

**PROGRESS IN
THE FIGHT
FOR BETTER
TREATMENT
PREVENTION
A VACCINE
AND A CURE
FOR HIV
TUBERCULOSIS
AND HEPATITIS
C VIRUS**

TAG

Treatment Action Group

18 June 2018

Dear Friend of TAG:

I'm proud to share with you TAG's 2017 Annual Report. Last year was one of unprecedented threats to TAG's mission and the people we serve. A newly-elected President threatened to abolish the Affordable Care Act (ACA) and proposed savage cuts to the federal research, health care, domestic and international AIDS prevention and treatment, and immigrant health services budgets. Congress seemed determined to roll back protections for LGBTQ people, women's reproductive health and rights, and immigrants' very ability to live in the United States.

Treatment Action Group was a leader in global, national, state, and local coalitions to defeat these threats, advance research, and protect the interests of people living with or at risk for HIV, hepatitis C virus (HCV) infection, and tuberculosis (TB). Together with our allies, we fought successfully to preserve the ACA. We beat back efforts to make cuts to the budgets of the National Institutes of Health (NIH), Centers for Disease Control and Prevention (CDC), the AIDS Drug Assistance Programs (ADAPs), and the President's Emergency Plan for AIDS Relief (PEPFAR). We also continued our campaign to scale up effective HIV prevention, treatment, housing services, harm reduction and treatment for opioid addiction, and sexual health and reproductive rights, at the national level, in New York State and City, and in the most deeply affected jurisdictions in the Deep South.

TAG's campaign to end HIV as an epidemic by the end of the year 2020 made significant progress, with the first substantial declines in new HIV infections among men who have sex with men — the group with the most new infections — in New York State and City reported in over three decades. We continued to fight for lower drug prices and greater treatment access to two-and-three drug oral cures for HCV. We intensified our struggle for more investment, better clinical trials, and more rapid access to effective new diagnostics and drugs to more rapidly and safely diagnose and cure TB.

We're so grateful to you and your dedicated support to TAG. We couldn't have defended our mission and advanced the health of the people we serve without this generosity, which gives us the freedom and the resources to accelerate our mission when threats arise. Our work is far from finished, and each day brings new challenges. As you review what we've done over the past year — all thanks to you and your donations — please consider increasing your support to TAG's work.

Yours in the struggle to end HIV, HCV, and TB,



Barbara Hughes
President, Board of Directors

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2017 RESEARCH IN ACTION AWARDS

TAG's 2017 Research in Action Awards took place on November 16 at Slate in New York City. The event honors activists, scientists, philanthropists, and creative artists who have made contributions to the fight against HIV, tuberculosis, and hepatitis C virus. Resources raised at RIAA provide vital support for TAG's programs throughout the year.



Event co-chairs Sally Morrison and Robert Monteleone



Johanne Morne presents the award to honoree Dr. Demetre Daskalakis



TAG Board Chair, Barbara Hughes



TAG Executive Director, Mark Harrington, presenting the award to honoree Charles King



Honoree Joseph Evall



Co-host Jenna Wolfe

TAG ANNUAL REPORT PROJECT UPDATES

BASIC SCIENCE, VACCINES, AND CURE (BSVC) PROJECT

Throughout 2017, TAG's BSVC Project continued to support the HIV cure research field by maintaining the Research Toward an HIV Cure Clinical Trials website listing. Updated monthly, the listing contains information on ongoing and completed clinical trials, along with links to study results where available. The web page attracts frequent visits and has been widely cited by researchers and other cure research stakeholders, including representatives from the National Institutes of Health.

The BSVC Project co-sponsored and helped organize a Forum for Collaborative Research workshop, "Regulation of Clinical Research Related to HIV Cure," held in Bethesda, Maryland. The meeting facilitated discussion of a number of important issues facing the field, including enhancing the involvement of HIV-positive women and the use of antiretroviral treatment interruptions in clinical trials. TAG's BSVC Project

Director Richard Jefferys served as a panelist on the topic of gene therapy research.

