTIVITIES - STATUS OF GRANTEEES

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 82 CHARITIES SUPPORTED ARE PRESUMED TO BE THE EQUIVALENT OF U.S. CHARITIES.

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

2018

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

▶ Go to www.irs.gov/Form990 for instructions and the latest instructions.

Name of the organization

THE FOUNDATION FOR AIDS RESEARCH

Employer identification number

13-3163817

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

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

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 AAB PRODUCTIONS, INC.	EVENTS PRODUCTION		X	20,306,722.	550,543.	19,756,179.
2 JOSH WOODS PRODUCTION	EVENTS PRODUCTION		X	3,941,393.	361,400.	3,579,993.
3 EIDOLON COMM., INC.	DIRECT MAIL		X	850,329.	192,503.	657,827.
4 SANKY COMM., INC.	DIRECT MAIL		X	158,254.	135,463.	22,791.
5						
6						
7						
8						
9						
10						
Total				25,256,698.	1,239,909.	24,016,790.

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,

Part II Fundraising Events. Complete if the organization answered "Yes" on 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	(b) Event #2	(c) Other events	(d) Total events
		CANNES	DALLAS	18.	(add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	13,695,811.	5,526,933.	10,467,896.	29,690,640.
	2 Less: Contributions	13,244,311.	5,324,413.	9,327,746.	27,896,470.
	3 Gross income (line 1 minus line 2)	451,500.	202,520.	1,140,150.	1,794,170.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	1,071,064.	257,624.	442,774.	1,771,462.
	7 Food and beverages	382,908.	226,613.	730,059.	1,339,580.
	8 Entertainment	1,832,283.	248,752.	1,559,893.	3,640,928.
	9 Other direct expenses	3,657,242.	801,539.	1,845,638.	6,304,419.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				13,056,389.
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-11,262,219.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

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

- 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	13a	%
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:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming 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 ▶ \$ _____.
- c 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 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 IV 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).

SCHEDULE G, PART I

THE FOUNDATION FOR AIDS RESEARCH ACTUALLY PAID OUT \$747,847 IN FUNDRAISING EXPENSES FOR THE YEAR ENDING SEPTEMBER 30, 2019. THIS AMOUNT IS REPORTED ON PART IX, LINE 11(E). FOR PURPOSES OF SCHEDULE G, THE FOUNDATION IS REPORTING ALL AMOUNTS PAID TO THE CONSULTANTS LISTED ON PART I, REGARDLESS OF WHETHER SUCH AMOUNTS WERE PURE FUNDRAISING EXPENSES OR EVENT PRODUCTION COSTS. ON SCHEDULE G, THE TOTAL AMOUNT PAID TO THE

- 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	13a	%
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:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming 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 ▶ \$ _____.
- c 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 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 IV 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).

ORGANIZATIONS LISTED IS \$1,239,909. OF THAT \$1,239,909, ONLY \$747,847 WAS PAID FOR FUNDRAISING SERVICES, THE REMAINING \$492,062 WAS PAID FOR EVENT PRODUCTION SERVICES. IN THE INTERESTS OF CLARITY, THE FOUNDATION WOULD ALSO LIKE TO MAKE CLEAR THAT THE COMPENSATION REPORTED AS HAVING BEEN PAID 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

- 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	13a	%
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:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming 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 ▶ \$ _____.
- c 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 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 IV 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).

SCHEDULE O). IN COMPLIANCE WITH THE INSTRUCTIONS TO THE FORM 990, COMPENSATION REPORTED FOR PART VII (AND LISTED IN SCHEDULE O) IS REPORTED ON A CALENDAR YEAR BASIS. ACCORDINGLY, AMOUNTS ON PART VII AND SCHEDULE G WILL NOT RECONCILE.

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

THE FOUNDATION FOR AIDS RESEARCH

Employer identification number

13-3163817

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 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" on 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) 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 noncash assistance	(h) Purpose of grant or assistance
(1) THE ROCKEFELLER UNIVERSITY 1230 YORK AVENUE NEW YORK, NY 10065	13-1624158	501(C)(3)	13,394.				BASIC RESEARCH
(2) BETH ISRAEL DEACONESS MEDICAL CENTER 330 BROOKLINE AVENUE BOSTON, MA 02215	04-2103881	501(C)(3)	213,426.				BASIC RESEARCH
(3) REGENTS OF THE UNIVERSITY OF CA, SAN FRANCISCO 3333 CALIFORNIA ST, SAN FRANCISCO, CA 94143	94-6036493	501(C)(3)	374,968.				BASIC RESEARCH
(4) FOUNDATION FOR THE NATIONAL INST. OF HEALTH 9650 ROCKVILLE PIKE BETHESDA, MD 20814-3999	52-1986675	501(C)(3)	13,334.				BASIC RESEARCH
(5) MAYO CLINIC COLLEGE OF MEDICINE 200 FIRST STREET SW ROCHESTER, MN 55905	41-6011702	501(C)(3)	42,858.				BASIC RESEARCH
(6) OREGON HEALTH AND SCIENCE UNIVERSITY 3181 SW SAM JACKSON PARK PORTLAND, OR 97239	93-1176109	501(C)(3)	42,848.				BASIC RESEARCH
(7) BOSTON UNIVERSITY SCHOOL OF MEDICINE 650 ALBANY ST, EBRC 640 BOSTON, MA 02118	04-3314093	501(C)(3)	75,001.				BASIC RESEARCH
(8) FRED HUTCHINSON CANCER RESEARCH CENTER 1100 FAIRVIEW AVE N. SEATTLE, WA 98109	23-7156071	501(C)(3)	68,615.				BASIC RESEARCH
(9) UNIVERSITY OF MARYLAND AT BALTIMORE 725 LOMBARD ST S615 BALTIMORE, MD 21201	52-6002033	501(C)(3)	60,001.				BASIC RESEARCH
(10) FRED HUTCHINSON CANCER RESEARCH CENTER 1100 FAIRVIEW AVE N. SEATTLE, WA 98109	23-7156071	501(C)(3)	42,858.				BASIC RESEARCH
(11) INTERNATIONAL AIDS VACCINE INITIATIVE 125 BROAD ST., 9TH FL. NEW YORK, NY 10004	13-3870223	501(C)(3)	74,759.				BASIC RESEARCH
(12) WEILL MEDICAL COLLEGE OF CORNELL UNIVERSITY 1300 YORK AVENUE NEW YORK, NY 10065	13-1623978	501(C)(3)	145,534.				BASIC RESEARCH

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2018)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

THE FOUNDATION FOR AIDS RESEARCH

Employer identification number

13-3163817

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 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" on 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) 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 noncash assistance	(h) Purpose of grant or assistance
(1) THE SCRIPPS RESEARCH INSTITUTE 130 SCRIPPS WAY, LA JOLLA, CA 33458	33-0435954	501(C)(3)	75,000.				BASIC RESEARCH
(2) EMORY UNIVERSITY 1599 CLIFTON RD. ATLANTA, GA 30322-4250	58-0566256	501(C)(3)	75,000.				BASIC RESEARCH
(3) STATE UNIVERSITY OF NEW YORK AT BUFFALO 520 LE ENTRANCE, STE 211 AMHERST, NY 14228	91-6001537	501(C)(3)	16,666.				BASIC RESEARCH
(4) NORTHWESTERN UNIVERSITY SEARLE 6-512 320 E. CHICAGO, IL 60611	36-2167817	501(C)(3)	76,416.				BASIC RESEARCH
(5) THE WISTAR INSTITUTE 3601 SPRUCE STREET PHILADELPHIA, PA 19104	23-6434390	501(C)(3)	65,002.				BASIC RESEARCH
(6) THE BRIGHAM AND WOMEN'S HOSPITAL, INC. 75 FRANCIS STREET BOSTON, MA 02115	04-2312909	501(C)(3)	50,002.				BASIC RESEARCH
(7) HARVARD PILGRIM HEALTH CARE INSTITUTE 93 WORCESTER ST STE 100 WELLESLEY, MA 02481	04-2452600	501(C)(3)	66,540.				BASIC RESEARCH
(8) NATIONAL INSTITUTES OF HEALTH 40 CONVENT DRIVE BETHESDA, MD 20892		115	75,000.				BASIC RESEARCH
(9) JOHNS HOPKINS UNIVERSITY 733 N. BRDWAY MRB, #117 BALTIMORE, MD 21205	52-0595110	501(C)(3)	102,261.				GMT INITIATIVE
(10) BLACK AIDS INSTITUTE 1833 WEST EIGHTH #200 LOS ANGELES, CA 90057	95-4742741	501(C)(3)	25,000.				PREVENTION SCIENCE OUTREACH
(11) SCHWAB CHARITABLE FUND P.O. BOX 628298 ORLANDO, FL 32862-8298	31-1640316	501(C)(3)	45,000.				PREVENTION SCIENCE OUTREACH
(12) HEALTH GAP (GLOBAL ACCESS PROJECT) 81 PROSPECT STREET BROOKLYN, NY 11201	20-5053765	501(C)(3)	47,995.				PUBLIC POLICY

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2018)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

