

**Return of Organization Exempt From Income Tax**

**2006**

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 2006 calendar year, or tax year beginning 2006, and ending 2006, and ending 20

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

**C** Name of organization: **THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA**  
 Number and street (or P O box if mail is not delivered to street address) / Room/suite: **CHEMIN DE BLANDONNET 8**  
 City or town, state or country, and ZIP + 4: **CH-1214 GENEVA, SWITZERLAND**

**D** Employer identification number: **98 0380092**

**E** Telephone number: **41-22-791-1700**

**F** Accounting method:  Cash  Accrual  
 Other (specify) ▶

**G** Website: ▶ **WWW.THEGLOBALFUND.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 ▶ **2,535,218,928**

**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 ▶ **N/A**  
**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)

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

Revenue	<b>1</b> Contributions, gifts, grants, and similar amounts received:				
	<b>a</b> Contributions to donor advised funds	<b>1a</b>			
	<b>b</b> Direct public support (not included on line 1a)	<b>1b</b>	<b>512,827,093</b>		
	<b>c</b> Indirect public support (not included on line 1a)	<b>1c</b>			
	<b>d</b> Government contributions (grants) (not included on line 1a)	<b>1d</b>	<b>1,895,893,851</b>		
	<b>e</b> Total (add lines 1a through 1d) (cash \$ <b>2,408,720,944</b> noncash \$ )	<b>1e</b>			<b>2,408,720,944</b>
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>			
	<b>3</b> Membership dues and assessments	<b>3</b>			
	<b>4</b> Interest on savings and temporary cash investments	<b>4</b>			
	<b>5</b> Dividends and interest from securities	<b>5</b>			<b>126,497,984</b>
	<b>6a</b> Gross rents	<b>6a</b>			
	<b>b</b> Less: rental expenses	<b>6b</b>			
<b>c</b> Net rental income or (loss). Subtract line 6b from line 6a	<b>6c</b>				
<b>7</b> Other investment income (describe ▶ )	<b>7</b>				
Revenue	<b>8a</b> Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
	<b>b</b> Less: cost or other basis and sales expenses	<b>8a</b>	<b>8b</b>		
	<b>c</b> Gain or (loss) (attach schedule)	<b>8c</b>			
	<b>d</b> Net gain or (loss). Combine line 8c, columns (A) and (B)	<b>8d</b>			
	<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>				
	<b>a</b> Gross revenue (not including \$ of contributions reported on line 1b)	<b>9a</b>			
	<b>b</b> Less: direct expenses other than fundraising expenses	<b>9b</b>			
	<b>c</b> Net income or (loss) from special events. Subtract line 9b from line 9a	<b>9c</b>			
Revenue	<b>10a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>			
	<b>b</b> Less: cost of goods sold	<b>10b</b>			
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	<b>10c</b>			
	<b>11</b> Other revenue (from Part VII, line 103)	<b>11</b>			
<b>12</b> Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	<b>12</b>			<b>2,535,218,928</b>	
Expenses	<b>13</b> Program services (from line 44, column (B))				<b>1,880,334,075</b>
	<b>14</b> Management and general (from line 44, column (C))				<b>5,369,950</b>
	<b>15</b> Fundraising (from line 44, column (D))				<b>9,792,500</b>
	<b>16</b> Payments to affiliates (attach schedule)				
	<b>17</b> Total expenses. Add lines 13 and 14, column (A)				<b>1,895,496,525</b>
Net Assets	<b>18</b> Excess or (deficit) for the year. Subtract line 17 from line 12				<b>639,722,403</b>
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))				<b>1,464,394,103</b>
	<b>20</b> Other changes in net assets or fund balances (attach explanation). STMT 1				<b>13,140,419</b>
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18, 19, and 20				<b>2,117,256,925</b>

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**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
<b>22a</b>	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
<b>22b</b>	Other grants and allocations (attach schedule) (cash \$ <b>1,818,762,621</b> noncash \$ _____) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	<b>1,818,762,621</b>	<b>1,818,762,621</b>	STMT 6	
<b>23</b>	Specific assistance to individuals (attach schedule)				
<b>24</b>	Benefits paid to or for members (attach schedule)				
<b>25a</b>	Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)	<b>1,508,080</b>	<b>820,705</b>	<b>316,060</b>	<b>371,315</b>
<b>b</b>	Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)				
<b>c</b>	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) (attach schedule)				
<b>26</b>	Salaries and wages of employees not included on lines 25a, b, and c				
<b>27</b>	Pension plan contributions not included on lines 25a, b, and c				
<b>28</b>	Employee benefits not included on lines 25a - 27				
<b>29</b>	Payroll taxes				
<b>30</b>	Professional fundraising fees				
<b>31</b>	Accounting fees	<b>110,126</b>	<b>21,805</b>	<b>88,321</b>	
<b>32</b>	Legal fees	<b>578,993</b>	<b>247,727</b>	<b>111,190</b>	<b>220,076</b>
<b>33</b>	Supplies	<b>80,850</b>	<b>56,207</b>	<b>10,558</b>	<b>14,085</b>
<b>34</b>	Telephone	<b>604,125</b>	<b>450,915</b>	<b>62,303</b>	<b>90,907</b>
<b>35</b>	Postage and shipping	<b>164,150</b>	<b>61,879</b>	<b>17,699</b>	<b>84,572</b>
<b>36</b>	Occupancy	<b>2,524,121</b>	<b>1,893,091</b>	<b>252,412</b>	<b>378,618</b>
<b>37</b>	Equipment rental and maintenance	<b>74,147</b>	<b>55,610</b>	<b>7,415</b>	<b>11,122</b>
<b>38</b>	Printing and publications	<b>1,222,937</b>	<b>601,316</b>	<b>77,311</b>	<b>544,310</b>
<b>39</b>	Travel	<b>6,648,824</b>	<b>4,062,243</b>	<b>501,917</b>	<b>2,084,664</b>
<b>40</b>	Conferences, conventions, and meetings	<b>1,346,660</b>	<b>450,418</b>	<b>118,812</b>	<b>777,430</b>
<b>41</b>	Interest				
<b>42</b>	Depreciation, depletion, etc. (attach schedule)				
<b>43</b>	Other expenses not covered above (itemize):				
<b>a</b>	STATEMENT 7	<b>61,870,891</b>	<b>52,849,538</b>	<b>3,805,952</b>	<b>5,215,401</b>
<b>b</b>	-----				
<b>c</b>	-----				
<b>d</b>	-----				
<b>e</b>	-----				
<b>f</b>	-----				
<b>g</b>	-----				
<b>44</b>	<b>Total functional expenses.</b> Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	<b>1,895,496,525</b>	<b>1,880,334,075</b>	<b>5,369,950</b>	<b>9,792,500</b>

**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 \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_, (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_