TAG launched a new report: *HIV Research in the Era of PrEP: The Implications of TDF/FTC for Biomedical Prevention Trials* in September, co-authored by BSVC Project Director Richard Jefferys and HIV Project colleagues Tim Horn and Jeremiah Johnson. Based on a review of the scientific literature and an online community survey, the report addresses the complex implications of the availability of PrEP for the ethical conduct of clinical trials of other candidate HIV prevention interventions, such as vaccines.

The BSVC Project sponsored a community webinar on the problem of suboptimal immune recovery despite antiretroviral therapy in November, and presented on a May webinar providing an update on cure research results, targeted toward community advisory board members of the Martin Delaney Collaboratories (projects funded by the National Institutes of Health that are focused on the development of an HIV cure). Richard Jefferys also presented a biomedical prevention & cure research pipeline update at the National Alliance of State and Territorial AIDS Directors (NASTAD) Prevention and Care Technical Assistance Meeting in July.

HEPATITIS C VIRUS (HCV) PROJECT

During the current tumultuous political times, the HCV Project has ramped up defensive and all-out resistance strategies to mitigate threats to our efforts to eliminate hepatitis C in our lifetimes. At every turn, we speak out against anti-science policies, provide technical assistance to emerging activists, help to develop leadership across the diverse campaigns in which we engage, and work in coalition to maximize political pressure.

In 2017, two additional regimens (Vosevi and Mavyret) hit the market, which can cure all genotypes (viral strains) in over 95% of people living with HCV in as little as 8 weeks. Some gains have been made in generic direct-acting antivirals (DAAs) access in low- and

middle-income countries through legal and advocacy channels—safe and effective generics can cost less than US\$100. Yet unfinished business for HCV advocacy remains: We need to increase diagnoses, expand harm reduction and safer drug consumption spaces to address the opioid/overdose epidemics, and strengthen political and funding commitments towards elimination.

The HCV Project helps steer the New York State HCV Elimination Campaign, which convened 200 stakeholders at the first-ever statewide elimination summit in February 2017. Thanks to our tireless campaigning for political buy-in and increased budget allocations, in early 2018, New York became the first U.S. state to commit to HCV elimination, in an announcement by Governor Cuomo that included the expansion of rental assistance to people living with HIV. The state-approved budget included \$5 million for HCV programs, quadrupling the previous funding, which had been flat for the last decade. Further

advocacy will be needed to sustain funding beyond a one-year investment and to fulfill the community demand for a statewide Task Force to implement elimination recommendations. We will also support City Council budget advocacy by our community partners. We also participate as a coalition partner in the Supervised Injection Facilities NYC/End Overdose campaign, fighting for evidence-based interventions to prevent overdose and link New Yorkers to HIV/HCV testing, treatment, care, and harm reduction services. Currently, the campaign is pressuring NYC Mayor de Blasio to release a feasibility report championed and conducted by NYC SIF/End Overdose partners.

Our value to global and domestic HCV advocacy remains in translating research for treatment activists in order to strengthen their technical knowledge and capacity on the latest treatments and diagnostics. This year, we published and translated into three languages the updated *Training Manual for Treatment Advocates: Hepatitis C Virus and HIV Coinfection* for educators to use in training workshops and community forums. We also worked with national experts to develop advocacy tools on cost-modeling the national HCV epidemic—expected in 2018—which can be used to influence funding commitments.

TAG and partners convened the World HCV Community Advisory Board among 37 treatment activists, three

generics and three diagnostics companies in Bangkok. The meeting offered an opportunity to exchange information and assert

demands on treatment availability and pricing. A central component of our work in 2018 is to build activists' capacity on diagnostics technologies and overcoming barriers to testing. We will support growing demands for global multilateral funding for HCV, continued expansion to generic DAAs and affordable diagnostics, and the inclusion of people who use drugs and the incarcerated in US-based HCV elimination efforts.