THE FOUNDATION FOR AIDS RESEARCH

Employer identification number

13-3163817

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 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" on 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) 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 noncash assistance	(h) Purpose of grant or assistance
(1) UNIVERSITY OF CALIFORNIA, SAN FRANCISCO 3333 CALIFORNIA ST SAN FRANCISCO, CA 94143	94-6036493	501(C)(3)	3,219,544.				RESEARCH
(2) HARVARD UNIVERSITY 29 OXFORD STREET CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	130,106.				RESEARCH
(3) REGENTS OF THE UNIVERSITY OF MINNESOTA 200 OAK STREET MINNEAPOLIS, MN 55455-2070	41-6007513	501(C)(3)	110,096.				RESEARCH
(4) UNIVERSITY OF WASHINGTON 4333 BROOKLYN AVE. SEATTLE, WA 98195-9472	91-6001537	501(C)(3)	283,681.				RESEARCH
(5) JOHNS HOPKINS UNIVERSITY 733 N. BRDWAY MRB, #117 BALTIMORE, MD 21205	52-0595110	501(C)(3)	333,487.				RESEARCH
(6) TRUSTEES OF THE UNIVERSITY OF PA 3451 WALNUT ST. PHILADELPHIA, PA 19104-6250	23-1352685	501(C)(3)	311,171.				RESEARCH
(7) JOHNS HOPKINS UNIVERSITY 733 N. BRDWAY MRB, #117 BALTIMORE, MD 21205	52-0595110	501(C)(3)	192,460.				RESEARCH
(8) THE BRIGHAM AND WOMEN'S HOSPITAL, INC. 75 FRANCIS STREET BOSTON, MA 02115	04-2312909	501(C)(3)	50,597.				RESEARCH
(9) JOHNS HOPKINS UNIVERSITY 733 N. BRDWAY MRB, #117 BALTIMORE, MD 21205	52-0595110	501(C)(3)	178,167.				TREAT ASIA
(10) MASSACHUSETTS GENERAL HOSPITAL 101 HUNTINGTON AVE. #300 BOSTON, MA 02199	04-2697983	501(C)(3)	30,000.				TREAT ASIA
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 34.

3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2018)

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

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

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

GRANTS AND ASSISTANCE

PART I, LINE 2

AMFAR PROVIDES GRANTS AND FELLOWSHIPS TO INDEPENDENT NOT-FOR-PROFIT ORGANIZATIONS THROUGH A PEER-REVIEW PROCESS. GRANT APPLICATIONS ARE FIRST REVIEWED BY THE FOUNDATION'S VOLUNTEER SCIENTIFIC ADVISORY COMMITTEE, WHICH COMPRISES RECOGNIZED EXPERTS IN THE MEDICAL, SCIENTIFIC, AND SOCIAL SCIENCES DISCIPLINES RELEVANT TO HIV AND AIDS. THE SCIENTIFIC ADVISORY COMMITTEE THEN SENDS ITS EVALUATIONS TO ONE OF 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

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

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

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

TRUSTEES. AFTER A PROGRAM COMMITTEE HAS COMPLETED ITS REVIEW OF THE APPLICATIONS, IT PRESENTS ITS FUNDING RECOMMENDATIONS TO AMFAR'S EXECUTIVE COMMITTEE AND/OR THE FULL BOARD OF TRUSTEES FOR FINAL APPROVAL AND FUNDING AUTHORIZATION. GRANTS AND FELLOWSHIPS ARE PAYABLE OVER A ONE-TO-THREE-YEAR PERIOD, AND ARE REVOCABLE AT AMFAR'S OPTION IF THE RECIPIENT'S PERFORMANCE OR USE OF FUNDS IS NOT CONSISTENT WITH THE TERMS OF THE GRANT OR FELLOWSHIPS. IN CERTAIN CASES, THE ACTUAL AMOUNTS PAID UNDER GRANTS AND FELLOWSHIP AWARDS MAY BE LESS THAN THE ORIGINAL AWARD IF THE RECIPIENT DOES NOT USE THE FULL AMOUNT AWARDED. THEREFORE, A RESERVE FOR UNEXPENDED GRANTS AND FELLOWSHIPS HAS BEEN RECORDED. SUBAWARDS ARE

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

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

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

GRANTS AWARDED TO NOT-FOR-PROFIT ORGANIZATIONS TO SUPPORT 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)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization

THE FOUNDATION FOR AIDS RESEARCH

Employer identification number

13-3163817

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
 - b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
 - c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
 - b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
 - b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2018

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 on 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 aren't 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 of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 KEVIN FROST CHIEF EXECUTIVE OFFICER	(i)	424,771.	0.	55,637.	37,750.	59,271.	577,429.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 BRADLEY JENSEN ASSISTANT TREASURER, CFO	(i)	268,290.	0.	0.	19,104.	43,063.	330,457.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 ROWENA JOHNSTON ASST SEC, VP, RESEARCH	(i)	207,188.	0.	0.	14,564.	18,145.	239,897.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 EDWARD DONNELLY ASST TREASURER, CONTROLLER	(i)	165,914.	0.	0.	16,384.	16,623.	198,921.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 ERIC MUSCATELL VICE PRESIDENT OF DEVELOPMENT	(i)	219,278.	0.	0.	16,384.	18,145.	253,807.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 ANNETTE SOHN VICE PRESIDENT, TREAT ASIA PGM	(i)	235,284.	0.	0.	17,391.	7,740.	260,415.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7 ANNMARIE SHANNAHAN VICE PRESIDENT, PUBLIC INFO.	(i)	237,680.	0.	0.	16,803.	28,735.	283,218.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8 GREGORIO MILLET VICE PRESIDENT, PUBLIC POLICY	(i)	186,211.	0.	0.	14,109.	41,963.	242,283.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9 ANDREW MCINNESS DIRECTOR, PUBLICATIONS	(i)	170,102.	0.	0.	12,256.	55,728.	238,086.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
10 ANTHONY ANCONA VICE PRESIDENT, HUMAN RESOURCE	(i)	192,931.	0.	0.	13,571.	18,145.	224,647.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
11 SUSAN DOSTER CHIEF TECHNOLOGY OFFICER	(i)	149,888.	0.	0.	11,132.	40,898.	201,918.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
12 JONATHAN KEY DIRECTOR, PHILANTHROPY	(i)	193,887.	0.	0.	14,040.	43,063.	250,990.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
13 SEBASTIAN GHEITH ASSOCIATE COUNSEL	(i)	169,030.	0.	0.	12,250.	55,728.	237,008.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

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 2018, AMFAR CONTRIBUTED
\$55,637 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 2018
EMPLOYER-FUNDED 457(F) CONTRIBUTION OF \$55,637.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

THE FOUNDATION FOR AIDS RESEARCH

Employer identification number

13-3163817

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles.				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	6.	63,158.	SALES PRICE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2018

JSA

8E1298 1.000

76004W 700J

V 18-8.6F

0176982-00003

PAGE 62

Part II **Supplemental Information.** 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)**

Department of the Treasury
Internal Revenue Service

Name of the organization

THE FOUNDATION FOR AIDS RESEARCH

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Employer identification number

13-3163817

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 RESEARCHERS 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.

COUNTDOWN TO A CURE FOR AIDS

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

IN 2015, AMFAR ANNOUNCED AN INVESTMENT STRATEGY OF UP TO \$100 MILLION 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. 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

ESTABLISHED IN 2015 WITH A \$20 MILLION GRANT OVER FIVE YEARS TO THE UNIVERSITY OF CALIFORNIA, SAN FRANCISCO, THE INSTITUTE IS THE CORNERSTONE OF AMFAR'S CURE RESEARCH.

- INNOVATION GRANTS

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

- IMPACT GRANTS

THESE 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.

- INVESTMENT GRANTS

AIMED AT RECRUITING THE EXPERIENCE AND EXPERTISE OF SCIENTISTS FROM OUTSIDE THE FIELD OF HIV, THESE \$1 MILLION GRANTS ARE AWARDED OVER A

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

FOUR-YEAR PERIOD. GRANTEEES MAY HAVE EXPERTISE IN FIELDS SUCH AS CANCER, NEUROSCIENCE, OR INFLAMMATORY DISEASE THAT CAN DIRECTLY INFORM EFFORTS TO 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 ENABLES AMFAR TO RESPOND QUICKLY TO EMERGING AND UNFORESEEN RESEARCH OPPORTUNITIES.

SINCE LAUNCHING THE COUNTDOWN TO A CURE FOR AIDS INITIATIVE, AMFAR HAS AWARDED 79 COUNTDOWN GRANTS TOTALING MORE THAN \$48 MILLION TO SUPPORT RESEARCH CONDUCTED BY 277 SCIENTISTS WORKING AT 95 INSTITUTIONS IN 15 COUNTRIES.

IMPACT GRANTS

IN SEPTEMBER 2018, AMFAR AWARDED GRANTS TOTALING \$828,000 TO ADVANCE TWO CRITICAL AREAS OF HIV CURE RESEARCH. FIVE GRANTS ARE SUPPORTING A RANGE OF EFFORTS TO UNDERSTAND THE MECHANISMS AND PREDICTORS OF POST-TREATMENT CONTROL, WHEREBY A SMALL NUMBER OF INDIVIDUALS ARE ABLE TO CONTROL THEIR HIV AFTER STOPPING TREATMENT. THREE ADDITIONAL GRANTEEES ARE STUDYING HIV-POSITIVE POPULATIONS IN LOW- AND MIDDLE-INCOME COUNTRIES TO LOOK FOR DIFFERENCES IN HOW THE PERSISTENT VIRAL RESERVOIR-THE PRINCIPAL BARRIER TO A CURE-FORMS AND CHANGES OVER TIME.

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

IN A COHORT OF POST-TREATMENT CONTROLLERS FROM ONE OF THE LARGEST HIV CLINICAL TRIAL NETWORKS IN THE WORLD, DR. JONATHAN LI OF BRIGHAM AND WOMEN'S HOSPITAL IN BOSTON IS USING NEXT-GENERATION GENOMIC SEQUENCING TO INVESTIGATE WHETHER CHARACTERISTICS OF THE VIRUS OR IMMUNOLOGIC RESPONSES CAN PREDICT POST-TREATMENT CONTROL.

