

AIDS Research Alliance

2011 Annual Report

From Hope to Cure

**If Not Now,
When?**



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Our Journey from Hope to Cure

As a nonprofit research organization, AIDS Research Alliance would not exist without the generous support of our donors and volunteers. This year, we took the opportunity to highlight the faces and stories of our donors in our Annual Report. We hope that in so doing, we demonstrate the range of people who are committing their energy and resources to supporting our cause - developing better treatments for those affected by HIV, and working towards an HIV cure strategy.

AIDS Research Alliance was founded in 1989 - seven years before ART made HIV a manageable disease. Since its inception, ARA has been something of a maverick. In 2001, Dr. Stephen Brown became interested in prostratin and its potential as part of an HIV cure strategy. At the time, "cure" was a four-letter word. It remained so until only a few years ago. Today, scientists and pharmaceutical companies embrace the possibility of an HIV cure. As you will read on page 3, the 2012 International AIDS Conference focused on cure science as never before. The world is recognizing what we have been working on since 2001, and validates our research strategy.

Meanwhile, as we work to complete the prostratin preclinical trials required by the FDA, we continue to grow our clinical trials program. Beginning in March, we gave notice to all of the pharmaceutical companies with which we do business, which includes all of the companies that are active in the development of anti-HIV drugs, that we were expanding our clinical trials portfolio. In the United States, the Hepatitis C virus is spreading among the HIV/AIDS population at an alarming rate, making this a public health problem of substantial proportions. So we added Hepatitis C and co-infection to the portfolio of clinical trials we are doing at ARA. The results have exceeded our expectations. We now have five active trials in our clinic, with another four about to launch. This is a new record for business development at ARA, which means that our strategy is working.

The changes we have adopted in the development (fundraising) program have been similarly dramatic. We have added social media strategies to our existing fundraising activities, which we believe suit our size and resources. To date, we have added GlobalGiving U.S., GlobalGiving U.K. and Causes as new fundraising platforms, and we are encouraged by our progress, including increases in the number of new donors, and the return of lapsed donors. An important part of our strategy is a vigorous communications program, so that we can keep our donors and volunteers informed of significant events, research results, and trends.

We could not have made the strides we have without the leadership of new members of our staff, including Kevin Griggs, Pharm D., our research pharmacist; Emma Brownell, our Director of Communications; and Lilian Miller, our Director of Development. They have done an excellent job of identifying new ideas, opportunities and strategies. Our Research Clinic has also done a phenomenal job of handling a surge in our clinical trials program, with few increases in human resources.

We are still in the process of evaluating the changes that were adopted in early 2012, but I trust and believe that our year-end figures will show that we are on the right path.

We could not have come this far without our donors and study volunteers, who continue to have confidence in the work we do at ARA.

Thank you for your continued generosity!



Carolyn Carlborg, J.D.
President & C.E.O.



AIDS Research Alliance: A History in Logos

As AIDS Research Alliance has evolved over the past 23 years, so has our logo. At each stage of the organization's history, our logo has reflected our identity, mission and culture. Below, you will see how far the organization has come – and where we are today, visually, thanks to a generous grant from the Taproot Foundation:

AIDS Research Alliance was founded in 1989 by a group of physicians and activists as a community-based research



initiative. At the time, the organization was called "Search Alliance." The logo here speaks to that original name – the S in AIDS Research Alliance is capitalized and is also depicted in the image to the left. Then, as now, Search Alliance sought to challenge conventional thinking about medical research and the drug development process. Our founders' activism led to the discovery of treatments for various opportunistic infections, thus saving the lives of countless people.

In February 2006, under the direction of CEO and President Carolyn Carlburg, AIDS Research Alliance redesigned its logo for a cleaner and more modern look. The new logo incorporated the AIDS ribbon, and the tagline reflected our driving force, "Because research works."



By the spring of 2012, we recognized that while our logo worked, it did not sufficiently convey the energy or scientific expertise upon which AIDS Research Alliance prides itself. ARA applied for a grant from the Taproot Foundation, which provided us with a talented team of brand consultants. The end result is the logo at the bottom, a version of which is on the cover of this Annual Report. This new logo represents both a DNA strand, symbolizing our research program, and the AIDS ribbon, symbolizing our longstanding commitment to the HIV/AIDS community. Our new tagline – "From hope to cure." – reflects the evolution of our organization and our mission – from hoping for better treatments for HIV/AIDS, to working on the science that could, in a matter of years, lead to a cure for HIV/AIDS.



ARA Cure Strategy Becomes Mainstream

By Marisa Briones, Ph.D.



The International AIDS Conference 2012 and the IAS Global Scientific Strategy

This year marked the first time in twenty-two years that the International AIDS Conference (“AIDS 2012”) took place in the United States. Over 25,000 scientists, public health experts, activists, policymakers and members of the HIV-affected community met in Washington D.C. from July 22 – 27 to discuss recent scientific advances and the significant global economic challenges that still remain. The theme of AIDS 2012 was “Turning the Tide Together,” reflecting the current sense of hope that, with advances in HIV treatment and prevention, the momentum for a cure, and the continuing commitment to global access to key interventions, the goal of an “AIDS-free generation” is possible. Recent advances were highlighted, ranging from HIV treatment as a means of prevention, to cost-savings with anti-retroviral generics, early treatment options, and progress toward HIV eradication. Notable speakers, including U.S. Secretary of State Hillary Clinton, emphasized the necessity of continuing support for HIV research, and renewed our nation’s commitment to ending the global HIV/AIDS pandemic.