“The meeting offered an opportunity to exchange information and assert demands on treatment availability and pricing.”

- World HCV Community Advisory Board Report <http://www.hepcoalition.org/advocate/advocacy-tools/article/forging-a-path-to-hcv-elimination-simpler-tests-and-affordable-generics>
- *Training Manual for Treatment Advocates: Hepatitis C Virus and HIV Coinfection* <http://www.treatmentactiongroup.org/content/updated-training-manual-hcv-coinfection-hiv>

HIV PROJECT

In 2017, TAG's HIV Project continued to advance its research and policy agenda amidst significant shifts in the federal political climate. This has required a recalibration of strategies to not only defend against any backsliding in HIV prevention and survival gains made of the past two decades, but to continued movement toward the end of HIV as an epidemic in the United States.

Notable achievements included the launch of the southern states ending-the-epidemic (EtE) initiative,

beginning with a landmark convening of 45 community leaders from eight Deep South states to explore opportunities to move forward with strategies to end their epidemics. Leaders in several jurisdictions stepped forward to begin EtE strategy development in 2017, including Alabama, Louisiana, and Nashville, Tennessee. TAG convened successful planning meetings with community, health department, academic, and government stakeholders in all three jurisdictions and work toward task force development remains under way.

Our hope is that these efforts will yield results similar to those being seen in New York, where the 2015 EtE blueprint is having an impact. According to 2016 surveillance data released in December, new diagnoses dropped from 3,443 in 2014 to 2,881, with a 12 percent

decrease among gay and bisexual men. Much of the success thus far is a result of a number of progressive policy victories, including increased funding for New York City sexual health and wellness clinics, coverage of transgender health services under Medicaid, and significant increases in housing assistance for people living with and vulnerable to HIV infection.

The HIV Project's EtE work continued in lockstep with its long-standing advocacy supporting the

development of highly effective, maximally tolerable, and easily administered treatment options for people living with HIV—particularly those with extensive treatment experience and limited options—and those vulnerable to the infection. A necessary extension of this work has been renewed focus on affordable access to HIV prevention and treatment in the U.S., where egregious drug pricing and the need for cost containment in the face of finite resources are increasingly at odds and in need of reconciliation.

TB PROJECT

TB remains the leading cause of death of people with HIV, and has now surpassed HIV as the lead infectious killer globally. TAG's activism in 2017 to combat this deadly but preventable, curable disease employed a right to science frame to promote patient- and community-oriented TB research and care.

On the research side, TAG worked with community partners on the Global TB Community Advisory Board and the Community Research Advisors Group to review several clinical trials protocols for treatment and prevention. TAG's TB team focused on the appropriate inclusion in research of marginalized groups—including children, adolescents, and pregnant and post-partum women—to ensure evidence guides the best care for these vulnerable populations. To promote adequate resources for research and development and provide accountability for closing the funding gap, TAG issued its annual *Tuberculosis Research Funding Trends* report, and developed the first-ever country-specific funding targets. In anticipation of the November 2017 Global Ministerial Conference on TB in Moscow, TAG was commissioned to research and write a seminal policy paper on TB research funding for the World Health Organization (WHO), *Global Investments In Tuberculosis Research And Development: Past, Present, And Future*.

Securing equitable access to the benefits of such research also requires adequate resources. To that end, TAG and partners educated key decision-makers on TB needs. Our collective advocacy led to U.S. legislative commitments to increasing funding for both the domestic and global TB response, even in an oppositional political environment.

TAG also advocated for improved availability of specific key diagnostic, prevention, and treatment interventions at the global level, and empowered in-country advocates to do the same at national and regional levels. Priority tools included the life-saving, point-of-care test for TB in people with AIDS (TB-LAM), newer drugs (bedaquiline, delamanid, and child-friendly formulations), and a newer prevention option (3HP).

