This is our philosophy at AIDS Action and what drives our mission which is to stop the epidemic by preventing new infections and optimizing the health of those who are already infected. We believe that it is possible to:

- Envision a world without AIDS
- Provide access to care and treatment for everyone infected with HIV
- Prevent the spread of new infections
- Ensure access to high quality health care for people of color
- Eliminate the stigma associated with HIV/AIDS
- End racism, sexism, transphobia and homophobia

In this annual report you will read about all of our efforts to do the impossible. We have been among several leaders from around the country who have driven forward the vision of a National AIDS Strategy for this country. Both presidential candidates have committed to this strategy to tackle the domestic epidemic with the same intensity and resources that the U.S. has committed to fight AIDS abroad.

Our commitment to promoting safe sexual practices and preventing the spread of HIV is evident in our work at The MALE Center, in BE SAFE, and our new Hotlines.

We continue to enrich our services in housing and are now providing significant legal services including litigation. We are very proud of our expanded peer support programs including our highly successful program for HIV+ women, Healing Our Community Collaborative (HOCC).

The year ahead will provide many challenges. There is significant worry about the state of our economy and likely state or federal budget cuts. Now is the time to be bold and innovative so that we ensure that AIDS Action Committee can continue to serve those in need and stop new infections. We will pursue strategic partnerships, collaborations and mergers; whatever it takes to sustain our work. We have a secure and efficient financial base and will use all of our expertise and experience on behalf of those we serve.

We can do none of this without your continued support and commitment to our mission. If you too dare to believe the “impossible,” then please continue to join us on our quest to end this epidemic and see a world without AIDS in our lifetime.

Michael T. Wong, M.D.
President, AAC Board of Directors

Rebecca Haag
President and CEO

AIDS Action Committee of Massachusetts is a not-for-profit organization whose mission is to stop the epidemic by preventing new HIV infections and optimizing the health of those who are already infected.

The Annual Report is published by AIDS Action Committee of Massachusetts, Inc.
294 Washington Street, 5th Floor
Boston, MA 02108
Telephone: 617-437-6200
TTY: 617-437-1394
Fax: 617-437-6445
www.aac.org

© 2008 AIDS Action Committee
The AIDS epidemic in the US is clearly not over:

- The CDC increased its estimate of newly reported annual cases of HIV/AIDS by 40%.
- 17,538 people are living with HIV or AIDS in Massachusetts.
- The Massachusetts Department of Public Health (MDPH) issued a report illustrating the disproportionate impact of the disease on gay, bisexual and other men who have sex with men.

AIDS Action’s prevention efforts fight the spread of the disease:

- AAC reached more than 40,000 people with prevention messages.
- AIDS Action’s Male Center (D) offers the only late night and weekend testing hours statewide (A).
- AAC is working with the Massachusetts Department of Public Health on a statewide HIV Testing Campaign (B), the 25-year-old HIV Hotline, and the newly-launched STD411.org.

AIDS Action’s work with clients included:

- Providing services to more than 2,500 clients with an average income of $9,750.
- Expanding support groups including Whole Health Forums and Healing Our Community Collaborative (E).
- Focusing on legislation to strengthen confidentiality and data security protections for HIV positive people.

AIDS Action is focusing on the future, by:

- Bringing in over $2 million of critical unrestricted funding through Boomerangs and the AIDS Walk (C).
- Building relationships in innovative ways through Facebook, Twitter, YouTube and more.
- Making sure the next president commits to implementing a National AIDS Strategy (F).
OUR MISSION: END THE EPIDEMIC

MACY’S

In 2007 Macy’s became the Presenting Sponsor of AIDS Walk Boston, a commitment now extended through 2009. Macy’s involvement with the Walk has engaged their company at every level, mobilizing the resources of their New York executive offices, Macy’s Parade Studio, and associates from all 31 of its New England locations through Macy’s employee volunteer program, Partners In Time. Macy’s has also designated AIDS Action as a beneficiary of the national Shop for a Cause and Passport: Fashion Cinema fundraisers. Since the early 1980s, Macy’s and its thousands of store associates have volunteered countless hours and brought over $27 million to AIDS research, prevention and support services nationwide.