**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
<b>Assets</b>	45 Cash—non-interest-bearing . . . . .	474,391	45	616,117
	46 Savings and temporary cash investments . . . . .	2,731,757,828	46	3,135,761,573
	47a Accounts receivable . . . . .	47a		
	b Less: allowance for doubtful accounts . . . . .	47b		47c
	48a Pledges receivable . . . . .	48a		
	b Less: allowance for doubtful accounts . . . . .	48b		48c
	49 Grants receivable . . . . .	225,085,138	49	642,391,043
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule) . . . . .			50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)			50b
	51a Other notes and loans receivable (attach schedule) . . . . .	51a		
	b Less: allowance for doubtful accounts . . . . .	51b		51c
	52 Inventories for sale or use . . . . .			52
	53 Prepaid expenses and deferred charges . . . . .	8,166,931	53	899,166
	54a Investments—publicly-traded securities . . . . .	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a
	b Investments—other securities (attach schedule) . . . . .	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b
	55a Investments—land, buildings, and equipment: basis . . . . .	55a		
	b Less: accumulated depreciation (attach schedule) . . . . .	55b		55c
	56 Investments—other (attach schedule) . . . . .			56
	57a Land, buildings, and equipment: basis . . . . .	57a		
	b Less: accumulated depreciation (attach schedule) . . . . .	57b		57c
58 Other assets, including program-related investments (describe ▶ <b>GOVERNMENT PROMISSORY NOTES</b> . . . . .)	68,969,352	58	419,405,897	
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58 . . . . .	3,034,453,640	59	4,199,073,796	
<b>Liabilities</b>	60 Accounts payable and accrued expenses . . . . .	5,026,877	60	6,328,959
	61 Grants payable . . . . .	1,565,032,660	61	2,075,487,912
	62 Deferred revenue . . . . .		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .		63	
	64a Tax-exempt bond liabilities (attach schedule) . . . . .		64a	
	b Mortgages and other notes payable (attach schedule) . . . . .		64b	
	65 Other liabilities (describe ▶ . . . . .)		65	
	66 <b>Total liabilities.</b> Add lines 60 through 65 . . . . .	1,570,059,537	66	2,081,816,871
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted . . . . .	1,464,394,103	67	2,117,256,925
	68 Temporarily restricted . . . . .		68	
	69 Permanently restricted . . . . .		69	
	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 <b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) . . . . .	1,464,394,103	73	2,117,256,925
	74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73 . . . . .	3,034,453,640	74	4,199,073,796





**Part VI Other Information (continued)**

		Yes	No
<b>82a</b>	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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</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.)		
	<b>82b</b> 9,111,595		
<b>83a</b>	Did the organization comply with the public inspection requirements for returns and exemption applications?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</b>	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	N/A	
<b>84a</b>	Did the organization solicit any contributions or gifts that were not tax deductible?	N/A	
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
<b>85</b>	<b>501(c)(4), (5), or (6) organizations. a</b> Were substantially all dues nondeductible by members?	N/A	
<b>b</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.		
<b>c</b>	Dues, assessments, and similar amounts from members	N/A	
<b>d</b>	Section 162(e) lobbying and political expenditures	N/A	
<b>e</b>	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	N/A	
<b>f</b>	Taxable amount of lobbying and political expenditures (line 85d less 85e)	N/A	
<b>g</b>	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	
<b>h</b>	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?	N/A	
<b>86</b>	<b>501(c)(7) orgs. Enter: a</b> Initiation fees and capital contributions included on line 12	N/A	
<b>b</b>	Gross receipts, included on line 12, for public use of club facilities	N/A	
<b>87</b>	<b>501(c)(12) orgs. Enter: a</b> Gross income from members or shareholders	N/A	
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	N/A	
<b>88a</b>	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.		<input checked="" type="checkbox"/>
<b>b</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		<input checked="" type="checkbox"/>
<b>89a</b>	<b>501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911</b> NONE; <b>section 4912</b> NONE; <b>section 4955</b> NONE		
<b>b</b>	<b>501(c)(3) and 501(c)(4) orgs.</b> 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		<input checked="" type="checkbox"/>
<b>c</b>	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	NONE	
<b>d</b>	Enter: Amount of tax on line 89c, above, reimbursed by the organization	NONE	
<b>e</b>	<b>All organizations.</b> At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		<input checked="" type="checkbox"/>
<b>f</b>	<b>All organizations.</b> Did the organization acquire a direct or indirect interest in any applicable insurance contract?		<input checked="" type="checkbox"/>
<b>g</b>	<b>For supporting organizations and sponsoring organizations maintaining donor advised funds.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	N/A	
<b>90a</b>	List the states with which a copy of this return is filed	STATEMENT 13	
<b>b</b>	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)	90b	NONE
<b>91a</b>	The books are in care of	BARRY GREENE Telephone no. 41-22-791-1700	
	Located at	CHEMIN DE BLANDONNET 8, CH-1214 GENEVA, SWITZERLAND ZIP + 4	
<b>b</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	<input checked="" type="checkbox"/>
	If "Yes," enter the name of the foreign country	SWITZERLAND, STATEMENT 14	
	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)

Yes No

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 **▶ SWITZERLAND**

**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** **N/A**

**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	
<b>93</b> Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments . . . . .					
g Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments . . . . .					
<b>95</b> Interest on savings and temporary cash investments					
<b>96</b> Dividends and interest from securities . . . . .			14	126,497,984	
<b>97</b> Net rental income or (loss) from real estate:					
a debt-financed property . . . . .					
b not debt-financed property . . . . .					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income . . . . .					
<b>100</b> Gain or (loss) from sales of assets other than inventory					
<b>101</b> Net income or (loss) from special events . . . . .					
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
<b>104</b> Subtotal (add columns (B), (D), and (E))				126,497,984	
<b>105</b> Total (add line 104, columns (B), (D), and (E))					126,497,984

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).
N/A	

**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
N/A	%			

**Part X Information Regarding Transfers Associated with**

- (a) Did the organization, during the year, receive any funds, directly or indirectly, from a disqualified person?
- (b) Did the organization, during the year, pay premiums, directly or indirectly, for a disqualified person?

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

Yes	No
	✓

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

**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.

Yes	No
	✓

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

**108** Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No
	N/A

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**

Signature of officer: *Michel Kazatchkine* ✓ Date: 04/11/07

PROFESSOR MICHEL KAZATCHKINE, EXECUTIVE DIRECTOR

Type or print name and title

**Paid Preparer's Use Only**

Preparer's signature: *Janis Becker Hains* Date: 11/4/07 Check if self-employed:

Firm's name (or yours if self-employed): CLARK NUBER, P.S. Preparer's SSN or PTIN (See Gen. Inst. X): P00183358

address, and ZIP + 4: 10900 NE 4TH STREET, SUITE 1700, BELLEVUE, WA 98004 EIN: 91-1194016 Phone no: (425) 454-4919



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

**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

OMB No 1545-0047

**2006**

Department of the Treasury  
Internal Revenue Service

**Supplementary Information—(See separate instructions.)**

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

Name of the organization <b>THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA</b>	Employer identification number <b>98 : 0380092</b>
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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
NONE				

Total number of other employees paid over \$50,000 . ▶	<b>NONE</b>
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**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
STATEMENT 15		

Total number of others receiving over \$50,000 for professional services . . . . . ▶	<b>14</b>
--	-----------

**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
STATEMENT 15		

Total number of other contractors receiving over \$50,000 for other services . . . . . ▶	<b>NONE</b>
--	-------------

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

	Yes	No
<b>1</b> 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>NONE</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		
<b>2</b> 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 )		
<b>a</b> Sale, exchange, or leasing of property?	2a	✓
<b>b</b> Lending of money or other extension of credit?	2b	✓
<b>c</b> Furnishing of goods, services, or facilities?	2c	✓
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <span style="float: right;">FORM 990, PART V-A</span>	2d	✓
<b>e</b> Transfer of any part of its income or assets?	2e	✓
<b>3a</b> 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>b</b> Did the organization have a section 403(b) annuity plan for its employees?	3b	✓
<b>c</b> 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	✓
<b>d</b> Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d	✓
<b>4a</b> Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g	4a	✓
<b>b</b> Did the organization make any taxable distributions under section 4966?	4b	N/A
<b>c</b> Did the organization make a distribution to a donor, donor advisor, or related person?	4c	N/A
<b>d</b> Enter the total number of donor advised funds owned at the end of the tax year . . . . . ►	NONE	
<b>e</b> Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year . . . . . ►	NONE	
<b>f</b> 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 . . . . . ►	NONE	
<b>g</b> Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ►	NONE	