The weekend before AIDS 2012 commenced, an

international working group of researchers developing a global scientific strategy called “Towards an HIV Cure” (1) met to present and discuss their collaborative goal of HIV eradication. This strategy identifies the priorities for the international community of researchers that must be addressed in order to combat HIV persistence in patients on antiretroviral therapy (ART). The established priorities span the areas of basic, translational and clinical research, with two broadly defined approaches for curing HIV infection: the elimination of all HIV-infected cells (a sterilizing cure), and the generation of effective host immunity to HIV that would result in lifelong control of the virus in the absence of ART (a functional cure). The strategy defines seven key scientific priorities for HIV cure research, including developing and testing potential therapeutic agents that reverse latency, such as prostratin. The working group also established that, given the multiple mechanisms that contribute to HIV persistence, a combination approach will most likely be necessary and highlighted that treatment with prostratin and a histone deacetylase (HDAC) inhibitor would be one potential combination.

“Shock and Kill”

Recent efforts towards HIV eradication have focused on the “Shock and Kill” approach (2), whereby latent HIV is activated or “shocked” via an activating agent (such as prostratin), allowing the immune system to recognize and “kill” infected cells, all the while preventing new infections with continued exposure to ART. Results from a study led by David Margolis at UNC Chapel Hill examined the effects of an activating agent, voronostat (VOR) on HIV latency in patients on ART (3). VOR, or suberoylanilide hydroxamic acid (SAHA), is a member of a larger class of compounds that inhibit histone deacetylases (HDACs). HDACs contribute to HIV latency

In recent years, there has also been a paradigm shift within the field from a focus on treatment and prevention to the possibility of HIV eradication.

by restricting gene expression at the transcriptional level. HDAC inhibitors have been shown to relieve this repression in *in vitro* systems (4).

VOR, a Merck FDA-approved drug for the treatment of cutaneous T cell lymphoma (brand name Zolinza), is a

potent HDAC inhibitor. To evaluate VOR on HIV latency *in vivo*, validation experiments using resting CD4+ T cells from HIV-infected patients on suppressive ART were conducted *in vitro* to determine if VOR treatment caused an induction in HIV RNA expression. Following the validation experiments, eight of those patients who did show a measureable HIV RNA induction were given a single dose of VOR at 200mg to determine tolerability. An additional dose of 400 mg VOR was given two to four weeks later to further determine safety and tolerability. After a second dose of 400 mg VOR, resting CD4+ T cells were isolated and HIV RNA levels were determined. Results show an average of a 4.8-fold increase in HIV RNA levels following VOR administration, indicating that VOR exposure is safe, tolerable and leads to HIV RNA induction. This report is the first proof-of-concept study in humans that HIV latency can be therapeutically targeted using an activating agent.

Studies conducted by ARA and others, using *in vitro* cell models, patient derived CD4+ T cells, and combined with other compounds, such as SAHA, have shown the therapeutic potential of prostratin.

Cure Strategy at ARA

As described at AIDS 2012, much has changed in the twenty-two years since the last conference took place in the United States. Novel drug targets and combination approaches have dramatically expanded HIV treatment options, and efforts toward a safe and effective vaccine are continuously improving. In recent years, there has also been a paradigm shift within the field from a focus on treatment and prevention to the possibility of HIV eradication [5]. Not only have researchers joined the efforts toward developing a cure, pharmaceutical companies are also interested in joining this pursuit – given that 34.2 million people are currently living with HIV worldwide (UNAIDS 2012 report: Together we will end AIDS). This concerted effort has highlighted the potential pathways towards eradication, including latent HIV activation (“Shock and Kill”).

At ARA, the “Shock and Kill” strategy focuses on prostratin, a non-tumorigenic phorbol ester. Prostratin is an “activating” agent that targets the protein kinase

C (PKC) cellular pathway and leads to induction of HIV expression within latently infected cells. Studies conducted by ARA and others, using *in vitro* cell models, patient derived CD4+ T cells, and combined with other compounds, such as SAHA, have shown the therapeutic potential of prostratin. Furthermore, preclinical toxicology, toxicity and dose-range finding studies have been completed to move prostratin along the development pathway. The remaining toxicology and *in vitro* experiments will provide critical data to develop the clinical approach for treatment with prostratin.

The current effort toward determining a precise clinical approach towards evaluating activating agents [1] strongly supports ARA’s goal of therapeutically targeting HIV latency as a pathway in HIV eradication, and provides the first evidence that HIV latency can be targeted *in vivo*. Given the groundswell in HIV cure research, and the concerted effort among researchers and policymakers, ARA and prostratin will undoubtedly play an important role in “Turning the Tide Together.”

Dr. Marisa Briones earned her Ph.D. in the Department of Molecular and Medical Pharmacology at UCLA, where she completed a post-doctoral appointment in the laboratory of Dr. Samson Chow. While at UCLA, Dr. Briones was a recipient of the National Research Service Award, among many other scientific honors. Prior to joining the staff of AIDS Research Alliance, Dr. Briones studied the molecular mechanisms that control and regulate the early steps of HIV-1 replication. This expertise informs her prostratin experiments in our laboratory, studying the molecular mechanisms necessary to clear the HIV reservoirs.

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AIDS Research Alliance Expands Its Clinical Trials Program

By Kevin Griggs, Pharm.D.

