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Form **990-PF**Department of the Treasury
Internal Revenue Service**Return of Private Foundation**
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

OMB No 1545-0052

2009

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2009, or tax year beginning

, 2009, and ending

, 20

G Check all that apply

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name changeUse the IRS
label.Otherwise,
print
or type.See Specific
Instructions.

Name of foundation

Merck Company Foundation

A Employer identification number

22-6028476

Number and street (or P O box number if mail is not delivered to street address)

One Merck Drive, P.O. Box 100

Room/suite

B Telephone number (see page 10 of the instructions)

908-423-1000

City or town, state, and ZIP code

Whitehouse Station, NJ 08889

C If exemption application is
pending, check here ☐D 1. Foreign organizations, check here ☐2 Foreign organizations meeting the
85% test, check here and attach
computation ☐H Check type of organization ☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end

of year (from Part II, col (c), line

16) ☐ \$ 332,720,965J Accounting method ☒ Cash ☐ Accrual☐ Other (specify)

(Part I, column (d) must be on cash basis)

E If private foundation status was terminated
under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination
under section 507(b)(1)(B) check here ☐**Part I Analysis of Revenue and Expenses** (The
total of amounts in columns (b), (c), and (d)
may not necessarily equal the amounts in
column (a) (see page 11 of the instructions))(a) Revenue and
expenses per
books(b) Net investment
income(c) Adjusted net
income(d) Disbursements
for charitable
purposes
(cash basis only)

Revenue

Operating and Administrative Expenses

1 Contributions, gifts, grants, etc., received (attach schedule) #1

150,006

2 Check ☐ if the foundation is not required to
attach Sch. B.

3 Interest on savings and temporary cash investments

4,021,033

4,021,033

4 Dividends and interest from securities

2,942,461

2,942,461

5a Gross rents

b Net rental income or (loss)

6a Net gain or (loss) from sale of assets not on line 10

20,334,460

b Gross sales price for all
assets on line 6a

7 Capital gain net income (from Part IV, line 2)

0

8 Net short-term capital gain

9 Income modifications

10a Gross sales less returns
and allowances

b Less: Cost of goods sold

c Gross profit or (loss) (attach schedule)

11 Other income (attach schedule) Stmt. #1A

-2,513,848

-2,513,848

12 Total. Add lines 1 through 11

24,934,112

4,449,646

0

13 Compensation of officers, directors, trustees, etc.

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees (attach schedule)

b Accounting fees (attach schedule)

c Other professional fees (attach schedule)

10,971

10,971

17 Interest

18 Taxes (attach schedule) (see page 14 of the instructions) #2

140,000

19 Depreciation (attach schedule) and depletion

20 Occupancy

21 Travel, conferences, and meetings

84

84

22 Printing and publications

23 Other expenses (attach schedule) Stmt. #3

628,436

628,436

24 Total operating and administrative expenses.

Add lines 13 through 23

779,491

10,971

0

628,520

25 Contributions, gifts, grants paid

42,238,719

42,238,719

26 Total expenses and disbursements Add lines 24 and 25

43,018,210

10,971

0

42,867,239

27 Subtract line 26 from line 12

-18,084,098

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

4,438,675

c Adjusted net income (if negative, enter -0-)

0

Part II Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less allowance for doubtful accounts ▶	0		
	4 Pledges receivable ▶			
	Less allowance for doubtful accounts ▶	0		
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 16 of the instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ 99,917			
	Less allowance for doubtful accounts ▶	99,917	370,652	370,652
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10 a Investments - U S and state government obligations (attach schedule) .			
	b Investments - corporate stock (attach schedule)			
	c Investments - corporate bonds (attach schedule)			
	11 Investments - land, buildings, and equipment basis ▶			
Less accumulated depreciation (attach schedule) ▶				
12 Investments - mortgage loans				
13 Investments - other (attach schedule)	333,630,604	332,350,313	332,350,313	
14 Land, buildings, and equipment basis ▶				
Less accumulated depreciation (attach schedule) ▶				
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	333,730,521	332,720,965	332,720,965	
Liabilities	17 Accounts payable and accrued expenses	178,428	16,178,794	
	18 Grants payable	2,004,180	411,204	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons .			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	2,182,608	16,589,998	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☐			
	and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ ☒			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds . .	331,547,913	316,130,967	
	30 Total net assets or fund balances (see page 17 of the instructions)	331,547,913	316,130,967	
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	333,730,521	332,720,965		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	331,547,913
2 Enter amount from Part I, line 27a	2	-18,084,098
3 Other increases not included in line 2 (itemize) ▶ Securities Loss to reconcile	3	2,667,152
4 Add lines 1, 2, and 3	4	316,130,967
5 Decreases not included in line 2 (itemize) ▶	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	316,130,967

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)			(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					
b					
c					
d					
e					

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			0
b			0
c			0
d			0
e			0

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a		0	0
b		0	0
c		0	0
d		0	0
e		0	0

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7
If (loss), enter -0- in Part I, line 7 } **2** 0

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)
If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions)
If (loss), enter -0- in Part I, line 8. } **3**

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☐ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008			0.0000
2007			0.0000
2006			0.0000
2005			0.0000
2004			0.0000

2 Total of line 1, column (d) **2** 0.0000

3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years **3** 0.0000

4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 **4** 0

5 Multiply line 4 by line 3 **5** 0

6 Enter 1% of net investment income (1% of Part I, line 27b) **6** 0

7 Add lines 5 and 6 **7** 0

8 Enter qualifying distributions from Part XII, line 4 **8** 0

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of ruling letter if necessary - see instructions)		1	88,774
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	
3 Add lines 1 and 2		3	88,774
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	88,774
6 Credits/Payments			
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a 158,130		
b Exempt foreign organizations-tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d		7	158,130
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached		8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	0
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	69,356
11 Enter the amount of line 10 to be Credited to 2010 estimated tax 69,356 Refunded		11	0

Part VII-A Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ (2) On foundation managers \$		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8 a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) NEW JERSEY		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address ☐ NONE				
14	The books are in care of ☒ TAXPAYER Telephone no ☐ 908-423-1000			
	Located at ☒ ONE MERCK DRIVE, WHITEHOUSE STATION, NJ ZIP + 4 ☒ 08889-0100			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	15		

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Yes ☒ No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☒ No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☒ Yes ☐ No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☒ Yes ☐ No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	☐ Yes ☒ No	
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	☐ Yes ☒ No	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b	X
Organizations relying on a current notice regarding disaster assistance check here		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	☐ Yes ☒ No	
If "Yes," list the years ☐		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see page 20 of the instructions)	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ☐		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☒ No	
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) ☒ Yes ☐ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? **5b** ☐ X

Organizations relying on a current notice regarding disaster assistance check here ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☒ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b** ☐ X

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? **7b** ☐

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE ATTACHED STATEMENT #4		0		
		0		
		0		
		0		

2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If 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 and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 ☐ 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services** (see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 SEE ATTACHED STATEMENT #4A	
	21,037,622
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See page 24 of the instructions	
3	
Total. Add lines 1 through 3	0

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	320,190,430
c	Fair market value of all other assets (see page 24 of the instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	320,190,430
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	320,190,430
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 of the instructions)	4	4,802,856
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	315,387,574
6	Minimum investment return. Enter 5% of line 5	6	15,769,379

Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6	1	15,769,379
2a	Tax on investment income for 2009 from Part VI, line 5	2a	88,774
b	Income tax for 2009 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	88,774
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	15,680,605
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	15,680,605
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	15,680,605

Part XII Qualifying Distributions (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	42,867,239
b	Program-related investments - total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	42,867,239
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	42,867,239

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				15,680,605
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2009				
a From 2004	34,192,457			
b From 2005	35,928,383			
c From 2006	39,086,242			
d From 2007	41,908,198			
e From 2008	21,576,905			
f Total of lines 3a through e	172,692,185			
4 Qualifying distributions for 2009 from Part XII, line 4 ► \$ 42,867,239				
a Applied to 2008, but not more than line 2a . . .				
b Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
c Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d Applied to 2009 distributable amount				15,680,605
e Remaining amount distributed out of corpus . .	27,186,634			
5 Excess distributions carryover applied to 2009 . (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	199,878,819			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions		0		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions			0	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	34,192,457			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	165,686,362			
10 Analysis of line 9				
a Excess from 2005	35,928,383			
b Excess from 2006	39,086,242			
c Excess from 2007	41,908,198			
d Excess from 2008	21,576,905			
e Excess from 2009	27,186,634			

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					0
b 85% of line 2a	0	0	0	0	0
c Qualifying distributions from Part XII, line 4 for each year listed					0
d Amounts included in line 2c not used directly for active conduct of exempt activities					0
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	0	0	0	0	0
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					0
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					0
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0
(3) Largest amount of support from an exempt organization					0
(4) Gross investment income					0

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see page 28 of the instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed Ellen Lambert, Exec. VP 908-423-1000, The Merck Company Foundation, PO Box 100, Whitehouse Sta, NJ

b The form in which applications should be submitted and information and materials they should include

08889-0100

SEE ATTACHED STATEMENT #5

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

SEE ATTACHED STATEMENT #5

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year SEE ATTACHED STATEMENT #6				42,238,719
Total. ► 3a				42,238,719
b Approved for future payment SEE ATTACHED STATEMENT #7				11,246,773
Total. ► 3b				11,246,773

Form 990-PF (2009)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income	Excluded by section 512, 513, or 514	(e) Related or exempt function income (See page 28 of the instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount
1 Program service revenue				
a _____				
b _____				
c _____				
d _____				
e _____				
f _____				
g Fees and contracts from government agencies				
2 Membership dues and assessments				
3 Interest on savings and temporary cash investments			14	4,021,033
4 Dividends and interest from securities			14	2,942,461
5 Net rental income or (loss) from real estate				
a Debt-financed property				
b Not debt-financed property				
6 Net rental income or (loss) from personal property .				
7 Other investment income				
8 Gain or (loss) from sales of assets other than inventory			18	20,334,460
9 Net income or (loss) from special events				
10 Gross profit or (loss) from sales of inventory . .				
11 Other revenue a Other Income			14	-2,513,848
b _____				
c _____				
d _____				
e _____				
12 Subtotal. Add columns (b), (d), and (e)		0		24,784,106
13 Total. Add line 12, columns (b), (d), and (e)				24,784,106

(See worksheet in line 13 instructions on page 28 to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a	Transfers from the reporting foundation to a noncharitable exempt organization of			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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 taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer or trustee

Date _____

Title

**Paid
Preparer's
Use Only**

Preparer's signature

Date _____

Check if self-employed ☐

Preparer's identifying
number (See **Signature** on
page 30 of the instructions)

Firm's name (or yours if self-employed), address, and ZIP code

END ▶

Phone no

Schedule of Contributors

OMB No 1545-0047

▶ Attach to Form 990, 990-EZ, or 990-PF.

2009

Name of the organization

Employer identification number

Merck Company Foundation

22-6028476

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 $\frac{1}{3}$ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Merck Company Foundation

Employer identification number

22-6028476

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MERCK & CO., INC. ONE MERCK DRIVE WHITEHOUSE STATION, NJ 08889-0100	\$ 150,006	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution .)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)

Name of organization

Merck Company Foundation

Employer identification number

22-6028476

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Merck Company Foundation

Employer identification number

22-6028476

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry.

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once See instructions.) ► \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

STATEMENT 1

CONTRIBUTIONS FROM MERCK & CO. TO MERCK COMPANY FOUNDATION FORM 990-PF 2009

PART 1 - LINE 1 CONTRIBUTIONS

<u>MONTH</u>	<u>AMOUNT</u>
2009	150,006
TOTAL	<u>150,006</u>

STATEMENT #1A

MERCK COMPANY FOUNDATION
FORM 990-PF 2009
OTHER INCOME
PART 1, LINE 11

SECURITIES LENDING INCOME	\$ 153,304
REALIZED LOSS ON SECURITIES	<u>(2,667,152)</u>
TOTAL	<u><u>\$ (2,513,848)</u></u>

STATEMENT #2

MERCK COMPANY FOUNDATION
FORM 990-PF 2009
EXCISE TAX DETAIL
PART 1 LINE 18

2008 Credit per T/R	\$18,130.00
5/15/2009	\$25,000.00
6/15/2009	\$40,000.00
9/15/2009	\$40,000.00
12/15/2009	\$35,000.00
TOTAL	<u>\$158,130.00</u>

STATEMENT #3

MERCK COMPANY FOUNDATION
FORM 990-PF 2009
OTHER EXPENSE
PART 1, LINE 23

OPERATING EXPENSES	610,172
MISCELLANEOUS EXPENSES	<u>18,264</u>
	<u>628,436</u>

STATEMENT #4
MERCK COMPANY FOUNDATION
FORM 990-PF PAGE 6 PART VIII INFORMATION ABOUT OFFICERS
2009

(a) NAME AND TITLE	(b) AVE HOURS/WEEK	(c) COMPENSATION	(d) EMPLOYEE BENEFITS	(e) EXPENSES & ALLOWANCE
Geralyn S Ritter, President	0	0	0	0
Timothy Dillane, Assistant Treasurer	0	0	0	0
Ellen Lambert, Executive Vice President	0	0	0	0
Ingrid A Novak, Assistant Vice President	0	0	0	0
Siobhan Cavanaugh, Senior Vice President	0	0	0	0
Richard T Clark, Chairman of the Board	0	0	0	0
Celia A Colbert, Secretary	0	0	0	0
Leslie M Hardy, Vice President	0	0	0	0
Mark E McDonough, Treasurer	0	0	0	0
Stephen C Propper, Assistant Treasurer	0	0	0	0

**THE MERCK COMPANY FOUNDATION
FOUR LARGEST GRANTS MADE IN 2009**

STATEMENT #4A, FORM 990-PF 2009, PAGE 7, PART IX-A

AFRICAN COMPRHENSIVE HIV/AIDS PARTNERSHIP – Total contribution of:

\$6,500,000

to support the improvement of HIV/AIDS prevention, care and treatment in Botswana.

MERCK INSTITUTE FOR SCIENCE EDUCATION – Total contributions of:

\$6,222,711

made to this organization, which works with elementary and secondary schools and teachers to improve the teaching of science in selected areas of New Jersey and Pennsylvania.

CHINA – MSD HIV/AIDS PARTNERSHIP – Total contributions of:

\$4,515,000

to support the partnership with China's Ministry of Health to strengthen HIV/AIDS prevention, patient care, treatment and support programs.

MERCK CHILDHOOD ASTHMA NETWORK – Total contributions of:

\$3,799,911

to support this organization focused on approving access to quality asthma care and management for children in the United States.

Part XV, Question 2b

Requests may be submitted by letter containing a brief summary of the organization, including documentation of its federal tax-exempt status, objectives of the project and means for accomplishing the goal, the budget, sources of other funding, and amount of the grant request. Evidence of a sound program, competent leadership, and the ability to accomplish objectives must be shown.

Part XV, Question 2d

Requests are evaluated on the basis of relevance to the philanthropic priorities of the Merck Company Foundation, the interests of Merck & Co., Inc. the location of its major facilities, and the concerns of its employees.

Grants are not made to political, labor, or sectarian groups, nor for endowments, publications, or media productions. Except within Foundation programs, grants are not given for scholarships, fellowships, or to individuals.

The Merck Company Foundation Expenses for 2009

The Merck Company Foundation Expense for 2009			
	STATEMENT #6		
	FORM 990-PF, PAGE 11, PART XV, 3a		
Date	Payee	Check #	Amount
1/26/2009	Baylor Research Institute	205445	\$ 292,049.00
1/26/2009	University of Chicago	205446	\$ 400,000.00
1/26/2009	The Cooper Foundation, Inc.	205447	\$ 400,000.00
1/26/2009	Sundance Research Institute, Inc.	205448	\$ 367,565.00
1/26/2009	Regents of University of Michigan	205449	\$ 250,000.00
1/26/2009	Healthy Memphis Common Table	205450	\$ 393,675.00
1/26/2009	Trustees of Columbia University in the City of New York	205451	\$ 420,020.00
1/26/2009	Manchester String Quartet	205452	\$ 20,000.00
1/26/2009	McGaheysville Volunteer Fire Co.	205453	\$ 2,500.00
1/26/2009	Society of St. Vincent de Paul	205454	\$ 500.00
1/26/2009	P-Patch Trust	205455	\$ 500.00
1/26/2009	Grand Opera House	205456	\$ 1,000.00
1/26/2009	Helping Hand Rescue Mission	205457	\$ 500.00
1/26/2009	Boy Scouts of America	205458	\$ 5,000.00
1/26/2009	Community Food Bank of New Jersey	205459	\$ 10,000.00
1/26/2009	North Penn Music Aides	205460	\$ 4,500.00
1/26/2009	Men of All Colors Together Philadelphia	205461	\$ 500.00
1/26/2009	Special Equestrians	205462	\$ 1,000.00
1/26/2009	John F. Kennedy Medical Center Foundation	205463	\$ 1,500.00
1/26/2009	St. John the Baptist Catholic Church School	205464	\$ 1,000.00
1/26/2009	Boy Scouts of America	205465	\$ 1,000.00
1/26/2009	Zarephath Health Center	205466	\$ 500.00
1/26/2009	P-Patch Trust - VOIDED duplicate	205467	
1/26/2009	Ronald McDonald House Charities of Southern California	205468	\$ 1,000.00
1/26/2009	Upper Dublin Chinese Association	205469	\$ 1,000.00
1/26/2009	Victoria University of Technology	205470	\$ 100,000.00
1/26/2009	Universidad Carlos III de Madrid	205471	\$ 50,000.00
1/26/2009	Universitat Pompeu Fabra	205472	\$ 50,000.00
1/26/2009	Massachusetts Institute of Technology	205473	\$ 75,000.00
1/26/2009	Cornell University	205474	\$ 100,000.00
1/26/2009	LSE Foundation	205475	\$ 100,000.00
1/26/2009	Friends of the University of Natal	205476	\$ 100,000.00
1/26/2009	Ethics Resource Center	205477	\$ 50,000.00
1/26/2009	Ethics Resource Center	205478	\$ 167,000.00
1/29/2009	JK Group, Inc.	205479	\$ 2,220,193.56
2/16/2009	American Australian Association	205480	\$ 25,000.00
2/16/2009	World Vision, Inc.	205481	\$ 75,000.00
2/16/2009	Hunterdon Museum of Art	205482	\$ 500.00
2/16/2009	North Wales Memorial Free Library	205483	\$ 500.00
2/16/2009	Leukemia & Lymphoma Society	205484	\$ 500.00
2/16/2009	American Red Cross	205485	\$ 10,000.00
2/16/2009	Habitat for Humanity	205486	\$ 1,000.00
2/16/2009	New York Cares, Inc.	205487	\$ 500.00
2/16/2009	Elkton Volunteer Fire Department	205488	\$ 1,500.00
2/16/2009	Artists Cooperative for Personal and Professional Advancement, Inc.	205489	\$ 500.00

The Merck Company Foundation Expenses for 2009

2/16/2009	Helping Hand Rescue Mission	205490	\$	500.00
2/16/2009	Hunterdon Medical Center Foundation	205491	\$	150,000.00
2/16/2009	Seeing Eye, Inc.	205492	\$	1,000.00
2/16/2009	The Tewksbury Historical Society	205493	\$	500.00
2/16/2009	Metropolitan Opera Association, Inc.	205494	\$	10,000.00
2/16/2009	United Way of Hunterdon County	205495	\$	500.00
2/16/2009	Raritan Valley Community College Foundation	205496	\$	50,000.00
2/16/2009	Hunterdon Prevention Resources Inc.	205497	\$	5,000.00
2/16/2009	Women's Health and Counseling Center, Inc.	205498	\$	7,500.00
2/16/2009	Freedom House Inc.	205499	\$	10,000.00
2/16/2009	Raritan River Concerts, Inc.	205500	\$	27,000.00
2/16/2009	United Way of Hunterdon County	205501	\$	10,000.00
2/16/2009	Rahway Center Management Corporation	205502	\$	25,000.00
2/16/2009	Union County Arts Center, Inc.	205503	\$	50,000.00
2/16/2009	Urban League of Union County, Inc.	205504	\$	10,000.00
2/16/2009	Communities in Schools of Durham Inc.	205505	\$	18,750.00
2/16/2009	Science Museums of Wilson, Inc.	205506	\$	63,350.00
	Void check (wrong payee, not sent out)	205507		
2/16/2009	Cradles to Crayons Inc.	205508	\$	500.00
2/16/2009	Boy Scouts of America	205509	\$	500.00
2/16/2009	Big Brothers Big Sisters of the Bay Area	205510	\$	1,000.00
2/16/2009	Boy Scouts of America	205511	\$	4,500.00
2/16/2009	Wilderness Inquiry Inc.	205512	\$	1,000.00
2/16/2009	Ridge Fire Company No. 1	205513	\$	1,000.00
2/16/2009	Royal Scottish Country Dance Society Delaware Valley Branch LTD	205514	\$	500.00
2/16/2009	Boy Scouts of America	205515	\$	1,000.00
2/16/2009	Boy Scouts of America	205516	\$	1,000.00
2/16/2009	Arkell Center, Inc.	205517	\$	500.00
2/16/2009	Edison First Aid Squad Number 2 Inc.	205518	\$	1,900.00
2/16/2009	Horse and Buddy	205519	\$	500.00
2/16/2009	Hunterdon Prevention Resources Inc.	205520	\$	500.00
2/16/2009	Guanghua Chinese Association Inc.	205521	\$	500.00
2/16/2009	iVolunteer Inc.	205522	\$	500.00
2/16/2009	Calvary Baptist Church of Lansdale, PA	205523	\$	500.00
2/16/2009	Ronald McDonald House Charities of Central Ohio Inc.	205524	\$	500.00
2/16/2009	National Ambucs Inc.	205525	\$	500.00
2/16/2009	Autism Speaks	205526	\$	1,500.00
2/16/2009	Boy Scouts of America	205527	\$	1,000.00
2/16/2009	Boy Scouts of America	205528	\$	500.00
2/16/2009	Boy Scouts of America	205529	\$	500.00
2/16/2009	Chosen 300 Ministries Inc.	205530	\$	500.00
2/16/2009	Boy Scouts of America	205531	\$	1,000.00
2/16/2009	Catholic Relief Services	205532	\$	500.00
2/16/2009	Zoological Society of Philadelphia	205533	\$	500.00
2/16/2009	Hunterdon Land Trust Alliance	205534	\$	500.00
	Void check (wrong address, not sent out)	205535		
2/16/2009	Girl Scouts Heart of New Jersey Inc.	205536	\$	2,000.00
2/16/2009	Central North Carolina Chapter of the American National Red Cross	205537	\$	39,080.00
2/16/2009	Rutgers - The State University of NJ	205538	\$	82,504.00