ANOTHER GRANTEE, DR. GODWIN NCHINDA, A RESEARCHER IN YAOUNDE, CAMEROON, HAS IDENTIFIED A COHORT OF WOMEN WHO RECEIVED ANTIRETROVIRAL THERAPY (ART) DURING PREGNANCY AND CONTINUE TO CONTROL THEIR VIRUS DESPITE DISCONTINUING TREATMENT AFTER GIVING BIRTH. HE IS STUDYING THIS GROUP TO DETERMINE THE CAUSES OF THEIR VIRAL CONTROL.

THE MAJORITY OF WHAT IS KNOWN ABOUT HIV COMES FROM RESEARCH DONE IN HIGH-INCOME COUNTRIES, WHERE HIV SUBTYPE B PREDOMINATES. HOWEVER, SUBTYPE B ACCOUNTS FOR JUST 12% OF GLOBAL HIV INFECTIONS. DR. EDWARD KANKAKA OF THE RAKAI HEALTH SCIENCES PROGRAM IN KAMPALA, UGANDA, HAS SHOWN THAT NON-B HIV-POSITIVE UGANDANS HAD A SMALLER RESERVOIR OF PERSISTENT VIRUS COMPARED TO PEOPLE INFECTED WITH SUBTYPE B. DR. KANKAKA IS EXPANDING THESE STUDIES TO DETERMINE WHETHER FORMATION AND MAINTENANCE OF THE RESERVOIR DIFFER IN THESE POPULATIONS.

IN DURBAN, SOUTH AFRICA, DR. ALEX SIGAL IS EXAMINING THE INFLUENCE OF TUBERCULOSIS-A COMMON CO-INFECTION IN LOW- AND MIDDLE-INCOME COUNTRIES-ON THE HIV RESERVOIR. HE IS EXPLORING WHETHER THE IMMUNE RESPONSE TO TB ITSELF ALTERS HIV REACTIVATION-A KEY COMPONENT OF THE "SHOCK AND KILL"

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

APPROACH TO CURING HIV.

THE REMAINING GRANTEES ARE DR. MOHAMED ABDEL-MOHSEN OF THE WISTAR INSTITUTE, PHILADELPHIA, PA; DR. JOHN FRATER OF OXFORD UNIVERSITY, UK; DR. REENA RAJASURIAR OF THE UNIVERSITY OF MALAYA, KUALA LUMPUR, MALAYSIA; AND DR. RUI WANG OF HARVARD PILGRIM HEALTHCARE INSTITUTE, WELLESLEY, MA.

INVESTMENT GRANTS

IN FEBRUARY 2019, AMFAR ANNOUNCED NEW FUNDING TO RESEARCHERS USING CUTTING-EDGE TECHNOLOGY TO ADDRESS THE MAIN BARRIER TO AN HIV CURE: THE PERSISTENT RESERVOIRS OF VIRUS NOT CLEARED BY ART. TOTALING \$800,000, THIS NEW ROUND OF INVESTMENT GRANTS LAUNCHED THE CRITICAL THIRD PHASE OF A RESEARCH PROJECTS BEGUN IN 2017.

IN THE FIRST TWO PHASES OF HER STUDY, DR. HUI ZHANG OF JOHNS HOPKINS UNIVERSITY USED MASS SPECTROMETRY TO SCAN THE SURFACE OF HUMAN CELLS FOR PROTEINS-BIOMARKERS-THAT DISCRIMINATE BETWEEN LATENTLY INFECTED AND UNINFECTED CELLS. AFTER SCANNING A VARIETY OF CELL LINES, SHE IDENTIFIED 17 POTENTIAL TARGETS. IN PHASE THREE, DR. ZHANG IS TEAMING UP WITH HIV SCIENTIST DR. WEIMING YANG, ALSO OF JOHNS HOPKINS UNIVERSITY, TO DETERMINE IN A PRECLINICAL STUDY WHETHER SPECIFICALLY KILLING CELLS DISPLAYING ANY OF THESE 17 PROTEINS WILL ELIMINATE THE LATENT RESERVOIR.

ARCHE (AMFAR RESEARCH CONSORTIUM ON HIV ERADICATION)

IN SEPTEMBER 2018, AMFAR AWARDED \$800,000 IN NEW FUNDING TO SIX TEAMS OF

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

RESEARCHERS DEVELOPING AN AMBITIOUS GENE THERAPY-BASED APPROACH TO CURING HIV. THE AWARD LAUNCHED A CRITICAL NEW PHASE IN 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 INFECTED 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.

IN JUNE 2019, AMFAR AWARDED \$1.16 MILLION IN ARCHE GRANTS FOR A PAIR OF INNOVATIVE RESEARCH STUDIES PURSUING DIFFERENT ANGLES TO ATTACK HIV. DR. KEITH JEROME OF THE UNIVERSITY OF WASHINGTON, SEATTLE, WAS AWARDED \$344,000 FOR A PROJECT THAT AIMS TO ADVANCE A GENE THERAPY STRATEGY FOR CURING HIV. GENE THERAPY IS VERY PROMISING, BUT IT CARRIES RISKS AND IT IS EXTREMELY EXPENSIVE. AMFAR'S ARCHE-GT CONSORTIUM PLANS TO REDUCE COSTS BY DEVELOPING IN VIVO GENE THERAPY IN WHICH THE GENE-ENGINEERING TOOLS ARE INJECTED DIRECTLY INTO THE PATIENT USING VECTORS, WHICH FUNCTION AS "TROJAN HORSES". DR. JEROME'S TEAM PLANS TO COMPARE WHICH OF 11 VECTORS DELIVERS THE GENE-EDITING TOOLS MOST EFFECTIVELY TO THE VARIOUS SPECIFIC

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

TISSUES THAT ARE BEING TARGETED. THESE LEAD CANDIDATES WILL THEN BE USED IN FUTURE STUDIES OF COMBINATION IN VIVO GENE THERAPY INTERVENTIONS.

AND DR. JONATHAN LI OF BRIGHAM AND WOMEN'S HOSPITAL, BOSTON, WAS AWARDED \$815,000 FOR A PROJECT STUDYING POST-TREATMENT CONTROL OF THE VIRUS (SEE IMPACT GRANTS ABOVE). DR. LI AND HIS TEAM HAVE ASSEMBLED AN IMPRESSIVE COHORT OF POST-TREATMENT CONTROLLERS-INDIVIDUALS WHO EXHIBIT THE RARE ABILITY TO CONTROL THE VIRUS AFTER STOPPING ART-FROM ONE OF THE LARGEST HIV CLINICAL TRIAL NETWORKS GLOBALLY. THE RESEARCH TEAM IS GATHERING AND ANALYZING SAMPLES FROM THIS MULTINATIONAL POST-TREATMENT CONTROL COHORT AND WILL BE ABLE TO EMPLOY CUTTING-EDGE TOOLS TO INVESTIGATE WHETHER CHARACTERISTICS OF THE VIRUS OR IMMUNOLOGIC RESPONSES CAN PREDICT POST-TREATMENT CONTROL. DISCOVERING WHAT LEADS TO POST-TREATMENT CONTROL IN SOME PEOPLE COULD HELP TO ACHIEVE DURABLE ART-FREE CONTROL IN ALL PEOPLE LIVING WITH HIV.

MATHILDE KRIM FELLOWSHIPS

IN SEPTEMBER 2018, AMFAR ANNOUNCED THE RECIPIENT OF THE 2018 MATHILDE KRIM FELLOWSHIP IN BASIC BIOMEDICAL RESEARCH: DR. YEN-TING LAI OF THE VACCINE RESEARCH CENTER/NATIONAL INSTITUTES OF HEALTH IN BETHESDA, MD.

THE 2019 KRIM FELLOWS, DR. MAOLIN LU OF YALE UNIVERSITY IN NEW HAVEN, CT, AND DR. SHAHEED ABDULHAQQ, OF OREGON HEALTH AND SCIENCE UNIVERSITY IN PORTLAND, OR, WERE ANNOUNCED IN SEPTEMBER 2019. THE KRIM FELLOWSHIPS SUPPORT BRIGHT YOUNG SCIENTISTS ADVANCING INNOVATIVE SOLUTIONS TO HIV/AIDS. EACH FELLOW IS AWARDED APPROXIMATELY \$150,000 OVER TWO YEARS.

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

PROGRAM SERVICE ACCOMPLISHMENTS (1) CONT.

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 FY2019, 53 SCIENTIFIC PUBLICATIONS RESULTED FROM
AMFAR-FUNDED RESEARCH. EXAMPLES INCLUDE:

THE "LONDON PATIENT" IS POTENTIALLY CURED FOLLOWING A STEM CELL
TRANSPLANT

THE "BERLIN PATIENT"--TIMOTHY BROWN--WAS THE FIRST PERSON KNOWN TO HAVE
BEEN CURED OF HIV. DIAGNOSED WITH LEUKEMIA, HE RECEIVED A STEM CELL
TRANSPLANT FROM A DONOR WITH A RARE GENETIC MUTATION CONFERRING
RESISTANCE TO HIV INFECTION. AMFAR'S ICISTEM CONSORTIUM WAS ESTABLISHED
TO REPLICATE AND IDENTIFY THE MECHANISMS UNDERLYING HIS CURE, AND HAS
ASSEMBLED THE LARGEST COHORT OF PATIENTS WITH HIV WHO HAVE RECEIVED, OR
WILL SOON RECEIVE, STEM CELL TRANSPLANTS. IN THE MARCH 2019 ISSUE OF
NATURE, DR. RAVI GUPTA AND COLLEAGUES REPORTED ON THE "LONDON PATIENT,"
THE SECOND INDIVIDUAL POTENTIALLY CURED FOLLOWING A STEM CELL TRANSPLANT.
THIS CASE--ALONG WITH THE "DÜSSELDORF PATIENT," A THIRD POTENTIALLY CURED
INDIVIDUAL--IS PROVIDING CRITICAL NEW DATA TO COMPARE WITH THE "BERLIN
PATIENT."

