

Return of Organization Exempt From Income Tax

2007

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2007 calendar year, or tax year beginning 7/1/2007, and ending 6/30/2008

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Final return
 - Amended return
 - Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
SAN FRANCISCO AIDS FOUNDATION

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
P O Box 426182

City or town, state or country, and ZIP + 4
San Francisco, CA 94142-6182

D Employer identification number
94 2927405

E Telephone number
(415) 487-3000

F Accounting method: Cash Accrual
 Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

- H and I are not applicable to section 527 organizations.**
- H(a)** Is this a group return for affiliates? Yes No
- H(b)** If "Yes," enter number of affiliates ▶
- H(c)** Are all affiliates included? Yes No (If "No," attach a list. See instructions.)
- H(d)** Is this a separate return filed by an organization covered by a group ruling? Yes No
- I** Group Exemption Number ▶
- M** Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: ▶ **www.sfaf.org**

J Organization type (check only one) ▶ 501(c) (**3**) ◀ (insert no.) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **32,467,713**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:					
	a Contributions to donor advised funds	1a			0	
	b Direct public support (not included on line 1a)	1b			16,854,465	
	c Indirect public support (not included on line 1a)	1c			177,672	
	d Government contributions (grants) (not included on line 1a)	1d			7,340,392	
	e Total (add lines 1a through 1d) (cash \$ 24,151,430 noncash \$ 221,099)					1e 24,372,529
	2 Program service revenue including government fees and contracts (from Part VII, line 93)					2 323,872
	3 Membership dues and assessments					3 0
	4 Interest on savings and temporary cash investments					4 114,904
	5 Dividends and interest from securities					5 234,033
	6a Gross rents	6a			81,793	
	b Less: rental expenses	6b			81,793	
c Net rental income or (loss). Subtract line 6b from line 6a					6c 0	
7 Other investment income (describe ▶)					7 0	
8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other			
	6,956,860	8a	0			
	b Less: cost or other basis and sales expenses	6,708,156	8b	0		
	c Gain or (loss) (attach schedule) Stmt 1	248,704	8c	0		
	d Net gain or (loss). Combine line 8c, columns (A) and (B)					8d 248,704
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>	a Gross revenue (not including \$ 13,389,368 of contributions reported on line 1b)	9a		200,991		
	b Less: direct expenses other than fundraising expenses	9b		1,562,852		
	c Net income or (loss) from special events. Subtract line 9b from line 9a					9c -1,361,861
10a Gross sales of inventory, less returns and allowances	10a			0		
	b Less: cost of goods sold	10b		0		
c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a					10c 0	
11 Other revenue (from Part VII, line 103)					11 182,731	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11					12 24,114,912	
Expenses	13 Program services (from line 44, column (B))				13 15,384,573	
	14 Management and general (from line 44, column (C))				14 1,940,200	
	15 Fundraising (from line 44, column (D))				15 6,008,200	
	16 Payments to affiliates (attach schedule)				16 0	
	17 Total expenses. Add lines 16 and 44, column (A)					17 23,332,973
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12				18 781,939	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))				19 11,404,015	
	20 Other changes in net assets or fund balances (attach explanation) Stmt 3				20 -607,044	
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20					21 11,578,910

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> noncash \$ <u>0</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	22a 0	0		
22b	Other grants and allocations (attach schedule) (cash \$ <u>1,755,814</u> noncash \$ <u>0</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	22b 1,755,814	1,755,814		
23	Specific assistance to individuals (attach schedule)	23 0	0		
24	Benefits paid to or for members (attach schedule)	24 0	0		
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A	25a 221,679	148,148	28,523	45,008
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b 0	0	0	0
c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c 0	0	0	0
26	Salaries and wages of employees not included on lines 25a, b, and c	26 7,092,385	4,739,849	912,552	1,439,984
27	Pension plan contributions not included on lines 25a, b, and c	27 247,869	165,652	31,892	50,325
28	Employee benefits not included on lines 25a - 27	28 1,077,482	720,083	138,636	218,763
29	Payroll taxes	29 577,916	386,222	74,358	117,336
30	Professional fundraising fees	30 316,782	0	0	316,782
31	Accounting fees	31 74,065	36,788	10,374	26,903
32	Legal fees	32 61,016	30,307	8,547	22,162
33	Supplies	33 245,531	86,559	37,297	121,675
34	Telephone	34 177,290	62,501	26,931	87,858
35	Postage and shipping	35 889,701	117,084	4,621	767,996
36	Occupancy	36 1,126,149	700,285	111,528	314,336
37	Equipment rental and maintenance	37 75,307	26,548	11,439	37,320
38	Printing and publications	38 912,740	612,758	8,490	291,492
39	Travel	39 234,173	144,585	42,921	46,667
40	Conferences, conventions, and meetings	40 300,858	185,759	55,144	59,955
41	Interest	41 48,130	16,967	7,310	23,853
42	Depreciation, depletion, etc. (attach schedule)	42 410,815	232,171	60,915	117,729
43	Other expenses not covered above (itemize): See Statement 6	43a 7,487,271	5,216,493	368,722	1,902,056
a	-----	43b			
b	-----	43c			
c	-----	43d			
d	-----	43e			
e	-----	43f			
f	-----	43g			
g	-----				
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44 23,332,973	15,384,573	1,940,200	6,008,200