There was a time when there were not many treatment options for HIV-positive people. Now, there are more than 30 HIV/AIDS medications on the market, and new



treatments are in the pipeline. The newer antiretroviral (ARV) medications are less toxic and have fewer and fewer side effects, which means patients live longer, healthier lives. HIV therapy has become so advanced that many individuals may only have to take one pill a day to keep their virus undetectable. For these reasons, their drive to see what else is out there – and to participate in clinical trials – is understandably lower than it once was. If you are on a simple and stable treatment regimen, you are less likely to look into clinical studies for alternative therapies.

The most recent CDC guidelines recommend treatment for all HIV-infected individuals, regardless of CD4 count. A number of randomized, controlled clinical trials demonstrate clinical benefit to individuals who start ARVs sooner rather than later. Some studies also show that transmission rates among those who are on a stable ARV regimen are significantly lower than those who are not. In light of these findings, doctors are recommending that patients start ARV therapy as soon as they discover their HIV-positive status. Prior to the most recent wave of evidence-based clinical studies, most primary care physicians would take a “wait and see” approach -- not initiating treatment until a patient's T cells dropped below 350 cells/mm³. Consequently, many HIV-positive patients were not on a treatment regimen, and were therefore available to join studies.

These changes have contributed to a smaller pool of HIV clinical trial volunteers. Meanwhile, there are infectious diseases that are transmitted at higher rates in the HIV population than in the general population, such as HCV [hepatitis C virus] and syphilis. Studying these infectious

diseases may offer benefits to our primary target population, the HIV-affected community.

According to the CDC, 25 percent of HIV-positive patients are co-infected with HCV, the dangers of which are significant. If a patient has chronic HCV and develops cirrhosis, his/her liver becomes fibrotic. Long-term cirrhosis may lead to cancer and eventually liver failure. But HCV can be cured in many cases with medication. There is also a small population of people who are able to clear the virus on their own. There are new drugs coming onto the market, which are much more effective and have fewer side effects than older classes of HCV drugs. One

...because HCV and HIV spread in similar ways, and are treated similarly, with drugs that block or inhibit a stage in the virus' lifecycle, AIDS Research Alliance is in a unique position to participate in HCV clinical trials.

such drug is Vertex Pharmaceuticals' Incivek (telaprevir). Others are in development. Progress is being made in HCV treatment research. And because HCV and HIV are transmitted in similar ways, and are treated similarly, with drugs that block or inhibit a stage in the virus' life cycle, AIDS Research Alliance is in a unique position to participate in HIV/Hepatitis co-infection studies and HCV standalone clinical studies.

We are also interested in conducting clinical trials for conditions where there is an unmet medical need. There are many co-morbid conditions associated with HIV infection. One such condition is HIV-associated peripheral neuropathy. Often, many of the ARVs responsible for keeping individuals alive also exacerbate conditions such as peripheral neuropathy. HIV-associated peripheral neuropathy can be severe and debilitating, and there are no approved drugs for this condition. This is an area in which we have already conducted a number of clinical trials, and where we will continue to conduct research until an effective treatment is approved.

Kevin Griggs, Pharm.D., earned his Doctor of Pharmacy degree from the University of Southern California [USC] School of Pharmacy, where he acquired basic science experience at the USC Department of Molecular Pharmacology under the mentorship of Dr. Roberta Diaz Brinton, working on the effects of Hormone Replacement Therapy in the brain. Kevin also participated in undergraduate research projects at UCLA and Caltech/JPL, for which he won the JPLUS scholar award.

A Conversation with ARA Spokesperson LeVar Burton

*You may know Emmy Award-winner LeVar Burton from his starring role as Kunta Kinte in *Roots*, as Geordi La Forge on *Star Trek: The Next Generation*, or as the producer and host of *Reading Rainbow*.*

*Today, LeVar Burton is the national spokesperson for AIDS Research Alliance, the creator of the newly released *Reading Rainbow* tablet application, a father, a husband, and a concerned citizen. He talks here about why he dedicates his work and energy to making the world a better place – and to fighting AIDS.*

AIDS Research Alliance: You have been in the field of entertainment for more than 35 years. How did you get into the business?

LeVar Burton: This year marks the 35th anniversary of Alex Haley's *Roots*. It premiered in January 1977.

In 1976, I was a sophomore studying Theater at the University of Southern California (USC). At the time, the *Roots* casting agents had just cast the net wider. They had exhausted all normal means of finding talent. I was in the right place at the right time, and they found me. But I had always wanted to be a theater actor.

I grew up in a home where one's life's work should be about service. That was one of the primary lessons I learned in my mother's home. My work with AIDS Research Alliance is an extension of that.

ARA: Were you conflicted about accepting a TV role?

Burton: Are you kidding? *Roots* was the first time anyone ever paid me to indulge my passion. I had no thought of turning it down.

ARA: What was it like to be involved in *Roots*?

Burton: I was 19. I had no previous professional experience. Once we got to Savannah, Georgia to begin taping, I recognized I was in the company of the greats -- actors I had grown up watching on television -- Cicely Tyson and Dr. Maya Angelou, among others. They were giants to me, and every single one of them was overjoyed at the prospect of being part of this TV series, which looked closely at the history of slavery in America. Some of them had been waiting their entire careers for such an opportunity. I had such a sense of awe. I thought, "Wow, if they say this is rare, it really must be..."

ARA: What was the experience like for you?