The Merck Company Foundation Expenses for 2009

	Voided check - printer error	205539	
3/19/2009	University of Maryland Baltimore Foundation	205541	\$ 200,000.00
3/19/2009	Task Force for Child Survival & Development	205542	\$ 150,000.00
3/19/2009	Trustees of Princeton University	205543	\$ 63,000.00
3/19/2009	New Jersey Symphony Orchestra	205544	\$ 150,000.00
3/19/2009	Feeding America	205545	\$ 2,500.00
3/19/2009	Caucus Educational Corporation	205546	\$ 2,500.00
3/19/2009	Rutgers University Foundation	205547	\$ 2,500.00
3/19/2009	Stone Barns Center for Food & Agriculture	205548	\$ 5,000.00
3/19/2009	Drexel University	205549	\$ 2,500.00
3/19/2009	Meals on Wheels Association of America	205550	\$ 2,500.00
3/19/2009	International Longevity Center USA Ltd	205551	\$ 2,500.00
3/19/2009	Girl Scouts of Eastern Pennsylvania	205552	\$ 500.00
3/19/2009	Civil Air Patrol	205553	\$ 1,000.00
3/19/2009	National Ski Patrol System Inc	205554	\$ 2,000.00
3/19/2009	Zoological Society of Philadelphia	205555	\$ 500.00
3/19/2009	Aid for Friends	205556	\$ 500.00
3/19/2009	Franklin Institute	205557	\$ 50,000.00
3/19/2009	Media Boys Club	205558	\$ 1,000.00
3/19/2009	Society of St. Vincent de Paul of Philadelphia	205559	\$ 500.00
3/19/2009	Pearl S. Buck International Inc.	205560	\$ 500.00
3/19/2009	Branchburg Rescue Squad, Inc.	205561	\$ 1,000.00
3/19/2009	Montgomery County Association for the Blind	205562	\$ 500.00
3/19/2009	Hunterdon Hispanos Inc.	205563	\$ 500.00
3/19/2009	Multiple Sclerosis Society Blue Ridge Chapter	205564	\$ 500.00
3/19/2009	Habitat for Humanity International Inc.	205565	\$ 500.00
3/19/2009	Communities of Faith for Housing Inc	205566	\$ 1,000.00
3/19/2009	Reach Out and Read Inc	205567	\$ 2,500.00
3/19/2009	Holland Township Board of Education	205568	\$ 1,000.00
3/19/2009	United States Conference of Catholic Bishops	205569	\$ 1,000.00
3/19/2009	Down Syndrome Organization of Houston	205570	\$ 1,000.00
3/19/2009	Clymer Library Association of Pocono Pines	205571	\$ 500.00
3/19/2009	Edison Wetlands Association	205572	\$ 500.00
3/19/2009	Harrisonburg Rescue Squad	205573	\$ 1,000.00
3/19/2009	Boy Scouts of America (Lansdale)	205574	\$ 500.00
	Voided check - printer error	205575	
3/19/2009	Manna on Main Street	205576	\$ 1,000.00
3/19/2009	Alpha Community Development Corp	205577	\$ 2,000.00
3/19/2009	Presbyterian Church USA	205578	\$ 1,000.00
3/24/2009	JK Group	205580	\$ 802,161.02
	Voided check - printer error	205581	
3/26/2009	Children's Inn at NIH	205582	\$ 100,000.00
11/14/2008	University of Maryland Baltimore Foundation check voided - never sent out (2008)	205410	
11/14/2008	Task Force for Child Survival - Voided check - never sent out (2008)	205412	
4/13/2009	American Australian Association	205583	\$ 100,000.00
4/13/2009	Healing the Children of Oregon & Western Washington	205584	\$ 500.00
4/13/2009	Woodbridge Township Domestic Violence Response Team, Inc.	205585	\$ 900.00
4/13/2009	Pennsburg Fire Co. #1	205586	\$ 500.00
4/13/2009	ECO Bucks Inc.	205587	\$ 500.00

The Merck Company Foundation Expenses for 2009

4/13/2009	Big Brothers Big Sisters of Bucks County	205588	\$	500.00
4/13/2009	Celebration for Life, Inc.	205589	\$	1,000.00
4/13/2009	Stuarts Draft Elementary School PTA	205590	\$	1,000.00
4/13/2009	Journey for Children	205591	\$	1,000.00
4/13/2009	McCarter Theatre	205592	\$	25,000.00
4/13/2009	JK Group Inc.	205593	\$	2,122,077.39
4/13/2009	Presidents and Fellow of Harvard College	205594	\$	250,000.00
4/13/2009	Young Mens Christian Association of Eastern Union County	205595	\$	25,000.00
4/13/2009	Hanson Park Conservancy	205596	\$	5,000.00
4/13/2009	Jewish Family Service Agency of Central Jersey	205597	\$	5,000.00
4/13/2009	Rahway Community Action Organization	205598	\$	25,000.00
4/13/2009	Trinitas Health Foundation	205599	\$	14,000.00
4/13/2009	Hunterdon County Department of Health	205600	\$	5,000.00
4/13/2009	Glen Gardner Youth Association	2005601	\$	10,000.00
4/13/2009	Hunterdon Medical Center Foundation Inc.	205602	\$	15,000.00
4/13/2009	Hunterdon Drug Awareness Program	205603	\$	7,500.00
4/13/2009	Hunterdon Land Trust Alliance	205604	\$	7,500.00
4/13/2009	Center for Educational Advancement	205605	\$	6,200.00
4/13/2009	Hunterdon Hospice	205606	\$	10,700.00
4/13/2009	Hunterdon Hispanos, Inc.	205607	\$	5,000.00
4/13/2009	Briteside Adult Day Centers, Inc.	205608	\$	5,000.00
4/13/2009	Hunterdon Museum of Art	205609	\$	8,600.00
4/13/2009	Barton College	205610	\$	50,500.00
4/13/2009	Community Counseling Center Inc.	205611	\$	50,000.00
4/13/2009	Rahway Public Schools	205612	\$	2,000.00
4/13/2009	New Jersey Audubon Society	205613	\$	10,000.00
4/13/2009	South Branch Watershed Association	205614	\$	10,000.00
4/13/2009	Interfaith Council fo the Homeless of Hunterdon County Inc.	205615	\$	10,000.00
4/13/2009	County of Hunterdon New Jersey	205616	\$	10,000.00
4/13/2009	The Midland School	205617	\$	10,000.00
4/13/2009	United Way of Greater Union County, Inc.	205618	\$	15,000.00
4/13/3009	United Presbyterian Church	205619	\$	10,000.00
4/13/2009	Arts Guild of Rahway	205620	\$	15,000.00
	Voided (never sent out)	205621		
	Voided (never sent out)	205622		
5/7/2009	Trustees of Columbia University in the City of New York	205623	\$	392,858.00
5/11/2009	JK Group Inc.	205624	\$	808,169.80
5/15/2009	Grantmakers in Health	205627	\$	5,000.00
5/15/2009	Rockingham Memorial Hospital	205629	\$	150,000.00
5/15/2009	ARC of Hunterdon Foundation	205630	\$	2,500.00
5/15/2009	Flemington Area Food Pantry	205631	\$	20,000.00
5/15/2009	Anderson House	205632	\$	2,500.00
5/15/2009	Young Men's Chrisitan Association of Hunterdon County	205633	\$	2,500.00
5/15/2009	Senior PharmAssist Inc.	205634	\$	8,000.00
5/15/2009	Orphan Grain Train, Inc.	205635	\$	500.00
5/15/2009	Boy Scouts of America (Dayton)	205636	\$	500.00
5/15/2009	Robert Wood Johnson University Hospital at Rahway Foundation	205637	\$	50,000.00
5/15/2009	Boy Scouts of America (Cranford)	205638	\$	1,000.00
5/15/2009	Habitat for Humanity International	205639	\$	500.00

The Merck Company Foundation Expenses for 2009

5/15/2009	Kalamar Nykel Foundation	205640	\$	500.00
5/15/2009	Evangelical Lutheran Church in America	205641	\$	500.00
5/15/2009	The Laymen Playmen, Inc.	205642	\$	1,000.00
5/15/2009	Franklin Institute	205643	\$	500.00
5/15/2009	Boy Scouts of America (Glenmore)	205644	\$	1,000.00
5/15/2009	SAFE in Hunterdon Inc.	205645	\$	5,000.00
5/15/2009	YWCA of Eastern Union County	205646	\$	15,000.00
5/15/2009	Big Brothers / Big Sisters - Hunterdon County	205647	\$	2,500.00
5/15/2009	Boy Scouts of America (Metztown)	205648	\$	1,000.00
5/15/2009	Cradles to Crayons, Inc.	205649	\$	1,000.00
5/15/2009	Care & Share Shoppes, Inc.	205650	\$	500.00
5/15/2009	Funders Concerned About AIDS	205651	\$	7,500.00
6/15/2009	American National Red Cross	205660	\$	250,000.00
6/15/2009	New Jersey Symphony Orchestra	205661	\$	100,000.00
6/15/2009	James A. Michener Art Museum	205662	\$	30,000.00
6/15/2009	Child Abuse Prevention Effort	205663	\$	500.00
6/15/2009	Ethics Resource Center	205664	\$	24,565.00
6/15/2009	University of North Carolina at Chapel Hill	205665	\$	40,000.00
6/15/2009	University of Chicago	205666	\$	40,000.00
6/15/2009	Trustees of the University of Pennsylvania	205667	\$	40,000.00
6/15/2009	Temple University	205668	\$	40,000.00
6/15/2009	George Mason University	205669	\$	40,000.00
6/15/2009	Board of Trustees for the University of Alabama	205670	\$	40,000.00
6/15/2009	Case Western Reserve University	205671	\$	40,000.00
6/15/2009	North Carolina State University Physical & Mathematical Sciences Foundation	205672	\$	40,000.00
6/15/2009	University of Wisconsin Madison	205673	\$	40,000.00
6/15/2009	Boston University Trustees of Boston University	205674	\$	40,000.00
6/15/2009	Girl Scouts of Eastern Pennsylvania	205675	\$	1,000.00
6/15/2009	Youth Education in the Arts	205676	\$	500.00
6/15/2009	Habitat for Humanity of Greater Bucks	205677	\$	1,000.00
6/15/2009	Harvesters - The Community Food Network	205678	\$	1,000.00
6/15/2009	Zoological Society of Philadelphia	205679	\$	1,000.00
6/15/2009	Caucus Educational Corporation	205680	\$	75,000.00
6/15/2009	New Jersey Performing Arts Center	205681	\$	200,000.00
6/15/2009	Habitat for Humanity of Greater Bucks	205682	\$	1,000.00
6/15/2009	National Multiple Sclerosis Society Blue Ridge Chapter	205683	\$	500.00
6/15/2009	Boy Scouts of America	205684	\$	500.00
6/15/2009	Metropolitan Area Neighborhood Nutrition Alliance	205685	\$	500.00
6/15/2009	Sebastian Riding Associates, Inc	205686	\$	1,000.00
7/15/2009	New York University	205690	\$	50,000.00
7/15/2009	Regents of the University of Michigan	205691	\$	100,000.00
7/15/2009	Young Men's Christian Association of Burlington County	205692	\$	1,000.00
7/15/2009	Boy Scouts of America	205693	\$	1,000.00
7/15/2009	Manna on Main Street	205694	\$	1,000.00
7/15/2009	The Laymen Playmen, Inc.	205695	\$	500.00
7/15/2009	Pathfinder Mission	205696	\$	500.00
7/15/2009	Artists Cooperative for Personal and Professional Advancement, Inc.	205697	\$	500.00
7/15/2009	SAFE in Hunterdon, Inc.	205698	\$	1,000.00
7/15/2009	Lower Frederick Fire Co., Inc.	205699	\$	1,000.00
7/15/2009	Pearl S. Buck International, Inc.	205700	\$	500.00

The Merck Company Foundation Expenses for 2009

7/15/2009	World Vision, Inc.	205701	\$	500.00
7/15/2009	JK Group, Inc.	205702	\$	781,058.63
7/15/2009	Pedi Place	205703	\$	500.00
7/15/2009	New York Cares	205704	\$	500.00
7/15/2009	Boy Scouts of America	205705	\$	1,000.00
7/15/2009	Habitat for Humanity International	205706	\$	500.00
7/15/2009	Cradles to Crayons, Inc.	205707	\$	1,000.00
7/15/2009	United Service Organizations, Inc.	205708	\$	1,000.00
7/15/2009	Cambria Township Volunteer Fire Co.	205709	\$	1,000.00
7/15/2009	Dutch Country Players, Inc.	205710	\$	500.00
7/15/2009	Foundation Center	205711	\$	4,000.00
7/15/2009	Ethics Resource Center	205712	\$	50,000.00
7/15/2009	Ethics Resource Center	205713	\$	75,000.00
	voided check (was not sent out)	205715		
8/14/2009	JK Group, Inc., Trustees for Merck Partnership for Giving	205716	\$	1,799,170.28
8/14/2009	Society of St. Vincent de Paul	205717	\$	500.00
8/14/2009	Habitat for Humanity of Rowan County	205718	\$	1,000.00
8/14/2009	Habitat for Humanity of Montgomery County	205719	\$	500.00
8/14/2009	University of Iowa Foundation	205720	\$	1,000.00
8/14/2009	Penn Foundation, Inc.	205721	\$	1,000.00
8/14/2009	Birth Haven, Inc.	205722	\$	1,000.00
8/14/2009	Hospice Service of Lake County	205723	\$	1,000.00
8/14/2009	Massachusetts Institute of Technology	205724	\$	75,000.00
8/14/2009	Cornell University	205725	\$	100,000.00
8/14/2009	LSE Foundation	205726	\$	100,000.00
	voided check (was not sent out)	205727		
8/14/2009	Universidad Carlos III de Madrid	205728	\$	50,000.00
8/14/2009	Universitat Pompeu Fabra	205729	\$	50,000.00
8/14/2009	Victoria University of Technology	205730	\$	100,000.00
8/25/2009	Young Men's Christian Association of Burlington County	205731	\$	500.00
8/25/2009	Media Boys Club	205732	\$	1,000.00
8/25/2009	Delaware Hospice, Inc.	205733	\$	1,000.00
8/25/2009	Ronald McDonald House Charities of Central PA	205734	\$	1,000.00
8/25/2009	Canine Companions for Independence	205735	\$	1,000.00
8/25/2009	Caring Bridge	205736	\$	1,000.00
8/25/2009	Shannon Daley Memorial Fund, Inc.	205737	\$	1,000.00
8/25/2009	Reeds Relief Inc.	205738	\$	1,000.00
8/25/2009	Northwest Human Services of Pennsylvania	205739	\$	1,000.00
8/25/2009	Greater Bay Area Make a Wish Foundation	205740	\$	1,000.00
8/25/2009	Fox Chase Cancer Center	205741	\$	1,000.00
8/25/2009	Ken-Crest Centers	205742	\$	1,000.00
8/25/2009	John F. Kennedy Medical Center Foundation	205743	\$	500.00
8/25/2009	Housing Partnerships Inc.	205744	\$	1,000.00
8/25/2009	Good Samaritan Hospital Foundation	205745	\$	1,000.00
8/27/2009	The Children's Inn at NIH	205746	\$	500,000.00
9/16/2009	Cranford Board of Education	205748	\$	2,000.00
9/16/2009	Habitat for Humanity, Inc.	205749	\$	1,000.00
9/16/2009	Exultate	205750	\$	1,000.00
9/16/2009	Boys & Girls Clubs of Greater Fort Worth	205751	\$	1,000.00
9/16/2009	Kansas Food Bank Warehouse, Inc.	205752	\$	1,000.00
9/16/2009	Zarephath Health Center	205753	\$	1,000.00
9/16/2009	March of Dimes Birth Defects National Foundation	205754	\$	500.00

The Merck Company Foundation Expenses for 2009

9/16/2009	Wheeler Lake Association	205755	\$	500.00
9/16/2009	Boy Scouts of America	205756	\$	2,500.00
9/16/2009	North Penn Music Aides, Inc.	205757	\$	500.00
9/16/2009	Ozanam	205758	\$	1,000.00
9/16/2009	West End Firs Co. No.2	205759	\$	500.00
9/16/2009	Cranford First Aid Squad	205760	\$	1,000.00
9/16/2009	Habitat for Humanity International	205761	\$	500.00
9/16/2009	Boy Scouts of America	205762	\$	500.00
9/16/2009	Iselin Chemical Hook & Ladder Volunteer Fire Co.	205763	\$	1,000.00
9/16/2009	Manna on Main Street	205764	\$	500.00
9/16/2009	Charlotte Maxwell Complementary Clinic	205765	\$	500.00
9/16/2009	Missionaries of Charity	205766	\$	500.00
9/16/2009	UCEDC	205767	\$	10,000.00
9/16/2009	Drexel University	205768	\$	200,000.00
9/16/2009	North Carolina Museum of Life and Science	205769	\$	50,000.00
9/16/2009	Boston Medical Center	205770	\$	50,000.00
9/16/2009	The PhD Project	205771	\$	25,000.00
10/14/2009	Boston Medical Center Corporation	205773	\$	50,000.00
10/14/2009	Boy Scouts of America	205774	\$	2,000.00
10/14/2009	United Way of Williamson County	205775	\$	1,000.00
10/14/2009	Indian Valley AMBUCS	205776	\$	500.00
10/14/2009	Autism Speaks	205777	\$	1,000.00
10/14/2009	Quakertown Food Pantry	205778	\$	1,000.00
10/14/2009	Boy Scouts of America	205779	\$	500.00
10/14/2009	Berkeley Community Health Project	205780	\$	500.00
10/14/2009	Pennsburg PA Boy Scouts America #90	205781	\$	1,000.00
10/14/2009	Zoological Society of Philadelphia	205782	\$	1,000.00
10/14/2009	American Red Cross	205783	\$	1,000.00
10/14/2009	Keystone Opportunity Center Inc	205784	\$	500.00
10/14/2009	Edison Wetlands Association	205785	\$	1,000.00
10/14/2009	Bradley Center	205786	\$	500.00
10/14/2009	New York Says Thank You Foundation	205787	\$	500.00
10/14/2009	Zoological Society of Philadelphia	205788	\$	1,000.00
10/14/2009	Appalachia Service Project, Inc.	205789	\$	500.00
10/14/2009	Eva's Village Inc	205790	\$	1,000.00
10/14/2009	Upper Dublin Chinese Association	205791	\$	500.00
10/14/2009	Family Service of Montgomery County PA	205792	\$	500.00
10/14/2009	Somerset Hills Handicapped Riders Club	205793	\$	1,000.00
10/14/2009	American Red Cross Plainfield	205794	\$	500.00
10/14/2009	Community Food Bank of New Jersey	205795	\$	500.00
10/14/2009	Caring Bridge	205796	\$	1,000.00
10/14/2009	North Fulton Community Charities Inc	205797	\$	500.00
10/14/2009	JK Group, Trustees for Merck Partnership fo Giving	205798	\$	764,975.49
10/14/2009	Trinity Habitat for Humanity	205799	\$	1,000.00
10/14/2009	Rahway First Aid Emergency Squad	205800	\$	20,000.00
10/14/2009	Camp Sunshine at Sebago Lake Inc	205801	\$	500.00
10/26/2009	JK Group, Trustees for Merck Partnership fo Giving	205802	\$	1,285,599.33
7/15/2009	Boy Scouts of America (Cranford) (voided)	205693		
8/25/2009	Caring Bridge (check lost & voided)	205736		
	Damaged Check	205803		
11/18/2009	Friends of the University of Natal, Inc.	205804	\$	100,000.00
11/18/2009	American National Red Cross	205805	\$	50,000.00

The Merck Company Foundation Expenses for 2009

11/18/2009	Ken-Crest Centers	205806	\$	1,000.00
11/18/2009	Habitat for Humanity Bay-Waveland Area	205807	\$	500.00
11/18/2009	National Multiple Sclerosis Society Blue Ridge Chapter	205808	\$	1,000.00
11/18/2009	Families Fit for Good	205809	\$	1,000.00
11/18/2009	Visiting Nurses Association of Somerset Hills	205810	\$	500.00
11/18/2009	American Red Cross of Northern Utah	205811	\$	500.00
11/18/2009	Children's Specialized Hospital	205812	\$	1,000.00
11/18/2009	Visiting Nurses Association of Saint Luke's Home Health/Hospice, Inc.	205813	\$	1,000.00
11/18/2009	Leukemia and Lymphoma Society, Inc.	205814	\$	500.00
11/18/2009	Organization of American Kodaly Educators, Inc.	205815	\$	500.00
11/18/2009	Quakertown Music Promoters Organization	205816	\$	1,000.00
11/18/2009	Boy Scouts of America	205817	\$	1,000.00
11/18/2009	Task Force for Global Health	205818	\$	200,000.00
12/15/2009	Trustees of Indiana University	205819	\$	200,000.00
12/15/2009	Void check - not sent out	205820		
12/15/2009	Boy Scouts of America Tannersville	205821	\$	1,000.00
12/15/2009	McGaheysville Volunteer Fire Co.	205822	\$	500.00
12/15/2009	American Red Cross	205823	\$	500,000.00
12/15/2009	Union County Arts Center Inc	205824	\$	25,000.00
12/15/2009	Salvation Army Territorial Headquarters	205825	\$	60,000.00
12/15/2009	Boys and Girls Club of Paterson	205826	\$	12,500.00
12/15/2009	Ocean County Legal Services	205827	\$	30,000.00
12/15/2009	Newark Museum, The	205828	\$	25,000.00
12/15/2009	Literacy Volunteers of America - Union County Affiliate, Inc.	205829	\$	10,000.00
12/15/2009	Land Conservancy of New Jersey	205830	\$	5,000.00
12/15/2009	Family Service of Morris County	205831	\$	50,000.00
12/15/2009	Northwest New Jersey Community Action Program, Inc.	205832	\$	12,000.00
12/15/2009	America's Grow A Row, Inc	205833	\$	15,000.00
12/15/2009	Parker Family Health Center, Inc	205834	\$	40,000.00
12/15/2009	Court Appointed Special Advocates of NJ, Inc.	205835	\$	8,000.00
12/15/2009	Hunterdon Land Trust Alliance	205836	\$	7,000.00
12/15/2009	St. Peter's Foundation	205837	\$	50,000.00
12/15/2009	Community Food Bank of New Jersey	205838	\$	50,000.00
12/15/2009	County of Hunterdon, The	205839	\$	6,650.00
12/15/2009	County of Hunterdon, The	205840	\$	10,000.00
12/15/2009	Youth Development Clinic of Newark	205841	\$	50,000.00
12/15/2009	Streetlight Mission Inc	205842	\$	18,680.00
12/15/2009	Young Women's Christian Association of Elizabeth, NJ	205843	\$	25,000.00
12/15/2009	Robert Wood Johnson University Hospital at Rahway Foundation	205844	\$	50,000.00
12/15/2009	Foundation of the University of Medicine and Dentistry of New Jersey	205845	\$	25,000.00
12/15/2009	Boys and Girls Club of Camden County	205846	\$	50,000.00
12/15/2009	Boys & Girls Club of Trenton/Mercer County	205847	\$	50,000.00
12/15/2009	Jewish Family Service of MetroWest	205848	\$	50,000.00
12/15/2009	Rahway Public Schools	205849	\$	2,800.00
12/15/2009	South Mountain Conservancy Inc.	205850	\$	500.00
12/15/2009	South Mountain Conservancy Inc.	205851	\$	1,000.00
12/15/2009	API Cultural Center, Inc	205852	\$	500.00
12/15/2009	Hunterdon Land Trust Alliance	205853	\$	1,000.00
12/15/2009	Elizabethport Presbyterian Center	205854	\$	10,000.00