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ 3,595,659; (ii) the amount allocated to Program services \$ 1,037,204;
 (iii) the amount allocated to Management and general \$ 0; and (iv) the amount allocated to Fundraising \$ 2,558,455

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► End the pandemic and suffering caused by HIV. All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a See Statement 7 (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
b (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
c (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
d (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services). ►	15,384,573

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash—non-interest-bearing	1,238,414	45	2,521,505
	46 Savings and temporary cash investments	7,104,721	46	4,122,037
	47a Accounts receivable	47a 2,033,996		
	b Less: allowance for doubtful accounts	47b 0	1,782,710	47c 2,033,996
	48a Pledges receivable	48a 430,528		
	b Less: allowance for doubtful accounts	48b 25,635	672,309	48c 404,893
	49 Grants receivable	0	49	0
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)	0	50a	0
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	0	50b	0
	51a Other notes and loans receivable (attach schedule)	51a 0		
	b Less: allowance for doubtful accounts	51b 0	0	51c 0
	52 Inventories for sale or use	0	52	0
	53 Prepaid expenses and deferred charges	341,434	53	499,286
	54a Investments—publicly-traded securities	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	5,046,363	54a 3,606,790
	b Investments—other securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	0	54b 0
	55a Investments—land, buildings, and equipment: basis	55a 0		
	b Less: accumulated depreciation (attach schedule)	55b 0	0	55c 0
	56 Investments—other (attach schedule)	0	56	0
	57a Land, buildings, and equipment: basis	57a 2,940,037		
b Less: accumulated depreciation (attach schedule) Stmt 8	57b 1,610,937	637,281	57c 1,329,100	
58 Other assets, including program-related investments (describe ► See Statement 9)	240,385	58	244,022	
59 Total assets (must equal line 74). Add lines 45 through 58	17,063,617	59	14,761,629	
Liabilities	60 Accounts payable and accrued expenses	2,283,143	60	2,230,436
	61 Grants payable	3,075,224	61	561,500
	62 Deferred revenue	189,003	62	215,675
	63 Loans from officers, directors, trustees, and key employees (attach schedule)	0	63	0
	64a Tax-exempt bond liabilities (attach schedule)	0	64a	0
	b Mortgages and other notes payable (attach schedule)	0	64b	0
	65 Other liabilities (describe ► See Statement 10)	112,232	65	175,108
66 Total liabilities. Add lines 60 through 65	5,659,602	66	3,182,719	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	10,983,930	67	11,040,966
	68 Temporarily restricted	19,667	68	118,315
	69 Permanently restricted	400,418	69	419,629
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	11,404,015	73	11,578,910
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	17,063,617	74	14,761,629

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	23,723,706
b	Amounts included on line a but not on Part I, line 12:		
1	Net unrealized gains on investments	b1	-626,843
2	Donated services and use of facilities	b2	153,844
3	Recoveries of prior year grants	b3	
4	Other (specify):	b4	
	Add lines b1 through b4	b	-472,999
c	Subtract line b from line a	c	24,196,705
d	Amounts included on Part I, line 12, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	0
2	Other (specify): See Statement 11	d2	-81,793
	Add lines d1 and d2	d	-81,793
e	Total revenue (Part I, line 12). Add lines c and d	e	24,114,912

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements	a	23,548,810
b	Amounts included on line a but not on Part I, line 17:		
1	Donated services and use of facilities	b1	153,844
2	Prior year adjustments reported on Part I, line 20	b2	-19,800
3	Losses reported on Part I, line 20	b3	0
4	Other (specify):	b4	0
	Add lines b1 through b4	b	134,044
c	Subtract line b from line a	c	23,414,766
d	Amounts included on Part I, line 17, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	0
2	Other (specify): See Statement 12	d2	-81,793
	Add lines d1 and d2	d	-81,793
e	Total expenses (Part I, line 17). Add lines c and d	e	23,332,973

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
See Statement 13				

Part V-A Current Officers, Directors, Trustees, and Key Employees <i>(continued)</i>	Yes	No
75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 13		
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) . . .	75b	✓
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." ▶ If "Yes," attach a statement that includes the information described in the instructions.	75c	✓
d Does the organization have a written conflict of interest policy?	75d	✓