**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	
<b>Total</b> . . . . .					

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



**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)

NOT APPLICABLE

		Yes	No
<b>29</b>	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?		
<b>30</b>	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?		
<b>31</b>	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.) ..... ..... .....		
<b>32</b>	Does the organization maintain the following:		
<b>a</b>	Records indicating the racial composition of the student body, faculty, and administrative staff?		
<b>b</b>	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
<b>c</b>	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
<b>d</b>	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 ) ..... .....		
<b>33</b>	Does the organization discriminate by race in any way with respect to:		
<b>a</b>	Students' rights or privileges?		
<b>b</b>	Admissions policies?		
<b>c</b>	Employment of faculty or administrative staff?		
<b>d</b>	Scholarships or other financial assistance?		
<b>e</b>	Educational policies?		
<b>f</b>	Use of facilities?		
<b>g</b>	Athletic programs?		
<b>h</b>	Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.) ..... ..... .....		
<b>34a</b>	Does the organization receive any financial aid or assistance from a governmental agency?		
<b>b</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		
<b>35</b>	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) **NOT APPLICABLE**

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

<b>Limits on Lobbying Expenditures</b>		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred.)			
<b>36</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .	<b>36</b>	
<b>37</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	<b>37</b>	
<b>38</b>	Total lobbying expenditures (add lines 36 and 37) . . . . .	<b>38</b>	
<b>39</b>	Other exempt purpose expenditures . . . . .	<b>39</b>	
<b>40</b>	Total exempt purpose expenditures (add lines 38 and 39) . . . . .	<b>40</b>	
<b>41</b>	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 . . . . .	<b>41</b>	
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41) . . . . .	<b>42</b>	
<b>43</b>	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36. . . . .	<b>43</b>	
<b>44</b>	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38. . . . .	<b>44</b>	

**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) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
<b>45</b> Lobbying nontaxable amount . . . . .					
<b>46</b> Lobbying ceiling amount (150% of line 45(e)) . . . . .					
<b>47</b> Total lobbying expenditures . . . . .					
<b>48</b> Grassroots nontaxable amount . . . . .					
<b>49</b> Grassroots ceiling amount (150% of line 48(e)) . . . . .					
<b>50</b> Grassroots lobbying expenditures . . . . .					

**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:

- 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**.) . . . . .

Yes	No	Amount
	✓	
	✓	
	✓	
	✓	
	✓	
	✓	
	✓	
	✓	
		NONE

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



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

Department of the Treasury  
Internal Revenue Service

▶ File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

**Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed)

Section 501(c)(3) corporations required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

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

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for section 501(c)(3) corporations required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization <b>THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS &amp; MALARIA</b>	Employer identification number <b>98-0380092</b>
	Number, street and room or suite no. If a P O box, see instructions <b>CHEMIN DE BLANDONNET 8</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>CH-1214 GENEVA, SWITZERLAND</b>	

Check type of return to be filed (file a separate application for each return)

- |  |  |                                    |
|--|--|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)     | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                             | <input type="checkbox"/> Form 8870 |

• The books are in the care of ▶ BARRY GREENE

Telephone No ▶ 41 27911765 FAX No ▶ 41 27911791

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box  If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 months for a section 501(c)(3) corporation required to file Form 990-T) extension of time until 08/15, 2007, to file the exempt organization return for the organization named above. The extension is for the organization's return for

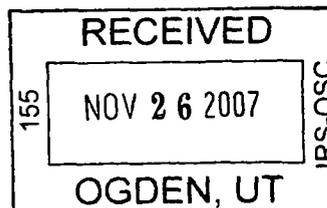
- ▶  calendar year 2006 or
- ▶  tax year beginning \_\_\_\_\_, \_\_\_\_\_, and ending \_\_\_\_\_

2 If this tax year is for less than 12 months, check reason  Initial return  Final return  Change in accounting period

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

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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



- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II and check this box, . . . . .  **X**
- Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

**Part II Additional (not automatic) 3-Month Extension of Time. You must file original and one copy.**

Type or print  File by the extended due date for filing the return See instructions	Name of Exempt Organization <b>THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS &amp; MALARIA</b>	Employer identification number <b>98-0380092</b>
	Number, street, and room or suite no If a P O box, see instructions <b>CHEMIN DE BLANDONNET 8</b>	For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions. <b>CH-1214 GENEVA, SWITZERLAND</b>	

Check type of return to be filed (File a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of  **BARRY GREENE**  
Telephone No  **41 27911765** FAX No  **41 27911791**
- If the organization does not have an office or place of business in the United States, check this box, . . . . .
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . . . . . If this is for the whole group, check this box  If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until 11/15, 20 07

5 For calendar year 2006, or other tax year beginning 20 and ending 20

6 If this tax year is for less than 12 months, check reason  Initial return  Final return  Change in accounting period

7 State in detail why you need the extension ADDITIONAL TIME IS REQUIRED TO GATHER THE NECESSARY INFORMATION FROM THIRD PARTIES TO ASSURE PREPARATION OF A COMPLETE AND ACCURATE TAX RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	8a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b \$
c Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c \$

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature  *Sumner Becker Honio* Title  CPA Date  7/18/2007

**Notice to Applicant. (To Be Completed by the IRS)**

- We have approved this application Please attach this form to the organization's return
- We have not approved this application However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions) This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return
- We have not approved this application After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file We are not granting a 10-day grace period.
- We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested
- Other \_\_\_\_\_

Director \_\_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_

**Alternate Mailing Address.** Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above

Type or print	Name <b>CLARK NUBER P.S.</b>
	Number and street (Include suite, room, or apt. no.) or a P.O. box number <b>10900 NE 4TH, SUITE 1700</b>
	City or town, province or state, and country (including postal or ZIP code) <b>BELLEVUE, WA 98004</b>

**The Global Fund to Fight AIDS, Tuberculosis and Malaria  
EIN 98-0380092**

**For the Year Ended December 31, 2006**

**Form 990, Part I - Other Increases in Fund Balances**

**Description:**

NET UNREALIZED FOREIGN EXCHANGE GAIN ON ASSETS	56,984,018	
DISCOUNTING TO NET PRESENT VALUE OF FUTURE CASH FLOWS (SFAS 116)	(45,181,937)	
	<hr/>	11,802,081
SUBTOTAL		
NET UNREALIZED FOREIGN EXCHANGE LOSS ON LIABILITIES	(6,789,335)	
DISCOUNTING TO NET PRESENT VALUE OF FUTURE CASH FLOWS (SFAS 116)	8,127,673	
	<hr/>	1,338,338
TOTAL NET UNREALIZED GAIN		<hr/> <hr/>
		13,140,419

