

Form 990
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2007

Open to Public Inspection

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

A For the 2007 calendar year, or tax year beginning 01-01-2007 and ending 12-31-2007

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

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

C Name of organization
Elizabeth Glaser Pediatric AIDS Foundation
Number and street (or P O box if mail is not delivered to street address) Room/suite
1140 Connecticut Avenue
City or town, state or country, and ZIP + 4
Washington, DC 20036

D Employer identification number
95-4191698
E Telephone number
(202) 296-9165
F Accounting method
Cash
Accrual
Other (specify)

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

G Web site: www.pedaids.org

J Organization type (check only one)
501(c)(3)
4947(a)(1)
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

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 100,573,294

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates?
H(b) If "Yes" enter number of affiliates
H(c) Are all affiliates included?
H(d) Is this a separate return filed by an organization covered by a group ruling?
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.)

Table with columns for Revenue, Expenses, and Net Assets. Rows include Contributions, Program service revenue, Membership dues, Interest on savings, Dividends, Gross rents, Other investment income, Gross amount from sales of assets, Special events and activities, Gross sales of inventory, Other revenue, Total revenue, Program services, Management and general, Fundraising, Payments to affiliates, Total expenses, Excess or (deficit) for the year, Net assets or fund balances at beginning of year, Other changes in net assets or fund balances, Net assets or fund balances at end of year.

**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 \$ <sup>0</sup> noncash \$ <sup>0</sup> ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22a</b>			
<b>22b</b> Other grants and allocations (attach schedule) (cash \$ <sup>0</sup> noncash \$ <sup>0</sup> ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22b</b>			
<b>23</b> Specific assistance to individuals (attach schedule)	<b>23</b>			
<b>24</b> Benefits paid to or for members (attach schedule)	<b>24</b>			
<b>25a</b> Compensation of current officers, directors, key employees etc. Listed in Part V-A (attach schedule)	<b>25a</b>	553,030	553,030	
<b>b</b> Compensation of former officers, directors, key employees etc. listed in Part V-B (attach schedule)	<b>25b</b>			
<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>25c</b>			
<b>26</b> Salaries and wages of employees not included on lines 25a, b and c	<b>26</b>	14,865,433	12,003,010	2,112,607
<b>27</b> Pension plan contributions not included on lines 25a, b and c	<b>27</b>	301,297		301,297
<b>28</b> Employee benefits not included on lines 25a - 27	<b>28</b>	4,890,391	4,021,839	651,851
<b>29</b> Payroll taxes	<b>29</b>	1,685,103	1,385,822	224,611
<b>30</b> Professional fundraising fees	<b>30</b>	239,652		239,652
<b>31</b> Accounting fees	<b>31</b>	796,285	49,089	747,196
<b>32</b> Legal fees	<b>32</b>	58,251	39,080	2,987
<b>33</b> Supplies	<b>33</b>			
<b>34</b> Telephone	<b>34</b>	569,653	393,104	167,777
<b>35</b> Postage and shipping	<b>35</b>	231,482	153,789	51,434
<b>36</b> Occupancy	<b>36</b>	1,671,586	644,085	1,026,949
<b>37</b> Equipment rental and maintenance	<b>37</b>			
<b>38</b> Printing and publications	<b>38</b>			
<b>39</b> Travel	<b>39</b>	3,348,524	3,018,032	211,532
<b>40</b> Conferences, conventions, and meetings	<b>40</b>	3,142,329	3,050,492	84,735
<b>41</b> Interest	<b>41</b>			
<b>42</b> Depreciation, depletion, etc. (attach schedule)	<b>42</b>	190,169	1,245	188,924
<b>43</b> Other expenses not covered above (itemize)				
<b>a</b> See Additional Data Table	<b>43a</b>			
<b>b</b>	<b>43b</b>			
<b>c</b>	<b>43c</b>			
<b>d</b>	<b>43d</b>			
<b>e</b>	<b>43e</b>			
<b>f</b>	<b>43f</b>			
<b>g</b>	<b>43g</b>			
<b>44</b> Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	<b>44</b>	100,556,654	87,734,785	10,006,104

**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 \$<sup>0</sup>, (ii) the amount allocated to Program services \$<sup>0</sup>, (iii) the amount allocated to Management and general \$<sup>0</sup>, and (iv) the amount allocated to Fundraising \$<sup>0</sup>