Burton: My character was the central character in the first four hours of the series. Someone once said, "History has a tendency to be told by the winners." This was the first time the history of slavery was told by blacks. It gave America a sense of perspective about the human cost of slavery.

ARA: *Roots* is just one of the TV projects you have worked on over the course of your career. Which project are you most proud of?

Burton: I am pretty lucky. Any actor would be happy with one project that had the cultural impact that *Roots* had. I have been fortunate to have worked on three – *Roots*, *Star Trek: The Next Generation*, and *Reading Rainbow*. Of those three, the one that makes me the most proud is *Reading Rainbow*, on which I spent 26 years as the host and producer.

ARA: Why *Reading Rainbow*?

Burton: My mother was an English teacher. For the son of an English teacher to be part of an effort that has, in large measure, inspired generations of kids to connect with literature and the written word is... I do not even know the word that could capture all of it.

ARA: What is it about your career that fulfills you?

Burton: The ability to influence lives in a positive way. Going back to *Reading Rainbow*, it is being a part of the lives of children when they are making a decision about whether they are going to be a reader for life, or not. For me, there is a special satisfaction in that. It is God's work.

ARA: Was your mother involved in *Reading Rainbow*?

Burton: *Reading Rainbow* is a labor of love in honor of my mother. It is my way of giving back what she gave to me. She was my first teacher. It is because of her that I have the relationship I do with literature.

ARA: How has your professional path evolved? What are you working on now?

Burton: In 2009, after 26 years on the air, PBS pulled *Reading Rainbow*. There was this amazing and surprising outcry by adults who had grown up on the show. They were concerned that it would not be there for their children. Mark Wolfe, my business partner, and I realized that there was more for the brand to do. It had not outlived its relevance. We were determined to try to secure the rights to the brand and bring it back.

We were always certain that TV was not what we wanted to do, but TV was the technology in the 1980s and 1990s that captured kids' attention, and a tool for steering their attention back to books. Now there is an opportunity with today's kids – this wired generation – to create a digital reinterpretation of the TV show. And so Mark and I began a journey that brought us to where we are now. The *Reading Rainbow* application is now available in the Apple store. It is a bottom-up reinvention of the show. It has 150 books loaded on it now. We have partnered with 11 publishers, and the list is growing daily.

As the founder of an educational technology company, I am really interested in seeing if we can have an impact on the education of our children in this country. We have left too many kids behind, despite

No Child Left Behind [the education policy of the Bush administration].

I want to put a tablet computer in

My daughter just turned 18; my granddaughter just turned 11. They are growing up in a world where they are faced with sexuality 24/7 through the media. They are at risk simply because they are going to be sexually active women in an age when having sex could be fatal. There was no way I could say no to being the spokesperson for ARA.

the hands of every child in America. There needs to be content for them that is enriching and engaging. My decision was – if I have to figure it out and lead the way, so be it. But it is necessary, essential and important that we do better. This is America. We can do better.

ARA: You are taking on a lot.

Burton: I will sleep when I am dead. This is what is important to me.

ARA: What were the beginnings of your philanthropy? Where did the inspiration to give back come from?

Burton: My mother's second career, after education, was social work. I grew up in a home where one's life's work should be about service. That was one of the primary lessons I learned in my mother's home. My work with AIDS Research Alliance is an extension of that.

ARA: How did you come to be the celebrity spokesperson for AIDS Research Alliance?

Burton: As someone in show business, I was very much aware of the AIDS epidemic. So when

Carolyn Carlburg explained the work of ARA and really broke down the ongoing need to shine a light on AIDS and AIDS research, as well

as the unique position ARA has in the AIDS research community, I could not say no. I realized there was such a need. Elizabeth Taylor had died only a few months before Carolyn and I met. Elizabeth Taylor was a huge presence in the public's awareness of the effort to fight AIDS. I felt like she left behind a void, which needed to be filled.

Carolyn was very, very convincing and eloquent about the need, as well as about how the face of AIDS has changed – that it has migrated from a middle class white gay population into the black and Latino communities.

ARA: What is the connection between your role on *Reading Rainbow* and your investment in helping and inspiring children -- and HIV/AIDS?

Burton: My daughter just turned 18; my granddaughter just turned 11. They are growing up in a world where they are faced with sexuality 24/7 through the media. They are at risk simply because they are going to be sexually active women in an age when having sex could be fatal. There was no way I could say no to being the spokesperson for ARA.



ARA: Why do you think an HIV cure is important?

Burton: I have a tendency to be an optimist about most things. I

believe that the human species is distinguished by its creativity. The creative process is what makes us who we are. And I am betting on human beings – on our ability to figure this out - because

too many people continue to die unnecessarily. Ultimately, I am betting on human beings.

LeVar Burton and Frank Pennino Join AIDS Research Alliance Board of Directors

AIDS Research Alliance is honored to welcome Emmy Award-winner LeVar Burton and world-renowned designer to the stars Frank Pennino (see page 16) to its Board of Directors. Their energy, knowledge and commitment have furthered the mission of our organization and our cause. We are thrilled that their involvement will continue to grow as members of the board.



Jan Michaels

In Her Own Words

I graduated from Radcliffe (now Harvard) in 1951, at the age of 21. That year I married Alan Michaels, a newly minted Assistant Professor of Chemical Engineering at MIT. He was eight years older than I, and he had been through World War II. He completed both his Masters and his Doctorate in three years. There wasn't a lot of playing back then.

The men were in a hurry to make up for the years they'd lost in the war, and the women had to keep up.