The Merck Company Foundation Expenses for 2009

12/15/2009	Community Soup Kitchen of Morristown	205855	\$	10,000.00
12/15/2009	Volunteer Guardianship One-On-One	205856	\$	2,000.00
12/15/2009	American National Red Cross and its Constituent Chapters & Branches	205857	\$	20,000.00
12/15/2009	Girl Scouts of Eastern Pennsylvania	205858	\$	500.00
12/15/2009	Defenders of Freedom	205859	\$	500.00
12/15/2009	Berkeley Community Health Project	205860	\$	500.00
12/15/2009	North Wales Memorial Free Library	205861	\$	500.00
12/15/2009	Nature Conservancy, Inc.	205862	\$	50,000.00
12/15/2009	Montgomery County Association for the Blind, Inc	205863	\$	500.00
12/15/2009	Newark Beth Israel Medical Center Foundation Inc	205864	\$	72,865.00
12/15/2009	Colorado Institute of Developmental Pediatrics Inc	205865	\$	500.00
12/15/2009	Manna on Main Street	205866	\$	1,000.00
12/15/2009	Manna on Main Street	205867	\$	500.00
12/15/2009	Young Men's Christian Association of the Upper Main Line	205868	\$	500.00
12/15/2009	Young Men's Christian Association of the Upper Main Line	205869	\$	500.00
12/15/2009	iVolunteer Inc.	205870	\$	500.00
12/15/2009	Foundation of the University of Medicine and Dentistry of New Jersey	205871	\$	50,000.00
12/15/2009	National Health Museum	205872	\$	125,000.00
12/15/2009	American Heart Association	205873	\$	500.00
12/15/2009	void check - printing error	205874		
12/15/2009	Brighton and Sussex University Hospitals NHS Trust	205876	\$	200,000.00
	Subtotal 2009 TMCF Contributions Expense		\$	21,973,116.50
	Less Adjustments			
1/26/2009	Voided (never sent out) Trustees of Columbia in the City of New York	205451	\$	(420,020.00)
11/14/2008	University of Maryland Baltimore Foundation check voided - never sent out (2008)	205410	\$	(200,000.00)
11/14/2008	Task Force for Child Survival - Voided check - never sent out (2008)	205412	\$	(150,000.00)
7/15/2009	Boy Scouts of America (Cranford)	205693	\$	(1,000.00)
8/25/2009	Caring Bridge (check lost & voided)	205736	\$	(1,000.00)
	Subtotal TMCF Adjustments		\$	(772,020.00)
	Total TMCF Contributions Expense After Adjustments		\$	21,201,096.50
	Additional Merck Company Foundation Funding for Fiscal Year 2009			
	Merck Institute for Science Education		\$	6,222,711.42
	Merck Childhood Asthma Network		\$	3,799,910.71
	ACHAPS		\$	6,500,000.00
	C-MAP		\$	4,515,000.00
	Total		\$	21,037,622.13
	Grand Total Contributions Expense for Fiscal Year 2009		\$	42,238,718.63

STATEMENT #7FORM 990-PF
2009**PART XV, 3b****The Merck Company Foundation Pledges**

Organization	Total							Remaining
Grant Amount	Paid	2010	2011	2012	2013	2014	2015	Balance
American Australian Association Inc	\$300,000 00	\$100,000 00	\$100,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
\$500,000 00								
5-year (2007-2011), \$500,000 pledge to support the United States Studies Center program of The American Australian Association								
American National Red Cross	\$500,000 00	\$500,000 00	\$500,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
\$1,500,000 00								
Funding to support ARC's LARRA (Latin America Risk Reduction Activity) project 1 of 3								
Baylor Research Institute	\$668,967 00	\$0 00	\$400,000 00	\$400,000 00	\$400,000 00	\$0 00	\$0 00	\$0 00
\$1,868,967 00								
Five-year (2009-2013) grant to support comprehensive diabetes program in Dallas, as part of Merck Alliance to Reduce Disparities in Diabetes								
Brighton and Sussex University Hospitals NHS Trust	\$600,000 00	\$200,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
\$800,000 00								
Four-year (2007-2010) \$800,000 pledge to support establishment of new MVN-A training center in Zambia as part of Merck Vaccine Network-Africa (MVN-A)								
Children's Inn at NIH, Inc	\$300,000 00	\$100,000 00	\$100,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
\$500,000 00								
Renewal of 5-year (2007-2011), \$500,000 Challenge Grant to support annual operations and program services								
Children's Inn at NIH, Inc	\$2,000,000 00	\$0 00	\$1,000,000 00	\$1,000,000 00	\$1,000,000 00	\$0 00	\$0 00	\$0 00
\$5,000,000 00								
Five year (2009-2013) \$5 million pledge to support a new transitional housing program at The Children's Inn								
The Cooper Foundation, Inc	\$800,000 00	\$0 00	\$400,000 00	\$400,000 00	\$400,000 00	\$0 00	\$0 00	\$0 00

\$2,000,000 00

Five year (2009-2013) pledge to support comprehensive diabetes program through Camden Coalition of Healthcare Providers, as part of Merck Alliance to Reduce Disparities in Diabetes

Drexel University	\$200,000 00	\$400,000 00	\$400,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$1,000,000 00

Three-year (2009-2011) \$1,000,000 pledge to support the creation of the Center for Community Nutrition and Child Health

Ethics Resource Center	\$167,000 00	\$188,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$355,000 00

Support for the EthicsSA Center phase down 2009-2010

George Mason University	\$80,000 00	\$40,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$120,000 00

Support for three-year (2008-2010) \$120,000 fellowship in biostatistics, as part of "Merck Quantitative Sciences Fellowship Program "

Healthy Memphis Common Table	\$790,251 00	\$0 00	\$400,000 00	\$400,000 00	\$400,000 00	\$0 00	\$0 00	\$0 00
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\$1,990,251 00

Five year (2009-2013) pledge to support comprehensive diabetes program in Memphis, as part of Merck Alliance to Reduce Disparities in Diabetes

James A Michener Art Museum	\$90,000 00	\$30,000 00	\$30,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$150,000 00

Five year pledge (2007-2011), \$150,000 in support of the centennial campaign

McCarter Theatre	\$25,000 00	\$25,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$50,000 00

Two-year (2009-2010) \$50,000 pledge for general funding support

New Jersey Performing Arts Center	\$200,000 00	\$200,000 00	\$200,000 00	\$200,000 00	\$200,000 00	\$0 00	\$0 00	\$0 00
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\$1,000,000 00

Five year pledge (2009-2013), \$1,000,000 to support "The

Campaign for NJPAC " Funding to be alloted toward capacity-building work to strengthen & grow NJPACs arts education programs

The PhD Project Association	\$25,000 00	\$25,000 00	\$25,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$75,000 00

Three-year (2009-2011), \$75,000 pledge to support PhD Project's Diversity in the Workplace programs 1 of 3

Presidents and Fellows of Harvard College	\$500,000 00	\$0 00	\$249,311 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$749,311 00

3-year (2009-2011) \$749,311 pledge to support Phase II project focused on "Current Debates on Realizing Health and Human Rights - Roles & Responsibilities of the Pharmaceutical Industry "

The Regents of the University of Michigan	\$600,000 00	\$0 00	\$350,000 00	\$350,000 00	\$350,000 00	\$0 00	\$0 00	\$0 00
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\$1,650,000 00

Five year (2009-2013) pledge to support National Program Office of the Merck Alliance to Reduce Disparities in Diabetes

Rockingham Memorial Hospital	\$350,000 00	\$150,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$500,000 00

Four year (2007-2010), \$500,000 funding support for the Rockingham Memorial Hospital pharmacy capital building campaign (Sign to displayed in pharmacy recognizing TMC's gift) \$50,000 in 2007, \$150 000 2008-2010 3 of 4 2009 NOC - Elkton

Sundance Research Institute, Inc	\$737,697 00	\$0 00	\$400,000 00	\$400,000 00	\$400,000 00	\$0 00	\$0 00	\$0 00
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\$1,937,697 00

Five year (2009-2013) pledge to support comprehensive diabetes program among Eastern Shoshone Tribe as part of Merck Alliance to Reduce Disparities in Diabetes

Task Force for Global Health	\$600,000 00	\$200,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$800,000 00

Four-year (2007-2010), \$800,000 pledge to support establishment of new MVN-A training center in Uganda, as part of Merck Vaccine Network-Africa (MVN-A)

Temple University	\$80,000 00	\$40,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$120,000 00

Support for three-year (2008-2010)
\$120,000 fellowship in biostatistics,
as part of "Merck Quantitative
Sciences Fellowship Program "

Trustees of Columbia University in the City of New York	\$392,858 00	\$475,855 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$868,713 00

Two year (2009-2010) \$868,713
grant to support for the Millennium
Villages Health Worker training
program at the Earth Institute
(\$475,855 due in 2010)

Trustees of the University of Pennsylvania	\$80,000 00	\$40,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$120,000 00

Support for three-year (2008-2010)
\$120,000 fellowship in biostatistics,
as part of "Merck Quantitative
Sciences Fellowship Program "

University of Chicago	\$80,000 00	\$40,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$120,000 00

Support for three-year (2008-2010)
\$120,000 fellowship in health
economics, as part of "Merck
Quantitative Sciences Fellowship
Program "

University of Chicago	\$800,000 00	\$0 00	\$400,000 00	\$400,000 00	\$400,000 00	\$0 00	\$0 00	\$0 00
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\$2,000,000 00

Five year (2009-2013) pledge to
support comprehensive diabetes
program in south side of Chicago, as
part of Merck Alliance to Reduce
Disparities in Diabetes

Foundation of the University of Medicine and Dentistry of New Jersey	\$200,000 00	\$50,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$250,000 00

Five-year (2006-2010), \$250,000
pledge to support the Public Health
Research Institute's research in drug
targets for TB

University of North Carolina at Chapel Hill	\$80,000 00	\$40,000 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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\$120,000 00

Support for three-year (2008-2010)
\$120,000 fellowship in
epidemiology, as part of "Merck
Quantitative Sciences Fellowship
Program "

Grand Total	\$11,246,773 00	\$2,843,855 00	\$4,954,311 00	\$0 00	\$0 00	\$0 00	\$0 00	\$0 00
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**Merck
Institute for
Science
Education**

2009 Annual Report
Cover Sheet

Grant from the Merck Company Foundation to MISE	\$6,651,000
Unspent funds	\$392,798

A handwritten signature in cursive script, reading "Carlo Parravano", written over a horizontal line.

Dr. Carlo Parravano
Executive Director
Merck Institute for Science Education

3/12/10

Date

Merck Institute for Science Education
2009 Grant Report

Program	Amount Budgeted	Spent Funds	Unspent Funds
MISE K-12	\$3,101,000	\$2,848,202	\$252,798
Merck/AAAS Undergraduate Science Research Program	\$900,000	\$860,00	\$40,000
NAHH/Merck <i>Ciencia</i> Scholars	\$800,000	\$800,000	0
UNCF/Merck Science Initiative	\$1,500,000	\$1,500,000	0
UNCF STEM Initiative	\$200,000	\$100,000	\$100,000
Washington & Jefferson College	\$150,000	\$150,000	0
TOTAL	\$6,651,000	\$6,258,202	\$397,298

Merck Institute for Science Education
2009 Operating Expenses

Account Number		Total Expenses
6111.039	Salaries	\$924,047
6240.999	Employee benefits	\$369,618
6560.999	Supplies	\$25,399
6590.230	Resource Center	\$23,037
6615.999	Rental other - M&E	\$1,487
6765.020	Telephone	\$1,300
6809.000	Contract services	\$0
6823.025	Advisory Board	\$3,511
6845.070	Printing	\$3,915
6845.999	Outside services	\$1,103,776
6950.005	Entertainment	\$4,561
7010.999	Travel	\$81,993
7010.080	Travel (meals)	\$4,363
7729.999	Training	\$240
7744.005	Dues	\$1,254
7746.999	Postage&shipping	\$616
7748.005	Books/periodicals/AV	\$902
7750.999	AAAS Admin. Fees	\$43,158
7774.000	Achievement Awards	\$4,750
7798.080	Meals	\$40,747
7798.999	Miscellaneous	\$13,010
SUB-TOTAL		\$2,651,684
Transfer out excluded expenses*		\$52,112
TOTAL		\$2,599,572
*An error of \$438.16 in the excluded expenses for December will be corrected in the January 2010 B&E.		

Merck Institute for Science Education
2009 Program Support

Payee	Description of Support	Amount
MISE K-12		
MISE Advisory Board Members	Board service honoraria	\$13,000
AAUW-Lansdale	Program support	\$1,000
Biology Teachers Association of NJ	Monthly meetings and speakers	\$3,000
Boston Public Schools	District Science Fair support	\$400
Cirillo, Paul	Education consultant	\$480
Corbett, Dick	Education consultant	\$4,000
Delaware Valley Science Fair	Regional Science Fair support	\$10,000
MA State Science Fair	State Science Fair support	\$7,500
Merck Fellows	Pre-service professional development	\$2,000
NJ Chamber of Commerce	Business Coalition for Ed Excellence	\$30,000
NJ Science Teachers Association	Administration of MSSD	\$20,000
NJ Science Olympiad	General program support	\$2,000
Partner School Districts	NSTA Conference Attendance	\$15,500
Partnership - Academy Faculty	Professional development programs	\$50,000
Partnership - Teacher Workshops	Professional development programs	\$51,900
Raptor Trust	Education programs	\$5,000
Raritan Valley Community College	Professional development programs	\$6,250
Rutgers University	Douglass Summer Institute	\$21,600
Triangle Coalition	Education reform activities	\$5,000
SUB-TOTAL		\$248,630
Higher Education		
Colleges and Universities (various)	Merck/AAAS Undergraduate Science Research Program (USRP)	\$860,000
National Alliance for Hispanic Health	NAHH/Merck <i>Ciencia</i> Scholars Program	\$800,000
UNCF	UNCF/Merck Science Initiative	\$1,500,000
UNCF	UNCF STEM Initiative	\$100,000
Washington & Jefferson College	Internships for Excellence in Science	\$150,000
SUB-TOTAL		\$3,410,000
TOTAL		\$3,658,630

Merck Institute for Science Education
Highlights
First Quarter, 2009

Selection of External Evaluator

On January 12, MISE disseminated a request for proposals (RFP) to over 300 individuals and organizations identified as having expertise in science education and program evaluation. In response, MISE received proposals from 20 organizations; the proposals were reviewed in three rounds by MISE staff, members of the MISE Advisory Board and other evaluation experts. MISE selected Westat to serve as the new external evaluator, effective March 31. The team at Westat will work under the direction of Dr. Joy Frechtling who has more than 30 years of experience in education evaluation. Other team members include Gary Silverstein, who will serve as the lead Principal Investigator for the evaluation, Dr. Xiaodong Zhang, who will oversee the research design and analysis plan, Dr. Beatrice Lauman, who will serve as the site visit team leader, and Joseph McInerney and Katylee Hoover both of whom have an extensive content background in science and will be responsible for collecting classroom observation data.

The Academy for Leadership in Science Instruction – Day 7

The second academic year session of the Academy for Leadership in Science Instruction was held on March 26 in Princeton, NJ. Representing Cohort One of the Academy, one hundred and twenty-six educators comprised of twenty-two school-based teams and six district-based teams participated in this full-day professional development. In the morning, each school-based team had the opportunity to discuss the work they accomplished in their districts and reflect on their progress in achieving the three Academy goals during this first year. In the afternoon, school- and district-based teams had an opportunity to examine excerpts of classroom instruction through videos and vignettes. Teams discussed their combined knowledge of the research around and elements of effective science instruction. They shared evidence of good instruction as observed in a video/vignette cases. This analysis of the video/vignette cases was used as a springboard for constructing a draft vision of effective science instruction. Finally, each team member had the opportunity to articulate that vision to other Academy colleagues and receive feedback. Throughout the day, district-based teams worked alongside the school-based teams providing support and resources.

Selection of Schools for Cohort 2 of the Academy for Leadership in Science Instruction

Eighteen school-based teams were selected from within MISE's Partnership districts to participate in Cohort 2 of the Academy for Leadership in Science Instruction. The Academy program includes a five-day residential summer session followed by meetings throughout the academic year. School-based teams are composed of teachers and principals working collaboratively not only to support sustainability but also to allow the work of the Academy to become part of the school culture. These school-based teams meet throughout the year, primarily to become a community of learners focused on increasing their understanding of effective science instruction. In addition, teams conduct at least two outreach meetings at which colleagues are invited to participate in study sessions, investigations, and other experiences from the Academy. The Academy provides opportunities for educators to deepen their knowledge and develop effective leadership skills to improve science instructional practice, science curriculum and science assessment in their schools.

Sponsored Teachers to NSTA

This year MISE provided travel and registration funds to enable 18 teachers from partner school districts to attend the National Conference of the National Science Teachers Association. Three teachers from each of the partner school districts of Elizabeth, Hillside, Linden, North Penn, Readington Township and

Rahway attended the conference held March 19-22 in New Orleans. The National Conference is a significant professional development opportunity. Conference attendance opens opportunities for science teachers to learn about science teaching strategies, to see new science teaching materials, and to network with other teachers. Attendees typically return with notes, handouts, and anecdotes that enrich the professional lives of their fellow teachers.

CAMS Middle School Career Awareness Fair

On Friday, March 13, CAMS organized and sponsored a Career Awareness Fair at Kean University for 100 middle school students from the four CAMS school districts of Elizabeth, Hillside, Linden and Rahway. The students in attendance were selected by their teachers because of a strong aptitude and/or interest in mathematics or science. The program began with a presentation by the president of Kean University, who spoke with the students about the importance of college in their future plans. Students also learned about college admissions and careers in teaching from a Kean University admissions officer and a CAMS teacher. After lunch and a tour of the campus that included a visit to the Planetarium, the participants met in small groups with Kean University students to learn more about college life and undergraduate studies in science and mathematics.

Family Math & Science Nights

Rahway Middle School (Rahway School District) – January 27

Approximately 160 adults and children participated in this event, which focused on measurement. One activity involved the use of microscopes to look at various household materials such as poppy seeds, cotton fabric, and newsprint. A second activity focused on the growth trends of human bodies. Various measurements of the wrist, arm, hand, leg, and head on both children and adults showed similarities when their ratios were calculated. The third activity modeled the planet sizes in our solar system and gave participants an understanding of the significant differences between the outer gaseous planets and the rocky inner planets. Fifteen teachers from the Rahway Middle School and 25 National Honor Society members instructed and assisted the families. The feedback from the parents and students was very positive.

Walter O. Krumbiegel Middle School (Hillside School District) – March 4

The district's first Family Math & Science night was held at the Walter O. Krumbiegel Middle School for grade 6 - 8 students and their parents. Approximately 250 adults and children participated in this event which focused on Science and Design. One activity involved Balloon Rockets where families were challenged to make their balloon rocket glide along a fishing-line track and stop at a specific point. A second activity focused on designing a container to hold 293 kernels of popped popcorn, starting with only 5 kernels, construction paper, tape, and a ruler. The third activity challenged the families to design a marble chute that had 5 changes of direction and allowed the marble to fall 3-feet in exactly 5 seconds. Sixteen teachers and administrators participated as activity leaders and assistants. Parents and students judged the event very successful.

Rutgers Science Education Outreach Retreat

On March 24, MISE staff worked with nearly 50 science outreach educators from the Rutgers Cooperative Extension to assist them in creating a shared vision for an effective informal science education program; reviewing the evidence base for informal science education practices; and developing metrics to measure the impact of their work.

National Academies Workshop

Dr. Carlo Parravano served on the organizing committee for the National Academies workshop on "Exploring the Intersection of Science Education and the Development of 21st Century Skills." The workshop focused on the potential of K-12 science education as a context in which students can practice

and learn 21st century skills. The workshop was held on February 5-6 at the National Academies in Washington, DC.

UNCF•Merck Science Initiative (UMSI): Selection of 2009 Fellows

A total of 211 applications were received via the UNCF Online Portal, distributed among the award levels as follows: undergraduate = 51 applications; graduate = 101 applications; postdoctoral = 59 applications. All applications were reviewed by selection committees comprised of MRL scientists. The committees met in mid-February and early March to select the final list of fellows recommended for awards at each level. The candidates were notified by Dr. Jerry Bryant (Director of the Initiative at UNCF) and the 37 acceptances were received by the end of March.

Merck/AAAS Undergraduate Science Research Program (USRP): Selection of 2009 Awards

A total of 39 applications were received for the 2009 Merck/AAAS USRP grant. The applicants represent 20 states across the country. The 2009 Selection Committee was convened at the AAAS headquarters in Washington, DC on January 10; fourteen grants were awarded.

The 2009 grant competition was the final one for the program. The Merck/AAAS partnership was a pioneer in designing a grant program that focused on interdisciplinary collaboration in biology and chemistry at primarily undergraduate institutions. The USRP grants have been awarded to over 200 colleges and universities and have supported over 2,000 undergraduates, providing them the opportunity to work with and learn from faculty in the laboratory and engage in basic research.

Merck Institute for Science Education

Highlights

Second Quarter, 2009

IN-STEP Workshops

In early April, four MISE staff and two educational consultants traveled to Phuket in southern Thailand where they led and supported the presentation of six workshops for 85 Thai teachers. The teachers of grades 7, 8, and 9 are learning to use science materials that emphasize inquiry-based teaching. The April workshops were part of the IN-STEP project, a partnership of MISE, MSD Thailand, the Thai Ministry of Education, and Kenan Institute Asia. This partnership is a donor response to an identified need for developing science education following the December 2004 tsunami that caused severe damage and loss of life in Thailand's Phang-nga province. MISE has used its experience in developing and leading professional development for science teachers as the basis for supporting and guiding a select group of Thai teachers to become workshop leaders. MISE also contributed the necessary classroom laboratory supplies for teachers to use in teaching with the approaches to which they were introduced during the workshops.

Instructional Team and Faculty Retreats

Two faculty retreats were held to prepare for each Cohort of the Academy for Leadership in Science Instruction. The first retreat, held on March 16 and 17 was attended by 14 participants including five Partnership teachers and administrators (the Academy Faculty), MISE staff, as well as a design consultant and a researcher with expertise in science instruction. The retreat provided opportunities for participants to review the revised design framework for year one of the Academy as well as clarify roles and responsibilities for faculty members. From June 2-4, a year two retreat was held for the same group plus two additional consultants, one of whom was a the primary designer of the year two curriculum. The structure of the three days expanded on the work of the previous retreat, with the addition of time allotted to experience the science practice modules. This "dry run" offered the opportunity to revise segments of the curriculum in real time (as needed), as well as the opportunity for the faculty to raise their level of comfort with the materials.

The Instructional Team Retreat, held on April 20-21, was attended by twelve participants, including six Partnership educators, four members of the MISE staff, and two consultants. The retreat was held to prepare the Partnership educators to facilitate Curriculum Workshops in August as well as to introduce them to newly-developed concept maps that were designed to support them in structuring their workshops effectively.

New NSTA Position Statement—Parent Involvement in Science Learning

On an ongoing basis, the National Science Teachers Association (NSTA) revises its position statements which identify the qualities and standards for good science education and are used to support the improvement of science education at all levels. In June 2008, the NSTA enlisted a panel of 8 members to review and update the position statement on Parent Involvement in Science Learning. Dr. Joseph Maglaty participated on the panel that was chaired by David Heil.

In April 2009, the NSTA Board of directors voted to accept this revised position statement bringing attention to the important role that parents and other caregivers play in their children's science learning at home, in school, and throughout the community. The statement encourages parents to be actively involved in their children's science learning because it is crucial to their children's interest in and ability to learn science.

Merck State Science Day

Twenty-two New Jersey high school students were honored recently by MISE and the New Jersey Science Teachers Association (NJSTA) for their performance in the 59th annual Merck State Science Day competition. The students, known as Merck Scholars, received their awards at a ceremony and luncheon at Merck Research Laboratories in Rahway. A total of 1,662 students from 97 high schools in New Jersey competed in the Merck State Science Day academic competition, which gives students an opportunity to demonstrate their knowledge of science. Participating students take a test in either biology, chemistry, physics, integrated science, or advanced integrated science. MISE and NJSTA gave awards to the four highest scoring students on each test. The Merck State Science Day competition has recognized New Jersey high school students with exceptional abilities in science since 1950.