TAG's TB team developed webinars, guides, and toolkits to raise awareness about key services and interventions among decision-makers and providers, and build capacity among advocacy partners. TAG organized workshops and trainings for the independent community groups it supports (the Global TB Community Advisory Board and the Community Research Advisors Group).

TAG is continuing this work to maximize the opportunity of the United Nations High-Level Meeting in September 2018, and secure strong commitments in the fight against TB, in particular on human rights, childhood TB, and TB research and development.

U.S. AND GLOBAL HEALTH POLICY

TAG started 2017 with a charge to continue its deep and strategic work on advancing cross-cutting HIV, TB, and HCV policy-advocacy both federally and globally. The year ended with the unjust repeal of the Affordable Care Act's (ACA) individual mandate. Passed on the back of a disastrous tax bill that also sharpened the axe for the administration to take aim at live-saving research and important entitlement programs in 2018, under the guise of addressing the federal deficit.

Despite the penultimate setback, and the departure of the visionary leadership of Kenyon Farrow, TAG stood resilient and responded fiercely to challenges throughout the year with great success: countering the administration's repeated attempts to dismantle Medicaid, cull the NIH, and deregulate the FDA. Even in the face of the current fiscal climate and challenging political dynamic, TAG's year-long strategic investment in policy, advocacy, and communications in 2017 have yielded further wins with the bipartisan strengthening and expanding research programs with additional funding at NIH and for the Fogarty International Center, advocacy momentum to community and Congressional awareness on TB, and capitalizing on opportunities to significantly expand research for neglected populations such as pregnant women and children.

TAG's collaborative advocacy this past year with organization and coalition partners also positions future work favorably. For the first time in its history, the CDC's Division of TB Elimination (DTBE) was included in the advocacy of the powerful Federal AIDS Policy Partnership's (FAPP) AIDS Budget and Appropriations Coalition (ABAC) for the fiscal year (FY19). Significant groundwork was laid on educating the Washington D.C. policy community on the impact of the Pediatric Research Equity Act (PREA) loophole that exempts pharmaceutical manufacturers from conducting necessary pediatric clinical research on neglected diseases like TB. Both Kenyon and Suraj

were instrumental in the development and launch of the HIV Racial Justice Now coalition, which seeks to instill a necessary racial justice framework within HIV advocacy efforts, build leadership of communities of color impacted by HIV, and collectively respond to the administration's disregard for human rights and social justice of immigrants, people who use drugs, the LGBTQ community, sex workers, and other vulnerable populations.

The success of TAG's advocacy work is evidence that sustained activism can advance progressive policies even in the most arduous policy spaces. TAG's policy staff will take the momentum and best practices gained from 2017 and seek to apply new strategic campaigns in a critical election year to advance these wins further. In doing so, TAG will continue to sharpen its strategic policy advocacy, capacity and coalition building efforts, and communications infrastructure.

The work ahead for TAG in 2018 is clear: continuing to protect vital federal research and programs for all communities impacted by HIV, TB and HCV—

while seeking to expand activism fronts on universal health care and drug pricing in a critical election year. TAG will deepen its collaborative work with organizations and coalitions such as AIDS United, Black AIDS Institute, HIV Racial Justice Now, Housing Works, National TB Controller's Association, Positive Women's Network-USA, the TB Roundtable and many others. TAG will further continue to capitalize on growing attention to the TB epidemic, respond to administration attempts to limit access to Medicaid and target vulnerable immigrants, and work alongside communities to ensure robust engagement and activism at every level.

“The success of TAG's advocacy work is evidence that sustained activism can advance progressive policies even in the most arduous policy spaces.”