THE ABILITY TO CONTROL HIV WITHOUT ANTIRETROVIRAL THERAPY RUNS IN
FAMILIES

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

CCR5, THE PRIMARY RECEPTOR ENABLING HIV TO INFECT CELLS, IS KNOWN FOR ITS ROLE IN THE CURE OF THE "BERLIN PATIENT" FOLLOWING A STEM CELL TRANSPLANT WITH DONOR CELLS BEARING A MUTATED CCR5 PROTEIN. IN THE APRIL 2019 ISSUE OF ELIFE, DR. STEVEN DEEKS AND COLLEAGUES FOUND ANOTHER WAY THAT CCR5 IS CONNECTED TO THE ABILITY TO CONTROL HIV WITHOUT ART. THE RESEARCHERS STUDIED 131 INDIVIDUALS—ABOUT HALF ELITE AND HALF VIREMIC CONTROLLERS, ABLE TO NATURALLY MAINTAIN VIRAL LOADS OF LESS THAN 50 OR 2000 COPIES, RESPECTIVELY—SOME OF WHOM HAVE BEEN INFECTED SINCE 1980. THEY DISCOVERED THAT CONTROL WAS RELATED TO A NATURAL AND PARTIAL RESISTANCE TO INFECTION IN CONTROLLERS AND NONCONTROLLERS. FURTHER ANALYSIS SHOWED THAT CONTROLLERS HAD LESS CCR5 PRESENT ON THEIR CELLS THAN NONCONTROLLERS, AND THEIR CELLS WERE LESS PERMISSIVE TO HIV INFECTION. FURTHERMORE, NATURAL RESISTANCE TO HIV WAS SHOWN TO BE INHERITED, AS MULTIPLE GENERATIONS OF FAMILY MEMBERS, MALE AND FEMALE, FROM ONE OF THE VIREMIC CONTROLLERS HAD A SIMILAR PROFILE OF LOWERED CCR5. STUDYING HOW AND UNDER WHAT CIRCUMSTANCES THESE CONTROLLERS MAKE LOWER LEVELS OF CCR5 MAY LEAD TO NEW DISCOVERIES THAT COULD INFORM INTERVENTIONS FOR A FUNCTIONAL CURE.

IDENTIFYING A BIOMARKER FOR THE 'ACTIVE' HIV RESERVOIR
IN THE MAY 2019 ISSUE OF PATHOGENS AND IMMUNITY, DRs. TIMOTHY HENRICH AND PETER HUNT, BOTH AT THE UNIVERSITY OF CALIFORNIA, SAN FRANCISCO, REPORTED ON EFFORTS TO SEE WHETHER THE PROTEIN CD32—PREVIOUSLY SHOWN TO BE A BIOMARKER FOR HIV ACTIVITY IN BLOOD CELLS—MIGHT ALSO DENOTE ACTIVITY IN THE TISSUES. THE RESEARCHERS EXAMINED GUT BIOPSIES FROM FOUR STUDY PARTICIPANTS WHOSE MEDICATION HAD REDUCED THE HIV IN THEIR BLOOD TO

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

UNDETECTABLE LEVELS. THEY NOTED THAT ABOUT FOUR IN EVERY 100,000 CELLS IN THE TISSUE HAD STARTED ACTIVITY OF THE PROVIRUS, MEANING THEY HAD BEGUN THE FIRST STEPS TOWARDS PRODUCING NEW VIRUSES. THE STUDY CONFIRMED THAT CD32 MAY NOT BE A BIOMARKER OF THE LATENT RESERVOIR, BUT MAY BE A BIOMARKER OF WHAT MIGHT BE CALLED THE "ACTIVE RESERVOIR"-PERSISTENT VIRUS THAT IS PROBABLY FIRST TO RE-SEED INFECTION WHEN ART IS STOPPED. THINKING ON THE NATURE OF THE RESERVOIR IS EVOLVING TO INCLUDE NOT ONLY LATENT, BUT ALSO ACTIVE RESERVOIR, AND BOTH ARE MAJOR BARRIERS TO A CURE. FINDING A WAY TO DIFFERENTIATE CELLS HARBORING ACTIVE RESERVOIR FROM HEALTHY, UNINFECTED CELLS WOULD BE AN IMPORTANT ADVANCE.

HIV CURE SUMMIT

IN DECEMBER 2018, AMFAR HELD ITS FIFTH ANNUAL HIV CURE SUMMIT AT THE UNIVERSITY OF CALIFORNIA, SAN FRANCISCO (UCSF), WHERE THE AMFAR INSTITUTE FOR HIV CURE RESEARCH IS BASED. LEADING AMFAR-FUNDED CURE RESEARCHERS DETAILED THEIR PROGRESS AND DISCUSSED THE SCIENTIFIC CHALLENGES THAT CONTINUE TO STAND IN THE WAY OF A CURE. MUCH OF THE DISCUSSION CENTERED ON ANALYTIC TREATMENT INTERRUPTION. THE ONLY MEANS CURRENTLY AVAILABLE FOR PROVING THAT A PERSON HAS BEEN CURED IS TO REMOVE ANTIRETROVIRAL THERAPY UNDER CLOSELY CONTROLLED AND MONITORED CONDITIONS.

DR. ROWENA JOHNSTON, AMFAR VICE PRESIDENT AND DIRECTOR OF RESEARCH, ELUCIDATED THE TWO TYPES OF CURE THAT RESEARCHERS ARE PURSUING: ERADICATION AND POST-TREATMENT CONTROL. IN ERADICATION, AN INDIVIDUAL COMPLETELY CLEARS HIV FROM HIS OR HER BODY; AND IN POST-TREATMENT CONTROL

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

SOME VIRUS REMAINS, BUT THE IMMUNE SYSTEM CAN CONTROL IT WITHOUT ART.

DR. STEVEN DEEKS, A PROFESSOR OF MEDICINE AT UCSF AND A LEAD INVESTIGATOR AT THE AMFAR INSTITUTE, EXPLAINED THE COMPLEX CLINICAL STUDY HE IS ABOUT TO EMBARK ON. IN THE STUDY, DR. DEEKS AND HIS TEAM WILL ADMINISTER A SERIES OF THERAPEUTIC VACCINES, BROADLY NEUTRALIZING ANTIBODIES, AND AN AGENT TO SHOCK THE VIRUS OUT OF ITS HIDING PLACES.

THE SUMMIT ALSO FEATURED A RANGE OF PERSPECTIVES FROM MEMBERS OF THE COMMUNITY ADVISORY BOARD FOR THE AMFAR INSTITUTE AND OTHER COMMUNITY LEADERS.

THINK TANKS

CONSISTENT WITH AMFAR'S COMMITMENT TO INVESTIGATE EVERY AVENUE THAT MAY LEAD TO A CURE, THE FOUNDATION REGULARLY HOSTS THINK TANKS THAT BRING TOGETHER LEADING INVESTIGATORS IN VARIOUS FIELDS.

IN MARCH 2019, AMFAR HOSTED A THINK TANK ON GENE THERAPY. EXPERTS GATHERED TO DISCUSS CUTTING-EDGE APPROACHES TO CURING HIV THAT AMFAR COULD PURSUE THROUGH ITS GENE THERAPY RESEARCH INITIATIVE, ARCHE-GT.

IN MAY 2019, MEMBERS OF AMFAR'S ICISTEM CONSORTIUM OF EUROPEAN RESEARCHERS THAT AIMS TO REPLICATE THE CASE OF "THE BERLIN PATIENT" GATHERED FOR A THINK TANK IN DUBLIN, IRELAND. ICISTEM WAS CREATED AND IS FUNDED BY AMFAR THROUGH ITS COUNTDOWN TO A CURE FOR AIDS INITIATIVE.

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

AND IN AUGUST 2019, AMFAR HOSTED A THINK TANK IN NEW YORK CITY ON THE CCR5 RECEPTOR AS A TARGET IN CURE RESEARCH. THE RESEARCHERS DISCUSSED WAYS TO USE CCR5 TO DEVELOP A MORE GENERALIZABLE CURE THAN ONE INVOLVING RISKY AND COSTLY STEM CELL TRANSPLANTS.

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 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 38 PUBLICATIONS IN PEER-REVIEWED MEDICAL JOURNALS IN 2019.

INTERNATIONAL AIDS DATABASE

TREAT ASIA MANAGES THE ASIA-PACIFIC SECTION OF THE INTERNATIONAL EPIDEMIOLOGY DATABASES TO EVALUATE AIDS (IEDEA), A GLOBAL COLLABORATION ESTABLISHED BY THE U.S. NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES. IN FY2019, THE IEDEA CONSORTIUM COMPLETED STAY (STUDY OF TRANSITIONING ASIAN YOUTH), WHICH AIMS TO DOCUMENT THE EXPERIENCE OF HIV-POSITIVE YOUNG ADULTS WHO ARE TRANSITIONING FROM PEDIATRIC TO ADULT CARE.