Within four years I had two children, and our bicoastal life -- pursuing professorships and professional opportunities for my husband -- began. Alan established himself in the Chemical Engineering world, and in 1970, he was invited to start a Research & Development Department at a

small pharmaceutical company in the Bay area. Alan was interested in new ways to deliver drugs. He had invented a way to send small molecules of medications through the skin -- the technology behind "the patch." The pharmaceutical company further developed the technology -- coming out with a patch against seasickness, then a patch against pain, and so on.

While living in the Bay area I met



In the end, if asked why I continue to support AIDS Research Alliance, I would say it is because of the people.

surrounded by beauty every day.

San Francisco marked the beginning of my interest in what was then considered a mysterious new disease. When we moved back to New York in 1981, I continued to visit San Francisco about every four months. Every time I returned, old friends just weren't there any more. We still didn't know what was happening. It was happening in New York, too.

Closer to home, I had another reason to get involved with this cause. I have two sons, one of whom is gay. He became HIV positive in the 1980s. But times have changed since then. He has gone from some pretty tough medications to medications that are much easier to tolerate. As a result, he has been able to live an interesting life. He is now 59 years old, an age that we couldn't imagine in the '80s and '90s.

While living in Boston, I became a contributor to an AIDS organization called The Living Center. There was always such a need to find places

looking under "A" for AIDS. I didn't have to go very far – AIDS Research Alliance was listed at the top with four stars and all the little symbols to indicate it was very well managed and not a spendthrift organization. I didn't go further – it had such a good report. So I sent in a check.

Some time later, my telephone rang, and a voice at the other end said, "This is Carolyn Carlburg, and I want to thank you for your generous donation to AIDS Research Alliance." I was so surprised because no one had ever called me before to thank me for a donation.

That was the beginning of a wonderful friendship. Carolyn and I went for coffee. And I said, "You know, I've been looking for something interesting to do – would you have something in your office?" She asked me to come in to meet Vincent Cummings, the then Director of Development, and I began volunteering in the office.

In the end, if asked why I continue to support AIDS Research Alliance, I would say it is because of the people. The people who are close to the work inspire me. It's a good feeling to be included in a project of such continuing promise. This is why I give to AIDS Research Alliance.

Closer to home, I had another reason to get involved with this cause. I have two sons, one of whom is gay. He became HIV positive in the 1980s.

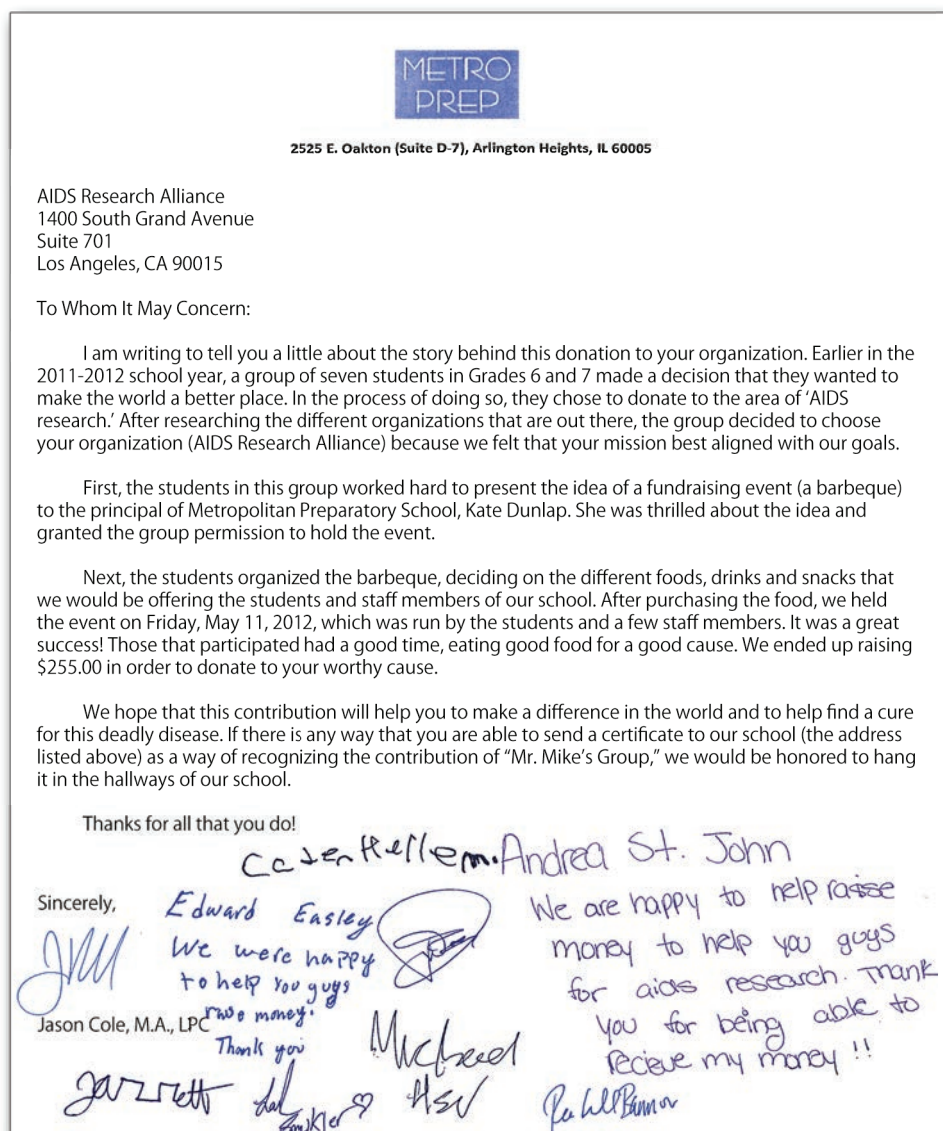
two men from Tiffany's in New York, who had opened a most wonderful store in San Francisco selling beautiful things for the home. I came into the business as a third partner, and I loved it. I loved being

for people who were sick. When I moved to Los Angeles in the early 2000s, I looked for another local organization to support. I visited the Charity Navigator website,