Balance Sheet

	2017	2016
Assets		
Cash and cash equivalents	\$1,949,112	\$1,978,688
Contributions receivable	88,411	73,871
Prepaid expenses and other current assets	25,384	31,826
Donated artwork	414,500	404,500
Security deposits	72,463	72,463
Property and equipment - net	25,974	30,870
Total assets	\$2,575,844	\$2,592,218
Liabilities and Net Assets		
Liabilities		
Accounts payable and accrued expenses	\$25,660	\$29,513
Deferred rent	\$55,069	44,570
Total liabilities	80,729	74,083
Net assets		
Unrestricted	1,321,367	1,355,999
Temporarily restricted	1,173,748	1,162,136
Total net assets	2,495,115	2,518,135
Total liabilities and net assets	\$2,575,844	\$2,592,218

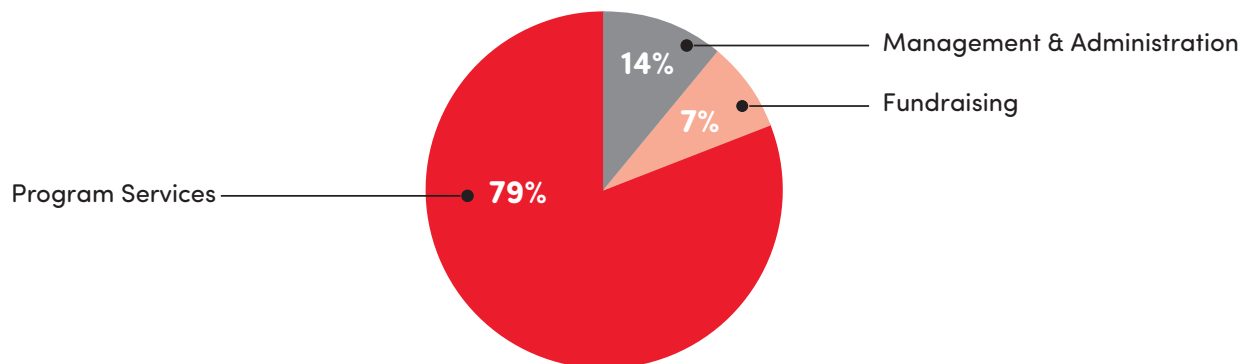
Statement of Cash Flows

	2017	2016
Cash Flows from Operating Activities		
Change in net assets	\$(23,020)	\$(1,071,102)
Adjustments to reconcile change in net assets to net cash used by operating activities		
Depreciation	9,432	7,246
Donated artwork	(10,000)	(23,500)
Loss (gain) on disposal of fixed assets	(186)	4,745
Decrease (increase) in assets		
Contributions receivable	(14,540)	98,113
Prepaid expenses and other current assets	6,442	(6,898)
Security deposits		(29,448)
Increase (decrease) in liabilities		
Accounts payable and accrued expenses	(3,853)	15,400
Deferred rent	10,499	37,949
Net cash used by operating activities	(25,226)	(967,495)
Cash flows from investing activities		
Purchases of fixed assets	(4,970)	(25,195)
Proceeds from sales of fixed assets	620	
Net cash used by investing activities	(4,350)	(25,195)
Net change in cash and cash equivalents	(29,576)	(992,690)
Cash and cash equivalents - beginning of year	1,978,688	2,971,378
Cash and cash equivalents - end of year	\$1,949,112	\$1,978,688

Statement of Activities

			2017	
		Unrestricted	Temporarily Restricted	Total
Revenues and Other Support				
Contributions and grants		\$360,226	\$2,034,918	\$2,395,144
Special events income	\$280,562			
Less direct costs of special events	(58,125)	222,437		222,437
Other income				
Interest Income		1,549		1,549
Net assets released from restrictions		2,023,306	(2,023,306)	
Total revenues and other support		2,607,518	11,612	2,619,130
Expenses				
Program services				
HIV Project		788,440		788,440
Hepatitis C Virus Project		325,052		325,052
TB/HIV Project		984,847		984,847
Total Program Services		2,098,339		2,098,339
Supporting Services				
Management and General		364,836		364,836
Fundraising		179,161		179,161
Total supporting services		543,997		543,997
Total operating expenses		2,642,336		2,642,336
Change in net assets before gain (loss) on disposal of fixed assets		(34,818)	11,612	(23,206)
Gain (loss) on disposal of fixed assets		186		186
Change in net assets		(34,632)	11,612	(23,020)
Net assets - beginning of year		1,355,999	1,162,136	2,518,135
Net assets - end of year		\$1,321,367	\$1,173,748	\$2,495,115