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

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

<p>What is the organization's primary exempt purpose? <b>▶ TO PREVENT AND ERADICATE PEDIATRIC AIDS</b></p> <p>All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)</p>	<p><b>Program Service Expenses</b> (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)</p>
<p><b>a</b> See Additional Data Table</p> <p>_____</p> <p>_____</p> <p>(Grants and allocations \$ _____ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p><b>b</b></p> <p>_____</p> <p>_____</p> <p>(Grants and allocations \$ _____ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p><b>c</b></p> <p>_____</p> <p>_____</p> <p>(Grants and allocations \$ _____ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p><b>d</b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>(Grants and allocations \$ _____ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p><b>e</b> Other program services (attach schedule)</p> <p>(Grants and allocations \$ _____ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p><b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) . . . . <b>▶</b></p>	<p>87,734,785</p>

**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)		(B)
		Beginning of year		End of year
Assets	<b>45</b> Cash—non-interest-bearing . . . . .	10,082,921	<b>45</b>	14,088,736
	<b>46</b> Savings and temporary cash investments . . . . .		<b>46</b>	
	<b>47a</b> Accounts receivable . . . . .	<b>47a</b> 846,552		
	<b>b</b> Less allowance for doubtful accounts . . . . .	<b>47b</b>	1,848,693	<b>47c</b> 846,552
	<b>48a</b> Pledges receivable . . . . .	<b>48a</b> 2,741,157		
	<b>b</b> Less allowance for doubtful accounts . . . . .	<b>48b</b>	1,774,925	<b>48c</b> 2,741,157
	<b>49</b> Grants receivable . . . . .		<b>49</b>	
	<b>50a</b> Receivables from current and former officers, directors, trustees, and key employees (attach schedule) . . . . .		<b>50a</b>	
	<b>b</b> Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule) . . . . .		<b>50b</b>	
	<b>51a</b> Other notes and loans receivable (attach schedule) . . . . .	<b>51a</b>		
	<b>b</b> Less allowance for doubtful accounts . . . . .	<b>51b</b>		<b>51c</b>
	<b>52</b> Inventories for sale or use . . . . .		<b>52</b>	
	<b>53</b> Prepaid expenses and deferred charges . . . . .	5,599,583	<b>53</b>	6,460,821
	<b>54a</b> Investments—publicly-traded securities <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	33,277	<b>54a</b>	3,010
	<b>b</b> Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		<b>54b</b>	
<b>55a</b> Investments—land, buildings, and equipment basis . . . . .	<b>55a</b>			
<b>b</b> Less accumulated depreciation (attach schedule) . . . . .	<b>55b</b>		<b>55c</b>	
<b>56</b> Investments—other (attach schedule) . . . . .		<b>56</b>		
<b>57a</b> Land, buildings, and equipment basis . . . . .	<b>57a</b> 1,871,188			
<b>b</b> Less accumulated depreciation (attach schedule) . . . . .	<b>57b</b> 1,171,856	825,794	<b>57c</b> 699,332	
<b>58</b> Other assets, including program-related investments (describe <input type="checkbox"/> _____ )		6,567,272	<b>58</b> <input checked="" type="checkbox"/>	6,460,625
<b>59 Total assets</b> (must equal line 74) Add lines 45 through 58 . . . . .		26,732,465	<b>59</b>	31,300,233
Liabilities	<b>60</b> Accounts payable and accrued expenses . . . . .	2,448,932	<b>60</b>	4,038,342
	<b>61</b> Grants payable . . . . .	8,871,115	<b>61</b>	12,340,775
	<b>62</b> Deferred revenue . . . . .	4,821,277	<b>62</b>	4,959,131
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .		<b>63</b>	
	<b>64a</b> Tax-exempt bond liabilities (attach schedule) . . . . .		<b>64a</b>	
	<b>b</b> Mortgages and other notes payable (attach schedule) . . . . .		<b>64b</b>	
	<b>65</b> Other liabilities (describe <input type="checkbox"/> _____ )		229,090	<b>65</b> <input checked="" type="checkbox"/>
<b>66 Total liabilities</b> Add lines 60 through 65 . . . . .		16,370,414	<b>66</b>	21,618,949
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</b>			
	<b>67</b> Unrestricted . . . . .	1,905,159	<b>67</b>	2,057,100
	<b>68</b> Temporarily restricted . . . . .	8,366,434	<b>68</b>	7,533,006
	<b>69</b> Permanently restricted . . . . .	90,458	<b>69</b>	91,178
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74</b>			
	<b>70</b> Capital stock, trust principal, or current funds . . . . .		<b>70</b>	
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund . . . . .		<b>71</b>	
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>72</b>	
<b>73 Total net assets or fund balances</b> Add lines 67 through 69 <b>or</b> lines 70 through 72 (Column (A) <b>must</b> equal line 19 and column (B) <b>must</b> equal line 21) . . . . .		10,362,051	<b>73</b>	9,681,284
<b>74 Total liabilities and net assets / fund balances</b> Add lines 66 and 73 . . . . .		26,732,465	<b>74</b>	31,300,233