The Global Fund to Fight AIDS, Tuberculosis and Malaria

EIN 98-0380092

For the Year Ended December 31, 2006

Form 990, Part II - List of Grants Paid

Grantee's Name & Country	Foreign Grant (Y/N)	Relationship	Purpose of Grant	Tax Status of Recipient	Paid Amount	Approved Amount
Afnicare, Benin	Y	NONE	Treat disease	Foreign	\$ 256,232 74	\$ 761,882 00
Albania, Ministry of Health	Y	NONE	Treat disease	Foreign	\$ -	\$ 3,278,156 00
Aller Vida - Centro de Estudios y Formación, Paraguay	Y	NONE	Treat disease	Foreign	\$ 289,627 16	\$ -
Angola - The United Nation Development Programme	Y	NONE	Treat disease	Foreign	\$ 11,810,450 37	\$ -
ARFH, Nigena	Y	NONE	Treat disease	Foreign	\$ 3,536,944 00	\$ 9,822,986 00
ASCOBEF	Y	NONE	Treat disease	Foreign	\$ 694,582 00	\$ -
Asoc Dominicana Pro-Bienestar de la Familia (PROFAMILIA)	Y	NONE	Treat disease	Foreign	\$ 554,281 00	\$ -
Azerbaijan, Ministry of Health	Y	NONE	Treat disease	Foreign	\$ 5,094,000 13	\$ -
Azerbaijan, Ministry of Health-EUR	Y	NONE	Treat disease	Foreign	\$ -	\$ 3,934,096 89
Belarus - United Nations Development Programme	Y	NONE	Treat disease	Foreign	\$ 2,817,059 00	\$ 9,945,034.00
Belize Enterpense for Sustainable Technology, Belize	Y	NONE	Treat disease	Foreign	\$ 436,257 00	\$ -
Benin, Ministry of Health-EUR	Y	NONE	Treat disease	Foreign	\$ -	\$ 21,519,428 88
Botswana - Ministry of Finance & National Planning	Y	NONE	Treat disease	Foreign	\$ 2,797,172 97	\$ 5,515,900 00
BRAC (Bangladesh Rural Advancement Committee)	Y	NONE	Treat disease	Foreign	\$ 7,795,068 00	\$ 19,712,162 00
Burundi - Programme National Lépre & T B	Y	NONE	Treat disease	Foreign	\$ 719,845 00	\$ -
CARE France, Cote d'Ivoire (EUR)	Y	NONE	Treat disease	Foreign	\$ -	\$ 3,627,043 48
CARE International Ecuador	Y	NONE	Treat disease	Foreign	\$ 4,466,971 00	\$ 1,891,560 00
CARE International in Cameroon	Y	NONE	Treat disease	Foreign	\$ 1,759,086 00	\$ -
CARE Peru	Y	NONE	Treat disease	Foreign	\$ 12,728,182.00	\$ 33,511,435 00
CARIBBEAN REGIONAL NETWORK OF PEOPLE LIVING WITH HIV/AIDS	Y	NONE	Treat disease	Foreign	\$ 778,587 00	\$ -
Catholic Relief Services - Madagascar	Y	NONE	Treat disease	Foreign	\$ 333,939 21	\$ -
Centre of International Cooperation in Health & Development, Niger	Y	NONE	Treat disease	Foreign	\$ 1,484,851 00	\$ -
Centro de Investigación, Educación y Servicios, Bolivia	Y	NONE	Treat disease	Foreign	\$ 1,108,652 18	\$ (5,574,506 18)
Chad - Support Fund for Population Activites	Y	NONE	Treat disease	Foreign	\$ 3,086,710 23	\$ 1,775,358 00
Christian Health Association of Nigena	Y	NONE	Treat disease	Foreign	\$ 8,444,792 00	\$ 25,570,061.00
Colombia - International Organization for Migration (IOM)	Y	NONE	Treat disease	Foreign	\$ 4,499,790.00	\$ 5,187,212 00
Comite National de Lutte contre le SIDA, Madagascar	Y	NONE	Treat disease	Foreign	\$ 3,979,035 00	\$ -
Comite National de Lutte Contre le SIDA, Mauntania	Y	NONE	Treat disease	Foreign	\$ 1,636,934 00	\$ 6,573,416 00
Conseil National de Lutte Contre le SIDA	Y	NONE	Treat disease	Foreign	\$ 5,300,974 00	\$ 14,251,660 00
Consejo de las Américas	Y	NONE	Treat disease	Foreign	\$ 2,232,830 00	\$ -
Department of State for Health of the Republic of the Gambia	Y	NONE	Treat disease	Foreign	\$ 3,851,378 22	\$ 10,757,693 00
Dominican Republic - COPRESIDA	Y	NONE	Treat disease	Foreign	\$ 5,628,572 00	\$ -
DTDC of the MOH of the Govern of the Republic of Indonesia	Y	NONE	Treat disease	Foreign	\$ 34,881,768 00	\$ 31,169,478 00
Equatorial Guinea - Medical Care Development Int'l	Y	NONE	Treat disease	Foreign	\$ 3,483,905 00	\$ 12,906,111 00
Equatorial Guinea - United Nations Development Programme	Y	NONE	Treat disease	Foreign	\$ 936,744 00	\$ -
Executive secretanat FFATM, Djibouti	Y	NONE	Treat disease	Foreign	\$ 3,489,301 97	\$ -
FIOTEC, Brazil	Y	NONE	Treat disease	Foreign	\$ -	\$ 8,784,427 00
Fondation SOGEBANK	Y	NONE	Treat disease	Foreign	\$ 26,222,046 00	\$ 19,205,567 00
Fundação Ataulpho de Paiva, Brazil	Y	NONE	Treat disease	Foreign	\$ -	\$ 2,818,000 00
Fundación Visión Mundial Guatemala	Y	NONE	Treat disease	Foreign	\$ 7,208,983 20	\$ -
Guinea-Bissau - United Nations Development Program	Y	NONE	Treat disease	Foreign	\$ 1,215,766 00	\$ -
HAPCO	Y	NONE	Treat disease	Foreign	\$ 56,182,476 00	\$ 84,001,277 00
HIVOS, Costa Rica	Y	NONE	Treat disease	Foreign	\$ 542,452 00	\$ 1,709,143 45
Impl and Monitoring Unit MOH of the Republic of Moldova	Y	NONE	Treat disease	Foreign	\$ 2,150,000 00	\$ -