Summary of 2017 Functional Expenses



\$100,000 or more

Ford Foundation
Bill and Melinda Gates Foundation
Gilead Sciences
Elton John AIDS Foundation
Open Society Foundations
Stop TB Partnership hosted by UNOPS
ViiV Healthcare

\$50,000 to \$99,999

M•A•C AIDS Fund
Merck & Co.
Veterans Affairs Medical Center of Washington, DC

\$25,000 to \$49,999

amfAR, The Foundation for AIDS Research
Broadway Cares / Equity Fights AIDS
Debs Foundation: Richard A. & Barbara Knowles Debs; Nick Debs
Janssen Therapeutics / Johnson & Johnson Health Care Systems
Levi Strauss Foundation
World Health Organization

\$10,000 to \$24,999

Annie Bennett Glenn Fund in honor of P. Forrest Williams, Jr.
Kevin & Neil Goetz / Screen Engine/ASI
Richard M. Lynn and Joseph Evall
Partners in Health
David Rosenauer and Rex Walker
Stony Wold-Herbert Fund
The Elizabeth Taylor AIDS Foundation
Joy A. Tomchin
Stanley H. Tomchin

\$5,000 to \$9,999

The Aurum Institute NPC
David Corkery
Credit Suisse
Marc E. Elovitz
Suzanne Gay in memory of Phillips G. Gay, Jr.
Global Health Strategies / David Gold
Addie Guttag / AJG Foundation
Mark Harrington
Robert W. Lennon and Mark Gilrain
Alby P. Maccaroni, Jr.
Dr. J. Michael McCune and Dr. Karen Kaye Smith-McCune
Robert Monteleone
Audrey Sokoloff and Timothy Hosking in honor of Joseph Evall
Test Positive Aware Network
The Andrew D. Zacks Foundation

\$2,500 to \$4,999

AERAS
AIDS Fonds Netherlands
Amida Care / Doug Wirth, President and CEO
Benjamin, Christine and Darius Anagnos
Anonymous Fund of Jewish Communal Fund
Sponsorships for Jim Aquino in the NYC Marathon
Katherine C. Ash and Thomas M. Ash III
John Calcagno and Dr. Amr Abdelaziz
Timothy and Mary Casey
Celeste Cooper
M. Lee Garrison
GMHC / Kelsey Louie
The Gendal Family Charitable Foundation in honor of Monte Steinman
Dr. Michael F. Giordano in Memory of Michael Palm
Judith and Richard Harrington
Harvard University
Housing Works / Charles King and Matthew Bernardo
Barbara Hughes
OraSure Technologies
Jason Osher and Richard Schubel
Seth Rosen and Dr. Jacob Goertz
Dr. Bruce R. Schackman and Edward K. Sikov
Rachel B. Tiven and Seth M. Marnin
W. Kirk Wallace and Mark M. Sexton in honor of Joe Evall

\$1,000 to \$2,499

Jim Aquino
AVAC / Mitchell and Alice Warren
Gifts in Celebration of Michael Beltran and Tim Ford's 25th Anniversary
Bob Bronzo
Frank Bua and Scott Carroll
John Caldwell and Zane Blaney: John & Zane's Queer Legacy Fund
Scott P. Campbell
Dr. Charles C.J. Carpenter and Mrs. Sally Carpenter
Dr. Kenneth Castro
Larry Chanen and Jack Burkhalter
Coalition Internationale SIDA
Arianne Z. Dar / New Ground Fund of Marin Community Foundation
John F. Duane
Judith Evall
Mitchell, Gracen and Sara Evall in honor of Joe Evall
Charles Franchino
Gayle French and William French in memory of Jay Kevin Funk
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Michael K. Longacre
Bobby McLain and Alberto Blanquel
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Laura A. Morrison
Mirla and George Morrison
Sally Morrison and Tobias Corser
NYC Department of Health and Mental Hygiene, Bureau of HIV/AIDS
Prevention and Control
Walter Rieman in memory of Tom Stoddard
Andrew C. Schirmmeister III on behalf of Monte Steinman
Jamie Saakvitne and Daniel Chow in honor of Barbara Hughes
Michael Schultz
Evan Schwartz and Robert Fitterman
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Monte Steinman
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Theratechnologies
University of California, San Francisco
James M. and Ruth E. Wilder Foundation: Terri Wilder
P. Forrest Williams, Jr.