**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? . . . . .	<b>82a</b>	Yes	
<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>		513,591
<b>83a</b> Did the organization comply with the public inspection requirements for returns and exemption applications?	<b>83a</b>	Yes	
<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contributions? . . . . .	<b>83b</b>	Yes	
<b>84a</b> Did the organization solicit any contributions or gifts that were not tax deductible? . . . . .	<b>84a</b>		
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	<b>84b</b>		
<b>85 501(c)(4), (5), or (6) organizations. a</b> Were substantially all dues nondeductible by members? . . . . .	<b>85a</b>		
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? . . . . .	<b>85b</b>		
If "Yes," was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed the prior year.			
<b>c</b> Dues assessments, and similar amounts from members . . . . .	<b>85c</b>		
<b>d</b> Section 162(e) lobbying and political expenditures . . . . .	<b>85d</b>		
<b>e</b> Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices . . . . .	<b>85e</b>		
<b>f</b> Taxable amount of lobbying and political expenditures (line 85d less 85e) . . . . .	<b>85f</b>		
<b>g</b> Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? . . . . .	<b>85g</b>		
<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? . . . . .	<b>85h</b>		
<b>86 501(c)(7) orgs.</b> Enter <b>a</b> Initiation fees and capital contributions included on line 12	<b>86a</b>		0
<b>b</b> Gross receipts, included on line 12, for public use of club facilities . . . . .	<b>86b</b>		0
<b>87 501(c)(12) orgs.</b> Enter <b>a</b> Gross income from members or shareholders . . . . .	<b>87a</b>		0
<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) . . . . .	<b>87b</b>		0
<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 . . . . .	<b>88a</b>		No
<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 . . . . .	<b>88b</b>		No
<b>89a 501(c)(3) organizations</b> Enter Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> _____ 0, section 4912 <input type="checkbox"/> _____ 0, section 4955 <input type="checkbox"/> _____ 0			
<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 . . . . .	<b>89b</b>		No
<b>c</b> Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . <input type="checkbox"/> _____ 0			
<b>d</b> Enter Amount of tax on line 89c, above, reimbursed by the organization . . . . . <input type="checkbox"/> _____ 0			
<b>e All organizations.</b> At any time during the tax year was the organization a party to a prohibited tax shelter transaction? . . . . .	<b>89e</b>		No
<b>f All organizations.</b> Did the organization acquire direct or indirect interest in any applicable insurance contract? . . . . .	<b>89f</b>		No
<b>g 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? . . . . .	<b>89g</b>		
<b>90a</b> List the states with which a copy of this return is filed <input type="checkbox"/> CA			
<b>b</b> Number of employees employed in the pay period that includes March 12, 2007 (See instructions) . . . . .	<b>90b</b>		149
<b>91a</b> The books are in care of <input type="checkbox"/> DANIEL WARCO CONTROLLER Telephone no <input type="checkbox"/> (202) 296-9185 1140 CONNETICUT AVE NW Located at <input type="checkbox"/> WASHINGTON, DC ZIP + 4 <input type="checkbox"/> 20036			
<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)? . . . . .	<b>91b</b>	Yes	No
If "Yes," enter the name of the foreign country <input type="checkbox"/> _____			
See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank and Financial Accounts			

**Part VI Other Information** (continued)

**c** At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes  No

If "Yes," enter the name of the foreign country \_\_\_\_\_

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

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

**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
<b>93</b> Program service revenue					
<b>a</b> U S GOVERNMENT					
<b>b</b> COOPERATIVE AGREEMENTS					84,069,510
<b>c</b> GRANTS FROM PRIVATE					3,625,422
<b>d</b> DONORS					
<b>e</b> _____					
<b>f</b> Medicare/Medicaid payments . . . . .					
<b>g</b> 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	266,466	
<b>97</b> Net rental income or (loss) from real estate					
<b>a</b> debt-financed property . . . . .					
<b>b</b> non 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			18	-13,716	
<b>101</b> Net income or (loss) from special events . . . . .			01	-356,343	
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue <b>a</b> ROYALTY INCOME			01	79,191	
<b>b</b> MISCELLANEOUS			01	1,371	
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>104</b> Subtotal (add columns (B), (D), and (E)) . . . . .				-23,031	87,694,932
<b>105</b> Total (add line 104, columns (B), (D), and (E)) . . . . .					87,671,901

**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)
93	FUNDING OF THE ORGANIZATION'S INTERNATIONAL
A&C	FAMILY AIDS/HIV PROGRAMS