How a Group of 6th and 7th Graders Is Helping the Cause

We are grateful for each and every donation that we receive here at AIDS Research Alliance. But every once in a while, one gift stands out – not because of the amount – but because of the sentiment behind it. Such gifts give us insight into the motivations and generosity of our donors. They lift our spirits and our hopes.

One such gift was sent on behalf of a group of 6th and 7th graders at Metropolitan Preparatory School in Arlington Heights, Illinois. Below is the letter that accompanied the donation.



We took the gift and the sentiment behind it very seriously. Our newest team member, Development Associate Clarissa Choy, created a certificate for Mr. Mike's Group, which she sent with HIV cure bracelets, and a handwritten note of our deep appreciation.

As AIDS Research Alliance works to realize an HIV-free generation, we are buoyed by the optimism, energy and dedication of this group of young people.

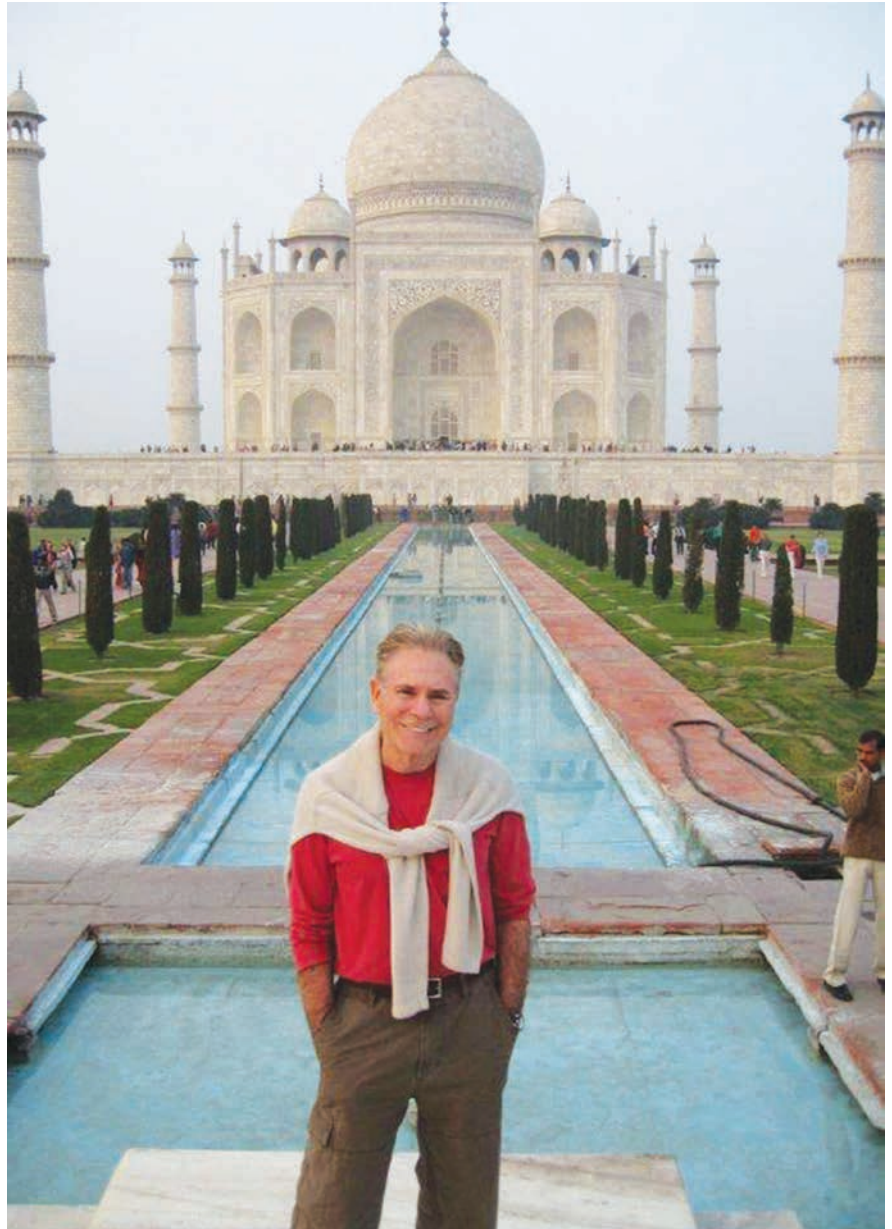
The Michael Becker Major Gift Announcement

AIDS Research Alliance is pleased to announce that former board member and longtime friend Michael Becker has made a planned gift to AIDS Research Alliance of \$1,000,000 to advance our research to eradicate the HIV reservoirs – the latent virus not killed by existing therapies. His generosity and kindness will help ARA move the world closer to a cure.