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

TREAT ASIA HIV OBSERVATIONAL DATABASE (TAHOD)

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

TAHOD LOW-INTENSITY TRANSFER

LAUNCHED IN 2014, TAHOD LOW-INTENSITY TRANSFER (TAHOD-LITE) CONTAINS DATA FROM OVER 37,000 HIV-POSITIVE PATIENTS ACROSS TEN TREAT ASIA NETWORK SITES. AS AN EXTENSION OF TAHOD, TAHOD-LITE AIMS TO INCREASE THE SCOPE OF ADULT DATA COLLECTION BY GATHERING A SUBSET OF CORE VARIABLES FROM THE ENTIRE COHORT OF HIV-INFECTED PATIENTS WHO HAVE SOUGHT CARE AT SELECTED TAHOD SITES.

TREAT ASIA PEDIATRIC HIV OBSERVATIONAL DATABASE

THE TREAT ASIA PEDIATRIC HIV OBSERVATIONAL DATABASE (TAPHOD) IS A REGIONAL PEDIATRIC HIV STUDY SET UP BY TREAT ASIA IN 2006. IT WAS MODELED AFTER THE ADULT DATABASE AND INCLUDES DATA FROM MORE THAN 6,400 CHILDREN AND ADOLESCENTS AT 17 CLINICAL SITES IN CAMBODIA, INDIA, INDONESIA, MALAYSIA, THAILAND, AND VIETNAM.

INTEGRATING HIV, MENTAL HEALTH, AND IMPLEMENTATION SCIENCE RESEARCH

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

IN MAY 2019, THE U.S. NATIONAL INSTITUTES OF HEALTH AWARDED A FIVE-YEAR, \$1.4 MILLION GRANT TO TREAT ASIA AND COLUMBIA UNIVERSITY TO ESTABLISH AN INNOVATIVE PLATFORM FOR INTEGRATING HIV, MENTAL HEALTH, AND IMPLEMENTATION SCIENCE RESEARCH IN THE ASIA-PACIFIC REGION. THE OBJECTIVE OF THE CHIMERA PROGRAM (CAPACITY DEVELOPMENT FOR HIV AND MENTAL HEALTH RESEARCH IN ASIA) IS TO ADDRESS THE DUAL AND INTERLINKED BURDENS OF HIV AND MENTAL HEALTH. CO-LED BY PRINCIPAL INVESTIGATORS DR. ANNETTE SOHN, AMFAR VICE PRESIDENT AND DIRECTOR OF TREAT ASIA, AND DR. MILTON WAINBERG, PROFESSOR OF CLINICAL PSYCHIATRY AT COLUMBIA UNIVERSITY AND THE NEW YORK STATE PSYCHIATRIC INSTITUTE, THE PROGRAM AIMS TO BUILD A TEAM WITHIN THE ASIA-PACIFIC WITH THE CAPACITY TO LEAD REGIONAL HIV-MENTAL HEALTH-IMPLEMENTATION SCIENCE RESEARCH THAT WILL INFORM PUBLIC HEALTH POLICY AND IMPROVE THE QUALITY OF CLINICAL CARE FOR PEOPLE LIVING WITH HIV.

THE PROGRAM IS NESTED WITHIN THE IEDEA (SEE ABOVE) ASIA-PACIFIC REGIONAL RESEARCH NETWORK THAT TREAT ASIA DIRECTS. CHIMERA WILL CREATE THE OPPORTUNITY TO BRING TOGETHER STELLAR TRAINING FACULTY FROM ACADEMIC CENTERS AND PUBLIC HEALTH AND DEVELOPMENT AGENCIES WITHIN THE REGION AND ACROSS THE WORLD, AND WILL BUILD ON EXISTING NIH-FUNDED MENTAL HEALTH RESEARCH BEING CONDUCTED THROUGH IEDEA ASIA-PACIFIC.

EMPOWERING YOUTH ADVOCATES

IN DECEMBER 2018, TREAT ASIA'S YOUTH ACATA-ASIA COMMUNITY FOR AIDS TREATMENT AND ADVOCACY-HELD A WORKSHOP IN BANGKOK. FOCUSED ON MODELS OF

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

SERVICE DELIVERY FOR KEY POPULATIONS, THE WORKSHOP INCLUDED SITE VISITS TO COMMUNITY-BASED OR KEY POPULATION-FRIENDLY HIV SERVICE PROVIDERS IN BANGKOK.

EXPANDING ACCESS TO HIV TREATMENT

IN 2018, THE WORLD HEALTH ORGANIZATION (WHO) RECOMMENDED DOLUTEGRAVIR (DTG)-BASED REGIMENS AS THE PREFERRED FIRST-LINE HIV TREATMENT FOR ADULTS AND ADOLESCENTS. BUT IN THE ASIA-PACIFIC REGION, ACCESS TO DTG-BASED REGIMENS REMAINS SEVERELY LIMITED. TO ACCELERATE DTG SCALE-UP IN THE REGION, TREAT ASIA AND THE CLINTON HEALTH ACCESS INITIATIVE ORGANIZED A WORKSHOP IN BANGKOK IN MARCH 2019 TO HELP NETWORKS OF PEOPLE LIVING WITH HIV AND OTHER TREATMENT ACCESS ADVOCATES BETTER UNDERSTAND ISSUES AROUND DTG ACCESS AND USE, AND COORDINATE FUTURE ADVOCACY EFFORTS. ATTENDED BY 25 PARTICIPANTS FROM NINE ASIAN COUNTRIES, THE WORKSHOP BUILT UPON EARLIER COLLABORATIVE EFFORTS WITH THE WHO SOUTH EAST ASIA AND WESTERN PACIFIC REGIONAL OFFICES TO ENHANCE ACCESS TO NEWER HIV AND HEPATITIS C MEDICATIONS.

IN APRIL 2019, GITEN KHWAIRAKPAM, TREAT ASIA'S PROJECT MANAGER FOR COMMUNITY AND POLICY, LED A TRAINING IN BANGKOK FOR REGIONAL COMMUNITY ADVOCATES AROUND THE USE OF DTG. AND THE FOLLOWING MONTH, TREAT ASIA CO-ORGANIZED A WEBINAR WITH THE WHO WESTERN PACIFIC OFFICE AROUND THE USE OF DTG AND ACCESS ISSUES IN THE REGION.

HELPING ADOLESCENTS TRANSITION TO ADULT CARE

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

THERE ARE INCREASINGLY LARGE NUMBERS OF YOUNG ADULTS IN THE ASIA-PACIFIC REGION WITH RECENTLY ACQUIRED INFECTIONS. IN 2017, 30% OF NEW HIV INFECTIONS IN THE ASIA-PACIFIC OCCURRED IN PEOPLE AGED 15-24 YEARS. CONTINUING ITS COMMITMENT TO HELPING ADOLESCENTS TRANSITION TO ADULT CARE, IN JANUARY 2019 TREAT ASIA HELD A THINK TANK ON YOUNG ADULT COHORT RESEARCH TO EXPLORE OPPORTUNITIES FOR A NEW COHORT STUDY FOCUSING ON YOUNG ADULTS.

ADVOCATING FOR CO-INFECTION TREATMENT ACCESS

IN JUNE 2019, TREAT ASIA HELD ITS ANNUAL REGIONAL ADVOCACY MEETING ON HEPATITIS C, HIV, AND TUBERCULOSIS TREATMENT IN BANGKOK, WITH CIVIL SOCIETY ORGANIZATIONS, CLINICAL CARE PROFESSIONALS, AND INTELLECTUAL PROPERTY EXPERTS. DURING THE YEAR, TREAT ASIA ALSO ATTENDED AND PRESENTED AT SEVERAL CONFERENCES ON HEPATITIS C TREATMENT ACCESS AND PARTNERED WITH CIVIL SOCIETY GROUPS AND FUNDERS ON ADVOCACY EFFORTS.

PUBLICATIONS

TREAT ASIA DIRECTOR DR. ANNETTE SOHN CO-AUTHORED AN OP-ED FOR ASIA-PACIFIC BIOTECH NEWS, TITLED "ASIA-PACIFIC: FALLING BEHIND IN THE FIGHT AGAINST HIV/AIDS." THE OP-ED, COAUTHORED BY A SINGAPOREAN INVESTIGATOR, DISCUSSED THE CURRENT STATE OF THE HIV EPIDEMIC IN ASIA, AND HIGHLIGHTED PRIORITY ISSUES FOR THE REGIONAL RESPONSE.

IN JANUARY 2019, TREAT ASIA PRODUCED THE FACT SHEET, WHO GUIDELINES FOR THE SCREENING, CARE, AND TREATMENT OF PERSONS WITH HEPATITIS C INFECTION.

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

THE FACT SHEET SUMMARIZES WHO GUIDELINES (UPDATED, JULY 2018) ON CARE AND TREATMENT OF HEPATITIS C VIRUS INFECTION, WHICH ARE AIMED AT HELPING POLICYMAKERS AND HEALTHCARE PROVIDERS IN LOW- AND MIDDLE-INCOME COUNTRIES ESTABLISH SCREENING, CARE, AND TREATMENT PROGRAMS.

AND IN FEBRUARY 2019, TREAT ASIA UPDATED THE BROCHURE, TREAT ASIA: A COOPERATIVE APPROACH TO COMBATING HIV IN ASIA AND THE PACIFIC, WHICH HIGHLIGHTS KEY FACTS AND FIGURES OF THE HIV EPIDEMIC IN THE REGION. THE BROCHURE MAKES THE CASE THAT TREAT ASIA'S UNIQUE CAPACITY TO BRING TOGETHER RESEARCHERS, CLINICIANS, ADVOCATES, AND POLICYMAKERS PLAYS AN IMPORTANT ROLE IN THE REGION'S RESPONSE TO HIV/AIDS, AND HAS BECOME A MODEL FOR REGIONAL COLLABORATION.