UNCF/Merck Science Initiative Fellows Day

The 2009 UNCF/Merck Science Initiative (UMSI) Fellows Day and allied events were held June 27 through June 30 at the Merck facility in West Point, PA and the Normandy Farms Conference Center, Blue Bell, PA. Highlights of the Fellows Day include scientific colloquia, poster sessions, laboratory tours, events and dinners hosted by the Association of UNCF/Merck Fellows and the Merck Black Employees Network, and an awards dinner and ceremony which featured a keynote address by Dr. Peter Kim, President, Merck Research Laboratories.

West Point Family Science Day

A MISE Family Science Day event was held at the West Point site on Saturday, April 4 to engage families with elementary and middle school children in grades 3 – 8 in Forensic Science. After watching a skit put on by the volunteers portraying the robbery of "top secret" plans for a new invention, the Crime Scene Investigation families worked eagerly to find the guilty person in a group of six suspects. The participants were engaged in four forensic science activities, namely fingerprint analysis, ink analysis using chromatography, acid/base testing, and blood analysis. There were over 40 volunteers who participated in the skit and led the activities. Two sessions were held, one in the morning and one in the afternoon, with a total attendance of nearly 400 adult and child participants.

Holland Brook School Astronomy Night (Readington Township School District)

Approximately 165 adults and children participated in the school's first Astronomy Night event held on April 30 at the Holland Brook School in Readington Township. Ms. Wendy Reardon, a team leader for the school's Academy Cohort 2 team, coordinated with MISE to identify a space science activity for the families to engage in when they were not at a Starlab presentation or outside using telescopes provided by Raritan Valley Community College. Eight teachers from the school were involved in presenting the activities. Additional information can be found in an article published online at http://www.nj.com/hunterdon-county-democrat/index.ssf/2009/07/kids_had_stars_in_eyes_at_astr.html.

Battin School Family Science Night (Elizabeth School District)

This Family Science event held on May 8 was attended by approximately 80 adults and children. Last year's theme of Forensic Science was repeated for the families who were new to the school since it moved from being a middle school to a K – 8 school. Ms. Kelly Edmonds coordinated the event again and enlisted the help of 9 teachers to participate in the robbery skit and instruct families on the three activities involving fingerprinting, ink separation, and acid / base analysis. MISE provided all of the materials for the activities. Families enjoyed the event which ran from 6:30 p.m. to 8:30 p.m. Friday night after the Home and School meeting.

Rahway Middle School Family Math / Science Night (Rahway School District)

Approximately 150 adults and children participated in this May 14 event, which focused on both mathematics and science and was entitled "What's the Volume of That?" Families were divided into three sections to work on activities. One activity focused on the effect on volume of doubling the height, width

and length of a box. In a second activity, families predicted the impact of size and shape of an object on its buoyancy. In the third activity participants predicted the volume of popcorn that could be held in a cylinder based on the way the edges of the cylinder were connected. Seventeen teachers from the Rahway Middle School instructed and assisted the families in the measurement activities. In addition, 24 National Honor Society members from the eighth grade assisted the families. The feedback from the parents and students showed that it was a very successful event.

Chasing the Sun Event

Merck sponsored a booth at this event held in Glendale, AZ on May 1 – 2 to establish closer connections to the Native American community. MISE provided recommendations to a team of seven Merck volunteers for science activities to be featured at the event. Three science activities were suggested for an audience of children whose ages spanned from toddlers to teenagers. The activities included tornado bottles, ink separation (chromatography) and experiments to understand why birds have different beak shapes. Hundreds of children successfully engaged in the activities and many children returned to do them again and again.

New Communication Firm

Dentsu Communications has been contracted to disseminate information about MISE and highlight key programs, as well as the MISE mission and philosophy. Dentsu Communications was chosen for this project because of their experience representing education and not-for-profit organizations, many of which are specifically focused on science education. Their scope of work includes creating a brochure, website and video to describe the work of MISE and spotlight successful programs, as well as working with local and national media.

Appointment to NSF Federal Advisory Committee

Dr. Carlo Parravano was invited by the National Science Foundation to serve on its Federal Advisory Committee for Education and Human Resources. Chartered under the Federal Advisory Committee Act, the Advisory Committee provides input on matters of policy and programming in STEM education. The committee also provides advice to the agency on its response to national requirements and strategic investments in STEM education.

Selected Presentations

Dr. Carlo Parravano participated in a panel session at the national meeting of the American Education Research Association (AERA) on April 13th in San Diego. The title of the session was "Translating Research Into Practice in the Teaching of Science." The session provided an opportunity to describe MISE's professional development and curriculum implementation programs.

Dr. Carlo Parravano made a presentation about MISE's work and its impact at a convocation held on April 29 and 30 in Irvine, CA. The convocation -- "Learning From and Sustaining Successful Programs in Science Education" -- was sponsored by the National Academy of Sciences, the National Academy of Engineering, and the Beckman Foundation and was moderated by Dr. Bruce Alberts, former president of the National Academy of Sciences and a member of MISE's Advisory Board. Participants at the convocation were stakeholders representing K-16 education, state government, business and industry, and philanthropy who explored ways to more effectively identify, implement and sustain effective practices in K-12 science education. The convocation served as the launch of a longer-term statewide discussion of ways for multiple communities to sustain and grow effective science education programs within California.

Merck Institute for Science Education

Highlights

Third Quarter, 2009

The Academy for Leadership in Science Instruction

Two cohorts for the Academy for Leadership in Science Instruction were held this summer in Princeton, NJ. Cohort one, comprised of 112 educators and twenty-two K-12 school-based teams, entered into their second year of the Academy curriculum. Cohort two, comprised of 101 educators and eighteen K-12 school-based teams, experienced their first year of the Academy curriculum. The six district-based teams joined the school-based teams for a day and a half at each Academy summer session.

Cohort two attended the Academy from July 20th – 24th. This cohort engaged in science practice which modeled the elements of effective science instruction, analyzed classroom videos to identify elements of effective science instruction and participated in study groups using the National Research Council's award-winning publication, *Ready, Set, SCIENCE!: Putting Research to Work in K-8 Science Classrooms*. Following their participation as adult learners, teams attended "Tool Time" sessions focused on facilitating similar experiences for their colleagues.

Cohort two attended the Academy from August 3rd – 7th. This cohort continued their study of the research on effective science instruction through video analysis, study group participation and engaging in science practice, and new content was added to the Academy curriculum to build the capacity of these leadership teams. The analysis of school culture and School Based Inquiry were introduced into the curriculum, providing two more leadership tools. The analysis of school science culture enabled the teams to identify strengths and areas of improvement in their instructional environments. These strengths or areas needing improvement became topics for examination through School Based Inquiry. The School Based Inquiry process is designed to engage colleagues in examining important issues relative to the improvement of science instruction. Through data collection, analysis and evidence-based decision making, School-based teams will lead their colleagues in making progress toward the goal of improving science instruction for all students.

Curriculum and Peer Teacher Workshops

In June, July, and August, 14 Peer Teacher and Curriculum Workshops were held in Elizabeth and Readington Township, NJ and North Penn, PA, attended by 250 educators from throughout the Partnership. The seven workshops for teachers in grades K-5 were tier-one, or implementation workshops. These introductory workshops are designed for teachers new to a set of instructional materials and provided participants the opportunity to experience each investigation in the modules, with a focus on conceptual development, classroom management techniques, assessment opportunities and alignment to the New Jersey Core Curriculum Content Standards and Pennsylvania State Standards. An implementation workshop for high school Biology teachers was also offered, focused on implementation of a textbook rather than a module, so the workshop included an introduction to the book and its organization and highlighted instructional strategies useful for implementing the text, as well as assessment strategies and alignment to the NJ Core Curriculum Content Standards. This was the Partnership's first Peer Teacher Workshop for high school teachers. Additionally, there were three science and three mathematics Curriculum Workshops for teachers of middle school. These were tier-two workshops, designed for teachers who had experience using the instructional materials in their grade level. The science Curriculum Workshops were supported by the use of concept maps, developed by Horizon Research, Inc. (HRI), as a tool to support purposeful implementation of the science modules. The mathematics Curriculum Workshops were supported by the Developing Mathematical Ideas (DMI) professional development curriculum.

Lenses on Learning

Over the six-year period that the Consortium for Achievement in Mathematics and Science (CAMS) received funding from the National Science Foundation, five cohorts of principals, vice principals, and mathematics supervisors have attended the Lenses on Learning program. Because of the quality of the program and its positive impact on principals as indicated by external evaluation data, CAMS leadership agreed to use local funding to support the expansion of the program to the secondary level. Three facilitators from the Partnership were trained by EDC in the use of the Secondary Lenses on Learning curriculum. These three facilitators will lead 25 secondary school administrators through the curriculum which is aimed at providing administrators with the knowledge and skills they need to effectively support middle and high school mathematics teachers.

The Alliance/Merck Ciencia Hispanic Scholars Program

A total of 102 applications were received for the *Ciencia* Scholars Program which provides four-year awards to Hispanic high school seniors intending to major in a STEM field. The applications were drawn from the Elizabeth, NJ, Brownsville, TX and Los Angeles, CA school districts—districts which have long-standing partnerships with MISE and the National Alliance for Hispanic Health. Each of the awards includes a scholarship, summer laboratory internships and mentoring opportunities. See Table 1 for a list of the *Ciencia* Scholars. In addition, the National Scholarship Program received a total of 109 applications representing sixteen states and Puerto Rico. The top ranked 25 students were selected to receive one-year scholarships. See Table 2 for a list of the *Ciencia* National Scholarship awardees.

Table 1: The 2009 Alliance/Merck *Ciencia* Scholars

NAME OF STUDENT	COLLEGE/UNIVERSITY	DECLARED MAJOR
Alejandro Aguirre Los Angeles Unified School District	Massachusetts Institute of Technology, Boston, MA	Mechanical Engineering
Mark C. García Brownsville Independent School District	Texas A&M University, College Station, TX	Biological Sciences
Roxana García Los Angeles Unified School District	Pomona College, Claremont, CA	Neuroscience
Oscar González Elizabeth Public Schools	New Jersey Institute of Technology, Newark, NJ	Computer Engineering
José P. Llongueras Brownsville Independent School District	University of Texas at Brownsville, TX	Biological Sciences
Edson U. Mancilla Los Angeles Unified School District	Columbia University, New York, NY	Neuroscience
Rosa Mejia Elizabeth Public Schools	Union County College, Cranford, NJ	Biological Sciences
Juan O. Pérez Brownsville Independent School District	University of Texas at Arlington, TX	Mechanical Engineering
Lorena Ramos Los Angeles Unified School District	California Lutheran University, Thousand Oaks, CA	Biological Sciences
Judy N. Rodriguez Elizabeth Public Schools	Massachusetts Institute of Technology, Boston, MA	Engineering

Table 2: The 2009 *Ciencia* National Scholarship Awardees

NAME OF STUDENT	COLLEGE/ UNIVERSITY	DECLARED MAJOR	CLASS	EXPECTED DATE OF GRADUATION
Ricardo Alamillo	University of California, Santa Barbara	Chemical Engineering	Senior	June 2010
Ana L. Cisneros	Columbia University, New York, NY	Biochemistry	Junior	May 2011
Francisco J. Cordero	University of California, Davis	Biochemistry & Molecular Biology	Senior	Jun 2010
Karina Espana	Portland State University, OR	Biological Sciences	Sophomore	June 2012
Gonzalo Esparza	University of California, Santa Barbara	Chemical Engineering	Junior	June 2011
Jeremy Flores	Massachusetts Institute of Technology, Boston, MA	Digital Media	Senior	May 2010
Roberto Flores	University of California, Irvine	Biological Sciences	Sophomore	June 2012
Awndre E. Gamache	Washington State University, WA	Microbiology & General Biology	Senior	May 2010
Ronnie S. García	San Antonio College, TX	Electrical Engineering	Sophomore	June 2012
Joseph Gonzalez	University of Illinois at Urbana-Champaign	Aerospace Engineering	Senior	December 2010
Laura González	Armstrong Atlantic State University, Savannah, GA	Biological Sciences	Junior	December 2011
Jesus O. Guardado	Massachusetts Institute of Technology, Boston, MA	Materials Science & Engineering	Junior	June 2011
Xochitl Henninger	San Francisco State University, CA	Biological Sciences	Senior	December 2010
Jennifer I. Keliher	San Diego State University, CA	Marine Biology	Sophomore	December 2012
Juan A. Llanes	Georgia Institute of Technology, Atlanta	Computer Sciences	Junior	June 2011
Jeremy Morales-Madrigal	Cañada College, Redwood City, CA	Chemical Engineering	Sophomore	June 2012
Hector Olguin	Georgia Institute of Technology, Atlanta, GA	Mechanical Engineering	Junior	June 2011
Santiago Ossa	Seminole Community College, Altamonte Springs, FL	Civil Engineering	Sophomore	December 2012
Anny Reyes	State University of New York at Albany	Biochemistry & Molecular Biology	Junior	May 2011
Francis Rodriguez	University of California, Irvine	Environmental Engineering	Senior	June 2010
Richard A. Rodriguez	University of California, Los Angeles	Microbiology, Immunology & Molecular Genetics	Senior	June 2010
Eduardo Roman	University of Illinois at Urbana-Champaign	Mechanical Engineering	Sophomore	May 2013
Lihana Ruiz	University of Texas at Brownsville	Physics	Junior	December 2011

National Scholarship Awardees (cont.)

NAME OF STUDENT	COLLEGE/ UNIVERSITY	DECLARED MAJOR	CLASS	EXPECTED DATE OF GRADUATION
Rolando Ruiz	California State University, Fullerton, CA	Biological Sciences	Senior	May 2010
Graciela N. Zamudio	University of California, Santa Barbara	Mathematics	Junior	June 2011

Selected Presentation

Dr. Carlo Parravano met over a two-day period in Vancouver, BC with STEM educators from city, suburban and aboriginal schools; and representatives from teacher and governmental organizations, higher education, biotechnology and science-rich firms, and informal science centers to discuss local replication of MISE and provide technical assistance on improving their K-12 outreach programs.

Merck Institute for Science Education

Highlights

Fourth Quarter, 2009

Advisory Board Meeting

MISE's Advisory Board convened on November 19 in Whitehouse Station for the 17th annual meeting. The morning was spent discussing the progress of the Academy for Leadership in Science Instruction. Natalie Kosonocky, Director of Elementary and Secondary Education, Elizabeth Public Schools, Cindy Apalinski, Elementary Teacher, Linden Public Schools, and Janice Sina, High School Teacher, North Penn School District, attended the meeting and provided insight about their experiences at the Academy as members of the faculty and participants on school- and district-based teams. In the afternoon, the Board provided significant and useful input on the new Framework tools developed for the Teacher Workshops and the Partnership external evaluation plan developed by MISE and its partner districts.

The Academy for Leadership in Science Instruction

Two academic year sessions for the Academy for Leadership in Science Instruction were held in Princeton, NJ. On October 22 eighteen Cohort Two school-based teams and six district-based teams participated in Day 6 of the Academy curriculum. Similarly, On October 27 twenty-two Cohort One school-based teams and six district-based participated in Day 13 of the Academy curriculum. A total of two hundred forty participants were involved in the sessions.

On Day 6, school-based teams met to discuss the work they accomplished in their schools since the summer. Concurrently, the district-based teams met to discuss ways to support the school-based teams. School- and district-based teams then came together in district groups to share out each school-based team's progress. The day also provided the opportunity for all participants to engage in a science investigation and analysis. Teams deepened their understanding of the strands of science learning and applied their knowledge to classroom descriptions they had written reflecting their own practice.

On Day 13, school-based teams met in pairs to debrief their experiences of introducing their faculties to the School Based Inquiry process. The teams provided feedback and suggestions to each other on how to advocate for engaging in this classroom research. Concurrently, the district-based teams attended a session in which they were introduced to the School Based Inquiry process. School- and district-based teams then came together to hear a presentation on data analysis given by Dr. Misty Sato. Using data collected from the first cycle of the School Based Inquiry, each team, joined by a district-based team member, then met to analyze their data and make decisions about the next steps in their inquiry cycle. Included in the teams' discussions were the development of a plan for communicating the analysis of the data and advocating next steps in the inquiry cycle to their faculties.

NJ Science Teachers Convention

In October, MISE staff interacted with many of the 1500 New Jersey Science Teachers Convention attendees at its display booth. The Convention, a two-day event, was planned to support K-12 science teachers and supervisors in enhancing the teaching of science. The Convention included approximately 250 teacher-led workshops along with a floor display by about 80 publishers, equipment vendors, and science program support agencies. MISE participated in the Convention as an exhibitor providing one of the floor displays. MISE distributed canvas bags and copies of useful publications to the approximately 1200 visitors to its booth.

Two MISE partnership schools delivered workshops at the Convention. School #2 (Linden) and Hillside High School have teams participating in the Academy for Leadership in Science Instruction. Each team

worked with MISE staff to prepare and present a workshop on their experiences as a professional learning community. Using teacher outreach activities from the Academy, they presented strategies for enhancing science instruction.

Rahway Family Science Day

A Family Science Day event was held at the Rahway site on Saturday, November 14 in the Bond St. cafeteria to engage families with children in grades 3 – 8 in Lunar Astronomy. The participants engaged in three science activities and two presentations. The activities encompassed learning about an Earth / Moon model, lunar cratering, and the phases of the moon. Presentations on the moon's phase changes were given in Starlab and authentic moon rocks supplied by NASA supported the lunar cratering discussion and activity which was presented by a visiting NASA-certified educator. There were over 40 Merck employee volunteers who led and assisted families with the activities. Two sessions were held, 9:00 a.m. – 12:00 p.m. and 1:00 p.m. to 4:00 p.m., with a total attendance of 300 Family members.

Rahway Middle School Family Math and Science Night

Approximately 170 family members participated in this very successful event which focused on forensic science. The event started with a live skit of a robbery that takes place in the school principal's office where the recipe for a new chocolate chip cookie is stolen from the safe. The families are the crime lab scientists who work on four activities which involve fingerprint analysis, acid/base determination, ink chromatography and blood-type analysis. Seven teachers and administrators were actors in the skit. These same teachers, along with 10 National Junior Honor Society students from the 8th grade, volunteered to lead and assist with the event activities. Four school parents assisted with the participant registration.

Consortium for Achievement in Mathematics and Science: Final Report

As part of the Cooperative Agreement with The National Science Foundation (NSF), MISE submitted the Final report to NSF documenting six years of activities for the Consortium for Achievement in Mathematics and Science (CAMS). The report includes the extent of implementation of Year 6 activities as measured against the approved plan; highlights and lessons learned in each of Five Goal areas over the six-year grant period; and a final summative evaluation report from the external evaluator, Horizon Research, Inc. The Final Report was approved within three weeks of submission and represents a culmination of six years of grant funding from NSF totaling \$7,025,426.

Summative Evaluation of the UNCF/Merck Science Initiative

Abt Associates, Inc., conducted an external evaluation to assess the outcomes of the UNCF/Merck Science Initiative (UMSI). Multiple data sources were analyzed to provide an assessment of the extent and nature of the program's benefits for participants. Selected key findings include: the UMSI selects talented and successful individuals; all Undergraduate Fellows and 92% of Graduate Fellows have graduated from their respective degree programs; nearly all Undergraduate Fellows (91%) enroll in graduate school; the UMSI is viewed as a prestigious and selective program; the UMSI provides important benefits to Fellows in the form of financial support, broader understanding of career options, enhanced research skills and capacities and expanded professional networks; and Merck mentors report personal and/or professional gains from their mentoring experience.

National Governor's Association Center for Best Practices

Dr. Carlo Parravano served as a STEM Resource Expert at a conference convened by NGA's Center for Best Practices on December 10 and 11. The goal of the conference was to provide technical assistance to state teams in completing their Race To The Top grant applications. The meeting was designed as mini-consulting opportunities for state teams to help inform their proposals. Thirty one state teams attended and the format generated extensive and productive discussions and provided an excellent opportunity to

disseminate the MISE model of a private-public partnership and lessons learned in establishing and sustaining a high-quality science program.

MISE featured on National Public Radio Program

Dr. Carlo Parravano was interviewed by Glen Busby, the host of *The Best of Our Knowledge*. This nationally syndicated program covers a broad range of education topics and has received numerous grants from the National Science Foundation. A production of WAMC/Northeast Public Radio, *The Best of Our Knowledge* is aired nationwide by NPR affiliates and other networks. During the interview, Dr. Parravano discussed MISE's mission, model for science education, current programs, and future vision.



26th March 2010

Ms Ellen Lambert
Executive Director, Corporate Contributions
Executive VP,
The Merck Company Foundation
Merck & Co., Inc
P O Box 100
Whitehouse Station
NJ 08889-0100
USA

Dear Ms Lambert,

Final Annual Progress and Expenditure Responsibility Report 2001-2009

Please find enclosed the final 2001 - 2009 Annual Progress and Expenditure Responsibility Report for the African Comprehensive HIV/AIDS partnerships (ACHAP). The report consists of

- The summary activity report on programmes and operations for phase I
- The financial statements and Cash flow for ACHAP for the year ended 31 December 2009
- Cumulative spending from year 2001 to 2009
- Expenditure responsibility statements, Capital Equipment Report, Intellectual
- property update and regulatory Assurances Update

On behalf of the ACHAP Board of Directors and Staff I would like to express our heartfelt appreciation for the continued support provided by the Merck Company Foundation in this unique partnership with the Bill and Melinda Gates Foundation to support Botswana's HIV/AIDS Response.

Please contact me if you have any questions or need additional information

Yours sincerely

Dr Themba L. Moeti
Managing Director

Cc:

Merck & Co. Inc.: Brenda Colatrella, Robert Pechinka, Barbara Johnston, Leslie Hardy
Bill & Melinda Gates Foundation: Luke Nkinsi, Manny McBride, Andrea Woods, Rachel Jackson
ACHAP: Francinah Serumola, Harold Van Patten

I. Final Progress Report Summary Information

Grant ID#:			
Report Due Date:	31 st March 2010	Date Range of Activities Reported:	September 1, 2001 – December 2009
Project Title:	African Comprehensive HIV/AIDS Partnerships (ACHAP)		
Organization Name:	African Comprehensive HIV/AIDS Partnerships (ACHAP)		
Principal Investigator/Project Director:			
Last name	Moeti	First name	Themba
Title	Dr	Telephone	+267 3933842
		Fax	+267 3933507
Address			
E-mail	tmoeti@achap.org		
Web site	www.achap.org		
Grant Amount (U.S. dollars):		US\$56,500,000	Project Duration (months): 100
Project End Date:		31st December 2009	
Has this project been granted a no-cost extension?		Yes (to 31 st December 2009)	
Geographic Location(s) of project		Botswana, Africa	
Report Prepared by:	Francinah Serumola Finance Manager	Date Submitted:	30 March 2010
Phone:	+267 3933842		
E-mail	francinah@achap.org		

Purpose of the Grant: Comprehensive Response to HIV/AIDS in Botswana

Public Project Description:

ACHAP is a Public Private Development Partnership between The Bill and Melinda Gates Foundation, Merck & Co., Inc/The Merck Company Foundation and the Government of Botswana. The goal of ACHAP is to reduce HIV incidence and minimize the impact of HIV/AIDS in Botswana through an integrated and focused approach to prevention and treatment. To date the two Foundations have provided a total of US\$106.5 million for ACHAP's activities from 2001 – 2009. In addition Merck and Co., Inc has donated four antiretroviral medicines Stocrin®, Crixivan®, Isentress and ATRIPLA free of charge to the Government of Botswana through December 2009.