The CDC’s report is a wake-up call. Our next president must focus attention on the crisis at home. Not only do we need a commitment to prevention, a significant increase in funding for care and treatment, better access to testing and counseling, and a way to address racial disparities, but we also need a National AIDS Strategy that establishes specific and measurable outcomes, timetables, and accountabilities.”

Rebecca Haag
Boston Globe Op-Ed • AUGUST 10, 2008

“Just in time for the upcoming presidential election, AIDS activists across the nation are calling for a response to the AIDS crisis in America. When the infection rate in the president’s backyard rivals that of many sub-Saharan African countries, the time has clearly come for a National AIDS Strategy for the United States.”

Regan Hoffman
Editor, Poz Magazine

Since the battle to end the AIDS epidemic cannot be won in Massachusetts alone, the AIDS Action Committee of Massachusetts (AAC) has been on the forefront of ending the epidemic in the U.S. as a key member of the national leadership team focused on creating a National AIDS Strategy (www.NationalAIDSstrategy.org). Conceived just over a year ago, the effort has already scored phenomenal success. Both Presidential nominees agree to support creating a National AIDS Strategy in the U.S. complete with measurable outcomes, a timeline and appropriate funding levels to end the epidemic in our country. The effort is embraced by over 350 organizations and more than 1,200 individuals. The U.S. requires similar plans from those countries to which it provides foreign aid to fight HIV/AIDS.

The national initiative resulted in a series of events that raised awareness of HIV/AIDS in the U.S. as a national health priority. AAC’s President and CEO Rebecca Haag moderated a bipartisan panel that testified before Congress with 10 Honorary Congressional co-sponsors including Representatives Tammy Baldwin, Donna Christensen, Barbara Lee, Hilda Solis, Maxine Waters and Henry Waxman, all calling for a National AIDS Strategy.

Following the hearing, both the Senate and House Finance Committees approved $1.4 million specifically designated for developing a National AIDS Strategy. Throughout the year, the National AIDS Strategy has been cited by Presidential candidates, elected officials and other leaders including former President Bill Clinton, Michelle Obama and actor Danny Glover. Support for creating a National AIDS Strategy was approved unanimously and included in the Democratic Party Platform, and was also a featured highlight at the biennial International AIDS Conference held this summer in Mexico City.

AAC President and CEO Rebecca Haag moderated a bipartisan panel in Washington this past May to develop a National AIDS Strategy. From left: Rebecca Haag; Dr. David Holtgrave, Ph.D., Johns Hopkins University; Mario Perez, Director, Office of AIDS Programs & Policy, Los Angeles County Department of Public Health; Phill Wilson, Executive Director, The Black AIDS Institute; Kathie Hiers, CEO, AIDS Alabama; Terrell Halaska, Partner at HCM Strategists and Marjorie Hill, Ph.D., CEO, Gay Men’s Health Crisis.
Prevention is the best tool to stop new HIV infections. Through creative collaborations and innovative, science-based interventions, the prevention department adds depth and breadth to its work every year. Finding and engaging people at risk is the cornerstone of effective prevention, and AAC’s successful efforts target populations who are disproportionately affected by HIV/AIDS, including communities of color, gay and bisexual men (especially Black and Latino gay men), women of color, youth and injection drug users.

The MALE Center: Changing Lives
In response to the ongoing HIV/AIDS crisis in the gay male community, The MALE Center has continued to grow and focus its efforts on those most at risk. In the past year the MALE Center has reached over 29,000 men who have sex with men through peer and staff outreach efforts. It has distributed close to 16,000 Role Model Stories — targeted outreach materials encouraging gay men to make safer choices and find out their HIV status. The MALE Center accomplishes all of this through the dedicated work of five staff and 45 committed and highly trained volunteers. Each month the Center holds multiple community events including social groups, reading groups, safer sex classes, discussion nights, and more. Through the Center’s targeted efforts, over 200 high risk men who have sex with men have had individual counseling sessions to talk about their risks, changing their behaviors, and getting tested for HIV.