IN ADDITION, TREAT ASIA CONTINUED TO PUBLISH LAY-LANGUAGE ARTICLES ON HIV/AIDS RESEARCH, POLICY, AND COMMUNITY ISSUES FACING THE ASIA-PACIFIC AS A WHOLE. THE ARTICLES AND EDUCATIONAL PIECES APPEAR IN THE TREAT ASIA REPORT, A BIMONTHLY E-NEWSLETTER, AND ON TREAT ASIA'S WEBSITE, WWW.TREATASIA.ORG.

18TH ANNUAL NETWORK MEETING

THE 2018 TREAT ASIA ANNUAL NETWORK MEETING WAS HELD IN OCTOBER 2018 IN BANGKOK, THAILAND, WHERE MORE THAN 120 ADULT AND PEDIATRIC INVESTIGATORS, DONORS, AND PROGRAM PARTNERS GATHERED TO REVIEW PROGRESS ON THE NETWORK'S RESEARCH AGENDA, HEAR ABOUT REGIONAL HIV-RELATED POLICY PRIORITIES, AND PLAN FOR FUTURE INITIATIVES.

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

OTHER CONFERENCES

TREAT ASIA STAFF AND NETWORK INVESTIGATORS ATTENDED AND PRESENTED AT SEVERAL REGIONAL AND INTERNATIONAL CONFERENCES ON HIV-RELATED ISSUES.

EXAMPLES INCLUDE:

IAS 2019

TREAT ASIA HAD A STRONG PRESENCE AT THE 10TH INTERNATIONAL AIDS SOCIETY CONFERENCE ON HIV SCIENCE (IAS 2019) IN MEXICO CITY IN JULY. TREAT ASIA DIRECTOR DR. ANNETTE SOHN CO-CHAIRLED A SPECIAL SESSION WITH FORMER IAS PRESIDENT DR. CHRIS BEYRER OF JOHNS HOPKINS UNIVERSITY, CALLED "DATA LEADING THE WAY: DESIGNING RESPONSES BASED ON THE NUMBERS." DR. SOHN WAS ALSO A SESSION CO-CHAIR AT THE INTERNATIONAL WORKSHOP ON HIV PEDIATRICS, WHICH CONVENED IMMEDIATELY BEFORE IAS 2019. GITEN KHWAIRAKPAM, TREAT ASIA'S PROJECT MANAGER FOR COMMUNITY AND POLICY, CO-CHAIRLED THE 5TH INTERNATIONAL HIV/VIRAL HEPATITIS CO-INFECTION PRECONFERENCE.

PROGRAM SERVICE ACCOMPLISHMENTS (2) CONT.

APACC

TREAT ASIA WAS ALSO WELL REPRESENTED AT THE FOURTH ASIA PACIFIC AIDS & CO-INFECTIONS CONFERENCE (APACC), HELD IN JUNE 2019 IN HONG KONG. SEVERAL JUNIOR INVESTIGATORS AND PH.D. STUDENTS AFFILIATED WITH THE TREAT ASIA NETWORK GAVE ORAL AND POSTER PRESENTATIONS AT THE CONFERENCE. APACC IS A REGIONAL-LEVEL HIV RESEARCH CONFERENCE THAT PROVIDES OPPORTUNITIES FOR LOCAL CLINICIANS, STUDENTS, AND RESEARCHERS TO SUBMIT ABSTRACTS FOR PRESENTATION.

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

PROGRAM SERVICE ACCOMPLISHMENTS (3)

LINE 4C: PUBLIC INFORMATION:

AMFAR SEEKS TO TRANSLATE AND DISSEMINATE INFORMATION ON IMPORTANT HIV-RELATED RESEARCH, TREATMENT, PREVENTION, AND POLICY ISSUES FOR DIVERSE AUDIENCES AND TO INCREASE AWARENESS AND KNOWLEDGE OF THE PANDEMIC. AMFAR 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 HIV.

EDUCATIONAL MATERIALS

AMFAR PRODUCES A RANGE OF PERIODICALS IN BOTH PRINT AND ELECTRONIC FORMATS, INCLUDING ITS NEWSLETTER INNOVATIONS, PUBLISHED TWICE A YEAR AND DISTRIBUTED TO MORE THAN 40,000 PEOPLE; THE TREAT ASIA REPORT, 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 APPROXIMATELY 11,000 PEOPLE. IN 2019, AMFAR REMOVED OUTDATED ADDRESSES FROM ITS EMAIL LIST AND SIGNIFICANTLY IMPROVED ENGAGEMENT WITH ITS AUDIENCE. THE MONTHLY OPEN RATE INCREASED FROM AN AVERAGE OF ABOUT 10% TO 30%.

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 36,000 VISITORS PER MONTH. AMFAR ALSO

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

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.

PUBLIC POLICY

AMFAR'S PUBLIC INFORMATION TEAM WORKS CLOSELY WITH THE PUBLIC POLICY OFFICE (SEE ABOVE) TO PRODUCE A WIDE RANGE OF ISSUE BRIEFS, FACTS SHEETS, INFOGRAPHICS, AND REPORTS. IN 2019 IT ALSO WORKED WITH AN ANIMATION STUDIO TO PRODUCE A SHORT FILM SHOWCASING THE FEATURES AND FUNCTIONALITY OF AMFAR'S OPIOID & HEALTH INDICATORS DATABASE (OPIOID.AMFAR.ORG).

EPIC VOICES

AMFAR'S EPIC VOICES, AN ONLINE VIDEO SERIES THAT AIMS TO REENERGIZE THE RESPONSE TO HIV AMONG MILLENNIAL AND LGBTQ COMMUNITIES CONTINUED TO GENERATE SIGNIFICANT PUBLICITY WITH SEVERAL NEW STORIES PUBLISHED IN 2019. LAUNCHED IN 2017, THE GOALS OF THE CAMPAIGN ARE TO: RENEW AWARENESS OF THE PERSISTENT THREAT OF HIV, UNDERSCORE THE URGENT NEED TO SUPPORT HIV RESEARCH, AND SUPPORT AMFAR'S LEADERSHIP IN THE SEARCH FOR A CURE. AMFAR SPOKE TO HIV ACTIVISTS ACROSS THE COUNTRY AND ASKED THEM TO SHARE THEIR UNIQUE JOURNEYS, THEIR INSIGHTS ON LIVING WITH HIV, AND THE BOLD STEPS THEY HAVE TAKEN IN THE FIGHT AGAINST THE EPIDEMIC.

SOCIAL MEDIA

AMFAR HAS VIGOROUSLY EXPANDED ITS PRESENCE IN THE SOCIAL MEDIA ARENA,

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

REACHING LARGE NUMBERS OF PEOPLE, INCLUDING A YOUNGER DEMOGRAPHIC THAT IS OFTEN LESS EDUCATED ABOUT HIV AND THE AIDS EPIDEMIC. THE FOUNDATION REGULARLY ADDS CONTENT TO ITS FACEBOOK PAGE, LIVE TWEETS FROM EVENTS, AND POSTS IMAGES ON INSTAGRAM FROM FUNDRAISING AND PROGRAM EVENTS. AMFAR HAS 73,000 LIKES ON FACEBOOK, MORE THAN 43,000 TWITTER FOLLOWERS, AND 164,000 INSTAGRAM FOLLOWERS.

MEDIA OUTREACH

IN FY2019, 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 HIV-RELATED PRESS COVERAGE. ARTICLES AND REPORTS INVOLVING AMFAR-MANY OF WHICH INCLUDED INTERVIEWS WITH STAFF-WERE CARRIED IN NUMEROUS MEDIA OUTLETS, INCLUDING THE NEW YORK TIMES, WIRED, SCIENCE, THE WASHINGTON POST, BANGKOK POST, USA TODAY, U.S. NEWS & WORLD REPORT, PEOPLE, VOX, VOGUE, VANITY FAIR, ESSENCE, BUSTLE, THE ADVOCATE, POZ, CBS NEWS, NBC NEWS, ABC NEWS, FOX NEWS, NPR, ASSOCIATED PRESS, AND REUTERS.

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. AMFAR IS PROFOUNDLY GRATEFUL FOR THE CONTINUING SUPPORT OF CELEBRITIES FROM ALL OVER THE WORLD.

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

CELEBRITY SUPPORTERS INCLUDED KATY PERRY, DAME SHIRLEY BASSEY, DARREN
 CRISS, JUDD APATOW, ROBERT PATTINSON, MATT BOMER, DIANA ROSS, JAY ELLIS,
 ZOE SALDANA, GRACE JONES, MILLA JOVOVICH, MERT ALAS AND MARCUS PIGGOTT,
 KIM KARDASHIAN, KOURTNEY KARDASHIAN, HEIDI KLUM, ALAN CUMMING, MICHELLE
 RODRIGUEZ, KAROLINA KURKOVA, ALESSANDRA AMBROSIO, CAROLINE VREELAND,
 CANDICE SWANEPOEL, ELSA HOSK, KAREN ELSON, LAIS RIBEIRO, VICTORIA
 JUSTICE, WINNIE HARLOW, ALEXANDER SKARSGÅRD, PHARRELL WILLIAMS, MICHELLE
 YEOH, KYLE MACLACHLAN, NICOLE SCHERZINGER, LAY ZHANG, MARIAH CAREY, DUA
 LIPA, TOM JONES, CHARLI XCX, CHRIS TUCKER, CARINE ROITFELD, ANDREAS
 SCHAGER, HENRY GOLDING, EVA LONGORIA, ANDIE MACDOWELL, NATASHA POLY,
 PATRICIA ARQUETTE, ANTONIO BANDERAS, ORLANDO BLOOM, IAN BOHEN, ADRIEN
 BRODY, KENDALL JENNER, H.E.R., TOMMY HILFIGER, KRIS JENNER, JULIAN
 LENNON, ADRIANA LIMA, COCO ROCHA, SARA SAMPAIO, CHRISTOPH WALTZ, REBEL
 WILSON, CEELO GREEN, JOAN SMALLS, AND RITA ORA.