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
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Part VI Other Information <i>(See the instructions.)</i>	Yes	No
76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76	✓
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	✓
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	✓
b If "Yes," has it filed a tax return on Form 990-T for this year?	78b	
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	✓
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	✓
b If "Yes," enter the name of the organization ▶ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt	81a	
81a Enter direct and indirect political expenditures. (See line 81 instructions.) 0	81a	
b Did the organization file Form 1120-POL for this year?	81b	✓

Part VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	✓	
	b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b <u>1,003,024</u>		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	✓	
	b Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
	b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
	c Dues, assessments, and similar amounts from members	85c	
	d Section 162(e) lobbying and political expenditures	85d	
	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
	f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
	h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
	b Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		✓
	b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	✓
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>0</u> ; section 4912 <u>0</u> ; section 4955 <u>0</u>		
	b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	✓
	c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0</u>		
	d Enter: Amount of tax on line 89c, above, reimbursed by the organization <u>0</u>		
	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	✓
	f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	✓
	g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	✓
90a	List the states with which a copy of this return is filed CA		
	b Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	90b <u>85</u>	
91a	The books are in care of Vice President and CFO Telephone no. 415-487-3000		
	Located at 995 Market Street Ste 200, San Francisco, CA ZIP + 4 94103-1702		
	b 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)?	91b	✓
	If "Yes," enter the name of the foreign country		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No
 If "Yes," enter the name of the foreign country ▶

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ | **92** |

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a Technical Assistance					261,372
b CIS Service Revenue					62,500
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	114,904	
96 Dividends and interest from securities			14	234,033	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	248,704	
101 Net income or (loss) from special events			01	-1,361,861	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a Event merchandise revenue			05	96,292	
b Termination of capital lease			01	71,896	
c Misc. Other Income			01	14,543	
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0		-581,489	323,872
105 Total (add line 104, columns (B), (D), and (E)) ▶					-257,617

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
	See Statement 14

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

107 Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2007, covering the interest, rents, royalties, and annuities described in question 107 above?

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.

Please Sign Here

Original signed by Marty Low | 2/12/09
 Signature of officer | Date

Marty Low, Deputy Executive Dir
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature: Original signed by Michael Steele, CPA | Date: 2/12/09
 Firm's name (or yours if self-employed), address, and ZIP + 4: Michael Steele, CPA
5801 Christie Avenue, Suite 394, Emeryville, CA 94608

Check if self-employed:

Preparer's SSN or PTIN (See Gen. Inst. X): 80 0318069
 EIN: _____ | Phone no.: (510) 985-0505

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2007

Name of the organization SAN FRANCISCO AIDS FOUNDATION	Employer identification number 94 - 2927405
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Marty Low P O Box 426182, San Francisco, CA 94142-618	VP & CFO 40	191,121	15,118	0
Steven Tierney P O Box 426182, San Francisco, CA 94142-618	VP, Programs & Srvs 40	186,109	15,118	0
Judith Auerbach P O Box 426182, San Francisco, CA 94142-618	VP, Science & Policy 40	179,886	15,118	0
Barbara Kimport P O Box 426182, San Francisco, CA 94142-618	VP, Development 40	178,062	15,118	0
William Bland P O Box 426182, San Francisco, CA 94142-618	Director 40	151,722	15,118	0
Total number of other employees paid over \$50,000 ▶	57			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
UCSF-AIDS Health Project Box 0884, San Francisco, CA 94143-0884, US	HIV program services	428,620
Shanti 730 Polk Street, San Francisco, CA 94109, US	HIV program services	176,465
MZA Events 121 Second Street 4th Floor, San Francisco, CA 94105, US	Fundraising/event producer	150,000
Langtec Systems Consulting 733 Front Street, San Francisco, CA 94111, US	IT consulting	86,713
Huron Consulting Group 100 California Street Ste 800, San Francisco, CA 94111, US	Strategic planning consultant	83,000
Total number of others receiving over \$50,000 for professional services ▶	6	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Steele North America 5970 Greenwood Plaza Ste 240, Greenwood Village, CO 80111, US	Security contractor	87,060
Hartmann Studios 100 West Ohio Ave, Richmond, CA 94804, US	Production	78,589
Taste Catering 3450 Third St 4D, San Francisco, CA 94124, US	Event caterer	68,983
Mal Warwick Associates 2550 Ninth Street Suite 103, Berkeley, CA 94710, US	Fundraising support	54,418
Total number of other contractors receiving over \$50,000 for other services ▶	0	