\$500 to \$999

AIDS Treatment Activists Coalition
Michael Beltran and Timothy Ford
Steven Capone
Denise and Steven J. Chickery
Carl Coleman
Stephanie and Walter Cowles
Jonathan Creighton and Megan Harrington
Richard J. Davis and Nancy R. Davis
John Deyling
Paul L. Dietz
Dr. Stephen M. Dillon in honor of Tim Horn
Erid Douglas
Michelle and Andre Doré / The InkLink Group
Mario Egozi
Lauren Elliot
Joy Episalla and Carrie Yamaoka

European AIDS Treatment Group
Jennifer J. Furin
Robert Gillard and James Harrington in honor of Monte Steinman
New York State Assemblymember Deborah J. Glick
Andrew J. Goffe and Jeff Levin
Robert C. Henry
Fred Hutchinson Cancer Research Center
Larry Iannotti and John Weis
Richard Jefferys
Babette Krolik and Sara Rafsky
Peter Kukielski and J. Drew Hodges
Charles Laven
Dale Jay Leitz
David Levine
Richard Mark in honor of Joseph Evall
Joseph McConnell and Erik Haagenen
Mt. Sinai Institute for Advanced Medicine
Jay Musoff
NASTAD / Murray C. Penner
Mark O'Donnell
Adam Offenhartz
Donna M. Pauline in memory of Jeff Palladino
David Pavese and Virun Rampersad
Eddie Peltó
Laura Pinsky in memory of Paul Harding Douglas
Daniel Ptacek
Robert H. Remien, Ph.D.
Mady J. Schuman and Kathleen D. Morrow
Virginia Shubert and David Sipress
Jane Silver
Peter Staley
Daniel Thomasch
Keith S. Tobin, M.D.
Dennis Trunfio in honor of Robert Monteleone
Tulane University, New Orleans
John Voelcker

\$250 to \$499

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Lauren Barry
Jack M. Battaglia
Robert J. Bazell
Brian Berk
Mark B. Black
Prof. Richard M. Buxbaum and Catherine Hartshorn
Richard Cardillo in memory of Peter F. Diffly, Jr.
Jeanie Carstensen
Matthew Chappell
Nancy Menkes Clayman in honor of Monte Steinman
Deborah Cotton, M.D., in honor of Ida May Lipsett
Scott Dainton
Jeff Davis and Kevin Jennings in honor of Robert Monteleone and Joe Evall
Judith C. Davis-Fagan
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S. David Deitcher
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Gene Falk
Steven M. Frank and Dr. Elizabeth Powell
Leslie Asako Gladsjo
Ron Goldberg and Joe Chiplock
Georgia V. Helmick
Hepatitis Education Project
Shelley and Jeff Holtzman
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Johns Hopkins University
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Adrienne Koch
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Elaine and Glenn Mealy
Jeff Mendoza
Fernando Juan Alva Miras
Fraser D. 'Skip' Mooney
Scott W. Morgan
Mitchell Netburn
Scott Newman
Bianca Maria Orlando in honor of Joe Evall
Stephen Paine in honor of Joe Evall
Pam A. Parker in honor of Jim Saslow and Steven Goldstein
B Pelton
RESULTS Educational Fund
Clifford Richner
Philip G. Ryan
Gregory 'Greig' Sargeant
Peter Schamel
Jeffrey H. Schmidt
Sarah Schutzensel in memory of Hartly Fleischmann
The Scientific Consulting Group
Lousine Shamamian
Merrie Shinder
Casey W. Smith
Rosalind Fox Solomon
Dr. John B. 'Jack' Steever
Gail Creitman Toll in honor of Monte Steinman
Andrew Ward
Thomas P. Wilczak and Steven R. Quinkert
Elizabeth Strong Williams
Carl Wolf