The Global Fund to Fight AIDS, Tuberculosis and Malaria  
 EIN 98-0380092  
 For the Year Ended December 31, 2006  
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Grantee's Name & Country	Foreign Grant (Y/N)	Relationship	Purpose of Grant	Tax Status of Recipient	Paid Amount	Approved Amount
India - Ministry of Finance - Department Economic Affairs	Y	NONE	Treat disease	Foreign	\$ 12,562,309 00	\$ -
India - Ministry of Health - Department Economic Affairs	Y	NONE	Treat disease	Foreign	\$ 34,609,836 48	\$ 22,020,000 00
INSTITUTO NACIONAL DE SALUD PÚBLICA (INSP)	Y	NONE	Treat disease	Foreign	\$ 255,897 00	\$ -
Ivory Coast - United Nations Development Programme	Y	NONE	Treat disease	Foreign	\$ 4,754,281 56	\$ 28,999,633 00
Jamaica-Ministry of Health	Y	NONE	Treat disease	Foreign	\$ 5,931,940 00	\$ 15,758,456 00
Kosovo - UN Interim Administration	Y	NONE	Treat disease	Foreign	\$ 707,166 40	\$ -
Lanka Jataka Sarvodaya Shramadana Sangamaya	Y	NONE	Treat disease	Foreign	\$ -	\$ 708,932 00
Libena - United Nations Development Program	Y	NONE	Treat disease	Foreign	\$ 10,111,614 00	\$ -
Medische Zending - Primary Health Care Surname	Y	NONE	Treat disease	Foreign	\$ 848,802 00	\$ -
Ministry of Health and Social Welfare Revolutionary Government of Zanzibar	Y	NONE	Treat disease	Foreign	\$ 1,729,236 00	\$ -
Ministry of Health / National Tuberculosis Program, Jordan	Y	NONE	Treat disease	Foreign	\$ 358,000 00	\$ 1,072,864 00
Ministry of Health, El Salvador	Y	NONE	Treat disease	Foreign	\$ 808,543 00	\$ 3,140,088 00
Ministry of Health, Population & Hospital Reform, Algeria	Y	NONE	Treat disease	Foreign	\$ 1,900,000 00	\$ -
Ministry of Health, Timor Leste	Y	NONE	Treat disease	Foreign	\$ 1,341,197 35	\$ 3,681,713 00
Ministry of Public Health of the Republic of Guinea	Y	NONE	Treat disease	Foreign	\$ (2,267,297 08)	\$ -
Ministry of Public Health of the Republic of Guinea (EUR)	Y	NONE	Treat disease	Foreign	\$ -	\$ 3,603,883 33
MOH - Government of the Republic of Sunname	Y	NONE	Treat disease	Foreign	\$ 990,623 15	\$ 2,395,000 00
Mozambique - Ministry of Health	Y	NONE	Treat disease	Foreign	\$ 21,453,536 00	\$ -
Mozambique - National AIDS Council (CNCS)	Y	NONE	Treat disease	Foreign	\$ 1,933,939 00	\$ -
National AIDS Center of the Govern of the Republic of Kyrgyzstan	Y	NONE	Treat disease	Foreign	\$ 2,496,500 00	\$ 12,115,268 00
National AIDS Control Progr , MOH of the Government of Pakistan	Y	NONE	Treat disease	Foreign	\$ 6,285,852 00	\$ 6,283,600 00
National Malaria Program at the MPHP of the Republic of Yemen	Y	NONE	Treat disease	Foreign	\$ 1,952,517 00	\$ 7,718,574 00
National Action Ctee on AIDS of the Federal Government of Nigeria	Y	NONE	Treat disease	Foreign	\$ 13,466,953 00	\$ 29,990,348 00
National AIDS Center of the Ministry of Health, Uzbekistan	Y	NONE	Treat disease	Foreign	\$ 3,087,513 00	\$ 16,315,086 00
National Council to fight HIV/AIDS, Burundi	Y	NONE	Treat disease	Foreign	\$ 574,429 00	\$ 5,807,127 00
National Council to fight HIV/AIDS, Congo	Y	NONE	Treat disease	Foreign	\$ 3,981,667 00	\$ 12,043,407 00
National Department of Health of the Government of S Afrca	Y	NONE	Treat disease	Foreign	\$ 400,000 00	\$ -
National High Council for HIV/AIDS control, Government of Mali	Y	NONE	Treat disease	Foreign	\$ 5,935,840 61	\$ -
National Multi-sectional Coord Unit for Fight Against HIV	Y	NONE	Treat disease	Foreign	\$ 2,000,000 00	\$ -
National TB Control Program	Y	NONE	Treat disease	Foreign	\$ 1,211,578 00	\$ -
NERCHA of the Government of the Kingdom of Swaziland	Y	NONE	Treat disease	Foreign	\$ 10,952,135 00	\$ 23,753,345 00
NICASALUD	Y	NONE	Treat disease	Foreign	\$ 3,930,917 00	\$ 9,829,192 00
Niger - International Federation of Red Cross	Y	NONE	Treat disease	Foreign	\$ 963,998 00	\$ -
Pact Tanzania	Y	NONE	Treat disease	Foreign	\$ 5,276,665 00	\$ -
Pilipinas Shell Foundation	Y	NONE	Treat disease	Foreign	\$ 6,444,860 00	\$ 11,097,529 00
Population Services International	Y	NONE	Treat disease	Foreign	\$ 6,863,516 00	\$ 2,833,652 00
Population Services International, Togo	Y	NONE	Treat disease	Foreign	\$ 6,605,303 29	\$ -
Project HOPE, Tajikistan	Y	NONE	Treat disease	Foreign	\$ 1,099,347 76	\$ 967,693 00
Provincial Health Department of the Western Cape, S Afrca	Y	NONE	Treat disease	Foreign	\$ 7,530,316 00	\$ 5,729,444 00
RAKS THAI FOUNDATION	Y	NONE	Treat disease	Foreign	\$ 3,410,609.66	\$ 7,468,345 00
RCPCof AIDS of the Govern of the Republic of Kazakhstan	Y	NONE	Treat disease	Foreign	\$ 5,430,700 00	\$ -
Red Cross - Sierra Leone	Y	NONE	Treat disease	Foreign	\$ 4,741,617 00	\$ 3,129,454 00
Republican DOTS Center of the Ministry of Health, Uzbekistan	Y	NONE	Treat disease	Foreign	\$ 2,198,713 00	\$ -
Republican Sanitary-Epidemiological Surveillance, Uzbekistan	Y	NONE	Treat disease	Foreign	\$ 359,034 00	\$ -
Return unspent grant funds	Y	NONE	Treat disease	Foreign	\$ -	\$ (2,461,605 90)