Part III **Statements About Activities** (See page 2 of the instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>298,209</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1 ✓	
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)	See Statement 15	
a Sale, exchange, or leasing of property?	2a	✓
b Lending of money or other extension of credit?	2b	✓
c Furnishing of goods, services, or facilities?	2c	✓
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d ✓	
e Transfer of any part of its income or assets?	2e	✓
3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a	✓
b Did the organization have a section 403(b) annuity plan for its employees?	3b ✓	
c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c	✓
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d	✓
4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a	✓
b Did the organization make any taxable distributions under section 4966?	4b	✓
c Did the organization make a distribution to a donor, donor advisor, or related person?	4c	✓
d Enter the total number of donor advised funds owned at the end of the tax year ▶ _____		
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year . . ▶ _____		
f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶ _____		0
g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ _____		0

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ►
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					0

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	21,351,899	23,855,653	23,528,163	21,017,427	89,753,142
16 Membership fees received	0	0	0	0	0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	561,724	667,360	774,671	852,553	2,856,308
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	643,361	465,544	249,783	160,617	1,519,305
19 Net income from unrelated business activities not included in line 18.	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge	0	0	0	0	0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	135,129	67,689	75,363	70,234	348,415
23 Total of lines 15 through 22	22,692,113	25,056,246	24,627,980	22,100,831	94,477,170
24 Line 23 minus line 17	22,130,389	24,388,886	23,853,309	21,248,278	91,620,862
25 Enter 1% of line 23	226,921	250,562	246,280	221,008	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶					1,832,417
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶					13,735,161
c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶					91,620,862
d Add: Amounts from column (e) for lines: 18 <u>1,519,305</u> 19 <u>0</u> ▶					
22 <u>348,415</u> 26b <u>13,735,161</u> ▶					
e Public support (line 26c minus line 26d total) ▶					76,017,981
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					83 %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2006) _____ (2005) _____ (2004) _____ (2003) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) _____ (2005) _____ (2004) _____ (2003) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶					27c
d Add: Line 27a total _____ and line 27b total _____ ▶					27d
e Public support (line 27c total minus line 27d total) ▶					27e
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶					27f
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶					27h %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	49,707
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	248,502
38	Total lobbying expenditures (add lines 36 and 37)	38	0
39	Other exempt purpose expenditures	39	23,014,964
40	Total exempt purpose expenditures (add lines 38 and 39)	40	0
41	Lobbying nontaxable amount. Enter the amount from the following table—		
	If the amount on line 40 is—		
	The lobbying nontaxable amount is—		
	Not over \$500,000		20% of the amount on line 40
	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
41		41	0
42	Grassroots nontaxable amount (enter 25% of line 41)	42	0
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43	0
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38.	44	0

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

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 instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
46 Lobbying ceiling amount (150% of line 45(e))					6,000,000
47 Total lobbying expenditures	298,209	299,943	258,817	239,865	1,096,834
48 Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
49 Grassroots ceiling amount (150% of line 48(e))					1,500,000
50 Grassroots lobbying expenditures	49,707	53,577	45,585	61,373	210,242

Part VI-B Lobbying Activity by Nonelecting Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h .)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h .)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Statement 1

Form: 990

Page: 1

Part: I

Question: 8

SAN FRANCISCO AIDS FOUNDATION

94-2927405

Sales of Assets Other than Inventory

Publicly Traded Securities

Description:

Sold To:

Sales Price:	\$6,956,860.00	Date Sold:
Expense of Sale:	\$0.00	Date acquired:
Cost or value when acquired:	\$6,708,156.00	How acquired:
Depreciation since acquisition:	\$0.00	
Net Sale:	\$248,704.00	

Statement 2

Form: 990

Page: 1

Part: I

Question: 9

SAN FRANCISCO AIDS FOUNDATION

94-2927405

Schedule of Special Events

Description	Gross Receipts	Contributions	Gross Revenue	Direct Costs	Net Income (Loss)
ALC, Marathons, LRD & Seismic	\$13,590,359.00	\$13,389,368.00	\$200,991.00	\$1,562,852.00	-\$1,361,861.00
Total:	\$13,590,359.00	\$13,389,368.00	\$200,991.00	\$1,562,852.00	-\$1,361,861.00

Statement 3

Form: 990

Page: 1

Part: I

Question: 20

SAN FRANCISCO AIDS FOUNDATION**94-2927405****Other changes in Net Assets or Fund Balances**

Explanation	Amount
Unrealized losses on investments	-\$626,844.00
Prior year grant returned to SFAF	\$19,800.00
Total:	-\$607,044.00

Statement 4

Form: 990
Page: 2
Part: II
Question: 22b

SAN FRANCISCO AIDS FOUNDATION
94-2927405

Grants and Allocations

Classification HIV/AIDS education & advocacy Women Organized to Respond to Life Threatening Dis

Date:

Type: Cash

Address: 414 13th Street

Grant Amt \$25,365.00

Oakland, CA 94612
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV/AIDS prevention AIDS Project East Bay

Date:

Type: Cash

Address: 1320 Webster

Grant Amt \$12,600.00

Oakland, CA 94607
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV/AIDS direct services Marin AIDS Project