The MALE Center provided 459 HIV tests in the past year. The MALE Center is the only site in Boston to offer evening and Saturday hours for free, walk-in HIV Rapid testing, and will expand this work in the coming year.

STD 411: 21st Century Outreach
Given the continued high rates of STDs among youth and young adults, AIDS Action partnered with the Bureau of Communicable Disease Control and Prevention to create a new innovative outreach strategy targeted at urban youth ages 20-29. STD411.org launched in late August. The site uses targeted online outreach strategies to respond to young adults’ common questions and concerns about STDs and help them find an STD clinic. AIDS Action is committed to holistically addressing STD prevention as part of its ongoing HIV prevention strategy. Diagnosing, treating, and preventing STDs is a critical component of reducing HIV infection. STD411.org is also running a special advertising and outreach effort in cities throughout Massachusetts.

BE SAFE: Breaking the Mold
AIDS Action’s collaborative youth prevention initiative BE SAFE emphasizes working horizontally across issues of sexual and mental health, substance use and healthy relationships. BE SAFE brings together the power and expertise of several leaders in the social services field: The Dimock Center, Center for Community Health, Education and Research, Boston Area Rape Crisis Center, Planned Parenthood League of Massachusetts, and The City School.

Over the past year BE SAFE has reached 6,775 youth with tailored training and consultation. This training aims to increase the likelihood that trusted adults in out-of-school time programs are able to respond to the concerns and issues the young people in their programs present. BE SAFE continues to enjoy widespread support from foundations and individual donors committed to the idea that effective work with youth demands reaching beyond silos and out of comfort zones.

Former BE SAFE Mass Promise Fellow, Rumsin Khoshaba (second from right, rear) with the 2008 Youth Leadership Board Members.
Optimizing the health of those already infected is a central tenet of AIDS Action’s mission. This year, the agency has further adapted to fit the health and well-being needs of its clients by strengthening housing and legal services and support groups.

**Targeting Housing**

Because housing is the most pressing need for the majority of AAC’s clients, the Housing Advocacy Team and Case Management Team combined to create the new Client Advocacy Program.

- Seven front line staff members support clients with eviction prevention, referrals to counseling, treatment consultations and housing search and budgeting groups.
- Post-housing stabilization services are largely provided by the Check-In Team of over 30 volunteers.
- In collaboration with Healthcare for the Homeless and Prevention Access Care Treatment (PACT) through Beth Israel Deaconess Medical Center, doctors, nurses, social workers, housing advocates and clinical staff bring comprehensive care to AAC’s homeless clients.

**Expanding Legal Services**

New research has proven that the resolution of legal issues positively influences health outcomes.

- This year Legal Services expanded the direct representation it gives clients facing legal action in housing as well as debt management, family issues and public and private benefit matters.
- AIDS Action also launched Massachusetts Transgender Legal Advocates, providing free legal services to transgender people living with or at risk of HIV/AIDS, in conjunction with Massachusetts Transgender Political Coalition (MTPC) and Cambridge Cares about AIDS.

**Strengthening Support Groups**

As the agency continues to embrace other health related issues facing clients, it has increased the number and scope of support groups.

- AAC began a new series to discuss race and the impact of racism on clients’ health.
- Healing Our Community Collaborative (HOCC) and the North Shore Community Health Project will be launching the Women’s Health Disparity Project, allowing physicians from the Board of Directors and agency staff to collaborate with women from affected communities in solution-based focus groups.
- Nearly 300 individuals attended peer support groups and over 1,000 participated in mental health counseling sessions.