The Global Fund to Fight AIDS, Tuberculosis and Malaria

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Grantee's Name & Country	Foreign Grant (Y/N)	Relationship	Purpose of Grant	Tax Status of Recipient	Paid Amount	Approved Amount
Russian Federation - Open Health Institute	Y	NONE	Treat disease	Foreign	\$ 17,363,416 00	\$ 57,146,047 00
Russian Federation - Partners in Health	Y	NONE	Treat disease	Foreign	\$ 2,586,256 00	\$ 4,459,617 00
Russian Harm Reduction Network	Y	NONE	Treat disease	Foreign	\$ -	\$ 3,990,746 17
Russian Healthcare Foundation	Y	NONE	Treat disease	Foreign	\$ 36,354,492 22	\$ -
Society for Family Health, Nigeria	Y	NONE	Treat disease	Foreign	\$ 2,673,800 00	\$ 6,417,422 00
Somalia - United Nations Children's Fund	Y	NONE	Treat disease	Foreign	\$ 10,021,304 00	\$ 3,995,916 00
Somalia - World Vision	Y	NONE	Treat disease	Foreign	\$ 2,757,546 30	\$ 8,224,136 00
State Sanitary Epidemiology Department, Republic of Kyrgystan	Y	NONE	Treat disease	Foreign	\$ 933,345 00	\$ 1,692,390 00
Tanzania - African Medical and Research Foundation	Y	NONE	Treat disease	Foreign	\$ 7,384,720 00	\$ -
Tanzania - Population Services International	Y	NONE	Treat disease	Foreign	\$ 1,423,310 00	\$ -
The "Ministere de la Sante" of the Government of Rwanda	Y	NONE	Treat disease	Foreign	\$ 52,277,093 49	\$ 77,238,580 00
The Caribbean Community Secretariat	Y	NONE	Treat disease	Foreign	\$ 2,866,672 00	\$ -
The CCDCP of the Government of the People's Republic of China	Y	NONE	Treat disease	Foreign	\$ 65,557,632 76	\$ 116,219,897 00
The Central Board of Health of the Government of Zambia	Y	NONE	Treat disease	Foreign	\$ 3,248,587 48	\$ (102,884 00)
The Churches Health Association of Zambia	Y	NONE	Treat disease	Foreign	\$ 17,835,201 41	\$ -
The Department of Health of the Government of Papua New Guinea	Y	NONE	Treat disease	Foreign	\$ 881,926 39	\$ -
The Economics Institute in Belgrade	Y	NONE	Treat disease	Foreign	\$ 1,059,044 00	\$ 856,798 00
The Federal MOH of the Govern of the FDR of Ethiopia	Y	NONE	Treat disease	Foreign	\$ 74,439,531.04	\$ 111,092,078 00
The Georgia Health and Social Projects Implementation Center	Y	NONE	Treat disease	Foreign	\$ 2,053,172 78	\$ 8,267,912 00
The Government of the Hashemite Kingdom of Jordan	Y	NONE	Treat disease	Foreign	\$ 151,750 00	\$ -
The Lutheran World Federation	Y	NONE	Treat disease	Foreign	\$ 215,000 00	\$ 215,000 00
The Medical Research Council	Y	NONE	Treat disease	Foreign	\$ 8,508,327 15	\$ 6,501,141 00
The Ministry of Health and Child Welfare of the Government of Zimbabwe	Y	NONE	Treat disease	Foreign	\$ 724,675 00	\$ 20,121,670 00
The Ministry of Finance of the Kingdom of Lesotho	Y	NONE	Treat disease	Foreign	\$ 4,557,502 68	\$ 31,768,383 00
The Ministry of Finance of the Republic of Kenya	Y	NONE	Treat disease	Foreign	\$ 55,700,211 00	\$ 98,983,853 00
The Ministry of Finance of the United Republic of Tanzania	Y	NONE	Treat disease	Foreign	\$ 41,645,581 00	\$ -
The Ministry of Health	Y	NONE	Treat disease	Foreign	\$ 863,713 27	\$ 3,952,117 00
The Ministry of Health and Family of the Government of Romania	Y	NONE	Treat disease	Foreign	\$ 6,612,499 00	\$ 4,933,954 00
The Ministry of Health and Social Services, Namibia	Y	NONE	Treat disease	Foreign	\$ 23,016,615 43	\$ 7,222,753 00
The Ministry of Health of Guyana	Y	NONE	Treat disease	Foreign	\$ 2,496,804 00	\$ -
The Ministry of Health of Mongolia	Y	NONE	Treat disease	Foreign	\$ 1,696,335 59	\$ 1,898,775 00
The Ministry of Health of the Government of the Republic of Mali	Y	NONE	Treat disease	Foreign	\$ 1,589,980 00	\$ 568,892 00
The Ministry of Health of the Government of the State of Entrea	Y	NONE	Treat disease	Foreign	\$ 5,915,105 00	\$ 27,661,927 00
The Ministry of Health of the Government of Macedonia	Y	NONE	Treat disease	Foreign	\$ 3,245,956 00	\$ 2,998,257 00
The Ministry of Health of the Government of Senegal	Y	NONE	Treat disease	Foreign	\$ 8,958,050 70	\$ (1,728,727 00)
The Ministry of Health of the Government of Turkey	Y	NONE	Treat disease	Foreign	\$ 2,618,071 00	\$ -
The Ministry of Health of the Government of Vietnam	Y	NONE	Treat disease	Foreign	\$ 4,632,965 86	\$ 12,000,000 00
The Ministry of Health of the Republic of Armenia	Y	NONE	Treat disease	Foreign	\$ 1,623,014 00	\$ 3,625,140 00
The Ministry of Health of the Republic of Bulgaria	Y	NONE	Treat disease	Foreign	\$ 3,564,217 00	\$ 8,817,612 00
The Ministry of Health of the Republic of Croatia	Y	NONE	Treat disease	Foreign	\$ 1,581,218 00	\$ 1,581,218 00
The Ministry of Health of the Republic of Ghana	Y	NONE	Treat disease	Foreign	\$ 25,572,875 57	\$ 46,177,644 00
The Ministry of Health of the Republic of Malawi	Y	NONE	Treat disease	Foreign	\$ 6,363,507 00	\$ 22,643,238 00
The Ministry of Health of the Republic of Serbia	Y	NONE	Treat disease	Foreign	\$ 1,697,011 01	\$ 1,658,993 00
The Ministry of Health of the United Republic of Tanzania	Y	NONE	Treat disease	Foreign	\$ 4,426,694 00	\$ 11,037,104 00
The Ministry of Health, Islamic Republic of Afghanistan	Y	NONE	Treat disease	Foreign	\$ 3,868,344 25	\$ 14,565,256 00