“I support AIDS Research Alliance because I have lost friends and lovers to HIV/AIDS. Even when on antiretroviral therapy, HIV-positive persons are more vulnerable to certain ailments, such as cardiovascular disease. One of my close friends, Paul, died of a heart attack, which I have to assume was related to his HIV-positive status. A cure would solve all of that. I want to help prostratin obtain FDA approval.”

The Board of Directors of AIDS Research Alliance gratefully acknowledges Michael’s forethought and commitment to our research program.

A growing number of donors are using planned gifts, including Charitable Remainder Trusts, to create a legacy for research. Given recent changes in state and federal laws, a planned gift to AIDS Research Alliance can empower donors to make sizable contributions in the future that will not affect their present finances. For more information about planned giving, please contact Lilian Miller, Director of Development, at 310-360-3863.



Michael Becker at the Taj Mahal, 2005

A Dazzling Night of Jazz to Benefit AIDS Research Alliance

The 2011 Art Deco & Jazz event at the Cicada Restaurant hosted by Emmy Award winner LeVar Burton celebrated the service of three outstanding physicians who have dedicated their careers to providing treatment to people living with HIV: Dr. Michael Gottlieb, Dr. Wilbert Jordan, and Dr. Robert Winters. Guests were treated to the fabulous music of Monica Mancini, David Benoit, Peter Smith and Kevin Axt. Presentations by the honorees highlighting their accomplishments and their influence on HIV science were enthusiastically appreciated by the audience.

The evening's honorees each received the 2011 AIDS Research Alliance Paul Rothman Award, which recognizes groundbreaking innovation, leadership, and achievement in HIV medicine equal to that achieved by our founder, Dr. Paul Rothman.

AIDS Research Alliance also celebrated its own accomplishments in the development of half of the drugs used in the treatment of HIV, and all of the major HIV vaccine trials conducted in the U.S. It renewed its commitment to finding a cure for HIV/AIDS by researching reservoir eradication strategies.

Currently, AIDS Research Alliance's reservoir eradication research is focused on the development of a new drug candidate called prostratin. Our scientists have completed 70 percent of the FDA required pre-clinical studies. They have already begun new experiments utilizing patient-derived samples rather than cell lines. Research takes time, perseverance, and financial resources, and it is due to your generous support, the dedication of our members of our Board of Directors, the members of our Institutional Review Board, our study volunteers, an exceptional staff, and our community partners that we have come this far. We hope you will continue to stand with us as we achieve further advances in HIV cure research.

Special Thanks to our Event Sponsors:

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Steve & Carol Villano
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Charles R. Williams



Chairman of the Board Cary Stevens, PepsiCo Senior Director of Sales David Orr, and ARA Spokesperson LeVar Burton



Dr. Michael Gottlieb, Wendy Gordon, and Board Chairman Cary Stevens

The Artist's Way: Why the Designer Frank Pennino Supports ARA



New Board member Frank Pennino with former Board members Kathleen Scheinfeld and Mitchell Morehart

I moved from Wisconsin to Los Angeles to do graduate work at UCLA. For the past 30 years, I have lived and worked in Los Angeles as a designer, creating interiors for celebrities like Bruce Springsteen, Steven Spielberg and Chris Columbus, among many others.

My professional life allows me to express myself artistically, and to improve people's day-to-day lives. This makes my work both interesting and gratifying. But I have always wanted to give back on a broader scale, and to be involved in matters larger than myself.

I discovered AIDS Research Alliance in 2000. What drew my attention to ARA was that it is involved in finding a cure for HIV/AIDS. Over the years, I have remained committed to the organization, most recently serving on the Host Committee for the Summer Soirée for a Cure, a fundraising event benefiting ARA's cure research program.

I know that in supporting ARA, I am helping to solve an enormous public health problem, and perhaps move society closer to a cure for HIV/AIDS. I find what ARA is seeking to do in its research program extremely promising.

AIDS Research Alliance 2011 Annual Report

Vision

AIDS Research Alliance envisions a future in which HIV and its effects on health are eliminated, and new infections are prevented.

Mission Statement

AIDS Research Alliance exists to develop a cure for HIV/AIDS, medical modalities to prevent new infections, and better treatments for those living with HIV.

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Lilian Miller
Joseph Trumed

AIDS Research Alliance is proud to announce the launch of its
new vehicle donation website – **Cars4aCure.org**

Please visit the site and let us know your feedback!

CARS4ACURE

HOME | FAQs | DONATE | WHY DONATE | ABOUT

Donate your car. Support life-saving research
Call 310.358.2423 or Email cardonation@aidresearch.org

Donate Now
310.358.2423

As Southern California's best vehicle donation service, we are committed to realizing an "HIV-free generation."

Why should I donate my vehicle?

- ✓ Your donation will support HIV vaccine + cure research
- ✓ Your donation is fully tax deductible
- ✓ We accept all vehicles, running or not
- ✓ We accept cars, SUVs, trucks, motorcycles, boats...
- ✓ We will pick it up

"Cars4aCure is Southern California's best vehicle donation program. Every time our family donates a car, I am impressed by how efficient they make the process and how much of every dollar from the sale goes to help research a cure for AIDS."
- Susan Carmichael, San Diego

We've made it easier than ever to donate your vehicle!