Date:

Type: Cash

Address: 901 Irwin Street

Grant Amt \$10,000.00

San Rafael, CA 94901
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV/AIDS prevention Larkin Street Youth Services

Date:

Type: Cash

Address: 701 Sutter Street

Grant Amt \$12,500.00

San Francisco, CA 94109
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV/AIDS prevention and counseling Billy DeFrank LGBT Community Center

Date:

Type: Cash

Address: 938 The Alameda

Grant Amt \$16,375.00

San Jose, CA 95126
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV/AIDS risk reduction

Meals of Marin

Date:

Type: Cash

Address: 1111 East Francisco Blvd Ste B

Grant Amt \$11,192.00

San Rafael, CA 94901
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Meal services for people with HIV/AIDS Project Open Hand

Date:

Type: Cash

Address: 730 Polk Street

Grant Amt \$32,581.00

San Francisco, CA 94109
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV prevention and risk reduction

AGUILAS

Date:

Type: Cash

Address: 2095 Harrison Street

Grant Amt \$7,500.00

San Francisco, CA 94110
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV/AIDS community services. New Conservatory Theatre Center
Date:
Type: Cash **Address:** 25 Van Ness Avenue
Grant Amt \$7,500.00 San Francisco, CA 94102
United States
Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS services Community Awareness and Treatment Services
Date:
Type: Cash **Address:** 1446 Market Street
Grant Amt \$7,500.00 San Francisco, CA 94102
United States
Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV education California Institute of Integral Studies
Date:
Type: Cash **Address:** 1453 Mission Street
Grant Amt \$2,000.00 San Francisco, CA 94103
United States
Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS health services Women's Community Clinic
Date:
Type: Cash **Address:** 2166 Hayes Street
Grant Amt \$5,000.00 San Francisco, CA 94117
United States
Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS prevention Asian Americans for Community Involvement
Date:
Type: Cash **Address:** 2400 Moorpark Ave Ste 300

Grant Amt \$5,000.00

San Jose, CA 95128
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS prevention

ProLatino

Date:

Type: Cash

Address: 938 The Alameda

Grant Amt \$2,000.00

San Jose, CA 95126
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS services

Vital Life Services

Date:

Type: Cash

Address: 5836 San Pablo Avenue

Grant Amt \$10,000.00

Oakland, CA 94608
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS prevention

Asian Pacific Islander Wellness Center

Date:

Type: Cash

Address: 730 Polk Street 4th Floor

Grant Amt \$25,505.00

San Francisco, CA 94109
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS risk reduction

Needle Exchange Emergency Distribution

Date:

Type: Cash

Address: 1947 Center Street 2nd Floor

Grant Amt \$5,000.00

Berkeley, CA 94704
United States

Purp of payment to affiliate

Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS global treatment access Pangaea Global AIDS Foundation
Date:
Type: Cash **Address:** 995 Market Street Ste 200
Grant Amt \$1,000,000.00 San Francisco, CA 94103
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS health services Asian Health Services
Date:
Type: Cash **Address:** 818 Webster Street
Grant Amt \$5,000.00 Oakland, CA 94607
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS healthcare services Women's HIV Program at UCSF
Date:
Type: Cash **Address:** 400 Parnassus Ave 4th Floor
Grant Amt \$10,000.00 San Francisco, CA 94143-0378
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS direct services Immune Enhancement Project
Date:
Type: Cash **Address:** 3450 16th Street
Grant Amt \$20,585.00 San Francisco, CA 94114
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV/AIDS risk reduction

HIV Education Prevention Project of Alameda Co

Date:

Type: Cash

Address: P O Box 7522

Grant Amt \$10,000.00

Oakland, CA 94601
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Legal services for people with HIV/AIDS

AIDS Legal Referral Panel

Date:

Type: Cash

Address: 1663 Mission Street Ste 500

Grant Amt \$14,710.00

San Francisco, CA 94103
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV/AIDS advocacy

Project Inform

Date:

Type: Cash

Address: 1375 Mission Street

Grant Amt \$23,125.00

San Francisco, CA 94103-2621
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Employment srvs for people w/HIV/AIDS

Positive Resource Center

Date:

Type: Cash

Address: 785 Market Street 10th Floor

Grant Amt \$17,616.00

San Francisco, CA 94103
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV risk reduction and needle exchange

St James Infirmary

Date:

Type: Cash

Grant Amt \$7,500.00

Address: 1372 Mission

San Francisco, CA 94103
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Pet care for people with AIDS

Pets Are Wonderful Support PAWS

Date:

Type: Cash

Grant Amt \$10,000.00

Address: 645 Harrison Street Ste 100

San Francisco, CA 94107
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV/AIDS risk reduction

AIDS Prevention Action Network

Date:

Type: Cash

Grant Amt \$2,000.00

Address: 1404 Madison Avenue

Redwood City, CA 94061-1550
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV/AIDS prevention

Outlook Program

Date:

Type: Cash

Grant Amt \$2,000.00

Address: 711 Church

Mountain View, CA 94041
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV/AIDS prevention

Population Action International

Date:

Type: Cash

Grant Amt \$5,000.00

Address: 1300 19th Street NW 2nd Floor

Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification Financial assistance for HIV/AIDS AIDS Emergency Fund
Date:
Type: Cash **Address:** 965 Mission Street Ste 630
Grant Amt \$12,500.00 San Francisco, CA 94103
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS advocacy CAEAR Coalition
Date:
Type: Cash **Address:** PO Box 21361
Grant Amt \$42,500.00 Washington, DC 20009-1361
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS advocacy AIDS Project Los Angeles
Date:
Type: Cash **Address:** 611 South Kingsley Drive
Grant Amt \$10,000.00 Los Angeles, CA 90005
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS prevention Planned Parenthood ShastaDiablo
Date:
Type: Cash **Address:** 2185 Pacheco
Grant Amt \$5,000.00 Concord, CA 94520
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Date:
Type: Cash
Grant Amt \$2,000.00
Address: 470 Carolina Street
San Francisco, CA 94107
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS housing advocacy
Date:
Type: Cash
Grant Amt \$4,000.00
Address: 727 15th Street NW 6th Floor
Washington, DC 20005
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS case managment
Date:
Type: Cash
Grant Amt \$18,680.00
Address: 2800 Third Street
San Francisco, CA 94107
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS healthcare
Date:
Type: Cash
Grant Amt \$2,000.00
Address: 3333 California Street Ste340
San Francisco, CA 94118
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS risk reduction and education
Date:
Type: Cash
Grant Amt \$5,020.00
Address: 1800 Market Street
SF LGBT Community Center

Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS healthcare services Valley Medical Center Foundation
Date:
Type: Cash **Address:** 2400 Moorpark Ave Ste 207
Grant Amt \$10,000.00 San Jose, CA 95128
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS services California Prevention Education Project
Date:
Type: Cash **Address:** 1504 Franklin Street Ste 302
Grant Amt \$756.00 Oakland, CA 94612
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS risk reduction Community Health EmpowermentExchange Works
Date:
Type: Cash **Address:** 3113 MacDonald Avenue
Grant Amt \$5,000.00 Richmond, CA 94804
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification HIV/AIDS case management East Oakland Community Project
Date:
Type: Cash **Address:** 7515 International Blvd
Grant Amt \$7,500.00 Oakland, CA 94621
United States

Purp of payment to affiliate
Relationship: N/A
Description of Property:

How Determined

Date:

Type: Cash

Address: 1748 Market Street Ste 201

Grant Amt \$5,000.00

San Francisco, CA 94102
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Housing advocacy

AIDS Housing AllianceSF

Date:

Type: Cash

Address: 427 South Van Ness Ave

Grant Amt \$5,000.00

San Francisco, CA 94103
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV/AIDS mental health services

New Leaf

Date:

Type: Cash

Address: 1390 Market Street Ste 800

Grant Amt \$10,000.00

San Francisco, CA 94102
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification HIV/AIDS prevention

STOP AIDS Project

Date:

Type: Cash

Address: 2128 15th Street

Grant Amt \$36,089.00

San Francisco, CA 94114
United States

Purp of payment to affiliate

Relationship: N/A

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Total Grants:

\$1,755,814.00

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Part: II

Question: 42

SAN FRANCISCO AIDS FOUNDATION

94-2927405

Depreciation and Depletion

Asset	Current Deprec.
Leasehold Improvements	\$73,661.00
Furniture & Equipment	\$337,154.00
Total	\$410,815.00

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Part: II

Question: 43

SAN FRANCISCO AIDS FOUNDATION**94-2927405****Attachment listing other expenses for Part II**

Description	Total:	Pgm Services	Mgt and General	Fundraising
Housing Subsidies	\$2,612,644.00	\$2,612,644.00	\$0.00	\$0.00
Professional Services	\$1,590,664.00	\$947,437.00	\$267,180.00	\$376,047.00
Event Production	\$1,362,426.00	\$527,196.00	\$0.00	\$835,230.00
Outreach & Promotion	\$639,398.00	\$278,903.00	\$17,895.00	\$342,600.00
Subcontractor Services	\$605,085.00	\$605,085.00	\$0.00	\$0.00
Operations	\$549,821.00	\$193,832.00	\$83,519.00	\$272,470.00
Donated Goods	\$127,233.00	\$51,396.00	\$128.00	\$75,709.00
Total:	\$7,487,271.00	\$5,216,493.00	\$368,722.00	\$1,902,056.00