ACHAP has supported Botswana's national comprehensive HIV/AIDS response in order to prevent new HIV infections and reduce the morbidity and mortality of HIV/AIDS. ACHAP collaborated with government, civil society, development partners and the private sector to facilitate the development and implementation of strategic initiatives and providing human, technical and financial resources. Activities supported by ACHAP were selected to add value to the achievement of its goals working within the following strategic objectives, to

- Scale up quality of and access to comprehensive HIV prevention services
- Expand HIV counselling and testing capacity including post test services
- Increase coverage of quality HIV/AIDS treatment services for all eligible people
- Increase the capacity of communities to utilize and provide HIV/AIDS services
- Improve ACHAP's institutional capacity to effectively deliver on its strategic objectives
- Strengthen partnerships and build capacities to support the sustainability of the national response

Summary of Expenditure of Foundation Grant Funds:

Grant Payments		Grant Expenditures	
Date of Payment	Amount Received	Period *	Amount Spent**
October 1, 2001	\$2,260,734	October 1, 2001 to December 31, 2001	\$1,630,423
May 9, 2002	\$3,771,742	January 1, 2002 to	
August 15, 2002	\$2,782,076	December 31, 2002	\$4,495,343
May 22, 2003	\$8,094,438	January 1, 2003 to December 31, 2003	\$6,401,470
September 9, 2004	\$10,000,000	January 1, 2004 to December 31, 2004	\$7,701,007
June 30, 2005	\$6,000,000	January 1, 2005 to December 31, 2005	\$6,890,456
November 30, 2006	\$10,000,000	January 1, 2006 to December 31, 2006	\$4,797,181
November 29, 2007	\$7,091,010	January 1, 2007 to December 31, 2007	\$7,139,292
-----	-----	January 1, 2008 to December 31, 2008	\$4,512,691
July 7, 2009	\$6,500,000	January 1, 2009 to December 31, 2009	\$10,452,647
Cumulative Interest , Exchange gains, Other income	\$617,569	January 1, 2009 to December 31, 2009	0
Total:	\$57,117,569	Total:	\$54,020,509
Unspent balance:			
Grant		As of December 31, 2009	\$2,479,491
Interest earned, exchange gains, other income		As of December 31, 2009	\$617,569
Total unspent balance		As of December 31, 2009	\$3,097,060

STATEMENTS OF GRANTEE:

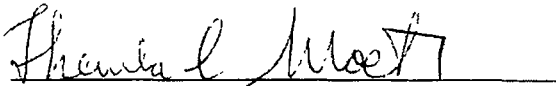
- 1 Grantee hereby confirms that, for the entire grant period, it has made all expenditures of Foundation grant funds, including expenditures of income or currency gains earned on the grant funds, in furtherance of the stated purpose of the grant
2. Grantee hereby confirms that, for the entire grant period, it has complied with all of the terms and conditions of the grant specified in the grant agreement signed by the Grantee and the Foundation dated October 18, 2000
- 3 The Subgrantees listed below received a portion of the Foundation's grant funds from Grantee, and Grantee hereby confirms that it exercised expenditure responsibility over all subgrants made with Foundation funds as required by the Foundation's grant agreement with Grantee:

Sub- Grantees	Grand Total Sub Grantee to	50% prior to 2008 + 100% Yr	Duration (to and from dates)
A : First Round Sub- Grants			
BONEPWA	\$346,980	\$173,490	2003 - 2005
CEYOHO	\$169,675	\$84,837	2004 - 2005
BOCAIP	\$3,352,281	\$1,676,140	2001 - 2006
BONASO – Small Grants	\$1,363,353	\$681,677	2001 - 2006
Light and Courage Centre	\$79,819	\$39,909	2005 - 2006
BBCA - Private Sector Response	\$292,419	\$146,210	2003 - 2006
Dula Sentle Orphan Care	\$280,197	\$140,099	2003 - 2005
COCEPWA	\$711,610	\$355,805	2001 - 2003
KITSO	\$6,733,023	3,691,883	2002- 2009
PSI – Condom Social Marketing	\$3,235,699	\$1,617,850	2003 - 2006
A : Second Round Sub- Grants			
BBCA - Private Sector Response	\$87,520	\$43,760	2006 - 2007
BOCAIP	\$1,393,055	\$392,688	2007 - 2009
Tebelopele	\$254,714	\$144,105	2007 - 2009
BOFWA	\$468,647	\$141,455	2007 - 2009
BONASO	\$128,728	\$48,374	2007 - 2009
BONEPWA	\$40,505	\$24,375	2008 - 2009
YOHO	\$205,251	\$175,468	2008 - 2009
University of Pennsylvania TB project	\$466,564	\$372,264	2007 - 2009
Right to Play	\$346,981	\$296,981	2008 - 2009
PSI –Condoms Interventions project	\$547,023	\$0	2008 - 2008
Gold - MOE	\$136,445	\$136,445	2009 - 2009
Total	\$20,640,489	\$10,383,815	

The Merck Company FOUNDATION
African Comprehensive HIV/AIDS Partnerships, Inc.

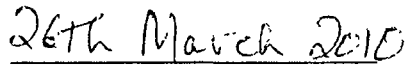
- 4 Grantee's budget (or prior report) indicates that Grantee will purchase (or has purchased) capital equipment with the Foundation's grant funds. Please complete the attached Capital Equipment Report for each item of capital equipment purchased with the Foundation's funds, and confirm, by signing below, that: (A) all capital equipment purchased with Foundation funds continues to be used for the stated purpose of the grant, and (B) such equipment has not been used for any of the following purposes: (i) to carry out propaganda or otherwise attempt to influence legislation, (ii) to influence the outcome of any public election or to carry on, directly or indirectly, any voter registration drive, (iii) to make a grant to any individual for travel, study or similar purposes or to make a grant to any other organization, or (iv) for any purpose other than charitable, scientific, literary or educational purposes.
- 5 The amount of unspent Foundation funds at the end of the year is \$3,097,060 made up of grant income in the amount of \$2,479,491 and other income (interest, exchange, tender sales, and management fees for other projects + other) of \$617,569. This amount will be set aside in a fund to be used as start up capital for ACHAP sustainability beyond phase II funding. Therefore, the grantee hereby confirms that it will spend the remaining amount for the charitable purposes of the Project, and in a manner consistent with the terms of the Grant Agreement.

I declare that I am authorized to sign this report on behalf of Grantee that I have examined the foregoing statements and related attachments, and that to the best of my knowledge, they are true, correct and complete.



Dr. Themba, L. Moeti

Managing Director, African Comprehensive HIV/AIDS Partnerships (ACHAP)



Date

CAPITAL EQUIPMENT REPORT INSTRUCTIONS

Annual Expenditure Responsibility Capital Equipment Report For Fiscal Year Ending December 31, 2009

The following table lists all items of capital equipment with an individual value greater or equal to \$5,000 purchased with Foundation grant funds for ACHAP Operations and programs in the last three years

CAPITAL EQUIPMENT REPORT – ACHAP OPERATIONS

BRIEF DESCRIPTION OF ITEM	DATE OF PURCHASE
2007	Dd/mm/yy
Photo copier Konica Digital 350DN	10/12/2007
2008	
Toyota Corolla 180i exclusive automatic	07/07/2008
Toyota Fortuner 4.0 V6 4x4	16/07/2008
Toyota Corolla 160i Advanced	12/08/2008
Toyota Corolla 160i Advanced	12/08/2008
Toyota Hilux 4.0 V6 4x4 Raider	12/08/2008
Toyota Hilux 4.0 V6 4x4 Raider	12/08/2008
Toyota Corolla 180i exclusive automatic	03/11/2008
Toyota Quantum 10 seater bus	17/11/2008
B211 konica minolta photocopier	13/11/2008
2009	
Reception desk unit	31/08/2009
Server Room Network Equipment	16/12/2009
Distribution Box 1-Fairground Office	16/12/2009
Distribution Box 2 - Fairground Office	16/12/2009
Distribution Box 3 - Fairground Office	16/12/2009
Uninterrupted Power Supply	16/12/2009
Backup server	02/11/2009

CAPITAL EQUIPMENT REPORT – ACHAP PROGRAMS:

BRIEF DESCRIPTION OF ITEM	DATE OF PURCHASE
2007	Dd/mm/yy
Porta cabins - BOCAIP	09/11/2007
CD4 machines - FACS Count instruments	21/03/2007
ARV Clinic renovations – Plateau Clinic, Kasane	13/12/2007
ARV Clinic renovations – Pandamatenga Clinic	13/12/2007
Prefab ARV therapy building – Serowe Mmashoro IDCC	28/05/2007
Burglar bars, leveling of site, electrical connections – Serowe Mmashoro IDCC	08/08/2007
Network cabling – Serowe Mmashoro IDCC	31/08/2007
Prefab ARV Clinic building – Princess Marina IDCC	18/10/2007
Prefab ARV Clinic building – Botshabelo IDCC, Selebi Phikwe	30/07/2007
Prefab ARV Clinic building – Charles Hill IDCC	30/07/2007
Prefab ARV therapy building – Sehithwa IDCC, Ngami	28/05/2007
Prefab ARV therapy building – Maunatla IDCC	14/12/2007
Thatched shelters for waiting patients – Botswelelo Clinic, Francistown	18/10/2007
Thatched shelters for waiting patients – Area W Clinic, Francistown	18/10/2007

CAPITAL EQUIPMENT REPORT – ACHAP PROGRAMS - Continued:	
BRIEF DESCRIPTION OF ITEM	DATE OF PURCHASE
	Dd/mm/yy
Thatched shelters for waiting patients – Gerald Clinic, Francistown	18/10/2007
IDCC Clinic and dispensary – Ramotswa IDCC	21/02/2007
Prefab ARV Clinic building – Nkoyaphin Gaborone	21/02/2007
Youth Centre Building/Multipurpose Hall – Emmanuel Counseling Centre	03/04/2007
Toyota 2700 raider d/cab – BOFWA HCT	28/11/2007
Portable cabin - Kokong	09/11/2007
Portable cabin - Sekoma	09/11/2007
Portable cabin - Kang	09/11/2007
Renovation of Maun Bofwa Centre	18/10/2007
Renovation of Ghanzi BNYC	28/03/2007
PA System – Ghanzi BNYC	23/11/2007
Toyota landcruiser 4.2 diesel - Tebelopele	15/08/2007
Toyota 2.5d double cab, 4*4 with canopy, reserve tank, bulbar - NTBRL	31/08/2007
Toyota 2.5d double cab, 4*4 with canopy, reserve tank, bulbar - NTBRL	21/09/2007
Water deionizer - NTBRL	08/11/2007
18m double wide portable laboratory - Gaborone	18/12/2007
18m double wide portable laboratory - Tsabong	18/12/2007
18m double wide portable laboratory - Palapye	18/12/2007
2009	
Nissan Horse Engine T10 2009 - YOHO	25/02/2009
Extension of Maokatumo Clinic	30/03/2009
Extension of Khurumela Clinic	09/03/2009
Extension of Moyabana Clinic	29/01/2009
Extension of Lotsane Clinic	16/07/2009

II Final Financial Report

Amount received from the Foundation in your last fiscal year, if any:	\$6,500,000
Amount of interest earned on received grant funds in your last fiscal year:	\$130,112

Accounting for Grant from the Merck Foundation

2.1 Grant and Transfer of Funds

The Merck Company Foundation made a grant of \$6, 5 million to ACHAP for the year 2009, to fund operational expenditure. In 2008 the ACHAP Board of Directors agreed not to apply the principle of matching funding by both foundations but to utilize the Bill and Melinda Gates Foundation funding first as this was expiring on the 31st December 2008. As such out of the total cash spending of \$15,457,519 for year 2008 an amount of \$4,512,691 was allocated to the Merck Company Foundation and \$10,944,828 was allocated to the Bill and Melinda Gates Foundation resulting in 100% utilization of the total grant received from the Bill and Melinda Gates Foundation of \$50 million.

Funding for year 2009 was exclusively from the Merck Company Foundation grant.

2.2 Other Sources of Project Support

2.2.1 Other Sources of Project Support. Did the project receive any additional unreported monetary support from outside donors during the last reporting period?

No, we did not receive any other project support.

2.2.2 Are any new sources of additional monetary support expected in the next funding period?

Yes - from both the Bill and Melinda Gates Foundation and Merck Company Foundation to fund ACHAP Phase II activities.

We received \$10million in October 2009 from the Bill and Melinda Gates Foundation, to fund Phase II activities. However, by the end of December 2009, we had not started utilizing the funds as we had not exhausted the funds from the Merck Company Foundation. In addition the Merck Company Foundation no cost extension for the project ran till December 2009. Hence activities during this period were funded with Phase I funds from Merck and the period was also used to close out Phase I projects with a view to beginning Phase II expenditure in 2010.

If you answered yes to either of the above questions, please complete the table below, and provide a brief narrative. Be certain to list any changes in previously reported sources from your last report.

Donor	Amount In \$U.S.	% of project	Committed or Potential	Expected Receipt date
Bill and Melinda Gates Foundation	Approx \$20million	33%	Committed	Year 2011 to 2014

The Bill and Melinda Gates Foundation has awarded ACHAP a grant for Phase II in the amount of \$29,813,113 and has so far disbursed \$10million to ACHAP. The balance of \$20million is payable over the term of the project.

III. Final Narrative Report

A. Background & Rationale:

Botswana's first HIV case was documented in 1985. By the time of the launch of ACHAP in 2000, Botswana was experiencing a severe generalized HIV epidemic with HIV prevalence rates having among pregnant women having risen from an estimated 18% in 1992 when the national HIV seroprevalence surveys among pregnant women began to one of the highest levels globally of 37.5% (confirm in 2001). Health infrastructure was severely overburdened with over 60% of adult medical beds occupied by patients with HIV-related illnesses, and AIDS was the leading cause of mortality among adults, especially the economically active age groups¹. Socio-economic indicators such as life expectancy at birth and infant mortality deteriorated as a result of the HIV burden. There was also a severe shortage of skilled human resources to guide and coordinate technical aspects of the national HIV/AIDS response and deliver the desperately needed HIV clinical care, with no established national treatment programme. It was estimated that less than 5% of patients who needed treatment were receiving it in the private sector. Further there were no established national guidelines for provision of ARV treatment.

Due to Botswana's middle income status much of the traditional development assistance had ceased and to attempt to mount a comprehensive national response, government was forced to deviate funds intended for other development areas to address the epidemic. The Government of Botswana recognized that establishment of partnerships would be critical for an effective response to the epidemic as the

country did not have sufficient resources to respond to an epidemic of this magnitude without external assistance. The Bill and Melinda Gates Foundation and Merck and Co. Inc./The Merck Company Foundation were interested in establishing a partnership in a developing country setting that could be used to demonstrate whether a public private partnership could be used to implement a program that would have a significant impact on a major public health programme. Botswana, with a severe HIV/AIDS epidemic, a committed government, good health and other infrastructure therefore was considered a suitable country to implement such a programme which could be a lesson to be replicated in other settings and the African Comprehensive HIV/AIDS Partnerships was established in the year 2000, and began operations in September 2001. Over the life of this project to 2009 the partners have contributed US\$ 106.5 million (Bill and Melinda Gates Foundation US\$ 50 million and The Merck Company Foundation US\$ 56.5 million) and in addition Merck has donated HIV medicines with a value in excess of US\$ 45 million. Multiple factors contributed to the severity of this epidemic including low levels of awareness at the start of the epidemic, high rates of sexually transmitted infections indicating high levels of unprotected intercourse with the practice of multiple concurrent sexual prevalent within the social-cultural fabric of the country. In addition high mobility of the population, Botswana's location in the center of southern Africa with good road infrastructure thus being a major transport route from southern to central Africa exposed the population to different levels of social and economic interaction that led to the development of sexual networks with minimal protection.

B. Goal & Objectives & Activities:

The programme of the African Comprehensive HIV/AIDS Partnerships (ACHAP) was implemented on the basis of an agreement between the Government of Botswana and ACHAP signed in October 2001 which set forth the scope and objectives of the partnership (as there was no formal proposal document). The objectives of the partnership identified in 2001 were to:

- a) Improve accessibility to comprehensive HIV prevention, care and support across a continuum of care from home to facilities and vice versa,
- (b) Improve access to prophylaxis and treatment of Opportunistic Infections (OI) and to Highly Active Anti-Retroviral Therapy (HAART) in the public sector for all people living with HIV/AIDS (PLWHA) eligible for treatment,
- (c) Strengthen sustainable improvements of health care systems and mitigate the impact of the HIV/AIDS epidemic,
- (d) Support NACA in performing a thorough needs assessment to inform HIV/AIDS prevention and care interventions in all districts of Botswana based on the overall goal of Medium Term Plan II (MTP II) (and) the new Strategic Plan 2001-2005.

Between 2001 and 2005, a number of important achievements were made

- a) Establishment and roll out of the national treatment programme. With ACHAP support the Government of Botswana was able to determine the human, financial, infrastructure and technical resource requirements necessary for the launch and implementation of a national treatment programme as a result of work done jointly by the Government of Botswana, ACHAP and McKinsey and Company. This enabled Government to make informed decisions on the establishment of the national treatment programme – it being estimated that about 330,000 people were infected in the country at the time and that 100,000 of these needed treatment. ACHAP therefore proceeded to support the Government of Botswana in the following ways
 - i Establishment of the national ARV training programme for various cadres of health care workers and lay personnel in a partnership between the Ministry of Health, the Botswana – Harvard School of Public Health HIV/AIDS Institute for Research and Education (The Botswana Harvard Partnership or BHP). This training programme provided the doctors, nurses, lab and pharmacy personnel as well as lay counseling personnel required to deliver and support the programme as it rolled out to all districts of the country.
 - ii Provision of the required infrastructure to provide the necessary space for clinical management of HIV patients and provision of HAART in existing health facilities.

- iii. Provision of the required diagnostic capacity by helping equip the national HIV referral laboratory and supporting expansion of diagnostic capability to district laboratories
- iv. Recruitment of human resources to staff the new ARV program Unit and complement government staff at health facilities
- v. Establishment of a preceptorship programme for training and mentorship of Government personnel

There were also several initiatives of civil society organizations supported through a proposal driven process which included support to networks of people living with HIV/AIDS including the Coping Centre for People living with HIV/AIDS (COCEPWA), The Botswana Network of People Living with HIV/AIDS (BONEPWA), the Centre for Youth of Hope (CEYOH), Botswana Christian AIDS Intervention Programme (BOCAIP), initiatives for orphans and vulnerable children (Light and Courage Centre House of Hope Trust, Dula Sentele), the Botswana Network of AIDS Service Organizations small grants programme for AIDS service organizations, and support for the Botswana government's condom social marketing initiative through PSI. Support for these civil society organizations assisted treatment and prevention efforts by educating and mobilizing communities through community based organizations including those of people living with HIV, as well as HIV mitigation efforts through centres targeting both adults as well as vulnerable children. This period also enabled provision of support to HIV prevention services by supporting safe blood transfusion services as well as the initiation of a youth HIV prevention programme linked to safe blood transfusion services – Pledge 25

Important support for the establishment of the current architecture of the national response was provided to the National AIDS Coordinating Agency through provision of funding and technical support for the development of Botswana's first multi-sectoral National Strategic Framework (NSFI, 2003 – 2009) under the auspices of the National AIDS Coordinating Agency (NACA). This support enabled government to lead and partners to provide support to a cohesive national AIDS strategy with defined interventions in the areas of treatment, prevention, HIV testing and counseling, community mobilization as well as legal and human rights issues. It also provided the framework for ACHAP's own priorities in the years 2005 – 2009, as well as a framework which guided the development and implementation of a national monitoring and evaluation system for the national HIV response, the Botswana HIV Response Information Management System to which ACHAP provided financial and technical support. This system is now the vehicle through which the reports of community based activities, district activities, as well as national level activities are reported to the supreme national coordinating and policy making body on HIV/AIDS (The National AIDS Council) through district multi-sectoral committees, and sector committees led by Ministries, civil society organizations, and the private sector.

Following ACHAP's midterm review in 2004/5 as well as the development of the national strategic framework a decision was made to make the organizations work more focused by development of a programme rather than a proposal driven strategy, and ACHAP's mission and objectives were further refined, as follows

Vision "To be a model public and private development partnership in the global fight against HIV/AIDS"

In operationalising the above vision, ACHAP would support and enhance Botswana's HIV/AIDS response through a comprehensive approach to prevention, care, treatment and support. The partnership would leverage private sector management skills, processes and resources in a government led planning and implementation process. Support would be provided in collaboration with or through Government, and civil society, by facilitating implementation of strategic initiatives by providing human, technical and financial resources.

To achieve this vision ACHAP identified four strategic/focus areas aligned to the NSF

- Scaling up prevention
- Expanding counseling and testing including post test services
- Supporting the national ARV programme
- Supporting advocacy, community mobilisation and people living with HIV/AIDS

To address these focus areas ACHAP defined six strategic objectives:

Strategic Objective 1: Scaling up of quality of, and access to, comprehensive HIV prevention services

Achievements

- 1 Capacity building for and implementation of a national In-school Youth HIV prevention programme that covered teachers and students that has been recognised through a number of channels,
 - won the Highway Africa Media Award for the effective utilisation of new interactive media technologies in disseminating HIV/AIDS information in 2004
 - one of nine finalists in the 2009 Commonwealth Education Good Practice Awards.
2. Expansion and strengthening of the national blood transfusion services and support for the implementation of a youth HIV prevention programme (Pledge 25) linked to donation of safe blood through adoption and maintenance of safe behaviours
- 3 Advocacy for and development of the national plan for scaling up HIV prevention 2008 – 2010 that recommended a minimum package of prevention interventions for Botswana and provides a framework for the design and implementation of prevention interventions
4. Capacity building for the management of STI services as well as development of the national STI partner tracing strategy
5. Support for the development of the national male circumcision strategy as part of the efforts to scale up safe male circumcision in Botswana
- 6 Expansion of the condom education and distribution programme with a focus on strengthening community involvement in education and distribution
7. Training of lay counsellors to support the PMTCT programme as well as expanding services for early infant HIV testing at the district level
- 8 Support for the development of a comprehensive strategy for condom management in Botswana in collaboration with the Ministries of Health, Local Government, PSI Botswana and other partners, as well as an innovative intervention using hair salon owners and their staff in HIV prevention with emphasis on condom education, distribution and storage in four major centres in Botswana
9. Expansion of the youth HIV prevention peer education programme by incorporating HIV prevention communication for change within sport and play activities

Strategic Objective 2: Expansion of HIV counselling and testing (HCT) capacity

- 1) Support for the development and implementation of the Botswana's Routine HIV testing policy at public health facilities, launched in January 2004 which was highly controversial at the time but which later provided a model for what is now very widely practiced and promoted globally as "provider initiated testing". This initiative has contributed to significant increases in the number of people who know their HIV status and has helped reduce stigma around HIV testing and improved access to post test services such as ARV treatment, prevention of mother to child transmission services, and has helped promote the involvement of people living with HIV/AIDS in prevention initiatives available at health facility and community levels. Important successes of the routine HIV testing programme accompanied by ACHAP's support for training of lay counsellors for the PMTCT programme through organisations such as BOCAIP has been the contribution this has made to increased uptake of PMTCT services and ARV treatment services
- 2) Increasing the number of people who know their HIV status – 56% ever tested - through provision of HIV test kits, training of service providers and equipping of laboratories for decentralisation of HIV testing

Strategic Objective 3: Increasing coverage of quality HIV/AIDS treatment services for all eligible people

This was the most significant area of achievement – establishment of the national HIV treatment programme and its roll out to all districts in the country – now almost 90% of people needing treatment

have access to it, (using CD4 count of 250 as one of the eligibility criteria), adherence rates are high, (over 90%) with low levels of acquired drug resistance. In addition, mortality has almost been halved with over 50,000 lives saved. This was the first national public sector treatment on the African continent which has also created capacity for ARV treatment in the private sector through training of private sector providers, and thus standardising approaches

Due to the close association between HIV/AIDS and TB, with between 60 – 85% of TB patients co-infected with HIV and pre ARV treatment programme research data indicating that TB is one of the leading causes of mortality in patients dying of AIDS, in 2007 ACHAP began to provide support to the TB programme. The areas supported were informed by findings of an external review of the TB programme in 2006, targeting areas not supported by other partners. Support was provided to strengthen TB diagnostic capacity at both the district laboratory level and the central TB reference laboratory, through provision of laboratory staff, as well as infrastructure and equipment for 7 district hospital TB laboratories. Staff were also trained on TB infection control in health care settings, and management and coordination capacity for the TB programme at district and central level improved through the placement of coordinating personnel at district level. This support has provided the foundation for improved TB/HIV service collaboration, strengthened TB diagnostic and quality assurance capability, as well as improved capacity for the identification of resistant TB cases including MDR TB.