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

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

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

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

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

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

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

				Yes	No
<b>106</b> Did the reporting organization <b>make</b> any transfers <b>to</b> a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity				Yes	
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a	Glaser Pediatric Research Network 1140 Connecticut Avenue NW Suite 20 Washington, DC 20036	954795884	CHARITABLE CONTRIBUTION	1,413,514	
b	Elizabeth Glaser Pediatric Resrch Fdn 1140 Connecticut Avenue NW Suite 2 Washington, DC 20036	954795883	CHARITABLE CONTRIBUTION	1,418,387	
<b>Totals</b>				2,831,901	

				Yes	No
<b>107</b> Did the reporting organization <b>receive</b> any transfers <b>from</b> a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity					No
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a					
b					
c					
<b>Totals</b>					

		Yes	No
<b>108</b> Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?			No

<b>Please Sign Here</b>	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.		
	Signature of officer	Date	
	DENISE DEVENNY CFO Type or print name and title	2008-10-30	

<b>Paid Preparer's Use Only</b>	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst W)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ERNST & YOUNG US LLP 75 BEATTIE PLACE SUITE 800 GREENVILLE, SC 29601			EIN
				Phone no (864) 242-5740

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

**Organization Exempt Under Section 501(c)(3)**

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

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

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

OMB No 1545-0047

**2007**

Department of the  
Treasury  
Internal Revenue  
Service

Name of the organization  
Elizabeth Glaser Pediatric AIDS Foundation

**Employer identification number**

95-4191698

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 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
PATRICIA DEVINE KARLIN 1140 CONNECTICUT AVE NW WASHINGTON, DC 20036	VP PROGRAMS 40 0	181,394	9,070	0
SUZANNE MINK 1140 CONNECTICUT AVE NW WASHINGTON, DC 20036	VP DEVELOPMENT 40 0	202,199	0	0
CATHERINE WILFERT 1140 CONNECTICUT AVE NW WASHINGTON, DC 20036	VP - RESEARCH 40 0	200,000	0	0
WILLIAM SALMOND 1140 CONNECTICUT AVE NW WASHINGTON, DC 20036	COUNTRY DIR UGANDA 40 0	189,485	6,039	0
DIANE THOMPSON 1140 CONNECTICUT AVE NW WASHINGTON, DC 20036	VP COMM AND POLICY 40 0	177,884	6,875	0
Total number of other employees paid over \$50,000	74			


**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions. List each one (whether individual 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
Acumen Solutions Inc 8614 Westwood Center Drive VIENNA, VA 22182	Systems consulting	2,251,702
Resources Global Professionals File 55221 LOS ANGELES, CA 09974	Temporary staffing	370,528
Party Planners West Inc 5440 McConnell Avenue LOS ANGELES, CA 90066	Event Prod and Plan	300,750
Dalzell Production 100 Grand St 5th Floor NEW YORK, NY 10013	Event Prod and Plan	239,652
Innovative Philanthropy 5 Hanover Square NEW YORK, NY 10004	Prof Fundraiser	234,175
Total number of others receiving over \$50,000 for professional services	18	

**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 individual or firms. If there are none, enter "None". See page 2 for instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Richard Marlink 103 N Norton Ave LOS ANGELES, CA 90004	Tech Sup and Pro Mng	154,960
Elizabeth Preble 1400-B Cerro Gordo Road SANTA FE, NM 87501	Tech Ast Mon and Evl	72,840
Sara Teitelman 6110 Canterbury Drive CULVER CITY, CA 90230	Tech Ast Mon and Evl	60,000
Total number of other contractors receiving over \$50,000 for other services		

**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, include 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>135,209</u> (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B ) 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>1</b>	Yes	
<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>2a</b>		No
<b>a</b> Sale, exchange, or leasing property?	<b>2b</b>		No
<b>b</b> Lending of money or other extension of credit?	<b>2c</b>		No
<b>c</b> Furnishing of goods, services, or facilities?	<b>2d</b>	Yes	
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	<b>2e</b>		No
<b>e</b> Transfer of any part of its income or assets?	<b>3a</b>		No
<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 )	<b>3b</b>	Yes	
<b>b</b> Did the organization have a section 403(b) annuity plan for its employees?	<b>3c</b>		No
<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 structures? If "Yes" attach a detailed statement	<b>3d</b>		No
<b>d</b> Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	<b>4a</b>		No
<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	<b>4b</b>		No
<b>b</b> Did the organization make any taxable distributions under section 4966?	<b>4c</b>		No
<b>c</b> Did the organization make a distribution to a donor, donor advisor, or related person?			
<b>d</b> Enter the total number of donor advised funds owned at the end of the tax year ► <u>0</u>			
<b>e</b> Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ► <u>0</u>			
<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 ► <u>0</u>			
<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 ► <u>0</u>			





**Part V Private School Questionnaire** (See page 7 of the instructions.)**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