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Part: III

Question:

SAN FRANCISCO AIDS FOUNDATION**94-2927405****Program Services**

Achievement	Pgm. Svc. Exp.
<p>Case Management Programs: Client advocacy, financial benefits, care coordination and case management for people with HIV. Of the 1,039 people with HIV/AIDS served this year, 80% were gay or bisexual, 4% were transgender individuals, and 8% were women. The ethnicity profile of the clients served reflect that 20% were African American, 15% Latino/a, 4% Asian/Pacific Islander, 2% Native American, 50% Caucasian, and 9% as other ethnicity or multi-ethnic. (5230 hours)</p> <p>Grants and Allocations: \$420,061.00 This amount includes foreign grants: No</p>	\$4,737,725.00
<p>Housing Programs, General/Other: Provided housing assistance during the fiscal year. Clients in the agencies three long-term rental subsidy programs (partial, shallow and full rental) were provided a total of 146,369 nights of rental assistance. (445 clients)</p> <p>Grants and Allocations: \$9,000.00 This amount includes foreign grants: No</p>	\$3,183,746.00
<p>Civil Rights, Social Action & Advocacy Programs, G: Advocated for funding increases to and protection of key federal, state, and local HIV prevention, care, treatment, and housing programs. Advocated for legislation related to HIV care, harm reduction, elimination of abstinence-only earmarks; condom distribution in state prisons; increasing HIV testing and screening. Produced and distributed near-monthly issues of HIV Policy Watch and periodic Action Alerts to 1200 organizations and individuals throughout Northern California through SFAF's HIV Advocacy Network. Published four issues of BETA (Bulletin of Experimental Treatments for AIDS), in English and Spanish, and distributed them widely. Continued SFAF's public forum series, HIVision; held three forums in the fiscal year on gay men's health, HIV in prisons, and HIV among Black gay men. Produced series of panel discussions on "Confronting the 'Evidence' in Evidence-Based HIV Prevention" held at major AIDS conferences and distributed a written summary. Led campaign for a National AIDS Strategy to be developed and implemented in the new Presidential administration. (1200 organizations/individuals)</p> <p>Grants and Allocations: \$55,671.00 This amount includes foreign grants: No</p>	\$1,311,413.00
<p>Preventive Health Services, General/Other: 90,319 calls, e-mails and website hits from throughout California to the toll-free HIV information, counseling and referral services hotline. 10,558 clients received 5,833 hours of targeted prevention services, including drop-in support groups, workshops, and events offered through the agencies Stonewall Project, Speed Project, and Black Brothers Esteem programs. Magnet, SFAFs health clinic for gay men completed 12,625 STD testing encounters, 926 STD treatment encounters, and 4,958 HIV testing and counseling encounters. The needle exchange program completed 30,810 direct client contacts with IDUs exchanging a total of 2.1 million syringes during 1,386 exchange session hours. (150196 client contacts)</p> <p>Grants and Allocations: \$271,082.00 This amount includes foreign grants: No</p>	\$4,890,317.00
<p>HIV/AIDS Programs: The Foundation provided grants, financial and other technical services to Pangaea Global AIDS Foundation in its seventh year of operation to support its implementation of global treatment access programs. Pangaea is continuing to support an HIV treatment initiative with the Republic of China and the Ukraine in partnership with the Clinton Foundation.</p> <p>Grants and Allocations: \$1,000,000.00 This amount includes foreign grants: No</p>	\$1,261,372.00
Total:	\$15,384,573.00

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Part: IV

Question: 57

SAN FRANCISCO AIDS FOUNDATION**94-2927405****Schedule of Land, Buildings and Equipment**

Description	Cost	Depreciation	Book Value
Equipment	\$1,727,869.00	\$1,296,170.00	\$431,699.00
Leasehold Improvements	\$446,848.00	\$170,352.00	\$276,496.00
Vehicles	\$51,958.00	\$24,639.00	\$27,319.00
Furniture	\$713,362.00	\$119,776.00	\$593,586.00
Total:	\$2,940,037.00	\$1,610,937.00	\$1,329,100.00

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Part: IV

Question: 58

SAN FRANCISCO AIDS FOUNDATION

94-2927405

Other Assets

Asset Description	BOY Amount	EOY Amount
Housing and other security deposits	\$240,385.00	\$244,022.00
Total:	\$240,385.00	\$244,022.00

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Part: IV

Question: 65

SAN FRANCISCO AIDS FOUNDATION

94-2927405

Other Liabilities

Liability Description	BOY Amount	EOY Amount
Capital lease obligation	\$112,232.00	\$175,108.00
Total:	\$112,232.00	\$175,108.00

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Form: 990

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Part: IV-A

Question: d(2)

SAN FRANCISCO AIDS FOUNDATION

94-2927405

Revenue Audit Line d(2)