Strategic Objective 4: Increasing the capacity of communities to utilise and provide HIV/AIDS services, civil society support, district HIV response in seven districts- CBO support

- 1) Training and positioning of lay counsellors to provide HCT services at IDCC's and other health facilities
- 2) Facilitating the formation of support groups for PLWHIV as vehicles for peer support for prevention and treatment services
- 3) Expansion of HIV counselling and testing (HCT) services through support for outreach services by CBOs and NGOs to hard to reach areas and populations
- 4) Decentralisation of CD4 count services to district hospitals to facilitate enrolment of HIV infected persons on treatment

Strategic Objective 5: Improving ACHAP's institutional capacity to effectively deliver on its strategic objectives

As implementation of the project progressed capacity needs were identified which needed to be addressed in order to enable ACHAP to deliver on its mandate. A midterm review was conducted in 2004 which identified areas of focus for ACHAP programmes. An organisational restructuring was undertaken to align capacities with programme needs. In addition training of staff, recruitment of more staff and learning visits were undertaken to help ACHAP bridge its capacity gaps.

Strategic Objective 6: Strengthening and building partnerships to support the sustainability of the National Response

A key element of ACHAP's approach has been the development of partnerships to support programme implementation and achievement of objectives. ACHAP has established partnerships with different sectors including health, education, national HIV/AIDS coordination, and civil society organisations at both national and district levels.

Please also complete the following table with respect to subcontractors paid with Foundation funds

Subcontractors	Total Amount \$U.S.	Duration From/to dates
None	N/A	N/A

C. Accomplishments:

- i) Support for establishment and roll out of the national ARV treatment programme which has achieved arguably the highest coverage rates of people in need of treatment on the African continent (89% of people in need of treatment as of December 2009)
- ii) Support for the development and implementation of an effective coordination framework for Botswana's national HIV/AIDS response the National Strategic Framework (NSF) I (2003 – 2009) and the development of NSF II (2010 – 2016)
- iii) Support for the development and implementation of the monitoring and reporting system for the national multi-sectoral response (Botswana HIV Response Information Management System – BHRIMS) which is the mechanism for reporting of interventions from community and district levels to the national level
- iv) Implementation of a partnership model that has successfully catalysed key components of Botswana's HIV response (treatment and prevention) while building human resource capacity and strengthening the health system in a sustainable way
- v) Support for development of the national plan for scaling up prevention 2008 – 2010 which is now the basis for a strengthened prevention response, informing all partner prevention interventions and which has raised the prevention profile resulting in greater partner and government resource investment in prevention.
- vi) Specific prevention interventions that have had ACHAP support include a campaign on multiple concurrent partnerships, support for the scale up of safe male circumcision services, support for the strengthening of STI services, as well as support for a novel youth HIV prevention intervention (Pledge 25).
- vii) Support for HIV counseling and testing services (in collaboration with government and other partners) which helped increase the number of people who have ever tested for HIV to one of the highest rates on the African continent (56%) and support for the introduction and implementation of routine HIV testing (provider initiated HIV testing and counselling) which increased uptake of treatment and PMTCT services dramatically

D. Impact:

ACHAP's contribution to the implementation of a national anti-retroviral treatment (ART) program – the first in Africa - which has achieved universal coverage and reduced annual HIV/AIDS related mortality by about half, from a peak of about 16,000 deaths annually in 2003 to about 7400 by 2007. According to estimates, the expansion of the ART coverage has averted about 53,000 adult deaths from the year 2000 through the end of 2007ⁱⁱ.

ACHAP support to the implementation of the routine HIV testing, as well as strengthening counseling services for PMTCT through training of lay counselors contributed to improving acceptability and uptake of both prevention-of-mother-to-child transmissions (PMTCT) and ART as evidenced by

- PMTCT enrollment of over 90% and a reduction of mother to child transmission to less than 4%
- ART coverage of almost 90% of those in need of treatment

ACHAP's sustained support for condom promotion and distribution has been associated with a marked increase in condom availability and self-reported use of about 50.2% of condom use at last sex and regular condom use of 43.6% amongst people aged 15 – 49 years (BAIS III). In addition, ACHAP support for the involvement of non-government organizations in the HIV/AIDS response has also supported the delivery of an expanded, multi-sectoral response to the epidemic

ACHAP's support for HIV prevention in Botswana (2001 – 2009), while part of prevention support by many different partners and Government efforts should be seen in the context of a decline in estimated incidence among 15-49 year olds from 5.0% in 1995 to 2.4% by 2007ⁱⁱⁱ. This decline is reflected in the adjusted prevalence of HIV among women aged 15-49 years, which has fallen from 37.4% in 2003 to 33.7% in 2009^{iv}. Among 15-19 year old pregnant women, the decline is most pronounced – with a 40% decline in point estimate since its peak in 1998. Similarly, the prevalence estimates among 20-24 year old pregnant women has shown a 35% decline over the same period (MOH Sentinel Surveillance, 2007)

The delivery of ACHAP support was done in such a way that the support benefited not only HIV/AIDS interventions but also other parts of the health system thus contributing to health system strengthening. E.g staff of different cadres (about 85 positions) provided to support roll out of the ARV service to clinic level in 2007 – 2009, not only helped roll out services to close to over 100 clinics (when combined with government and other partner support) but also strengthened the delivery of other health services in these facilities as they provided general health services as well as supporting HIV treatment. The absorption of these staff by government also provides long term strengthening of the health service

E. Lessons Learned:

The ACHAP programme design involved aligning objectives and funded projects to the National Strategic Framework and the Government of Botswana's priorities. This translated into funding and technically supporting GOB programmes and executing units through mechanisms and approaches where sustainability of programmes and interventions was an important element of the support. E.g. with the national ARV programme human resource support was delivered such that most of this human resource would be absorbed by government, while provision of the service occurred within facilities managed by government. This was mainly achieved through ACHAP's innovative and efficient integration of the GOB annual planning process, agreeing priorities with Government in selection of the projects to be funded consultatively during the annual planning conference and other consultative fora including meetings with Ministries and the Madikwe Forum, an ACHAP-GOB governance structure.

ACHAP played a catalytic role in defining and getting consensus on new initiatives like Routine HIV testing (provider initiated testing and counseling) in health care settings, the antiretroviral therapy programme, and also the adoption of safe male circumcision as an added HIV prevention strategy through a positive and supportive role in discussions at policy level as well as strategy development. Coupled with technical and financial support to such initiatives, these were easily integrated into government operational policy frameworks for scale up. Considering the limited human resource capacity for the HIV/AIDS response in Botswana, ACHAP introduced a model of seconding skilled human resource to key government ministries and NGOs to jump start programmes like the ART programme. This helped achieve speed while ensuring sustainability. In addition, the placement of programme officers at the District HIV/AIDS Coordinator's offices in the partner districts helped with coordination of planning and implementation as well as strengthening partnerships with other players at district and community levels. ACHAP also set up an onsite training programme for healthcare workers, the preceptorship programme. Preceptors educated and provided practical training in AIDS care and prevention for health workers in the country.

ACHAP's Madikwe Forum' which is a forum of Permanent Secretaries of key ministries, NACA Coordinator and the ACHAP Board of Directors has been a unique arrangement and helped review progress, resolve issues and provide strategic guidance in relation to ACHAP supported programme interventions. Other areas that worked well include the speed and flexibility especially in funding programme activities, streamlined procurement processes and strong network with government via our seconded staff and the Madikwe forum, an established and influential network with civil society and districts possessing local knowledge to guide programme design and implementation.

Areas that experienced a number of challenges in the implementation of the grant activities include:

- Slowness of channelling of resources to districts through the government system often experienced delays due to the multiple steps and this affected the speed at which activities were implemented at that level. This had implications for overall outputs of the programme
- ACHAP did not always have the ability to influence some aspects of the strategic planning processes at central and district level where different or innovative approaches to might have had greater impact. This sometimes led to fragmented support with minimal direct impact in some areas like prevention since ACHAP was directly supporting district and central level plans.
- The mode of delivery of support at district level (one programme officer) who did not have good linkages with other ACHAP supported human resources at district level due to the manner of their deployment. This limited ACHAP capacity at district level for optimal delivery of supported

programmes. The above experiences have resulted in a review of the staff deployment model to support district level interventions for the second phase in which it is proposed that cohesive multi-disciplinary teams will cover a number of districts without being embedded in government district offices thus facilitating more rapid transfer of funds and greater ease of working with both the public and non-public sectors

- Establishing functional working relationships with the local private sector to tap into their competencies for programme expansion especially in the area of HIV prevention
- Attracting and retaining skilled personnel for programme interventions in a setting where skilled human resources are in short supply both in the country and in the region across the broad range of technical and managerial skills to support programme implementation.

ACHAP's significant contribution to the ART programme and the outputs of that initiative led ACHAP to start a process of transitioning some of the components of that programme to government and refocus its interventions to scaling up HIV prevention in Botswana. Initial discussions on the transitioning process have indicated that this will need to be managed carefully and in a phased manner to ensure that previous gains are not lost. Our technical and financial support for the development of the plan for scaling up HIV prevention that was launched in 2008 is evidence of ACHAP's recognition of the need to catalyse national efforts for HIV prevention, which has paid positive dividends in raising the profile of and investment of resources in prevention by both government and other partners.

Other organisations attempting similar efforts are increasingly recognising the need to establish functional structural relationships with government systems (at national and district levels), NGOs and other partners to allow for programme interventions to be in sync with national priorities, and have learnt from ACHAP's approaches e.g. in recruitment designed to strengthen government capacities. This approach ensures sustainability of interventions when funding of this nature comes to an end. In addition partners are increasingly recognising the need to address human resource gaps in critical areas of the HIV/AIDS response and provide long and short term support in those areas.

An important challenge recognised is that Government may not always be well placed or ready to develop programmes that address certain critical HIV prevention issues like programmes focusing on most at risk groups such as MSM, sex workers and some other vulnerable populations. There is therefore need to partner with CBOs/NGOs and develop their capacities to deliver on such critical areas.

Working directly with government systems has its own challenges especially for projects that are time bound. Organisations attempting to engage in similar efforts need to appreciate the potential delays in decision making when dealing with entities as large as government, disbursement of resources and reporting that might be experienced. Therefore there should always be an attempt and strategies in place to engage government early enough in discussions related to programming so that time is not lost in the process of decision making. This was one of the lessons learnt in ACHAP's early phase that led to the establishment of the Madikwe Forum and improved linkages horizontally with operational levels in government. Finally, measurement of programme achievements is critical if donors/development partners and indeed host countries are to appreciate the value of such efforts. It is therefore imperative that systems to establish baseline, process, output and impact indicators where appropriate are in place to be able to provide reliable reports on the contribution of such efforts to the overall response.

ACHAP will create opportunities to share programme experiences as well as lessons learned in its first phase through conference presentations and posting of information onto its website. ACHAP has strong working relationships with the media and will use every opportunity to publish key programmatic lessons and experiences in both print and electronic media and present the same at national, regional and international conferences.

F. Challenges:

When the ACHAP grant was first approved, a formal proposal as in the current format was not submitted. Rather as earlier mentioned the agreement between the Government of Botswana, the Bill and Melinda Gates Foundation and Merck & Co Inc./the Merck company Foundation broadly stated the objectives of

the grant and was the basis of approval. It was anticipated that in a partnership with an entity as large as a government and the attendant processes and bureaucracy that may be inherent in such a structure that it would be necessary to set up mechanisms to guide decision making and monitor progress. Hence two structures – the Applications Review Committee on the one hand consisting of Heads of Government Ministries and the ACHAP Board of Directors on the other served as governance structures for the partnership. During the course of the partnership it became apparent that a common entity was needed to improve consensus on priorities, facilitate discussions on strategic approaches as well as provide policy level guidance to ACHAP interventions. In addition it was necessary to have a structure to help address implementation bottle necks and a new governance structure that consisted of heads of key government Ministries, the ACHAP Board of Directors and the Managing Director of ACHAP, the Madikwe Forum was created in 2004.

This structure assisted and strengthened the partnership and established an implementation review committee as a sub-committee of the Madikwe Forum to monitor implementation progress. It was recognised that there were significant capacity constraints with respect to the required clinical and management skills to provide the comprehensive support desired in areas such as ARV treatment, coordination of the response and community mobilization. Human resource support to the Government for the ARV programme and other interventions was provided in a manner where the ACHAP expedited recruitment for most positions which the government was then to absorb into its own structure. This enhanced the sustainability of this form of capacity development. It was also recognised that government procurement processes would be slow and a potential impediment to rapid progress – so to catalyse action ACHAP used its own procurement processes while working closely with government and this enabled rapid roll out of the ARV programme.

Additional challenges noted as the programme progressed was that prevention interventions requiring behavior change at a personal and community level were complex and that the civil society organizations did not have the required expertise to lead this area adequately. Support to these organizations required capacity development to be an integral part of the support.

With the success of the treatment programme it was recognised that prevention interventions were not receiving the required financial support to rapidly reduce the HIV burden or were not of a sufficiently high profile. ACHAP therefore working with the Government supported the development of a plan for scaling prevention (2008 – 2010) which is now the main document guiding prevention interventions in Botswana, and has also informed ACHAP's current work and its second phase proposal.

One of the potential challenges of such projects is often the concern that these may attract skills away from government programmes. A number of staff were recruited from the Government system and joined ACHAP over the years. However ACHAP has also provided considerable technical support by working very closely with government and in many cases appointing the recruited staff as seconded employees working within the Government system. In addition through its human resource support, the human resource capacity of government programmes has often been significantly enhanced with external recruitment.

G. Post-Grant Plans:

If these grant activities are to continue after the grant period how will they be sustained?

A number of grant activities from the 1st phase of ACHAP support (this grant) will continue in the second phase. These include support for the national ARV treatment programme. However this support is to be transitioned to the Government of Botswana over a two year period with scale down on the Merck medicines donation over a five year period. Infrastructure support has already been transitioned as Government has maintained facilities since their hand over. Much of the human resource support granted to the ARV programme has been through project positions the majority of which will be absorbed by the Government of Botswana as part of its sustainability plan for the treatment programme and to ensure that services provided do not cease. It is anticipated that Government will absorb over 90% of the positions supported for the years 2007 – 2009, which absorption should largely be completed by the end of 2010. In addition as part of the transition plan, support for KITSO training programme will also be transitioned.

over two years. In addition ACHAP has commissioned a Models of Care Study to assist the Government of Botswana make evidence informed choices on more cost effective ARV treatment models going forward.

Newer prevention activities such as support for male circumcision provided from 2009 will be part of second phase support. The government of Botswana has also provided its own domestic funding through a project memorandum approved by Government and mobilized support from other sources such as PEPFAR. The government of Botswana has maintained the principle of providing some of its own resources to help sustain activities for both treatment and prevention areas. Similarly support for the TB/HIV interventions will continue as an objective of the second phase grant, while also providing technical support and advocacy which will enable the government of Botswana to better appreciate the need for increased investment in TB.

H. Other Sources of Project Support:

If applicable, did the project receive the anticipated support as outlined in the proposal? Have there been any additional sources of support for this project, including in-kind gifts such as FTE's, lab work, equipment, etc? Detail organization, amount/type, date received.

Other sources of project support received include the grant from the Merck Company Foundation of US\$ 56.5 million, which for seven years of the project (2001 – 2007) provided funding equal to that provided by the Gates Foundation. In addition Merck and co. Inc. provided donations of ARV medicines, initially two (Efavirenz (STOCRIN) and Indinavir (CRIXIVAN)) and later four medicines (with the addition of Raltegravir (ISENTRESS) and ATRIPLA from January 2009). Merck's medicines donation will continue for the next phase being gradually scaled down as the Government of Botswana scales up alternative sources of procurement. The value of the medicines donation at US\$ 66,947,020.67 as at the end of December 2009 has been a major contribution to the success of the treatment programme enabling domestic resources to fight HIV/AIDS to go further.

I. Budget Variances:

Initially both Foundations pledged an equal contribution of \$50million each for a period of five years. The grant was allocated 90% to programs and 10% to operational costs. Given the shortages of skilled human resources and the coordination challenges in the early stages of the project, program implementation and absorption capacity of implementing partners was a challenge for the project. Therefore, programs budget utilization was lower than originally projected as indicated in the table below, while the operational expenditure was consistent with initial projections. However it was also noted that the 10% allocation to operational costs was not going to be enough to fund the line item over the five years of the project, an additional grant application in the amount of \$6.5 million each was submitted to both Foundations in year 2004. At this point the project had large program balances and an extension by a further 4 years was granted for the project to end on 31st December 2009.

The Merck Company Foundation approved and committed to grant an additional amount of \$6.5million for operational costs bringing the total grant to \$106.5million over 9 years. Spending for the project between the two Foundations was agreed by the ACHAP Board of Directors at a \$1 to \$1 with a variation in both years 2008 and 2009.

The summary table below represents the portion of the Merck Foundation grant of \$56.5 million which was not fully utilized by December 2009. A detailed spread sheet is annexed to the report.

The Merck Company FOUNDATION
African Comprehensive HIV/AIDS Partnerships, Inc.

PROGRAM DETAILS	Actual Cash spent - 2001	Actual Cash spent - 2002	Actual Cash spent - 2003	Actual Cash spent - 2004	Actual Cash spent - 2005	Actual Cash spent - 2006	Actual Cash spent - 2007	Actual Cash spent - 2008	Actual Cash spent - 2009	Grand Total Cash Spending	Grant Allocation (Budget)	Unspent Variance
SO1 Prevention - National Support	44,380	570,824	1,571,288	2,420,738	1,800,699	434,253	652,682	683,089	901,839	9,059,792	10,564,743	1,504,951
SO2 HIV Counselling and Testing (HCT)	-	-	-	-	-	203,034	617,654	159,348	84,544	1,064,579	1,440,116	375,536
SO3 ARV & TB Treatment	551,592	2,129,872	2,168,081	1,923,570	1,763,524	1,111,826	2,023,276	619,779	1,723,472	14,014,993	14,441,352	426,359
SO4 Community Mobilisation & Advocacy National Support	295,729	613,231	593,287	1,067,329	788,569	106,133	529,338	214,190	455,471	4,661,277	5,118,311	457,035
SO1-6 District Support	-	-	-	-	356,747	660,607	748,326	327,281	828,126	2,921,087	3,322,706	401,619
SO6&6 Central Support	92,985	554,265	868,464	1,123,099	1,371,312	1,508,967	1,749,054	766,606	4,032,693	12,067,444	10,112,772	-1,954,672
Programs total	984,686	3,868,192	5,201,120	6,534,736	6,078,852	4,024,818	6,320,330	2,760,292	8,026,146	43,789,172	45,000,000	1,210,828
Operational	645,737	627,161	1,200,360	1,166,271	811,604	772,363	818,962	1,762,399	2,426,501	10,231,338	11,500,000	1,268,662
Grand Total	1,630,423	4,495,343	6,401,470	7,701,007	6,890,456	4,797,181	7,139,292	4,512,691	10,452,647	54,020,610	56,500,000	2,479,491

ACHAP, the Botswana Government and the ACHAP Board of Directors allocated the grant to objectives and to projects. Grant allocation over period 2001 to year 2004 was proposal driven. Thereafter ACHAP had to re focus and allocate grant income to the agreed six strategic objectives periodically through Board approval of annual support plans and budgets.

PROGRAM EXPENDITURE 2001 TO 2009

The Merck Foundation grant was allocated to the strategic objectives as per the table above. Cumulative spending for programs amounted to \$43,789,172 and was in line with the allocation of \$45 million utilization over project period.

- National Prevention support - \$ 9,059,792 (17% of overall grant)**
 Spending under this strategic objective was mainly on procurement and social marketing of condoms, blood safety and youth prevention. Cumulative spending was generally within expectation over the period under review.
- HIV Counseling and Testing (HCT) - \$1,064,579 (2% of overall grant)**
 ACHAP started funding this strategy at national level from year 2006, prior to this, testing was funded through sub-grant to NGOs. At national level support was mainly for procurement of test kits to the Botswana Government and putting up porta cabins to store test kits at the districts. Test kits were supplied through the Government of Botswana and its distribution systems, which subsequently supplied both government health facilities as well as three NGOs which provide HIV Counselling and testing services.
- ARV and TB treatment - \$14,014,993 (26% of overall grant)**
 ACHAP phase I had an emphasis on treatment hence the high level of resource allocation to treatment. Spending was mainly on infrastructure, manpower, laboratory equipment, ARV IEC materials and training all of which contributed to the successful roll of ARV treatment nationally. TB treatment was only supported from year 2007 and support will continue through phase II of ACHAP support.
- Community Mobilization and Advocacy - \$4,661,277 (9% of overall grant)**

Funding for this line item was mainly sub grants to national nongovernmental organizations to do testing, counseling, small grants administration and support for coordination of the national response within the private sector.

- **District Support - \$2,921,087 (5% of overall grant)**
ACHAP started the district support and approach from year 2005 to date. Support was mainly in capacity building, technical assistance, infrastructure, IEC and community mobilization.
- **Central Cross Cutting – \$12,415,274 (22% of overall grant)**
This category had total budget of 24% of the grant Actual expenses relate to ACHAP programs management, technical personnel to the Ministries and the National AIDS Coordinating Agency (seconded staff), workshop support, research, programs monitoring, evaluation and documentation. Programs staff expenses were reallocated from Operations to this category from year 2005 Overall spending was 19% higher than the amount allocated.

OPERATIONAL SUPPORT 2001 TO 2009

The allocation of operational support out of \$56.5 million from the Merck Foundation was \$11.5 million. The operational line item covers office expenses, office communication, non program staff travel, general administration and non program personnel & housing. Program travel and personnel costs were charged to operational budget up to year 2004, the Board approved reallocation of all program staff costs to the programs category (to the 90% of the grant) from year 2005 onwards because the 10% operational cost allocation was not enough. Annual spending for ACHAP has always been approved by the ACHAP Board of Directors.

INTEREST, OTHER INCOME AND EXCHANGE - \$617,569

The interest amount generated over the years was not utilized in year 2009. This amount remains available and will be used solely for the charitable purposes of the project, in a manner consistent with the agreement and on approval by the ACHAP Board of Directors.