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Grantee's Name & Country	Foreign Grant (Y/N)	Relationship	Purpose of Grant	Tax Status of Recipient	Paid Amount	Approved Amount
The Ministry of Public Health in the Republic of Burundi	Y	NONE	Treat disease	Foreign	\$ 3,638,269 00	\$ 2,776,204 89
The Ministry of Public Health of the Government of Cameroon	Y	NONE	Treat disease	Foreign	\$ 12,033,105 66	\$ -
The Ministry of Public Health of the Government of Thailand	Y	NONE	Treat disease	Foreign	\$ 28,749,881 00	\$ 86,500,631 00
The Ministry of Public Health of the Republic of Ecuador	Y	NONE	Treat disease	Foreign	\$ 2,356,875 00	\$ (1,896,314 00)
The Ministry of Public Health of the Republic of Guinea	Y	NONE	Treat disease	Foreign	\$ -	\$ 2,267,296 58
The Ministry of Public Health, Cameroon (EUR)	Y	NONE	Treat disease	Foreign	\$ -	\$ 16,921,636 02
The MOF, Department of Aid and Debt Management Royal Government of Bhutan	Y	NONE	Treat disease	Foreign	\$ 713,167 00	\$ -
The MOF, Planning and Economic Development Government of Uganda	Y	NONE	Treat disease	Foreign	\$ 27,715,494 35	\$ -
The MOF, the Government of the People's Republic of Bangladesh	Y	NONE	Treat disease	Foreign	\$ 4,493,822 71	\$ 29,476,680 00
The MOH of the Government of the Lao People's Democratic Rep	Y	NONE	Treat disease	Foreign	\$ 7,182,550 50	\$ -
The MOH of the Government of the Kingdom of Cambodia	Y	NONE	Treat disease	Foreign	\$ 22,174,472 36	\$ 39,179,751 00
The MOH of the Government of the Kingdom of Morocco	Y	NONE	Treat disease	Foreign	\$ 2,408,885 00	\$ -
The MOH, His Majesty's Government of Nepal	Y	NONE	Treat disease	Foreign	\$ 4,461,200 00	\$ (421,186 00)
The National AIDS Commission Trust of the Republic of Malawi	Y	NONE	Treat disease	Foreign	\$ 22,852,260 90	\$ 144,571,095 00
The National AIDS Council of Senegal	Y	NONE	Treat disease	Foreign	\$ 4,564,164 00	\$ 5,714,285 00
The National AIDS Program, Republic of Yemen	Y	NONE	Treat disease	Foreign	\$ 982,019 00	\$ -
The National AIDS Secretariat of the Republic of the Gambia	Y	NONE	Treat disease	Foreign	\$ 2,213,495 15	\$ 8,326,935 00
The National Treasury of the Republic of South Africa	Y	NONE	Treat disease	Foreign	\$ 2,340,334 00	\$ -
The National Tuberculosis Control Program, Republic of Yemen	Y	NONE	Treat disease	Foreign	\$ 1,182,942 30	\$ -
The Organismo Andino de Salud - Convenio Hipólito Unzué	Y	NONE	Treat disease	Foreign	\$ 1,652,266 00	\$ -
The Organization Of Eastern Caribbean States	Y	NONE	Treat disease	Foreign	\$ 1,244,967 00	\$ -
The Population Foundation of India	Y	NONE	Treat disease	Foreign	\$ 1,903,657 00	\$ -
The Secretariat of the Pacific Community	Y	NONE	Treat disease	Foreign	\$ 3,994,737 00	\$ 3,269,731 00
The Sierra Leone National HIV/AIDS Secretariat	Y	NONE	Treat disease	Foreign	\$ 2,251,505 00	\$ -
The United Nations Development Programme	Y	NONE	Treat disease	Foreign	\$ 56,143,683 09	\$ 34,467,511 00
The United Nations Development Programme (UNDP), El Salvador	Y	NONE	Treat disease	Foreign	\$ 2,339,809 00	\$ 3,936,128 00
The United Nations Development Programme, Gabon	Y	NONE	Treat disease	Foreign	\$ 3,686,384 00	\$ 2,029,018 00
The United Nations Development Programme, Gabon (EUR)	Y	NONE	Treat disease	Foreign	\$ -	\$ 4,065,693 47
The United Nations Development Programme, Sudan	Y	NONE	Treat disease	Foreign	\$ 33,824,365 00	\$ 44,823,615 00
The United Nations Development Programme, Tajikistan	Y	NONE	Treat disease	Foreign	\$ 1,841,287 00	\$ 8,339,948 00
TRI of the Government of the Republic of Kyrgyzstan	Y	NONE	Treat disease	Foreign	\$ 253,476 00	\$ 1,558,235 00
Tropical Disease Foundation, Inc	Y	NONE	Treat disease	Foreign	\$ 9,122,007.01	\$ 5,043,879 00
Tropical Disease Foundation, Philippines-EUR	Y	NONE	Treat disease	Foreign	\$ -	\$ 14,935,502 55
UBATEC S A, Argentina	Y	NONE	Treat disease	Foreign	\$ 1,815,574 00	\$ -
United Nations Development Program, Montenegro	Y	NONE	Treat disease	Foreign	\$ -	\$ 1,652,140 37
United Nations Development Program, Niger	Y	NONE	Treat disease	Foreign	\$ 2,465,441 00	\$ 5,570,170 00
United Nations Development Programme, Benin	Y	NONE	Treat disease	Foreign	\$ 3,653,208 00	\$ -
United Nations Development Programme, Bosnia & Herzegovina	Y	NONE	Treat disease	Foreign	\$ 1,661,658 00	\$ 4,832,385 00
United Nations Development Programme, Iran	Y	NONE	Treat disease	Foreign	\$ 1,697,551 58	\$ -
United Nations Development Programme, Sao Tome & Principe	Y	NONE	Treat disease	Foreign	\$ 1,044,779 44	\$ 506,480 00
United Nations Development Programme, Togo	Y	NONE	Treat disease	Foreign	\$ 1,763,183 43	\$ 3,271,243 00
United Nations Development Project, Bolivia	Y	NONE	Treat disease	Foreign	\$ 4,662,785 00	\$ 5,768,815 00
United Nations Development Project, Niger	Y	NONE	Treat disease	Foreign	\$ -	\$ 6,513,452 17
World Vision International - Armenia Branch	Y	NONE	Treat disease	Foreign	\$ 849,927 00	\$ -
Yakubu Gowon Center for National Unity & Intl Coop, Nigeria	Y	NONE	Treat disease	Foreign	\$ 13,107,786 64	\$ -

The Global Fund to Fight AIDS, Tuberculosis and Malaria  
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Grantee's Name & Country	Foreign Grant (Y/N)	Relationship	Purpose of Grant	Tax Status of Recipient	Paid Amount	Approved Amount
Zambia - Ministry of Finance & National Planning	Y	NONE	Treat disease	Foreign	\$ 1,891,134 00	\$ -
Zambia National AIDS Network	Y	NONE	Treat disease	Foreign	\$ 2,726,612 72	\$ -
Zanzibar AIDS Commission	Y	NONE	Treat disease	Foreign	\$ 316,274 50	\$ 1,186,637 00
Zimbabwe - Assoc of Church Related Hospitals	Y	NONE	Treat disease	Foreign	\$ -	\$ 14,262,211 00
Zimbabwe - National AIDS Council	Y	NONE	Treat disease	Foreign	\$ -	\$ 32,742,685 00
Zimbabwe - United Nations Development Program	Y	NONE	Treat disease	Foreign	\$ 3,497,411 87	
						<u>\$ 1,825,551,956 17</u>
					Net unrealized foreign exchange loss	\$ 6,789,335 00
					Total grants paid	<u>\$ 1,818,762,621 17</u>

The Global Fund to Fight AIDS, Tuberculosis and Malaria  
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 Form 990, Part II - Other Expenses

Description	TOTAL	Program Services	Management & General	Fundraising
Local Fund Agent fees	23,893,594	23,893,594	-	-
Trustee/Administration fees	4,489,656	3,444,828	1,044,828	-
Other professional fees	3,290,049	2,420,748	233,633	635,668
IT infrastructure	859,027	644,213	86,131	128,683
Office infrastructure	931,715	642,960	154,070	134,685
Personnel and Administrative Services to support the operations of the Global Fund are provided by the World Health Organization (WHO) under an agreement between WHO and the Global Fund. The Global Fund bears in full the cost of these personnel.				
Wages paid for services of contract personnel	27,690,758	21,004,742	2,353,024	4,332,992
Benefit plans pension, health and accident insurance for services of contract personnel	798,693	520,389	100,715	177,589
Relocation costs on appointment and separation paid for services of contract personnel	1,425,478	1,098,768	149,611	177,099
SUB-TOTALS	63,378,971	53,670,242	4,122,012	5,586,716
Less compensation of officers, directors, etc. recorded directly on Form 990 - line 25a	1,508,080	820,705	316,060	371,315
<b>TOTALS</b>	<b>61,870,891</b>	<b>52,849,538</b>	<b>3,805,952</b>	<b>5,215,401</b>

**The Global Fund to Fight AIDS, Tuberculosis and Malaria**  
**EIN 98-0380092**  
**For the Year Ended December 31, 2006**  
**Form 990, Part III - Organization's Primary Exempt Purpose**

THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA (THE "GLOBAL FUND") IS AN INDEPENDENT, NON-PROFIT FOUNDATION INCORPORATED IN GENEVA ON 22 JANUARY 2002. THE PURPOSE OF THE GLOBAL FUND IS TO ATTRACT AND DISBURSE ADDITIONAL RESOURCES TO PREVENT AND TREAT AIDS, TUBERCULOSIS AND MALARIA.