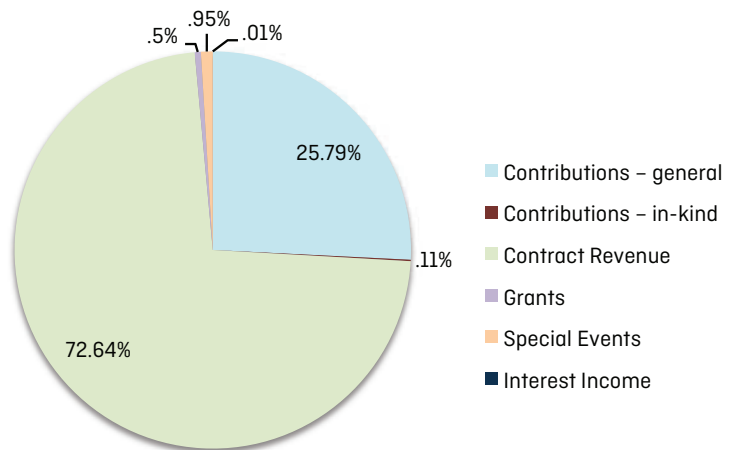
2011 Financials

AIDS Research Alliance's financial position has improved considerably since 2009, when we had to relocate from our West Hollywood location to new office space in Downtown Los Angeles. The relocation was costly because our monthly rent in West Hollywood had been subsidized by the City of West Hollywood. But the move also made it possible for us to expand and, with the support of the Pepsi Refresh Project, build a state-of-the-art research laboratory. This new laboratory's capacity and the hard work of our clinical trial and recruitment teams have grown ARA's contract revenue by more than 50 percent since 2008, before our relocation, and by almost 30 percent within the last year.

While our clinical trials program thrives, we continue to look for ways to strengthen our research program. We have broadened our reach through online platforms such as Facebook, Causes, GlobalGiving, and We-Care. We are also rebuilding relationships with lapsed donors, so that the work of our research team can be properly funded, moving the world closer to a cure for HIV.

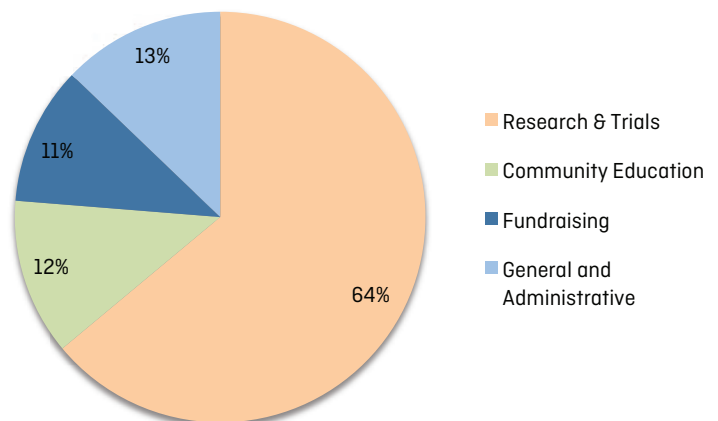
Support & Revenue Sources

Contributions – general	\$514,402.00
Contributions – in-kind	\$2,267.00
Contract Revenue	\$1,449,067.00
Grants	\$9,934.00
Special Events	\$19,096.00
Interest Income	\$27.00
Total Revenue	\$1,994,793.00



Funding Allocation

Research & Trials	\$1,362,123.00
Community Education	\$262,556.00
Fundraising	\$231,997.00
General and Administrative	\$273,419.00
Total Expenses	\$2,130,095.00



2011 Donor List

\$25,000+ | Leader's Circle

Robert John Sabo Trust
Medical Research Charities
Cary Stevens & Allen "Buddy" Green
Cam Davis & Sam Randazzo
Joseph Drown Fondation

\$10,000 to \$24,999 | Director's Circle

Mark Allen Itkin & Bradley Bayou
Jan Michaels
Capital Group Companies
Diane Heller
Entertainment AIDS Alliance
Foursight Foundation Household

\$5,000 to \$9,999 | Partner's Circle

Marie A. Tallmadge
Olive Higgins Prouty Foundation
Arthur McDermott & Jim White
Neighbor to Nation (NTN)
David Hart
Bluma Herman
John Gilbert
Arnold Kassoy
Car Program
Bernstein Global Wealth
Management
Daniel Renberg & Eugene Kapoloski
James Avedikian & Ken Evans
Nancy Kling
Sumanta Gayen

\$1,000 to \$4,999 | Ambassador's Circle

Michael Becker
Kathleen Scheinfeld
Charles Williams
William Morris Endeavor
Entertainment

United Jewish Foundation
Bernard Lewis Charitable
Foundation
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Ronald Zipperstein
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Schwab Charitable Fund
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James Babl
Janet & Jeffrey Valentine
Daniell Cornell
Joyce Dinell
Joyce Gordon
Louise Campbell
Mitchell Morehart
Neil Hedin
Ross Mtangi
Samuel Rotter
Stephen Teglovic
Thomas Given

\$500 to \$999 | Donors

Truist/ United Way

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Jean Morel
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We are also deeply grateful to our many, many, donors who contributed less than \$500, whose names could not be included above.

AIDS Research Alliance
1400 South Grand Avenue
Suite 701
Los Angeles, CA 90015



Join us on
Friday, November 30, 2012
for our

World AIDS Day Free Concert

The Colburn School
200 South Grand Avenue
Los Angeles, CA 90012

(across from the Disney Concert Hall)

**Master of Ceremonies:
Levar Burton**

Find out more at:
<http://aidsresearch.org/wad2012>