J. Publications and Data Sharing:

List of key articles published in peer-reviewed journals on ACHAP supported programmes during ACHAP Phase I¹

Title	Lead authors	Journal	Status
Universal Access to ART and HIV stigma in Botswana	Gamper A, Nathaniel S, Robbe IJ	American Journal of Public Health. 2009; Jun;99(6): 968-9	Published
The cost and impact of male circumcision on HIV/AIDS in Botswana.	Lori A Bollinger, John Stover, Godfrey Musuka, Boga Fidzani, Themba Moeti and Lesego Busang	Journal of the International AIDS Society 2009, 12.7doi.10.1186/1758-2652-12-7. 27 May 2009	Published
Scaling up ART treatment capacity Lessons learned from South Africa, Zimbabwe and Botswana	Ojitu B, Makadzange AT, Gaolathe T	Curr HIV/AIDS Rep 2008 May 5 (2) :94-8. PMID 18510895	Published
Estimated HIV Trends and Program Effects in Botswana.	Stover J, Fidzani B, Molomo BC, Moeti T, Musuka G (2008)	PLoS ONE 2008;3(11) e3729.	Published

¹These articles were not all authored by ACHAP but describe programmes and activities that benefited from ACHAP funding and support

Title	Lead authors	Journal	Status
HIV/AIDS Botswana's success comes at steep cost. Science	Cohen J.	Science. 2008 Jul 25;321(5888).526-9.	Published
Strengthening Healthcare Capacity Through a Responsive, Country-Specific, and Training Standard: The KITSO AIDS Training Program's Support of Botswana's National Antiretroviral Therapy Rollout Open AIDS.	Bussmann C, Rotz P, Ndwapi N, Baxter D, Bussmann H, Wester CW, Ncube P, Avalos A, Mine M, Mabe E, Burns P, Cardiello P, Makhema J, Marlink R	Open AIDS J 2008;2:10-6.	Published
Five-year outcomes of initial patients treated in Botswana's National Antiretroviral Treatment Program AIDS.	Bussmann H, Wester CW, Ndwapi N, Grundmann N, Gaolathe T, Puvimanasinghe J, Avalos A, Mine M, Seipone K, Essex M, Degruittola V, Marlink RG.	Journal of AIDS. 2008 Nov 12;22(17):2303-11.	Published
The impact of universal access to antiretroviral therapy on HIV stigma in Botswana	Wolfe WR, Weiser SD, Leiter K, Steward WT, Percy-de Korte F, Phaladze N, Iacopino V, Heisler M.	Am J Public Health 2008 Oct;98(10):1865-71	Published
The Halo Effect	Perry A	Time Magazine 20 September 2007	Published
Two and a half years of routine HIV testing in Botswana	Steen, T W , Seipone, K., Gomez, F.D., et al	J Acquir Immune Defic Syndr 44(4) 484-488, April 1, 2007	Published
Successful introduction of routine opt-out HIV testing in routine antenatal care in Botswana	Creek, T.L., Ntuny, R., Seipone, K , et al	J Acquir Immune Defic Syndr 45(1).102-107, May 1, 2007	Published
Routine HIV testing in Botswana: A population based study on attitudes, practices and human rights concerns	Weiser S, Leiter K, Heisler M, et al	PloS Medicine 2006 3(7); e261	Published
Public-Private Partnerships and Antiretroviral Drugs for HIV/AIDS Lessons From Botswana	Ramiah I and Reich M R	Health Aff March/April 2005 24(2). 545-551	Published

Title	Lead authors	Journal	Status
Initial response to highly active antiretroviral therapy in HIV-1C-infected adults in a public sector treatment program in Botswana.	Wester W , Kim S , Bussman H, Avalos A , et al.	JAIDS 2005,40(3):336-43.	Published
Establishment of a Public Antiretroviral Treatment Clinic for Adults in Urban Botswana: Lessons Learned.	Wester W C , Bussmann H , Avalos A. et al	Clin Inf.Dis 2005, 40: 1041–1044.	Published
The African Comprehensive HIV/AIDS Partnerships – A new role for multinational corporations in global health policy	Distlerath L. and McDonald G.	<i>Yale J. Health Policy, Law and Ethics</i> IV:1, 2004	Published
Partnership for Action: The experience of the Accelerating Access Initiative, 2000-04, and lessons learned In <u><i>The Economics of Essential Medicines</i></u> .	Sturchio, J	Chatham House, London 2004 (For ACHAP specifically see pp. 130-131 and 135)	Published
Introducing ARV therapy in the public sector in Botswana , A case study	DeKorte D., Mazonde P. and Darkoh E.	Perspectives and Practice in Antiretroviral Treatment. WHO, Geneva, 2004; ISBN 92 4 159240 0	Published
"New Dawn" for Botswana: Offering Free HIV Treatment—and Hope.	Stephenson J.	<i>JAMA</i> .2004, 292: 2565.	Published

K. Progress in Achieving a Global Access Strategy:

ACHAP has supported the Government of Botswana's efforts to achieve its universal access targets for both treatment and prevention services. With ACHAP support the proportion of people receiving treatment in Botswana has increased from less than 5% when the public sector programme began in 2002 to over 80% of patients needing treatment in Botswana. These are receiving treatment at no charge in the public sector. ACHAP's support for HIV testing and counseling services as well the routine HIV testing programme, has contributed to increasing the number of people ever tested for HIV from less than 10% of the population in 2001 to an estimated 56% of the population in 2008, one of the highest in the region. ACHAP's support for the national HIV prevention plan and the national safe male circumcision strategy will improve access to prevention services nationally and ultimate reduction of HIV transmission

IV. IP & Regulatory Assurances Checklists

If nothing has changed from your previous submission, check here. ☐ No change (Please still check off the appropriate boxes below)

1. Project has/will involve collaboration with for-profit companies	☐ YES ☒ NO
2. Project will involve use, further development or creation of technology that is or will be subject to intellectual property	☐ YES ☒ NO
3. Report contains proprietary information	☐ YES ☒ NO
4. If you checked "yes" for any of the above 3 statements, have any facts and circumstances changed from your last report/proposal submission?	☐ YES ☐ NO
5. Project has/will involve research using vertebrate animals	☐ YES ☒ NO
6. Project has/will involve research using human subjects	☒ YES ☐ NO
7. Project will involve clinical trials	☒ YES ☐ NO
8. Project will involve use of any of the following substances. • recombinant DNA • pathogens/toxins identified as "select agents" by U S law. http://www.selectagents.gov/agentToxinList.htm • biohazards or genetically modified organisms	☐ YES ☒ NO

IP & Regulatory Assurances Checklists

- Please indicate if there have been any changes since your last report. None
- Each question must be answered by all grantees

Human Subjects Consent Changes since the last update.

Study Title	Date of Approval and Institution approving	Approval Valid up to:	IRB Ref. Number
<i>Botsogo study (Natural History of HIV-1 Subtype C Disease Progression)</i>	(i) HSPH HSC October 08 (ii) HRDC, MoH. 18 December 2007	(i) 14 October 2009 (ii) 17 December 2008	(i) P10366-119/0208COST (ii) PPME-13/18/1/Vol III (51)
<i>Kgatelopele Study (Long-Term Antiretroviral Treatment)</i>	(i) HSPH HSC. 9 July 2008 (ii) HRDC MoH. 14 August 2008	(i) HSPH HSC 12 Jun 2009 (ii) HRDC MoH. 14 August 2009	(i) P16084-101 (ii) PPME-13/18/1/Vol IV(58)
<i>Bomolemo study (Study Evaluating the Efficacy and Tolerability of Tenofovir and Emtricitabine (Truvada™) as the Nucleoside Reverse Transcriptase Inhibitor (NRTI) Backbone As First-Line HAART for Adults In Botswana)</i>	(i) HSPH HSC. 9 Sept 2008 (ii) HRDC MoH. 17 July 2008	(i) 8 Sept 2009 (ii) 16 July 2009	(i) P16470-101 (ii) PPME-13/18/1/Vol IV(22)

Of note approvals are issued for a 12-month period and need to be re submitted for re-approval annually. In addition, the Models of Care project will use clinical data from National ART Programme

Patient data which will be de-identified before being handled by the project staff. Both the HRDC and the HSC have declared this part of the project exempt from a full committee IRB review.

- **IRB/IEC (Institutional Review Board/Independent Ethics Committee) approval:** Indicate the status of your IRB/IEC approval(s). The Foundation reserves the right to review copies of all IRB/IEC approvals for human subjects. If plans for use of human subjects are going to be indefinite at the inception of the grant, indicate the likely venues where such studies are to be conducted, standards to be applied and the approximate timelines.

IRB approvals changes since last update:

Study Title	Date of Approval and Institution approving	Approval Valid up to:	IRB Ref. Number
<i>Botsogo study (Natural History of HIV-1 Subtype C Disease Progression)</i>	(i) HSPH HSC: October 08 (ii) HRDC, MoH: 18 December 2007	(i) 14 October 2009 (ii) 17 December 2008	(i) P10366-119/0208COST (ii) PPME-13/18/1/Vol III (51)
<i>Kgatelopele Study (Long-Term Antiretroviral Treatment)</i>	(i) HSPH HSC: 9 July 2008 (ii) HRDC MoH: 14 August 2008	(i) HSPH HSC 12 Jun 2009 (ii) HRDC MoH 14 August 2009	(i) P16084-101 (ii) PPME-13/18/1/Vol IV(58)
<i>Bomolemo study (Study Evaluating the Efficacy and Tolerability of Tenofovir and Emtricitabine (Truvada™) as the Nucleoside Reverse Transcriptase Inhibitor (NRTI) Backbone As First-Line HAART for Adults In Botswana)</i>	(i) HSPH HSC: 9 Sept 2008 (ii) HRDC MoH: 17 July 2008	(i) 8 Sept 2009 (ii) 16 July 2009	(i) P16470-101 (ii) PPME-13/18/1/Vol IV(22)
<i>The cost effectiveness of HAART for HIV and AIDS in Botswana</i>	15th Oct 09	14th Oct 10	A letter dated 1st Oct 09
<i>HIV Positive and Pregnant Contributing Factors and Outcomes; Continue Review</i>	; Continuing review and inclusion of one additional site and interviewing of HCW	17th Jun 10	Letter dated 12th June 09

Final Progress Report Template

Section B

If you checked yes to any of the statements in Part IV of Section A, please continue with Section B. If all statements are checked no, skip Section B and proceed to complete the Objectives, Activities, and Milestones.

I. Intellectual Property Update – Checklist Questions 1-4

Please answer the questions in this section only if one or more of the following applies:

- Your grant includes intellectual property (IP) elements but you have never filled out this questionnaire before,
- Your grant has new or previously unreported IP elements since your last report, and/or
- The IP used or developed in your original proposal has changed.

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If you are uncertain whether any of the conditions above apply, please feel free to contact your Foundation Program Officer or Coordinator for assistance. **Please provide any narrative needed to answer each question immediately following that question. Use as much space as necessary.**

- 1 Please list new or previously unreported for-profit entities that are collaborating on this project.
NIL.

Start Date of Collaboration	Company Name	Address

- 2 Have any U.S. or foreign patents been issued or patent applications been filed or inventions disclosed on any of the existing technology or related information: (i) on which the program inventions would be dependent, or (ii) that will be further developed as part of the project?

Yes No

If yes, please list below (including the country and date of issuance or filing), and name the inventors as well as the parties (if other than the inventors) who own the patents and/or applications.

- 3 Has your organization acquired any new background technology that will be incorporated into the innovation that you are developing? **Yes No**

If yes, please describe

- 4 If your organization is not the owner of any newly incorporated background technology, do you hold the necessary license rights? **Yes No**

a. If yes, please provide a copy of the license, settlement or other agreement and any applicable nondisclosure agreements.

b. If no, please describe how you expect to have the right to use the background technology.

5. Is any of the new innovation or process considered to be trade secrets or otherwise proprietary but non-patentable information? **Yes No**

If yes, who might claim ownership in the trade secrets? Please recognize that measures will need to be taken to ensure the confidentiality of this type of IP

- 6 With respect to any of the background or newly invented technology, are you or any of your subgrantees or subcontractors bound by any **previously unreported** nondisclosure agreements or covenants not to compete? **Yes No**

If yes, please provide a copy of such agreements.

7. Is any technology the subject matter of any new or previously unreported license, assignment, research, collaboration, manufacturing or distribution agreements or options either now existing or currently being negotiated (and whether or not the grantee is a party to such agreements)?

Yes No

If yes, please list below the type of agreement and the related parties Please be prepared to provide a copy of all related documents upon request.

- 8 Since the previous reporting period, have you conducted any patent search to determine whether possible competing or blocking third-party patents or applications exist with respect to the new background technology (or any technology or products intended to be created or developed through the project)? **Yes No**

If yes, please briefly describe the efforts and results.

- 9 Has your organization or any collaborator received any **previously unreported** notice that the use of any of the background technology may infringe another's intellectual property rights? **Yes No**

If yes, please elaborate below.

- 10 Are you aware of any **previously unreported** potential third-party intellectual property rights, inventions or efforts that could: (a) affect the freedom to practice or use of the background technology or the ability to develop, manufacture, use or sell any technology or products intended to be created or developed through the project or (b) otherwise cause the use of the background technology to infringe a third party's rights? **Yes No**

- 11 Is any of the **previously unreported** added background technology subject to a security interest or lien held by a third party? **Yes No**

If yes, please provide the applicable documentation and identify the parties holding the security interest or lien.

12. Does your organization have all the rights and/or authorizations necessary to use the tools (e g., reagents, equipment etc.) applicable to the project over the next funding period? **Yes No**

If not, how are you going to cope with this to assure a viable global access strategy?

II. Regulatory Assurances – Checklist Questions 5-8

If you answered "yes" to any question numbered 5-8 on the IP & Regulatory Assurance Checklist (Section A.IV) please complete the following section *Please note: Sections 1-3 below apply only to projects involving research Section 2 B may apply to either research or demonstration projects.*

Research Assurances

Proposals that involve humans, animals, or sensitive/regulated research must provide annual updates to assurances and concrete designs to indicate that the project will continue to observe fully the governing regulations that pertain in all sites/host countries. Please consult with your assigned Program Officer if there are any questions regarding how these details should be provided, especially when such activities may not be fully defined until some future point after the inception of the next funding period.

A. Assurances Update NIL.

List the dates of most recent assurance review for any items covered by questions 6-9 If there are multiple protocols, list the date of each approval Please note that no funds may be expended for any covered activity unless it has a current valid approval You also must complete the narrative required in sections V B 1-3.

Study Title	Date of Approval and Institution approving	Approval Valid up to	IRB Ref Number
Botsogo study (Natural History of HIV-1 Subtype C Disease Progression)	(i) HSPH HSC: October 08 (ii) HRDC, MoH. 9 Oct 2009	(i) 14 October 2010 (ii) 17 December 2010	(i) P10366-119/0208COST (ii) PPME-13/18/1/Vol V (89)
Kgatelopele Study (Long-Term Antiretroviral Treatment)	(i) HSPH HSC: 3 June 2009 (ii) HRDC MoH 15 June 2009	(i) HSPH HSC: 12 Jun 2010 (ii) HRDC MoH: 16 June 2010	(i) P16084-103 (ii) PPME-13/18/1/Vol IV (366)
Bomolemo study (Study Evaluating the Efficacy and Tolerability of Tenofovir and Emtricitabine (Truvada™) as the Nucleoside Reverse Transcriptase Inhibitor (NRTI) Backbone As First-Line HAART for Adults In Botswana)	(i) HSPH HSC: 3 Sept 2009 (ii) HRDC MoH 10 May 2009	(i) 9 Sept 2010 (ii) 5 Aug 2010	(i) P16470-103 (ii) PPME-13/18/1/Vol III (309)
The cost effectiveness of HAART for HIV and AIDS in Botswana	(i) HSPH HSC: 30 Sept 2009	(i) 14th Oct 10	(i) 10366 – 120 (ii) PPME – 13/18/1 Vol V (89)
HIV Positive and Pregnant Contributing Factors and Outcomes, Continue Review	(i) HSPH HSC 10 June 2009 (ii) HRDC MoH: 17 March 2009	(i) 17th Jun 10 (ii) 26 March 2010	(i) P16174-104 (ii) PPME – 13/18/1 Vol IV (185)

Types of assurances include:

1. Animal Research NIL.

Please indicate which standards are in force, and the status and date of your most recent Institutional Animal Care and Use Committee (IACUC) approval (or equivalent). Grantees using animals in their research must adhere to the official regulations for animal welfare in their country. For U.S. grantees these are the U. S Government standards. In the case of multinational collaborations, the standards of the most restrictive country must be observed, unless these are incompatible with the laws and regulations governing the primary grantee, in which case follow the laws and regulations governing the primary grantee.

2. Research on Human Subjects

Grantees must adhere to the official regulations for human subjects in their country

Please indicate all studies, funded in whole or part by this grant, involving human subjects in research that have been initiated or terminated since your last report

For each project, indicate the most recent IRB/IEC (Institutional Review Board/Independent Ethics Committee) approval date, and the name of the IRB

For U S grantees or studies leading towards a submission to the U.S. FDA, re-approval must be obtained at yearly intervals. Non-U S grantees must follow their own appropriate national standards. Enrollment data and any interim analyses should be described in the Final Report narrative. If a new study is planned in the upcoming project period, please describe below.

- **Consent Form:** The status of any approval for all informed consent form(s). You may be required to submit a copy of the final approved form(s) before any enrollment of human subjects in a new research protocol can proceed.
- **IRB/IEC approval(s)** The date of final IRB/IEC approval for human subjects at each site. If plans for use of human subjects are indefinite at the inception of the next project period, indicate the expected date of approval and enrollment at each site where such studies are to be conducted.

3. Clinical Trials (If you checked yes to item 8, Section A.IV.)

- If your project includes a clinical trial as a part of the grant, either in the last reporting period or at some point in the next year, then in addition to describing progress for each trial, please indicate in the narrative section any changes in: (1) the trial sponsor, (2) the phase and status of accrual to each trial, (3) regulatory approval strategy and circumstances being followed, (4) any reportable serious adverse events that have occurred, (5) any sites added or dropped to each trial, (6) the date of the most recent meeting of the Data Safety and Monitoring Board (or equivalent), and any interim analyses.
- Are any **previously unreported** disciplinary actions by a regulatory agency pending against any of the principals in the trial? **Yes No**
If yes, please elaborate below.

B. Other Sensitive or Regulated Research

Have any changes occurred in the project involving other areas that are subject to regulation or involve risk in the areas indicated below? **Yes No**

Examples include: hazardous materials, "select agents" as defined under U.S. law, recombinant DNA, and release of modified insect vectors or genetically altered plants or other organisms into the environment. If yes, describe how you addressed the regulatory or other requirements, and on what timeframes any remaining pending required approvals/permits will be acquired. Topics in this area include.

- **Biosafety and protection of the environment** (For example: hazardous materials, recombinant DNA, release of modified insect vectors, genetically altered plants, or other genetically modified organisms into the environment; or use of "select agents" for entities with components in the United States).

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- **Assuring privacy of data linked to personal identifiers.** For entities with components in the United States, indicate if the grantee or organization is considered to be a "covered entity" under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) http://privacyruleandresearch.nih.gov/pr_02.asp
- **At risk populations.** For projects involving reproductive health, sexually transmitted infections, or other work that might involve studies in exploited populations (such as commercial sex workers), please reaffirm your assurance that no funds have been used to support, sponsor or engage in trafficking of persons http://www.unodc.org/unodc/en/trafficking_links.html

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ANNEX 1 - (NOT AUDITED)				
African Comprehensive HIV/AIDS Partnerships (ACHAP)				
Income Statement for 12 month period ended 31 December 2009				
(United States Dollar)				
	Exchange Rate		7.00	
	December 2009	December 2009	Balance on YTD	Actual vs Budget
	Actual	Budget	Budget	%
Income				
Grant - Merck Company Foundation	\$6,500,000	\$6,500,000	\$0	100%
Grant- Bill and Melinda Gates Foundation	\$10,000,000	\$10,000,000	\$0	100%
Interest	\$130,112	\$100,000	-\$30,112	130%
Profit/(loss) on disposal of Fixed Assets	\$15,556	\$0	-\$15,556	0%
Other Income	\$133,420	\$50,000	-\$83,420	267%
Exchange Gain/(Loss)	\$134,952	\$0	-\$134,952	0%
Total Income	\$16,914,040	\$16,650,000	-\$264,040	102%
Operations				
Personnel & Housing	\$1,254,404	\$1,267,121	\$12,717	99%
Office	\$446,117	\$604,042	\$157,925	74%
Travel	\$2,512	\$13,498	\$10,986	19%
Office Communications	\$41,520	\$56,791	\$15,271	73%
Information Technology	\$107,422	\$263,494	\$156,072	41%
Transport	\$59,990	\$57,939	-\$2,051	104%
General Administration	\$178,416	\$274,129	\$95,714	65%
Meetings	\$54,920	\$120,106	\$65,186	46%
PR and Communications	\$40,360	\$76,584	\$36,224	53%
Total Operations	\$2,185,659	\$2,733,704	\$548,045	80%
Programs				
Program Secondment of Clinical Staff/Preceptorship	-0	\$0	\$0	0%
Program Scaling up of Laboratories	538	\$538	\$0	100%
Program ARV Therapy Intro Program	20,239	\$1,962,659	\$1,942,420	1%
Program ARV Infrastructure	251,609	\$295,087	\$43,479	85%
Program KITSO/Harvard Aids Inst	993,234	\$889,035	-\$104,199	112%
Program BHRIMS	80,940	\$80,554	-\$386	100%
Program Capacity Building NACA/GOVT	851,138	\$1,070,396	\$219,258	80%
Program Development & Support	267,919	\$384,062	\$116,143	0%
Program W/shop & Meeting Support	-6,471	\$2,568	\$9,039	-252%
Program Blood Safety & Youth Prevention	26,274	\$34,062	\$7,788	77%
Program Youth HIV Prevention Project	298,218	\$201,049	-\$97,170	148%
Program Research, M&E and Documentation	976,548	\$459,142	-\$517,406	213%
Program Francistown District	138,324	\$111,980	-\$26,345	124%
Program Chobe District	69,975	\$72,298	\$2,323	97%
Program Ngami District	131,018	\$150,688	\$19,670	87%
Program Ghanzi District	77,084	\$99,928	\$22,845	77%
Program Mabutsane District	202,378	\$245,516	\$43,137	82%
Program Serowe/Palapye District	98,955	\$107,873	\$8,918	92%
Program Selebi-Phikwe District	28,196	\$34,769	\$6,573	81%
Program Programme Management	1,457,524	\$1,505,559	\$48,035	97%
Program Integrated National BCC Programs	106,055	\$188,980	\$82,925	56%
Program HIV Counselling and Testing (HCT)	76,153	\$74,476	-\$1,677	102%
Program Sexually Transmitted Infections (STI)	-	\$9,558	\$9,558	0%
Program National NGO Support	410,263	\$340,941	-\$69,321	120%
Program TB Project	286,790	\$597,254	\$310,464	48%
Program Programs Communications Support	4,831	\$13,147	\$8,316	37%
Program MOE Prevention Program	327,492	\$245,272	-\$82,219	0%
Program Male circumcision	54,288	\$106,990	\$52,702	51%
Total Programs	7,229,512	\$9,284,381	\$2,054,869	78%
Grand Total (Ops + programs)	\$9,415,172	\$12,018,085	\$2,602,913	78%
Net Income	\$7,498,869			

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African Comprehensive HIV/AIDS Partnerships (ACHAP)

Balance Sheet as at 31 December 2009

		December 2009 Actual	December 2008 Actual
Fixed Assets	1		
Capital - Transportation NBV		\$115,649	\$154,301
Capital - Office Furniture NBV		\$227,663	\$19,574
Capital - Office Computers NBV		\$68,987	\$26,352
Capital - Office Equipment NBV		\$114,088	\$7,558
Net Book Value		\$526,387	\$207,784
Current Assets			
Cash - Standard Chartered Bank Botswana Pula		\$706,833	\$1,813,939
Cash - Standard Chartered Bank Botswana US\$		\$2,307,068	\$4,699,050
Cash - Standard Chartered Bank New York		\$10,082,858	\$325,938
Petty Cash		\$300	\$267
Cash Advances/Deposits/Prepayments/other Debtors	2	\$72,027	\$290,255
Total Current Assets		\$13,169,087	\$7,129,449
Current Liabilities			
Accruals		\$459,864	\$187,143
Provisions	3	\$407,313	\$1,820,529
Creditors		\$793	\$924
Total Current Liabilities		\$867,970	\$2,008,597
Net Current Assets		\$12,301,118	\$5,120,852
		12,827,505	\$5,328,636
Accumulated Fund B/forward		\$5,328,636	\$21,468,812
Excess Income/Expenditure		\$7,498,869	-\$16,140,176
Accumulated Fund C/forward		12,827,505	\$5,328,636

ACHAP

Notes to Accounts as at 31 December 2009

(United States Dollar)

				December 2009	December 2008
Fixed Assets	1	Cost	Accum Depn	NBV	Actual
Capital - Transportation NBV		\$238,954	\$123,305	\$115,649	\$154,301
Capital - Office Furniture NBV		\$414,913	\$187,250	\$227,663	\$19,574
Capital - Computers NBV		\$242,311	\$173,324	\$68,987	\$26,352
Capital - Office Equipment NBV		\$208,648	\$94,560	\$114,088	\$7,558
		\$1,104,826	\$578,439	\$526,387	\$207,784
Cash Advances/Deposits/Prepayments	2				
Sundry Debtors				\$14,200	\$179,076
VAT Receivable Account				\$57,828	\$111,179
Salaries Control Account				\$0	\$0
Other Debtors & Petty cash clearing				\$0	\$0
				\$72,027	\$290,255
Provisions	3				
Audit Fee Provision				\$3,534	\$9,044
Gratuity Provision				\$237,234	\$780,040
Provision for Staff Bonus				\$166,544	\$0
BOMAID Payable				\$0	\$174
PAYE Tax				\$0	\$0
Sundry Creditors				\$0	\$1,031,271
				\$407,313	\$1,820,529

The Merck Company FOUNDATION
African Comprehensive HIV/AIDS Partnerships, Inc.