PROGRAM SERVICE ACCOMPLISHMENTS (5)

LINE 4D: PUBLIC POLICY:

INFORMED BY THOROUGH RESEARCH AND ANALYSIS, AMFAR IS A HIGHLY RESPECTED
 ADVOCATE OF RATIONAL AND COMPASSIONATE HIV/AIDS-RELATED PUBLIC POLICY.
 THE FOUNDATION IS ENGAGED IN EFFORTS TO SECURE NECESSARY INCREASES IN
 FUNDING FOR HIV/AIDS RESEARCH AND GLOBAL HIV/AIDS PROGRAMS, EXPAND ACCESS
 TO TREATMENT AND CARE FOR MARGINALIZED POPULATIONS, ADVOCATE HARM
 REDUCTION POLICIES AIMED AT REDUCING THE SPREAD OF HIV AND HEPATITIS C
 (HCV) AMONG PEOPLE WHO INJECT DRUGS, AND PROTECT THE CIVIL RIGHTS OF ALL
 PEOPLE AFFECTED BY OR VULNERABLE TO HIV/AIDS.

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

ENDING THE DOMESTIC HIV EPIDEMIC

DURING THE 2019 STATE OF THE UNION, PRESIDENT TRUMP ANNOUNCED A PLAN TO END HIV TRANSMISSIONS IN THE U.S. BY 2030. THE ENDING THE HIV EPIDEMIC INITIATIVE (EHE) AIMS TO REDUCE HIV INFECTIONS BY 75% IN FIVE YEARS, AND BY 90% IN TEN YEARS. IN 2019, AMFAR LAUNCHED A FREE INTERACTIVE DATABASE (EHE.AMFAR.ORG) TO HELP POLICYMAKERS, PUBLIC HEALTH OFFICIALS, ADVOCATES, AND OTHER STAKEHOLDERS UNDERSTAND THE OPPORTUNITIES AND CHALLENGES ACROSS EHE JURISDICTIONS. THE EHE DATABASE INCLUDES DEMOGRAPHIC, POLICY, AND SERVICE PROVIDER INFORMATION, AND EPIDEMIOLOGICAL INDICATORS.

IN 2018 THE TRUMP ADMINISTRATION PROPOSED A RULE CHANGE TO THE TITLE X NATIONAL FAMILY PLANNING PROGRAM, STATING THAT HEALTH PROVIDERS IN THE TITLE X PROGRAM "MAY NOT PERFORM, PROMOTE, REFER FOR, OR SUPPORT ABORTION." THE STIPULATION IS COMMONLY KNOWN AS THE DOMESTIC GAG RULE. IN FEBRUARY 2019, AMFAR PUBLISHED TITLE X, THE DOMESTIC GAG RULE, AND THE HIV RESPONSE, AN ISSUE BRIEF ILLUSTRATING THE BENEFITS OF THE TITLE X PROGRAM AND POTENTIAL IMPACTS OF THE GAG RULE. ANALYSIS FROM THE REPORT SHOWS THAT, IF IMPLEMENTED, THE DOMESTIC GAG RULE COULD NOT ONLY UNDERMINE WOMEN'S ACCESS TO REPRODUCTIVE HEALTH SERVICES, BUT ALSO IMPEDE ACCESS TO HIV TESTING FOR LOW-INCOME POPULATIONS, THREATENING THE NATIONAL RESPONSE TO THE HIV EPIDEMIC.

AND IN MARCH 2019, AMFAR PUBLISHED AN ISSUE BRIEF TITLED EXPANDING ACCESS TO PRE-EXPOSURE PROPHYLAXIS (PREP) FOR ADOLESCENTS AND YOUNG ADULTS:

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

MODELS FOR ADDRESSING CONSENT, CONFIDENTIALITY, AND PAYMENT BARRIERS.
ENSURING THAT ADOLESCENTS AND YOUNG ADULTS AT RISK FOR HIV CAN ACCESS
PREP IS A KEY STEP TOWARD REDUCING THE NUMBER OF HIV DIAGNOSES.

HIV AND THE OPIOID EPIDEMIC
AMFAR MAINTAINS AN IMPORTANT AND WIDELY USED RESOURCE ON HIV AND THE
OPIOID EPIDEMIC. ITS OPIOID & HEATH INDICATORS DATABASE
(OPIOID.AMFAR.ORG) IS A FREE WEB PLATFORM DESIGNED TO SUPPORT LAWMAKERS,
COMMUNITIES AND ADVOCATES IN MAKING INFORMED DECISIONS ABOUT THE OPIOID
EPIDEMIC AND ITS IMPACT ON HIV AND HEPATITIS C. THE SITE IS A WINDOW INTO
THE OPIOID EPIDEMIC UNFOLDING IN EVERY AMERICAN'S BACKYARD. IT PROVIDES
LOCAL TO NATIONAL STATISTICS USING RELIABLE DATA SOURCES ON NEW HIV AND
HEPATITIS C INFECTIONS, OPIOID USE AND OVERDOSE DEATH RATES, AND THE
AVAILABILITY OF SERVICES LIKE DRUG TREATMENT PROGRAMS AND SYRINGE
EXCHANGE SERVICES.

IN OCTOBER 2018, AMFAR PUBLISHED AN ANALYSIS IN HEALTH AFFAIRS ON THE LOW
PERCENTAGE OF SUBSTANCE USE FACILITIES THAT TEST FOR HIV OR HEPATITIS C.
THE NEW YORK TIMES PUBLISHED SEVERAL ARTICLES HIGHLIGHTING THE BIPARTISAN
OPIOID BILL PASSED BY CONGRESS THAT LINKED TO AMFAR'S ORIGINAL HEALTH
AFFAIRS ANALYSIS ON THE DEARTH OF SUBSTANCE USE TREATMENT FACILITIES THAT
OFFER MEDICATION-ASSISTED TREATMENT (MAT) NATIONWIDE.

THE NUMBER OF DRUG-RELATED POISONING DEATHS IN THE UNITED STATES MORE
THAN TRIPLED BETWEEN 1999 AND 2017, ACCOMPANIED BY A RISE IN INJECTION

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

DRUG USE. SINCE UPTAKE OF TREATMENT FOR SUBSTANCE USE DISORDER AND HARM REDUCTION SERVICES AT SYRINGE SERVICES PROGRAMS (SSPS) CAN REDUCE THE RISK OF HIV AND HEPATITIS C ACQUISITION, ACCESS TO SERVICES IS CRITICALLY IMPORTANT. IN NOVEMBER 2018, AMFAR PUBLISHED GETTING TO SERVICES: FAR, FAR AWAY, AN INFOGRAPHIC SHOWING HOW FAR AMERICANS MUST TRAVEL TO SUBSTANCE USE CLINICS OFFERING MAT AND SSPS. NEARLY 30% OF AMERICANS LIVE MORE THAN TEN MILES FROM A FACILITY PROVIDING MEDICATION-ASSISTED TREATMENT, AND NEARLY 80% LIVE MORE THAN TEN MILES FROM AN SSP. ACCORDING TO ONE STUDY, PEOPLE TYPICALLY DO NOT ACCESS SSPS IF THEY ARE MORE THAN TEN MILES FROM WHERE THEY LIVE.

IN AUGUST 2019, AMFAR SENIOR POLICY AND MEDICAL ADVISOR DR. SUSAN BLUMENTHAL PENNED AN OP-ED ON THRIVEGLOBAL ON THE NEED FOR A STRATEGIC PLAN FOR ADDRESSING THE OPIOID EPIDEMIC PARALLELING WHAT WAS DONE FOR HIV.

GLOBAL HEALTH

IN OCTOBER 2018, AMFAR PUBLISHED A FIRST-OF-ITS-KIND ANALYSIS THAT ATTEMPTED TO QUANTIFY INDIRECT COSTS CHARGED BY ORGANIZATIONS IMPLEMENTING THE U.S. PRESIDENT'S EMERGENCY PLAN FOR AIDS RELIEF (PEPFAR). EXAMINING DATA FROM 2007 TO 2016, THE STUDY FOUND THAT BETWEEN \$1.85 BILLION AND \$4.34 BILLION WAS SPENT ON INDIRECT COSTS. THE STUDY WAS PUBLISHED IN THE PEER-REVIEWED ONLINE JOURNAL PLOS ONE, AND CALLED FOR INCREASED TRANSPARENCY IN REPORTING INDIRECT COSTS INCURRED BY PEPFAR.

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

AT THE BIENNIAL HIV RESEARCH FOR PREVENTION CONFERENCE IN MADRID IN OCTOBER 2018, AMFAR POLICY ASSOCIATE JENNIFER SHERWOOD AND COLLEAGUES PRESENTED FINDINGS FROM A SURVEY USED TO TRACK THE IMPACT OF THE EXPANDED MEXICO CITY POLICY ON THE OPERATIONS AND SERVICE DELIVERY OF ORGANIZATIONS RECEIVING ASSISTANCE THROUGH PEPFAR. THE MEXICO CITY POLICY, OR "GLOBAL GAG RULE," WAS REINSTATED AND EXPANDED BY PRESIDENT TRUMP IN 2017. IT NOW RESTRICTS NON-U.S.-BASED OR FOREIGN NGOS FROM RECEIVING AMERICAN FINANCIAL AID IF THEY PERFORM, COUNSEL ON, OR REFER FOR ABORTION, OR ADVOCATE FOR ITS LIBERALIZATION OUTSIDE OF LIMITED EXCEPTIONS.