	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>29</b>	
<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>30</b>	
<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>31</b>	
<b>32</b> Does the organization maintain the following	<b>32a</b>	
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff?	<b>32a</b>	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?	<b>32b</b>	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	<b>32c</b>	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions?	<b>32d</b>	
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>33a</b>	
<b>b</b> Admissions policies?	<b>33b</b>	
<b>c</b> Employment of faculty or administrative staff?	<b>33c</b>	
<b>d</b> Scholarships or other financial assistance?	<b>33d</b>	
<b>e</b> Educational policies?	<b>33e</b>	
<b>f</b> Use of facilities?	<b>33f</b>	
<b>g</b> Athletic programs?	<b>33g</b>	
<b>h</b> Other extracurricular activities?	<b>33h</b>	
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>34a</b>	
<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>34b</b>	
<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	<b>35</b>	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)(To be completed **ONLY** by an eligible organization that filed Form 5768)Check  **a** if the organization belongs to an affiliated group Check  **b** if you checked "a" and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b>		<b>(a)</b> Affiliated group totals	<b>(b)</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>	130,557
<b>38</b>	Total lobbying expenditures (add lines 36 and 37)	<b>38</b>	135,209
<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>	135,209
<b>41</b>	Lobbying nontaxable amount Enter the amount from the following table— <b>If the amount on line 40 is—</b> <b>The lobbying nontaxable amount is—</b> 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>	27,042
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>	6,761
<b>43</b>	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	<b>43</b>	0
<b>44</b>	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	<b>44</b>	108,167
<b>Caution:</b> 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 11 of the instructions )

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
<b>45</b> Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					6,000,000
<b>47</b> Total lobbying expenditures	130,557	7,165	669,907	879,959	1,687,588
<b>48</b> Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					1,500,000
<b>50</b> Grassroots lobbying expenditures	4,652				4,652

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

	Yes	No	Amount
<b>a</b> Volunteers		No	
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines <b>c</b> through <b>h</b> .)			
<b>c</b> Media advertisements			
<b>d</b> Mailings to members, legislators, or the public			
<b>e</b> Publications, or published or broadcast statements			
<b>f</b> Grants to other organizations for lobbying purposes			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
<b>i</b> Total lobbying expenditures (Add lines <b>c</b> through <b>h</b> .)			

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



## Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 95-4191698  
**Name:** Elizabeth Glaser Pediatric AIDS Foundation

### Form 990, Part II, Line 43 - Other expenses not covered above (itemize):

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>a</b> INSURANCE - BUS LIABILITY	<b>43a</b>	306,527	203,666	98,861	4,000
<b>b</b> OFFICE EXPENSES	<b>43b</b>	5,331,909	3,990,919	1,126,300	214,690
<b>c</b> CONTRACT AND PROF SERVICES	<b>43c</b>	6,002,504	3,290,433	2,009,758	702,313
<b>d</b> REPAIRS AND MAINTENANCE	<b>43d</b>	566,133	187,012	379,121	
<b>e</b> REIMBURSIBLE SUBAGREEMENTS	<b>43e</b>	54,379,335	54,379,335		
<b>f</b> OTHER PROGRAM SERVICES	<b>43f</b>	900,207	900,207		
<b>g</b> CONTRIBUTED SERVICE EXPENSE	<b>43g</b>	469,963	23,626	67,134	379,203
<b>h</b> EVENT UNDERWRITING	<b>43h</b>	56,891			56,891