plus donations from an additional **410** generous contributors

We would also like to thank artist Erica Baum, producers Tim Levy and Jordan Roth, and the team at BlueprintNYC for their generous in-kind donation of services and goods.

About TAG

Treatment Action Group (TAG) is an independent, activist and community-based research and policy think tank fighting for better treatment, prevention, a vaccine, and a cure for HIV, tuberculosis, and hepatitis C virus.

TAG works to ensure that all people with HIV, TB, or HCV receive lifesaving treatment, care, and information.

We're science-based treatment activists working to expand and accelerate vital research and effective community engagement with research and policy institutions.

TAG catalyzes open collective action by all affected communities, scientists, and policy makers to end HIV, TB, and HCV.

Contribute

TAG welcomes donations from individuals who want to see the research agenda remain responsive to the needs of all people living with HIV, HCV, and TB. Make a tax-deductible gift now: www.treatmentactiongroup.org/support.

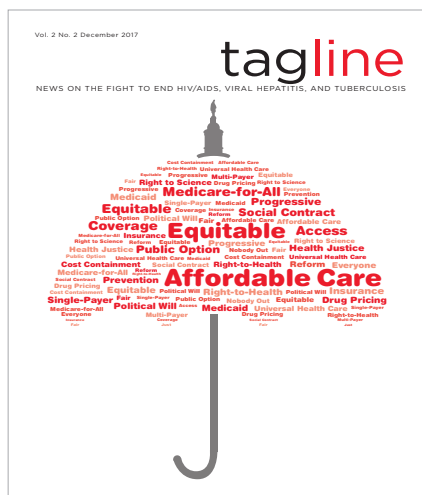
Does your company have a matching gifts program? If so, you can double or even triple your donation. Just complete the program's matching gift form and send it in with your donation to TAG.

When you shop on Amazon, enter the site at smile.amazon.com. Choose TAG Treatment Action Group as your designated charity, and 0.5 percent of the price of your eligible purchase will benefit TAG.

Save the Date!
RESEARCH IN ACTION AWARDS
November 15, 2018
6 pm



★★★★
CHARITY NAVIGATOR
Four Star Charity

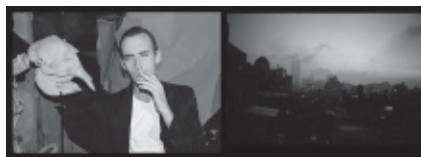


The theme of TAGline's Fall 2017 issue was *Everybody In, Nobody Out*, and it explored the political feasibility and sustainability of universal health care (UHC) in the United States. You can read this issue online here: <http://www.treatmentactiongroup.org/tagline/2017>.

TAG Limited Art Editions

Each year at its Research in Action Awards, TAG presents a new, limited-edition work of art, generously donated by a highly regarded visual artist. Past artists include Erica Baum, Rosalind Fox Solomon, Joy Episalla, Kate Shepherd, Nan Goldin, Robert Gober, Bill Jacobson, fierce pussy, Donald Moffett, Tony Feher, Carrie Yamaoka, David Armstrong, and Richard Renaldi.

TAG retains an inventory of many of the editions for sale to the public. All proceeds benefit TAG in support of programmatic work. If you're interested in purchasing an edition or learning more about the available editions, detailed information can be found at <http://www.treatmentactiongroup.org/limited-art-editions>.



Nan Goldin, *Apocalypse NYC*

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