**Housing is Healthcare**

The experiences of AAC’s clients in its residential housing program are a prime example of how housing creates health and stability among people living with HIV/AIDS. One 62-year-old African American male was living in a single room occupancy when he started coming to a weekly men’s group. At that time, he expressed a desire to move into one of the Joy Street apartments. In 1999, he signed his lease from his hospital bed while being treated for pneumonia. Since moving into Joy Street, the resident has been able to maintain his sobriety despite a long history of substance abuse. He has also been able to keep his medical appointments and improve his health by adhering to his medication regimen. With his housing situation and health stabilized, the resident has been able to work with his case manager to increase his self-sufficiency in other ways, including enrolling in an adult literacy and computer skill classes and working toward obtaining his driver’s license. He’s able to plan several trips a year to visit his mother in Florida and set aside money from his disability check each month in order to help her out. When out in the neighborhood, the resident is often recognized and greeted by his neighbors. He says he’s happy to be well-known for who he is today, and that, “Joy Street is home for me.”

**AIDS Action provides:**

- a place to call home.
- onsite case management.
- comprehensive counseling for substance abuse.
- support with relationships and disclosure, domestic violence, and co-infections such as Hepatitis C, cancer, diabetes and cardiac issues.

The Riklin Family

In 1996, Scott Riklin, age 44, passed away from complications due to AIDS. The following year, the Riklin family honored the memory of their beloved brother and son by organizing a charity golf tournament – AIDS Action Committee was honored to be named the beneficiary. Now in its 12th year, the Scott Riklin Memorial Golf Tournament has donated over $45,000 to support AAC’s programs and services. The tournament would not be possible without the tireless efforts of the entire Riklin family, who engage friends, family, neighbors and colleagues. Thanks to Jeff Riklin, his wife Liz and the entire Riklin family – including Scott’s 86-year-old father, Dr. Bernard Riklin, who anchored this year’s winning foursome – whose efforts have kept Scott’s memory alive and raised awareness of the terrible toll of this epidemic.
Jim Morgrage, president and director of the Harbor to the Bay AIDS charity bike ride, has supported local HIV/AIDS causes for almost 20 years. Jim was inspired to start the ride to honor the memory of his friend, Michael A. Tye, who lost his battle with cancer in 2003. Michael and Jim participated in Boston to New York AIDS Rides, but were dismayed to learn over half the funds raised went toward producing the event. Their vision of a grassroots, community-based event that would return all of the proceeds to HIV/AIDS organizations has become reality. Harbor to the Bay’s all-volunteer model ensures that 100% of the money raised through the event goes directly to improving the lives of people impacted by HIV/AIDS. H2B has raised more than $1 million for four Massachusetts HIV/AIDS organizations, including AIDS Action Committee.
Twenty-five years after its first call, AIDS Action’s HIV Hotline illustrates the changing face of the epidemic and the evolution of the agency’s prevention work. Funded by the Massachusetts Department of Public Health, the hotline has evolved from a first responder in fear-driven 1983 to the proactive leader it is today.

A Hotline volunteer since its origin in 1983, Fred Cowan offers his unique perspective on the early days when the epidemic first broke and the strengths of the Hotline as it exists now.

“There wasn’t anybody who wasn’t afraid,” says Cowan. “Everybody was in crisis mode.”

Cowan compared that with the Hotline environment today.

“Today, most Hotline volunteers don’t know people who are dying of AIDS, and I envy them that,” he said. “The training is detailed and I get to focus on being empathetic because the technology does the searching for us. Now, with a keystroke or two, I can get people access to HIV, hepatitis or general healthcare services, usually within five miles of their home.”

That expansion of AIDS Action’s focus beyond HIV comes because the agency believes the HIV/AIDS epidemic cannot be ended without addressing related health and social issues. To that end, AIDS Action has expanded its work to include correlated sexual health issues like STDs, viral hepatitis and general sexual health, and providing hotline support via email as well as phone.

Today AAC’s outreach and education work is multipronged. STD411 (STD411.org) provides a valuable online resource for young adults in the face of rising STD rates in Massachusetts. AAC is also preparing a soon-to-be-launched broad sexual health initiative in website form for young people. The MALE Center’s Sex Life Coaching program helps gay and bisexual men integrate their sexual health with the rest of their lives. And BE SAFE collaboratively addresses multiple issues including youth mental health, substance use, domestic violence and sexual assault, and sexual health.