**Form 990, Part III - Program Service Accomplishments:**

<p><b>All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)</b></p>	<p><b>Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)</b></p>
<p>Other program services expenses are incurred to</p> <p><b>a</b></p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p>provide programmatic support for the grants noted</p> <p><b>b</b></p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p>above (for instance, expenses incurred by the</p> <p><b>c</b></p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p>Foundation's field offices in support of the</p> <p><b>d</b></p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	
<p>Foundation's sub-grantees)</p> <p><b>e</b></p> <p>(Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/></p>	<p>33,697,947</p>
<p>The Elizabeth Glaser Pediatric AIDS Foundation 95-4191698 FORM 990, PART III - STATEMENT OF ACTIVITIES DESCRIPTION OF EXEMPT PURPOSE The Elizabeth Glaser Pediatric AIDS Foundation identifies funds and conducts critical pediatric research for children with HIV/AIDS and other serious life threatening diseases The Foundation's goals are to prevent transmission of HIV from mother to infant, to improve the lives of children with HIV/AIDS and other life threatening diseases to ensure that children are at the forefront of every scientific breakthrough HISTORY The Elizabeth Glaser Pediatric AIDS Foundation was co-founded by Elizabeth Glaser, Susan DeLaurentis and Suzie Zeegen in 1988 As mothers, the three friends were compelled to take action after Elizabeth and her husband, Paul, discovered that she, their daughter Ariel and son Jake were HIV-infected At the time, it was not yet widely known that HIV/AIDS was affecting children, so the issues pertaining to them were not clearly understood Whether they were talking to lawmakers or researchers, school administrators or neighbors, Elizabeth, Susan and Susie learned of the need for education and compassion, but also found that research money was desperately needed Their mission was clear - to get money into the hands of researchers as quickly as possible to find answers for children infected with HIV What began at a kitchen table is now the leading non-profit organization focused on pediatric HIV/AIDS and now other serious and life-threatening pediatric illnesses Today, there is an entire community of the highest caliber researchers focusing on the unique needs of children Fewer children are born with HIV, and children with HIV infection are living longer and healthier lives More drugs are being tested for safe and effective use in children In every area of the Federal government, from research priorities at the National Institutes of Health, to the halls of Congress, children are no longer forgotten PROGRAMS Global HIV/AIDS Programs Guided by the groundbreaking results of our research, and in partnership with public and private organizations around the world, the Foundations International Family AIDS Initiatives continued to reach more women and children As of December 31, 2007, the Foundation reached important milestones in its prevention, care, and treatment initiatives The Foundation works at more than 2,800 sites In four years, our care and treatment programs have enrolled more than 365,000 individuals, including 30,000 children under the age of 15 More than 198,000 individuals including 15,000 children began treatment In 2007, more than 1.5 million women accessed the Foundations prevention services an increase of 44 percent from 2006 2007 COST \$51,680,487</p> <p>(Grants and allocations \$ 51,680,487) If this amount includes foreign grants, check here <input checked="" type="checkbox"/></p>	<p>51,680,487</p>
<p>HIV/AIDS Research Programs The Foundations long-standing commitment to pediatric HIV/AIDS research is at the very heart of our programs and initiatives During the past year, the Foundation worked to address childrens specific needs by focusing on important issues from the search for a vaccine, to the use of scientific methods to improve and optimize our programs around the world Elizabeth Glaser Scientist Award The Foundations highest award is the Elizabeth Glaser Scientist Award, an investment in the most promising HIV/AIDS researchers at a critical stage in their careers These scientists represent the best and brightest investigators from the international medical science community, and are selected on the basis of their knowledge, innovation, and dedication By providing research funding over a five-year period, this award enables recipients to focus their long-term efforts on issues specific to pediatric HIV/AIDS The Elizabeth Glaser Scientist Award fosters an unprecedented spirit of collaboration among these scientists Each year, the Elizabeth Glaser Scientists come together with our internationally renowned advisory board to stimulate ideas, report on current programs, and plan collaborative research Since the programs inception in 1996, the Foundation has built an invaluable network of scientists whose work in vaccine development, immune response, breast milk transmission, and other critical areas impact the entire field of HIV/AIDS research 2007 COST \$819,000 International Leadership Award Most researchers in the developing world are educated and initially trained in developed nations, but when they return to their own countries there are very few resources or established programs available to help them put their new skills to use Initiated in 2002, the International Leadership Award (ILA) program is filling a critical gap in the development of research leaders in resource-poor countries that are working to eradicate pediatric AIDS Collaboration has always been a cornerstone of the Foundation programs, and the ILA award continues this tradition Candidates may apply for support to create effective pediatric HIV/AIDS research and implementation programs including those addressing epidemiology, prevention of mother-to-child transmission, treatment of infected mothers and infants, development of national policies or strategies to combat pediatric HIV, assessment of the economic impact of disease and its prevention, or training of additional in-country and regional scientists Award recipients will be asked to mentor a minimum of three additional people who would benefit from the experience and could help them achieve their goals These are individuals who would be hired and trained to work on the project proposed by the applicant The Elizabeth Glaser Pediatric AIDS Foundation hopes that this program will foster the next generation of leaders who will then succeed in establishing programs that change the pediatric HIV epidemic in their country 2007 COST \$900,000</p> <p>(Grants and allocations \$ 1,719,000) If this amount includes foreign grants, check here <input checked="" type="checkbox"/></p>	<p>1,719,000</p>
<p>Advocacy Efforts During the past year, the Foundation has continued to be a voice for children and to ensure that children with HIV are a global priority In March 2007, Susan Belfiore, a mother of four HIV-positive children, testified before the Senate Committee on Health, Education, Labor and Pensions to urge Congress to reauthorize laws that ensure medicines are tested for use in children In July 2007, the Foundation hosted a briefing on Capitol Hill to explore better strategies for preventing mother-to-child transmission of HIV The briefing, co-sponsored by CARE USA, a leading humanitarian organization dedicated to fighting global poverty, featured expert medical professionals, members of Congress, and Tanya Torres, HIV positive woman who is the mother of a healthy child In September 2007, the Foundation worked with Congress to pass The Food and Drug Administration Amendments Act of 2007 This important legislation contains several provisions to make medicines and medical devices safer for use in children 2007 COST \$637,351 2007 OTHER \$33,697,947 TOTAL PROGRAM SERVICE EXPENSES \$87,734,785</p> <p>(Grants and allocations \$ 637,351) If this amount includes foreign grants, check here <input type="checkbox"/></p>	<p>637,351</p>