Description	Amount
Reclass rent expense	-\$81,793.00
Total:	-\$81,793.00

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Form: 990

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Part: IV-B

Question: d(2)

SAN FRANCISCO AIDS FOUNDATION

94-2927405

Expense Audit Line d(2)

Description	Amount
Reclass rent expense	-\$81,793.00
Total:	-\$81,793.00

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Part: V

Question:

SAN FRANCISCO AIDS FOUNDATION

94-2927405

Officers, Directors, Trustees, and Key Employees

Name and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Andrew Belschner Title: Board Chair Addr 1: P O Box 426182 Addr 2: CSZ: San Francisco, CA 94142-6182 Country: United States	2.5	\$0.00	\$0.00	\$0.00
Christopher Esposito Title: Board Member Addr 1: P O Box 426182 Addr 2: CSZ: San Francisco, CA 94142-6182 Country: United States	2.5	\$0.00	\$0.00	\$0.00
David Galullo Title: Board Member Addr 1: P O Box 426182 Addr 2: CSZ: San Francisco, CA 94142-6182 Country: United States	2.5	\$0.00	\$0.00	\$0.00
Denise Bradby Title: Board Member Addr 1: P O Box 426182 Addr 2: CSZ: San Francisco, CA 94142-6182 Country: United States	2.5	\$0.00	\$0.00	\$0.00
Eric R Roberts Title: Board Member Addr 1: P O Box 426182 Addr 2: CSZ: San Francisco, CA 94142-6182 Country: United States	2.5	\$0.00	\$0.00	\$0.00
Helen Younossi Title: Board Member Addr 1: P O Box 426182 Addr 2: CSZ: San Francisco, CA 94142-6182 Country: United States	2.5	\$0.00	\$0.00	\$0.00

Name and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
<p>LeRoy Blea</p> <p>Title: Board Member Addr 1: P O Box 426182 Addr 2: CSZ: San Francisco, CA 94142-6182 Country: United States</p>	2.5	\$0.00	\$0.00	\$0.00
<p>Lorna Thornton MD</p> <p>Title: Board Member Addr 1: P O Box 426182 Addr 2: CSZ: San Francisco, CA 94142-6182 Country: United States</p>	2.5	\$0.00	\$0.00	\$0.00
<p>Mark Cloutier</p> <p>Title: Chief Executive Officer Addr 1: P O Box 426182 Addr 2: CSZ: San Francisco, CA 94142-6182 Country: United States</p>	40	\$221,679.00	\$15,118.00	\$0.00
<p>Mike Richey</p> <p>Title: Board Member Addr 1: P O Box 426182 Addr 2: CSZ: San Francisco, CA 94142-6182 Country: United States</p>	2.5	\$0.00	\$0.00	\$0.00
<p>Tom Perrault</p> <p>Title: Board Member Addr 1: P O Box 426182 Addr 2: CSZ: San Francisco, CA 94142-6182 Country: United States</p>	2.5	\$0.00	\$0.00	\$0.00
<p>Dan Bernal</p> <p>Title: Board Member Addr 1: P O Box 426182 Addr 2: CSZ: San Francisco, CA 94142-6182 Country: United States</p>	2.5	\$0.00	\$0.00	\$0.00
<p>Jonathan Deason</p> <p>Title: Board Member Addr 1: P O Box 426182 Addr 2: CSZ: San Francisco, CA 94142-6182</p>	2.5	\$0.00	\$0.00	\$0.00

Name and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Country: United States				
Michael Kidd	2.5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: P O Box 426182 Addr 2: CSZ: San Francisco, CA 94142-6182 Country: United States				
TOTALS		\$221,679.00	\$15,118.00	\$0.00

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Part: VIII

Question:

SAN FRANCISCO AIDS FOUNDATION

94-2927405

Relationship of Activities

Line No Relationship of Activities to the Accomplishment of Exempt Purposes

93 a Technical assistance agreement with Pangaea Global AIDS Foundation.

93 b Maintenance of Client information system.

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Form: Schedule A
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Part: III
Question: 2

SAN FRANCISCO AIDS FOUNDATION
94-2927405

Transaction Explanations

Line	Explanation
2d	See Form 990, Pt V

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Form: Schedule A
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Part: IV-A
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SAN FRANCISCO AIDS FOUNDATION
94-2927405

Other Income

Description	2006	2005	2004	2003
Event merchandise revenue	\$106,300.00	\$67,143.00	\$72,714.00	\$41,069.00
Termination of capital lease	\$5,169.00	\$0.00	\$0.00	\$25,081.00
Miscellaneous revenue	\$23,660.00	\$546.00	\$2,649.00	\$4,084.00
Total:	\$135,129.00	\$67,689.00	\$75,363.00	\$70,234.00