IN JANUARY 2019, AMFAR PUBLISHED AN ISSUE BRIEF REPORTING ON DISRUPTIONS IN SERVICE PROVISION DUE TO THE EXPANDED MEXICO CITY POLICY. BASED ON THE SURVEY DESCRIBED ABOVE, AMFAR REVEALED THAT PEPFAR PARTNERS IN 31 COUNTRIES REPORTED DISRUPTIONS IN SERVICE PROVISION DUE TO THE POLICY. THESE FINDINGS HAVE SERIOUS IMPLICATIONS FOR REPRODUCTIVE HEALTH AND THE GLOBAL HIV EPIDEMIC. IN FEBRUARY 2019, AMFAR PUBLISHED A COMPANION INFOGRAPHIC, PEPFAR PROGRAMMING DISRUPTED BY EXPANDED MEXICO CITY POLICY.

IN DECEMBER 2018, AMFAR LAUNCHED THE PEPFAR MONITORING, EVALUATION, AND REPORTING (MER) DATABASE (MER.AMFAR.ORG). THE MER DATABASE ENABLES POLICYMAKERS, PUBLIC HEALTH OFFICIALS, ADVOCATES, AND OTHER STAKEHOLDERS TO ACCESS A WIDE RANGE OF PROGRAMMATIC PEPFAR DATA AND INCLUDES

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

DOWNLOADABLE PDFS, MAPS, DATA VISUALIZATIONS, AND DISTRICT-LEVEL DATA.

THE NEW DATABASE COMPLEMENTS AMFAR'S EXISTING PEPFAR DATABASE

(COPSDATA.AMFAR.ORG), WHICH HIGHLIGHTS PLANNED FUNDING BY PROGRAM AREA, COUNTRY AND ORGANIZATION FOR EACH YEAR THAT HAS BEEN PUBLICLY RELEASED.

THE DATABASE IS DESIGNED TO HELP PEPFAR IN ITS EFFORTS TO INCREASE DATA TRANSPARENCY AND GENERAL PARTICIPATION IN THE PLANNING PROCESS.

IN FEBRUARY 2019, AMFAR, IN CONJUNCTION WITH AVAC, PUBLISHED AN ISSUE BRIEF TITLED NEW HIV TESTING STRATEGIES IN PEPFAR COP19: ROLLOUT AND HUMAN RIGHTS CONCERNS. THE REPORT ANALYZES COUNTRY OPERATIONAL PLAN (COP) GUIDANCE FOR HIV TESTING AND RECOMMENDED POLICIES AIMED AT HELPING TO FIND HIV-POSITIVE PEOPLE WHO HAVE NOT BEEN IDENTIFIED BY OTHER TESTING PROGRAMS AND LINKING THEM TO TREATMENT.

IN MAY 2019, AMFAR PUBLISHED A PAIR OF INFOGRAPHICS DEMONSTRATING THE EFFECTIVENESS OF THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA: A GLOBAL RESPONSE TO HIV REQUIRES THE GLOBAL FUND AND HOW THE GLOBAL FUND IMPROVES PEPFAR INVESTMENTS. THE TWO ORGANIZATIONS ARE THE WORLD'S LARGEST AND MOST EFFECTIVE INVESTORS IN HIV TREATMENT AND PREVENTION.

IAS 2019

AMFAR'S PUBLIC POLICY OFFICE PARTICIPATED IN THE 10TH INTERNATIONAL AIDS SOCIETY CONFERENCE ON HIV SCIENCE (IAS 2019) IN MEXICO CITY IN JULY.

AMFAR VICE PRESIDENT AND DIRECTOR OF PUBLIC POLICY GREG MILLETT JOINED

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

DR. ANTHONY FAUCI, DIRECTOR OF THE NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES AT A PRESS CONFERENCE ON "TRANSLATING PROGRESS INTO SUCCESS TO END THE AIDS EPIDEMIC." THE PRESS CONFERENCE COINCIDED WITH THE RELEASE OF A REPORT WITH THE SAME NAME, COAUTHORED BY AMFAR, AVAC, AND FRIENDS OF THE GLOBAL FIGHT AGAINST AIDS, TUBERCULOSIS AND MALARIA. THE REPORT SHOWS PLACES ACROSS THE GLOBAL NORTH AND SOUTH ON TRACK TO END THEIR RESPECTIVE EPIDEMICS AND THE COMMONALITIES BETWEEN THEM.

MR. MILLETT ALSO SPOKE AT A JOURNALIST ROUNDTABLE SPONSORED BY AVAC, AND SHARED THE STAGE AT A SEPARATE MEETING WITH WORLD HEALTH ORGANIZATION REPRESENTATIVES AND AMBASSADOR DEBORAH BIRX, U.S. GLOBAL AIDS COORDINATOR, TO DEBATE THE ETHICS OF HIV RECENCY TESTING IN PEPFAR PROGRAMS.

THE GMT INITIATIVE

IMPLEMENTATION SCIENCE AWARDS

IN FY2019, AMFAR'S GRANT MAKING THROUGH THE GMT INITIATIVE CONTINUED TO SUPPORT TWO LARGE IMPLEMENTATION SCIENCE PROJECTS AIMED AT IDENTIFYING BARRIERS TO HIV TESTING, TREATMENT, AND CARE AND STUDYING THE IMPACT OF INNOVATIVE HIV SERVICE DELIVERY MODELS FOR GAY MEN, OTHER MEN WHO HAVE SEX WITH MEN, AND TRANSGENDER INDIVIDUALS (COLLECTIVELY, GMT) IN LOW- AND MIDDLE-INCOME COUNTRIES. AMFAR HAS AWARDED \$2.6 MILLION OVER THREE YEARS TO SUPPORT THE STUDIES.

DR. CHRIS BEYRER OF JOHNS HOPKINS UNIVERSITY IN BALTIMORE IS LEADING A TEAM OF RESEARCHERS AND COMMUNITY-BASED SERVICES (IN COLLABORATION WITH

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

THE INTERNATIONAL HIV/AIDS ALLIANCE MYANMAR) IN EVALUATING THE EFFECTIVENESS OF PROMISING INTERVENTIONS FOR GMT IN MYANMAR, WHERE INCREASED HIV TESTING AND TREATMENT OPPORTUNITIES ARE BECOMING AVAILABLE. THE RESEARCHERS ARE ASSESSING 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 BANGKOK, DR. NITTAYA PHANUPHAK AND HER TEAM AT THE THAI RED CROSS AIDS RESEARCH CENTRE ARE WORKING 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 IS COMPARING THE EFFECTIVENESS OF ONLINE SERVICES AND SUPPORT INTERVENTIONS WITH TRADITIONAL CLINIC-BASED HIV SERVICES, AND A HYBRID MODEL THAT COMBINES ELEMENTS OF BOTH STRATEGIES.

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

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

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 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.

AMFAR'S LAST INDEPENDENT COMPENSATION STUDY WAS CONDUCTED IN NOVEMBER OF 2019 TO ENSURE THAT THE PRESIDENT & CEO'S COMPENSATION IS REASONABLE

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

GIVEN THE MARKET IN WHICH THE FOUNDATION OPERATES.

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 REASONS. ON SCHEDULES F & I, GRANTS ARE REPORTED IRRESPECTIVE OF WHETHER THEY WERE ULTIMATELY RETURNED TO AMFAR SINCE CATEGORIZING THE "RETURNED" AMOUNTS WOULD BE TIME CONSUMING. THEREFORE, AMOUNTS REPORTED ON PART IX, LINE 1 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.

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,

Name of the organization

THE FOUNDATION FOR AIDS RESEARCH

Employer identification number

13-3163817

ATTACHMENT 1 (CONT'D)FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

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 FOLLOWING:

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

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

- RESEARCH TO EXPLORE SCIENTIFIC APPROACHES TO HIV PREVENTION, TREATMENT, AND POTENTIAL CURES, AND TO ENHANCE THE HEALTH AND SURVIVAL OF PEOPLE LIVING 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

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

ATTACHMENT 1 (CONT'D)FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

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

ATTACHMENT 2FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

<u>DESCRIPTION</u>	<u>GRANTS</u>	<u>EXPENSES</u>	<u>REVENUE</u>
PUBLIC POLICY	77,995.	2,049,139.	0.
GMT INITIATIVE	94,843.	268,341.	0.
TOTALS	<u>172,838.</u>	<u>2,317,480.</u>	<u>0.</u>

ATTACHMENT 3FORM 990, PART VI, LINE 17 - STATES

AL, AR, CA,

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

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

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

ATTACHMENT 4990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
AAB PRODUCTION, INC. 64 ALLEN ROAD, 5TH FLOOR NEW YORK, NY 10002	EVENTS PRODUCTION	623,887.

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

ATTACHMENT 4 (CONT'D)

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

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
PATTERSON BELKNAP WEBB & TYLER LLP 1133 AVENUE OF THE AMERICAS NEW YORK, NY 10036-6710	LEGAL SERVICES	512,837.
JOSH WOODS PRODUCTION 39 WEST 14TH STREET, SUITE 504 NEW YORK, NY 10011	EVENTS PRODUCTION	315,500.
EIDOLON COMMUNICATIONS, INC. 15 MAIDEN LANE, SUITE 1401 NEW YORK, NY 10038	DIRECT MAIL/CONSULT.	286,181.
INCA INTERNATIONAL PRODUCTIONS INC. 40 WORTH STREET, SUITE 827 NEW YORK, NY 10013	EVENTS PRODUCTION	284,783.