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
Sheri Babbio 1140 Connecticut Ave NW Washington, DC 20036	Board Member 0 5	0	0	0
Pamela Barnes 1140 CONNECTICUT AVENUE NW Washington, DC 20036	PRESIDENT AND CEO 40 0	286,597	65,178	0
Willow Bay 1140 CONNECTICUT AVENUE NW Washington, DC 20036	BOARD MEMBER 0 5	0	0	0
Bill Belfiore 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Member 0 5	0	0	0
Peter Benzian 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Secretary and Treasurer 0 5	0	0	0
Bob Burkett 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Member 0 5	0	0	0
Mark Burnett 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Member 0 5	0	0	0
Denise Devenny 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Chief Financial Officer 40 0	191,672	9,584	0
Barbara Easterling 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Member 0 5	0	0	0
Jeffrey Elton 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Member 0 5	0	0	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
Jennifer Fox 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Member 0 5	0	0	0
Paul Michael Glaser 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Honorary Chairman 0 5	0	0	0
Russ Hagey 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Member 0 5	0	0	0
Brian Heidtke 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Member 0 5	0	0	0
Paul Johnson 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Member 0 5	0	0	0
David Kessler MD 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Chairman 0 5	0	0	0
Cynthia Lewis 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Member 0 5	0	0	0
Mike McCune MD 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Member 0 5	0	0	0
Stuart Pape 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Member 0 5	0	0	0
Susie Zeegan 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Co-Founder, Board Member 40 0	0	0	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
Bobbi Zifkin 1140 CONNECTICUT AVENUE NW Washington, DC 20036	Board Member 0.5	0	0	0

**Form 990, Part VI, Line 80b - If "Yes", enter the name of the organization and whether it is exempt or nonexempt:**

<b>Name of the Organization</b>	<b>Exempt</b>	<b>Nonexempt</b>
GLASER PEDIATRIC RESEARCH NETWORK	X	
ELIZABETH GLASER PEDIATRIC RESEARC FOUNDATION	X	

## TY 2007 General Explanation Attachment

**Name:** Elizabeth Glaser Pediatric AIDS Foundation

**EIN:** 95-4191698

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINES 91B AND 91C		Countries in which the Organization maintains both a presence and operating bank accounts are Cote d'Ivoire Kenya Mozambique Rwanda South Africa Swaziland Tanzania Uganda Zambia Zimbabwe The Organization is current in its filings of the annual TD F 90-22 1

Identifier	Return Reference	Explanation
FORM 990, PART I, LINE 8 - GAIN OR LOSS ON SALE OF ASSETS		DESCRIPTION ----- GAIN (A) SECURITIES PROCEEDS COST (LOSS) ----- ----- PUBLICLY TRADED SECURITIES 78,054 91,770 (13,716) ----- NET GAIN/(LOSS) (13,7 16) =====

Identifier	Return Reference	Explanation
FORM 990, PART II, LINE 42 - DEPRECIATION EXPENSE		DESCRIPTION AMOUNT ----- DEPRECIATION EXPENSE 190,169 ----- TOTAL DEPRECIATION EXPENSE 190,169 DEPRECIATION WAS CALCULATED USING THE STRAIGHT-LINE METHOD OVER THE USEFUL LIFE OF THE ASSETS

Identifier	Return Reference	Explanation
FORM 990, PART IV, LINE 57 - LAND, BUILDINGS, AND EQUIPMENT		DESCRIPTION AMOUNT ----- FURNITURE AND FIXTURES 596,327 COMPUTERS AND EQUIPMENT 783,454 OFFICE EQUIPMENT 93,017 AUTOMOBILE 57,197 LEASEHOLD AND TENANT IMPROVEMENTS 341,193 ----- 1,871,188 LESS ACCUMULATED DEPRECIATION (1,171,856) ---- ----- NET LAND, BUILDINGS, AND LAND 699,332 =====

**TY 2007 Other Assets Schedule**

**Name:** Elizabeth Glaser Pediatric AIDS Foundation

**EIN:** 95-4191698

Description	Beginning of Year Amount	End of Year Amount
DUE FROM US GOVT AGENCIES	6,567,272	6,460,625