With all its programs, AAC and the Hotline strive to provide the combination of information and empathy that make an impact with callers and community members.

“No one today on the phone with us feels like they are a person in a long line of callers, and that means that people today will ask an important question that took time and courage to build up to ask, rather than swallow and not voice it,” Cowan said.
AIDS Action continues to diversify its revenue streams, solicit funding for new emerging initiatives, and operate efficiently and effectively. In FY 2008, AAC received new funding for HOCC (Healing our Communities of Color), an emergency contraceptive hotline, and a new STD website, and additional funding for rental and utilities assistance.

AAC is doing well against those metrics that evaluate financial stability and the ability to survive during more challenging times:

- Overhead rate continues to be 12%, consistent with the prior year and well within the range of 10-15% that organizations of this size incur.
- AAC’s ability to pay current obligations with current assets remains strong – the agency has 3.8 times the amount required to meet its current obligations.
- AAC’s cash position remains strong so it can continue services during a crisis period. AIDS Action would be able to pay all operating costs of the organization for 82 days.

For FY 2008, almost 52% of agency funding was contract based – city, state or federal, up from 46% in the prior year. While at the same time, in kind donations have essentially doubled – from $148,000 to $310,000. This is a reflection of the continued commitment of AAC’s generous donors to the agency’s mission and work. AAC is also increasingly utilizing the web to boost visibility and online donations, and secured a grant from Google to drive more traffic to the website.

**Business is Booming at Boomerangs**

AIDS Action Committee’s award winning resale store enters its eighth year in the Jamaica Plain location and continues to thrive. By closing the Brighton store, enlarging the footprint of the Jamaica Plain location, and setting up a new warehouse and processing center in the Sam Adams Brewery complex in JP, Boomerangs increased gross revenue by almost $240,000 or 24% from the prior year. This operation now represents 13.2% of total agency revenue, up from 10.6% in the prior year.

In 2008, Boomerangs won Best Retail Store, Best Business in Area: Centre Street and Best Storefront from the Jamaica Plain Gazette. Open 7 days a week, the store offers outstanding bargains on new and used clothes, furniture, books, housewares and more, while supporting the programs and services of AIDS Action Committee, providing good karma at great prices.

**Corporate Commitment**

AAC is grateful for the strong relationships and support of the local business community. This year, the AIDS Walk’s Wellness Festival sold out every booth and Taste of the South End had its largest level of support to date from the local corporate community. Their support has helped establish Taste of the South End as the preeminent food and wine event in the city of Boston. AAC has also developed a long-term partnership with Macy’s as presenting sponsor of the AIDS Walk, and this year its walk team more than doubled in size. AAC thanks all our corporate partners (complete list on page 11). The agency would like to recognize a few companies that are new to the family of supporters or who have significantly increased their support, including Brueggers, Stop and Shop, Clarke Luxury Appliance Showroom, EMD Serono and Sovereign Bank. Please support those companies committed to fighting this disease.
**STATEMENT OF ACTIVITIES**
For the Year Ended April 30, 2008
with Comparative Totals for 2007

**UNRESTRICTED NET ASSETS OPERATIONS:**

**Revenues:**
- Contributions: $1,052,226
- Special events: $1,402,323
- Grants and contracts: $4,834,622
- Education and consulting: $279,603
- In-kind contributions: $310,672
- Total revenues: $7,879,446

**Expenses:**
- Client services: $3,011,365
- Prevention, education & policy: $2,706,916
- Community grants: $258,761
- Capacity building assistance: $258,761
- Administration and finance: $1,159,084
- Total operating expenses: $8,577,931

Increase (decrease) in unrestricted net assets from operations before retail: $(698,485)