THE FUND PROVIDES GRANTS TO LOCALLY-DEVELOPED PROGRAMS, WORKING IN CLOSE COLLABORATION WITH GOVERNMENTS, NONGOVERNMENTAL ORGANIZATIONS, THE PRIVATE SECTOR, DEVELOPMENT AGENCIES AND THE COMMUNITIES AFFECTED BY THESE DISEASES. THE GLOBAL FUND HAS BEEN FOUNDED ON THE FOLLOWING PRINCIPLES:

- RELY ON LOCAL EXPERTS TO IMPLEMENT PROGRAMS DIRECTLY,
- MAKE AVAILABLE AND LEVERAGE ADDITIONAL FINANCIAL RESOURCES TO COMBAT THE THREE DISEASES,
- SUPPORT PROGRAMS THAT REFLECT NATIONAL OWNERSHIP AND RESPECT COUNTRY-LED FORMULATION AND IMPLEMENTATION PROCESSES,
- OPERATE IN A BALANCED MANNER IN TERMS OF DIFFERENT REGIONS, DISEASES AND INTERVENTIONS,
- PURSUE AN INTEGRATED AND BALANCED APPROACH COVERING PREVENTION, TREATMENT AND CARE, AND SUPPORT IN DEALING WITH THE THREE DISEASES,
- EVALUATE PROPOSALS THROUGH INDEPENDENT REVIEW PROCESSES BASED ON THE MOST APPROPRIATE SCIENTIFIC AND TECHNICAL STANDARDS THAT TAKE INTO ACCOUNT LOCAL REALITIES AND PRIORITIES,
- SEEK TO ESTABLISH A SIMPLIFIED, RAPID, INNOVATIVE GRANT-MAKING PROCESS AND OPERATE IN A TRANSPARENT AND ACCOUNTABLE MANNER BASED ON CLEARLY DEFINED RESPONSIBILITIES. ONE ACCOUNTABILITY MECHANISM IS THE USE OF LOCAL FUND AGENTS TO ASSESS LOCAL CAPACITY TO ADMINISTER AND MANAGE THE IMPLEMENTATION OF FUNDED PROGRAMS.

**The Global Fund to Fight AIDS, Tuberculosis and Malaria**  
**EIN 98-0380092**  
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**Form 990, Part IV-A - Other Revenue on Return but Not on Books**

**Description:**

DISCOUNTING TO NET PRESENT VALUE OF FUTURE CASH FLOWS (SFAS 116)	<u>\$ (45,181,937)</u>
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**Form 990, Part IV-B - Other Expenses on Return but Not on Books**

**Description:**

DISCOUNTING TO NET PRESENT VALUE OF FUTURE CASH FLOWS (SFAS 116)	<u>\$ 8,127,673</u>
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The Global Fund to Fight AIDS, Tuberculosis and Malaria  
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 Form 990, Part V-A - List Officers, Directors, and Trustees

Name	Title	Average Hours/Week	Compensation	Benefits	Expenses & Allowances
Dr. Richard Feachem Chemin de Blandonnet 8 1214 Geneva, Switzerland	Executive Director	>50 Hrs/wk	221,039	22,009	112,604
Ms. Helen Evans Chemin de Blandonnet 8 1214 Geneva, Switzerland	Deputy Executive Director	>50 Hrs/wk	177,219	57,246	None
Dr. Christoph Benn Chemin de Blandonnet 8 1214 Geneva, Switzerland	Director, External Relations	>50 Hrs/wk	173,039	55,015	9,448
Dr. Bernhard Schwartlander Chemin de Blandonnet 8 1214 Geneva, Switzerland	Director, Performance Evaluation & Policy	>50 Hrs/wk	167,918	51,751	NONE
Mr. Barry Greene Chemin de Blandonnet 8 1214 Geneva, Switzerland	Chief Financial Officer	>50 Hrs/wk	166,027	50,763	10,876
Dr. Nosa Orobato Chemin de Blandonnet 8 1214 Geneva, Switzerland	Director of Operations	>50 Hrs/wk	93,111	28,165	None
Ms. Ines Garcia Chemin de Blandonnet 8 1214 Geneva, Switzerland	Director, Business Services Unit	>50 Hrs/wk	26,891	7,604	None
Mr. John Burke Chemin de Blandonnet 8 1214 Geneva, Switzerland	Chief Administrative Officer	>50 Hrs/wk	57,523	19,832	None
Dr. Carol Jacobs Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member, Chair of the Board	<10 Hrs/wk	None	None	None
Dr. Lieve Fransen Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member, Vice chair of the Board	<10 Hrs/wk	None	None	None
Dr. Francoise Ndayishimiye Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Mr. Peter van Rooijen Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Ms. Elisabeth Mataka Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Mr. Alexander Konuzin Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None

The Global Fund to Fight AIDS, Tuberculosis and Malaria  
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 Form 990, Part V-A - List Officers, Directors, and Trustees

Name	Title	Average Hours/Week	Compensation	Benefits	Expenses & Allowances
H.E. Mr. Abdallah Abdillahi Miguil Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Professor Sheila Dinotsho Tlou Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Mr. Serge Tomasi Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Ms. Martina Metz Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Ms. Lucia Fiori Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Mr. Masaru Tsuji Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Mr. Carsten Staur Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Dr. Regina Rabinovich Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Mr. Rajat Gupta Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Dr. Broto Wasisto Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Dr. Carole Presern Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Dr. William Steiger Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Mr. Urbain Olangena Awono Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Dr. Huang Jiefu Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None

The Global Fund to Fight AIDS, Tuberculosis and Malara  
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 Form 990, Part V-A - List Officers, Directors, and Trustees

Name	Title	Average Hours/Week	Compensation	Benefits	Expenses & Allowances
Dr. Peter Piot Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member	<10 Hrs/wk	None	None	None
Dr. Anders Nordstrom Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member, non-voting	<10 Hrs/wk	None	None	None
Mr. Philippe Le Houerou Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member, non-voting	<10 Hrs/wk	None	None	None
Mr. Edmond Tavernier Chemin de Blandonnet 8 1214 Geneva, Switzerland	Board Member, non-voting	<10 Hrs/wk	None	None	None
			1,082,767	292,385	132,928

**The Global Fund to Fight AIDS, Tuberculosis and Malaria**

**EIN 98-0380092**

**For the Year Ended December 31, 2006**

**Form 990, Part VI, Line 90a - States with which a copy of the return is filed**

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA,  
KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM,  
NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

**The Global Fund to Fight AIDS, Tuberculosis and Malaria**  
**EIN 98-0380092**

**For the Year Ended December 31, 2006**

**Form 990, Part VI, Line 91b - Foreign Accounts**

The Global Fund to Fight AIDS, Tuberculosis and Malaria holds signature authority over bank accounts in Switzerland. There are no U S persons holding signature authority therefore, filing the TDF 90-22.1 is not required.

The Global Fund to Fight AIDS, Tuberculosis and Malaria

EIN 98-0380092

For the Year Ended December 31, 2006

Form 990, Schedule A, Part II-A & Part II-B

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

Name and Address	Type of Service	Compensation
THE WORLD HEALTH ORGANIZATION GENEVA, SWITZERLAND	PERSONNEL CONTRACT SERVICE ADMIN FEES/SERV CONTRACTS	30,684,722 2,089,656
PRICEWATERHOUSE COOPERS GENEVA, SWITZERLAND	LOCAL FUND AGENT FEES	10,564,561
KPMG GENEVA, SWITZERLAND	LOCAL FUND AGENT FEES	7,671,088
THE WORLD BANK WASHINGTON, D C USA	TRUSTEE FEES	2,400,000
UNOPS GENEVA, SWITZERLAND	LOCAL FUND AGENT FEES	1,164,366

Part II-B Compensation of the Five Highest Paid Contractors for Other Services

Name and Address	Type of Service	Compensation
ICC MOVENPICK HOTEL GENEVA, SWITZERLAND	VARIOUS HOTEL, CONFERENCE & CATERING FACILITIES	185,848
INTERNATIONAL CONFERENCE CENTER DURBAN, SOUTH AFRICA	VARIOUS HOTEL, CONFERENCE & CATERING FACILITIES	109,336
MARIOTT HOTEL GUATEMALA CITY, GUATEMALA	VARIOUS HOTEL, CONFERENCE & CATERING FACILITIES	86,970
HOLIDAY INN CROWNE PLAZA GENEVA, SWITZERLAND	VARIOUS HOTEL, CONFERENCE & CATERING FACILITIES	79,642