## TY 2007 Other Changes in Net Assets Schedule

**Name:** Elizabeth Glaser Pediatric AIDS Foundation

**EIN:** 95-4191698

Description	Amount
CONTRIBUTED SERVICES-REVENUE	41,543
UNREALIZED GAIN	85

**TY 2007 Other Expenses Included Schedule**

**Name:** Elizabeth Glaser Pediatric AIDS Foundation

**EIN:** 95-4191698

Description	Amount
RECLASSIFY FUNDRAISING EXPENSE	647,265

**TY 2007 Other Liabilities Schedule**

**Name:** Elizabeth Glaser Pediatric AIDS Foundation

**EIN:** 95-4191698

Description	Beginning of Year Amount	End of Year Amount
DEFERRED RENT	229,090	280,701

**TY 2007 Other Revenues  
Not Included Schedule**

**Name:** Elizabeth Glaser Pediatric AIDS Foundation

**EIN:** 95-4191698

Description	Amount
RECLASSIFY FUNDRAISING EXPENSE	-647,265

## TY 2007 Special Events Schedule

**Name:** Elizabeth Glaser Pediatric AIDS Foundation

**EIN:** 95-4191698

Event Name	Gross Receipts	Contributions	Gross Revenue	Direct Expense	Net Income (Loss)
A TIME FOR HEROES	73,800	1,264,904	73,800	407,755	-333,955
KIDS FOR KIDS	113,872	1,562,524	113,872	66,608	47,264
GOLF TOURNAMENT	103,250	467,164	103,250	172,902	-69,652

## TY 2007 Other Income Schedule

**Name:** Elizabeth Glaser Pediatric AIDS Foundation

**EIN:** 95-4191698

Description	2006	2005	2004	2003	Total
MISCELLANEOUS INCOME	49,838	86,302			136,140

**TY 2007 Self Dealing Statement****Name:** Elizabeth Glaser Pediatric AIDS Foundation**EIN:** 95-4191698

<b>Line Number</b>	<b>Explanation</b>
2d	FORM 990, PART V

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2007 Supplemental Support Schedule

**Name:** Elizabeth Glaser Pediatric AIDS Foundation

**EIN:** 95-4191698

Year	Gifts, Grants and Contributions Received	Membership Fees Received	Gross Receipts From Admissions, Etc.	Gross Investment Income And Post 1975UBI	Net UBI Pre 1975	Tax Revenues Levied For Organization's Benefit	Value Of Services, Facilities Furnished By Government	Other Income	Total
2007	11,926,552		66,728,366	365,648				49,838	79,070,404
2004	11,067,930		54,800,224	175,140				86,302	66,129,596
2003	10,975,120		9,451,545	211,943					20,638,608
2002	11,263,120		9,048,514	539,452					20,851,086

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2007, or tax year beginning \_\_\_\_\_, 2007, and ending \_\_\_\_\_, 20 \_\_\_\_\_

2007

Department of the Treasury Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

See instructions on back.

Name of exempt organization

Employer identification number

ELIZABETH GLASER PEDIATRIC AIDS FDN

95-4191698

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8453-EO and enter the applicable amount from the return, if any. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line for the return for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here [X] b Total revenue, if any (Form 990, line 12) 1b 99834259.10
2a Form 990-EZ check here [ ] b Total revenue, if any (Form 990-EZ, line 9) 2b
3a Form 1120-POL check here [ ] b Total tax (Form 1120-POL, line 22) 3b
4a Form 990-PF check here [ ] b Tax based on investment income (Form 990-PF, Part VI, line 5) 4b
5a Form 8868 check here [ ] b Balance due (Form 8868, line 3c) 5b

Part II Declaration of Officer

6 [ ] I authorize the US Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the US Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
[ ] If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2007 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund.

Sign Here

Signature of officer [Handwritten Signature]

Date 10/13/2008

Title PRESIDENT & CEO

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub 4163, Modernized e-File (MeF) Information for Authorized e-file Providers. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only: ERO's signature [Handwritten: Susan Dull], Date 10-10-2008, Check if also paid preparer [X], Check if self-employed [ ], ERO's SSN or PTIN P00233523, Firm's name (or yours if self-employed), address, and ZIP code: ERNST & YOUNG U.S. LLP, 75 BEATTIE PLACE, SUITE 800, GREENVILLE SC 29601, EIN 34-6565596, Phone no 864/242-5740

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer's Use Only: Preparer's signature [ ], Date [ ], Check if self-employed [ ], Preparer's SSN or PTIN [ ], Firm's name (or yours if self-employed), address, and ZIP code [ ], EIN [ ], Phone no [ ]