**RETAIL:**
- Retail store sales: $1,241,776
- Donations of items for resale: $981,598
- Cost of goods sold: $(1,028,623)
- Retail store expenses: $(870,359)
- Increase in unrestricted net assets from retail before net gain or loss on investments: $(698,485)

Gain on disposal of capital leases: $7,202

Net gain (loss) on investments: $(75,740)

Increase (decrease) in unrestricted net assets from operations and retail: $(774,227)

**STATEMENT OF FINANCIAL POSITION**
As of April 30, 2008
with Comparative Totals for 2007

**ASSETS:**

**CURRENT ASSETS:**
- Cash and cash equivalents: $608,399
- Investments: $1,283,333
- Grants and contracts receivable: $662,789
- Other accounts receivable: $42,253
- Prepaids: $55,830
- Store inventory: $127,276
- Total current assets: $2,779,880

**FIXED ASSETS:**
- Fixed assets: $280,540
- Other assets: $211,177
- Total assets: $3,271,597

**LIABILITIES AND NET ASSETS**

**CURRENT LIABILITIES:**
- Accounts payable and accrued expenses: $470,784
- Deferred revenue: $175,521
- Deferred rent, current: $50,133
- Capital lease obligations, current: $16,613
- Total current liabilities: $713,051

**LONG-TERM LIABILITIES:**
- Deferred rent, long term: $66,353
- Capital lease obligations, long term: $48,654
- Total liabilities: $828,058

**NET ASSETS**

**UNRESTRICTED:**
- Available for operations: $2,365,458
- Investment in plant: $215,273
- Total unrestricted net assets: $2,371,524

**TEMPORARILY RESTRICTED:**
- Temporarily restricted net assets: $72,015
- Total net assets: $2,443,539

**TOTAL LIABILITIES AND NET ASSETS:**
- Total liabilities: $828,058
- Total net assets: $2,443,539

**FINANCES**

AIDS Action Committee of Massachusetts, Inc.

---

*The Statement of Activities and Statement of Financial Position are excerpted from the audited financial statements for AIDS Action Committee of Massachusetts for the year ended 4/30/08. Complete audit reports can be requested by contacting Drusilla Pratt-Otto, Chief Financial Officer.*
AIDS Action Committee of Massachusetts gratefully acknowledges the generous support of the following corporations for their contributions of $1,000 or more during our Fiscal Year 2008 (May 1, 2007 - April 30, 2008)

**OUR DONORS**

### Businesses, Corporations, and Foundations

- $100,000: Fidelity Investments Charitable Gift Fund • Harbor To The Bay Inc. • Harvard Pilgrim Healthcare Foundation
- $50,000: Macy's • National AIDS Fund
- $49,999: Bank of America Charitable Management
- $50,000: Agar Supply Co. • Bank of America Charitable Management
- "AIDS Action gratefully acknowledges the generous support of the following corporations for their contributions of $1,000 or more during our Fiscal Year 2008 (May 1, 2007 - April 30, 2008). Although space and cost constraints do not allow us to list every one who made donations, AIDS Action deeply appreciates the support and contributions from all of our supporters."

### Major Donors

AIDS Action Committee would like to take this opportunity to recognize the invaluable contributions of our Major Donors who contributed $1,000 or more during Fiscal Year 2008. Although space and cost constraints do not allow us to list every one who made donations, AIDS Action deeply appreciates the support and contributions from all of our supporters.

- **$100,000+:** Anonymous • Anne C. Kubik, M.D. and Michael A. Krupka • $50,000-$99,999 Anonymous • Esmond V. Hamsworth and James Richardson • William E. Kelly • $5,000-$9,999 Anonymous • Jeffrey P. Beale • John M. DeCecco • Pamela D. Dippel-Choney and Jeffrey Choney • Elder Family Foundation
- $1,000-$2,499 Anonymous (5) • Pamela and Steven Andradra • Stephen B. Andrus • Robert A. Baillargeon • The Barrington Foundation, Inc. • John H. Basile • Timothy M. Baum • R. David Beck and Gregory R. Van Boven • Jonathan and Barbara Beckwith • Steven H. Berez • John Bergen • David J. and Monica Bernstein
- Bertram D. Blaisdell Trust • Brian E. Boyle Charitable Foundation • William Haskell Brack and Jessica Anne Ladd • Harry H. Brakeley • Robert L. Buckwalter • Brett D. Burguard • Greg and Jessica Cappa • Charles E. Carney • Brian T. and Mary V. Carty • James O. and Alice F. Cole Foundation • The Collins Family Foundation • John R. Corcoran • Steven D. Corkin • Linda Corwin and Edwin J. Fremder • Frances Dennie Davis • Eric L. Day • Mary P. DiSchino • Frederick J. Doherty • Dennis P. Duffy
- Philip J. and Deborah Edmundson • Elizabeth Edwards • Paul English • Robert A. Ermanus • Elizabeth Feeherry • Deborah Frieze • Andrew M. Fuller • Kelly T. Gaule and Julie A. Clark • Donald D. Gilligan and Regina L. Hanus • Jennifer M. Haag and Mary Breslauer • Richard G. and Lorie Hamermesh • Geoffrey L. Hargadon and Patricia LaValley • Barbara S. Hayes • Stephen J. Hendrickson • Gardner C. Hendrie and Karen J. Johansen • Kathleen M. Henry and Kim V. Markand • Hermione Foundation
- William L. Hodgins • Sandra P. Hughes • John T. Jacoby • Patricia A. Johnson and Bonnie J. Strong • Roger B. Kalker • Kathleen L. Kerby and Ben Littauer • James R. Koliba
- Mitchell I. and Ann Kramer • Mary P. and Joseph P. Landy • Jonathan and Jeanne Lavine • David Levin • Steven Lipiner • Derek Lisinski • John F. and Julia M. Mahon • George P. Mair • Robert H. Marks, Jr. • Kim R. McCant • Dennis McFarland and Michelle B. Simons • Peter and Rosanne Meade • Michael Paul Melendez, PhD • Stanley J. Michalik • Trevor Miller and Kim Williams • Cyra and Jean Montagu • Georgette Moquin • James A. Moses • Joan L. Nissman and Morton Abromson • William P. O’Connell
- Kevin O’Laughlin • Carol Sawyer Parks • Robert Patten and Valerie Ann Yarashus • Kevin J. Pekar • Robert Penfield • Anne M. and Mark A. Peterson • Marc S. Plonskier and Heni Koenigsberg • Nancy Present-Van Broekhoven and Paul Van Broekhoven • Andrew A. and Deborah T. Rempis • William A. and Crystal Ribich • Cheryl A. Richardson and Michael Gerrish • Charles S. and Francene S. Rodgers • Daniel L. Romanow and Andrew Zelermeyer • Jill R. Rosenthal, M.D. and Tony Saletan • Susan and Daniel E. Rothenberg • Jerome Ryan • Diego Miguel Sanchez • Karen A. Schultz • Seymour and Sylvia Rothchild Family 2004 Charitable Foundation • Tyra and Mikel Sidberry • Andrew Sigel • Scott Slater • William C. Snaha • Mark D. Smith and John T. O’Keefe • Elizabeth D. Smith • Valerie B. Sorenson • Sally A. Stalker • Blaze A. Stancampiano • Valerie E. Stone • Liam Sullivan • Elinor and John R. Swenson • Donald J. Thompson • Eileen Thurston and Barbara Caschke • Patrick and Mary Ann Tynan • Barbara A. Ventola • Regina Ventre and Scott Forbes • Richard Voos • Becky and John Weidenbruch • Leah Weinberg • Bruce S. Weisberg and Sergeant A. Genesse • Michal J. Werkowski • Michael J. Whalen • K. Bryant and Emily Wick • Ann Maureen and Paul R. Shuey Wieneck • Ellen Wineberg • Michael T. Wong, M.D. • Karl Wood and James S. Harper • John A. and Abby Yozell • Michael F. Zito.