ANNEX 2 - SUMMARY												
Program and Operations Expenditure to December 2009												
Projects	2001 Actual Spending	2002 Actual Spending	2003 Actual Spending	2004 Actual Spending	2005 Actual Spending	2006 Actual Spending	2007 Actual Spending	2008 Actual Spending	2009 Actual Spending	US\$ Cumulative Spending to December 2009		
Total Prevention - National Support	\$85,840	\$1,182,068	\$3,109,324	\$4,947,170	\$3,605,024	\$945,407	\$1,286,407	\$3,393,872	\$812,327	\$19,367,440		
Total HCT	\$0	\$0	\$0	\$0	\$0	\$442,022	\$1,217,367	\$815,585	\$76,153	\$2,551,128		
Total ARV and TB Treatment	\$1,066,903	\$4,410,563	\$4,290,281	\$3,931,127	\$3,530,599	\$2,420,542	\$3,987,786	\$3,172,202	\$1,552,410	\$28,362,413		
Total Community & Advocacy	\$572,006	\$1,269,886	\$1,174,019	\$2,181,259	\$1,574,722	\$231,060	\$1,043,300	\$1,096,286	\$410,263	\$9,552,802		
Total District Support	\$0	\$0	\$0	\$0	\$714,213	\$1,438,199	\$1,474,918	\$1,675,113	\$745,930	\$6,048,373		
Total Central Support	\$179,854	\$1,147,778	\$1,718,549	\$2,295,235	\$2,745,385	\$3,285,152	\$3,447,307	\$3,923,700	\$3,632,429	\$22,375,390		
Grand Total Program -Spending	\$1,904,603	\$8,010,295	\$10,292,173	\$13,354,793	\$12,169,943	\$8,762,382	\$12,457,086	\$14,076,759	\$7,229,512	\$88,257,545		
Ops	\$1,249,000	\$1,298,712	\$2,375,297	\$2,383,464	\$1,624,842	\$1,681,501	\$1,614,138	\$1,811,512	\$2,185,659	\$16,224,125		
Grand Total Ops and Programs	\$3,153,603	\$9,309,007	\$12,667,470	\$15,738,257	\$13,794,785	\$10,443,883	\$14,071,224	\$15,888,270	\$9,415,172	\$104,481,670		

The Merck Company FOUNDATION
African Comprehensive HIV/AIDS Partnerships, Inc.

ANNEX 2 - DETAIL	ACHAP PHASE 1 CLOSE OUT TABLE											
Program & Ops Expenditure December 2009 - ACHAP OBJECTIVES	US\$											
Projects	Overall Current Commitments at December 2009	2001 Actual Spending	2002 Actual Spending	2003 Actual Spending	2004 Actual Spending	2005 Actual Spending	2006 Actual Spending	2007 Actual Spending	2008 Actual Spending	2009 Actual Spending	US\$ Cumulative Spending to December 2009	US\$ Unspent Project Balances at December 2009
SO1: Prevention - National Support												
Condom Marketing and Distribution (GOB)	\$4,439,679	\$0	\$0	\$102,813	\$1,075,209	\$394,649	\$161,119	\$295,679	\$1,766,179	\$0	\$3,796,648	\$643,031
Condom Social Marketing PSI	\$3,235,699	\$0	\$0	\$1,125,960	\$1,167,184	\$882,969	\$59,586	\$0	\$0	\$0	\$3,235,699	\$0
Blood Safety & Youth Prevention	\$3,820,922	\$0	\$0	\$320,115	\$1,383,992	\$1,408,906	\$419,264	\$150,376	\$85,948	\$26,274	\$3,794,876	\$26,046
New Youth Prevention Project	\$1,016,667	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$83,650	\$298,218	\$381,868	\$634,799
National Behaviour Change Interventions Training Program	\$353,370	\$0	\$0	\$5,797	\$185,191	\$25,650	\$136,732	\$0	\$0	\$0	\$353,370	\$0
Teacher Capacity Building (TCB)	\$2,691,020	\$0	\$1,002,345	\$467,065	\$643,015	\$343,361	\$135,235	\$0	\$0	\$0	\$2,691,020	\$0
MOE Prevention Interventions	\$999,178							\$134,851	\$284,032	\$327,492	\$746,375	\$252,803
Male Circumcision	\$160,000									\$54,288	\$105,712	\$105,712
Sexually Transmitted Infections (STI)	\$591,102						\$33,472	\$195,872	\$252,398	\$0	\$481,742	\$109,360
Resource Centres at Six District Hospitals	\$1,245,194	\$67,721	\$175,873	\$134,170	\$317,941	\$549,489	Project Complete	\$0	\$0	\$0	\$1,245,194	\$0
Project- Monitor	\$719,455	\$0	\$0	\$619,455	\$100,000	\$0	\$0	\$0	\$0	\$0	\$719,455	\$0
Alcohol Abuse and HIV/AIDS- Starter project	\$408,588	\$0	\$0	\$333,949	\$74,639	Complete	Complete	\$0	\$0	\$0	\$408,588	\$0
Condom Marketing Research Project	\$21,969	\$18,119	\$3,850	\$0	\$0	Complete	Complete	\$0	\$0	\$0	\$21,969	\$0
Integrated National BCC Program	\$1,526,643				\$0	\$0	\$0	\$508,627	\$921,666	\$108,055	\$1,536,348	-\$9,705
Total Prevention - National Support	\$21,129,486	\$85,840	\$1,182,068	\$3,109,324	\$4,947,170	\$3,605,024	\$945,407	\$1,288,407	\$3,393,872	\$812,327	\$19,387,440	\$1,762,046
SO2: HIV Counselling and Testing (HCT)												
Central support for national testing	\$2,880,231	\$0	\$0	\$0	\$0	\$0	\$442,022	\$1,217,367	\$815,585	\$76,153	\$2,551,128	\$329,103
Total HCT	\$2,880,231	\$0	\$0	\$0	\$0	\$0	\$442,022	\$1,217,367	\$815,585	\$76,153	\$2,551,128	\$329,103
SO3: ARV & TB Treatment												
ARV Treatment												
HIV/Aids Training Program (KITSO)	\$6,630,229	\$0	\$1,526,654	\$425,198	\$981,383	\$641,721	\$817,787	\$1,004,554	\$342,492	\$993,234	\$6,733,023	-\$102,794
Clinical Secondment of HIV/AIDS Experts (Preceptorship)	\$3,319,708	\$71,351	\$579,123	\$677,792	\$918,061	\$611,009	\$217,354	\$95,146	\$3,080	\$0	\$3,172,916	\$146,792
Scaling up of Laboratory Capacity	\$2,772,744	\$796,660	\$668,907	\$0	\$53,454	\$810,464	\$306,781	\$61,478	\$151,997	\$538	\$2,850,278	-\$77,534
Advanced HIV/AIDS Care/Mckinsey Project	\$220,493	\$83,223	\$137,270	\$0	Project Complete	Project Complete	Project Complete	\$0	\$0	\$0	\$220,493	\$0
Guidelines of ARV Therapy -Workshop & Printing	\$15,886	\$3,186	\$12,700	\$0	Project Complete	Project Complete	Project Complete	\$0	\$0	\$0	\$15,886	\$0
ARV Implementation Project -IEC	\$2,470,327	\$96,132	\$756,229	\$516,508	\$542,916	\$385,160	\$173,382	\$0	\$0	\$0	\$2,470,327	\$0
ARV Implementation Project -IT	\$1,005,571	\$496	\$99,420	\$120,657	\$434,656	\$67,089	\$283,254	\$0	\$0	\$0	\$1,005,571	\$0
ARV Implementation Project - Health Care Personnel Workers	\$4,206,984	\$0	\$303,693	\$8,448	\$595,487	\$888,118	-\$249,530	\$632,979	\$1,765,810	\$20,239	\$3,965,214	\$241,770
ARV Implementation Project - Mgt Support & CMS Logistics	\$501,315	\$0	\$0	\$228,315	\$273,000	\$0	\$0	\$0	\$0	\$0	\$501,315	\$0
ARV Implementation Project - ARV Team Costs	\$21,500	\$15,855	\$6,246	-\$601	\$0	\$0	\$0	\$0	\$0	\$0	\$21,500	\$0
Health/ARV Infrastructure Development	\$5,270,827	\$0	\$320,351	\$2,313,965	\$132,170	\$127,039	\$871,514	\$1,079,360	\$113,148	\$251,609	\$5,209,165	\$61,672
Total ARV Treatment	\$26,435,584	\$1,066,903	\$4,410,563	\$4,290,281	\$3,931,127	\$3,630,599	\$2,420,542	\$2,873,517	\$2,376,627	\$1,265,619	\$26,165,678	\$269,906
TB Treatment												
TB Treatment	\$2,447,120							\$1,114,269	\$795,675	\$286,790	\$2,196,735	\$250,385
Total TB Treatment	\$2,447,120						\$0	\$1,114,269	\$795,675	\$286,790	\$2,196,735	\$250,385
Total ARV and TB Treatment	\$28,882,704	\$1,066,903	\$4,410,563	\$4,290,281	\$3,931,127	\$3,630,599	\$2,420,542	\$3,987,796	\$3,172,202	\$1,552,410	\$28,362,413	\$520,291

**The Merck Company FOUNDATION
African Comprehensive HIV/AIDS Partnerships, Inc.**

Projects	%	US\$ Overall Current Commitments at December 2009	2001 Actual Spending	2002 Actual Spending	2003 Actual Spending	2004 Actual Spending	2005 Actual Spending	2006 Actual Spending	2007 Actual Spending	2008 Actual Spending	2009 Actual Spending	US\$ Cumulative Spending to December 2009	US\$ Unspent Project Balances at December 2009
S04 Community Mobilisation & Advocacy National Support													
BONEPWA		\$346,980	\$0	\$0	\$117,888	\$146,792	\$82,300	\$0	\$0	\$0	\$0	\$346,980	\$0
CEYHO		\$169,675	\$0	\$0	\$0	\$126,791	\$42,894	\$0	\$0	\$0	\$0	\$169,675	\$0
Faith Based Organisations (BOCAIP)		\$3,352,281	\$297,348	\$693,372	\$77,749	\$1,350,896	\$897,991	\$34,925	\$0	\$0	\$0	\$3,352,281	-\$1
BONASO Small Grants		\$1,363,353	\$37,163	\$284,955	\$402,965	\$331,736	\$309,667	\$16,847	\$0	\$0	\$0	\$1,363,353	\$0
Light and Courage Centre		\$79,819				\$0	\$60,133	\$19,686	\$0	\$0	\$0	\$79,819	\$0
Private Sector Response Coordination		\$299,419	\$0	\$0	\$1,118	\$142,733	\$96,049	\$52,519	\$0	\$0	\$0	\$299,419	\$0
House of Hope Orphanages		\$299,535	\$0	\$0	\$247,729	\$12,374	\$39,432	Complete	\$0	\$0	\$0	\$299,535	\$0
Dula Sentle Orphan Care Project		\$280,197	\$0		\$164,014	\$69,937	\$46,245	Complete	\$0	\$0	\$0	\$280,197	\$0
COCEPWA		\$711,610	\$237,495	\$311,559	\$162,556		Complete	Complete	\$0	\$0	\$0	\$711,610	\$0
NBA/BNYC Basket ball without Borders		\$30,459							\$30,459	\$0	\$0	\$30,459	\$0
National Support Private Sector (BBCA2)		\$87,520						\$76,625	\$10,895	\$0	\$0	\$87,520	\$0
National Support BOCAIP		\$1,730,187						\$776,631	\$776,631	\$612,051	\$4,372	\$1,393,055	\$337,132
National NGO Tebelopele		\$319,777						\$101,592	\$101,592	\$59,812	\$93,311	\$254,714	\$65,063
National NGO BOFWA		\$457,893						\$144,601	\$144,601	\$254,891	\$69,154	\$468,647	-\$10,752
National NGO BONASO		\$333,333						\$9,582	\$9,582	\$75,563	\$43,583	\$128,728	\$204,605
National NGO BONEPWA		\$166,567						\$0	\$0	\$16,130	\$24,375	\$40,505	\$126,062
National NGO YOHO		\$166,667						\$0	\$0	\$25,783	\$175,468	\$205,251	-\$38,584
National NGO Other		\$48,249						\$0	\$0	\$48,054	\$0	\$48,054	\$195
Total Community & Advocacy	11%	\$10,236,623	\$672,006	\$1,269,886	\$1,174,019	\$2,181,259	\$1,674,722	\$231,060	\$1,043,300	\$1,096,286	\$410,263	\$9,652,602	\$883,021
S01-6: District Support													
Francistown District		\$993,673					\$89,126	191874.25	\$204,287	\$318,554	\$136,324	\$942,165	\$57,508
Ghobe District		\$872,188					\$73,704	252420.01	\$191,480	\$148,226	\$69,975	\$733,785	\$138,403
Ngami District		\$1,268,560					\$143,793	305155.9	\$274,959	\$323,846	\$131,018	\$1,178,811	\$79,749
Gharisa District		\$941,813					\$79,399	204259.66	\$264,859	\$172,531	\$77,084	\$798,142	\$143,677
Solebi Phikwe District		\$815,330					\$73,175	99930.75	\$138,682	\$151,378	\$28,196	\$491,362	\$123,968
Mabutsane District		\$1,133,130					\$72,644	150402.68	\$325,645	\$460,885	\$202,378	\$1,211,955	-\$78,823
Serowe/Palape District		\$824,713					\$182,373	234155.5	\$74,976	\$101,694	\$98,555	\$692,153	\$132,560
Total District Support	7%	\$6,646,412	\$0	\$0	\$0	\$0	\$714,213	\$1,436,199	\$1,474,918	\$1,675,113	\$745,930	\$6,046,373	\$697,039

**The Merck Company FOUNDATION
African Comprehensive HIV/AIDS Partnerships, Inc.**

Projects	%	US\$ Overall Current Commitments at December 2009	2001 Actual Spending	2002 Actual Spending	2003 Actual Spending	2004 Actual Spending	2005 Actual Spending	2006 Actual Spending	2007 Actual Spending	2008 Actual Spending	2009 Actual Spending	US\$ Cumulative Spending to December 2009	US\$ Unspent Project Balances at December 2009
SOS46: Central Support													
Program Development & Consultations		\$247,672	\$0	\$0	\$60,310	\$28,396	\$128,108	\$2,895	\$11,296	\$0	\$287,919	\$498,925	-\$251,253
Workshop/Meeting Support		\$969,665	\$0	\$0	\$39,768	\$170,866	\$63,951	\$415,312	\$30,897	\$232,842	-\$6,471	\$947,164	\$22,491
Research, M&E & Documentation		\$3,558,711	\$0	\$0	\$0	\$630,042	\$116,449	\$486,720	\$1,188,495	\$759,805	\$976,548	\$4,158,058	-\$599,347
GOBNACA Cap Building/Tech Support		\$6,213,907	\$0	\$472,812	\$742,514	\$803,667	\$1,001,653	\$942,549	\$949,764	\$1,087,034	\$851,138	\$6,831,131	-\$617,224
Program, Programme management		\$5,062,197					\$1,051,083	\$1,265,978	\$1,106,921	\$1,434,953	\$1,457,524	\$6,316,459	-\$1,254,262
IAC Symposium - Barcelona		\$124,017	\$0	\$123,805	\$212	Complete	Complete	\$0	\$0	\$0	\$0	\$124,017	\$0
IAC Symposium - Kenya 2003		\$74,457	\$0	\$0	\$74,907	-\$450	Complete	\$0	\$0	\$0	\$0	\$74,457	\$0
Proposal Writing Training		\$152,120	\$0	\$151,791	\$329	Complete	Complete	\$0	\$0	\$0	\$0	\$152,120	\$0
Proposal Writing Consultants		\$61,876	\$0	\$50,861	\$11,015	Complete	Complete	\$0	\$0	\$0	\$0	\$61,876	\$0
Needs Assessment		\$249,577	\$179,854	\$52,468	\$7,622	\$9,633	Complete	\$0	\$0	\$0	\$0	\$249,577	\$0
Harvard Documentation of ACHAP as a PPP		\$130,310	\$0	\$0	\$32,470	\$65,370	\$32,470	\$0	\$0	\$0	\$0	\$130,310	\$0
Retrospective study of 1st 18months of ARV therapy		\$168,209	\$0	\$0	\$123,183	\$45,026	Complete	\$0	\$0	\$0	\$0	\$168,209	\$0
NACA Resource Centre		\$42,206	\$0	\$0	\$20,883	\$9,110	\$12,213	\$0	\$0	\$0	\$0	\$42,206	\$0
Strategic Planning Process- NACA Cap Building		\$325,196	\$0	\$250,159	\$73,136	\$1,901	Complete	\$0	\$0	\$0	\$0	\$325,196	\$0
NACA Strategic Plan Implementation		\$412,610	\$0	\$0	\$84,782	\$233,723	\$94,105	\$0	\$0	\$0	\$0	\$412,610	\$0
BHRIMS - National M & E System		\$1,750,186	\$0	\$0	\$421,513	\$278,126	\$34,984	\$81,803	\$59,208	\$304,661	\$80,940	\$1,261,234	\$488,952
Ministry of Education Coordinators		\$213,366	\$0	\$46,882	\$0	\$0	\$167,484	\$0	\$0	\$0	\$0	\$213,366	\$0
Coordinators		\$227,916	\$0	\$0	\$25,905	\$19,827	\$42,884	\$89,896	\$26,148	\$23,257	\$0	\$227,916	\$0
Programs Communications Support		\$185,546							\$47,178	\$74,396	\$4,831	\$126,405	\$59,141
Human Resources for Health Plan		\$55,811							\$27,401	\$26,752	\$0	\$54,154	\$1,657
Total Central Support	22%	\$20,228,646	\$179,854	\$1,147,778	\$1,718,549	\$2,296,235	\$2,746,385	\$3,285,162	\$3,447,307	\$3,923,700	\$3,632,429	\$22,376,390	\$2,149,845
Subtotal Program Support	100%	\$90,000,000	\$1,904,603	\$8,010,295	\$10,292,173	\$13,354,793	\$12,169,943	\$8,762,382	\$12,457,086	\$14,076,759	\$7,229,512	\$88,257,645	\$1,742,465
Flexi Fund / Contingency	0%	\$90,000,000	\$1,904,603	\$8,010,295	\$10,292,173	\$13,354,793	\$12,169,943	\$8,762,382	\$12,457,086	\$14,076,759	\$7,229,512	\$88,257,645	\$1,742,465
ACHAP APPROVED PROGRAMS	100%	\$16,500,000	\$1,249,000	\$1,298,712	\$2,375,297	\$2,383,464	\$1,624,842	\$1,681,501	\$1,614,138	\$1,811,512	\$2,185,659	\$16,224,125	\$276,875
Operational Costs		\$105,500,000	\$3,153,603	\$9,309,007	\$12,667,470	\$16,738,257	\$13,794,785	\$10,443,883	\$14,071,224	\$15,888,270	\$9,415,172	\$104,481,670	\$2,018,330

The Merck Company FOUNDATION
African Comprehensive HIV/AIDS Partnerships, Inc.

Annex 3

ACHAP

Cash Flow Reconciliation 2001 to 2009

(In US\$)

YEAR 2001 to 2008 Reconciliation	TMCF	GATES PHASE 1	GATES PHASE 2	Other Income	OVERALL
Grants Received in 2001	\$2,492,186	\$2,260,734			\$4,752,920
Interest Income 2001				\$10,123	\$10,123
Other Income 2001				(\$59,957)	(\$59,957)
Grants Received in 2002	\$6,553,819	\$6,553,818			\$13,107,637
Interest Income 2002				\$27,104	\$27,104
Other Income 2002				(\$57,205)	(\$57,205)
Grants Received in 2003	\$8,094,438	\$8,094,438			\$16,188,876
Interest Income 2003				\$61,423	\$61,423
Other Income 2003				(\$152,029)	(\$152,029)
Grants Received in 2004	\$9,816,126	\$10,000,000			\$19,816,126
Interest Income 2004				\$258,850	\$258,850
Other Income 2004				(\$154,250)	(\$154,250)
Grants Received in 2005	\$6,000,000	\$6,000,000			\$12,000,000
Interest Income 2005				\$667,154	\$667,154
Other Income 2005				(\$753,623)	(\$753,623)
Grants Received in 2006	\$10,000,000	\$10,000,000			\$20,000,000
Interest Income 2006				\$526,969	\$526,969
Other Income 2006				(\$365,425)	(\$365,425)
Grants Received in 2007	\$7,043,431	\$7,091,010			\$14,134,441
Interest Income 2007				\$806,084	\$806,084
Other Income 2007				(\$156,256)	(\$156,256)
Grants Received in 2008	\$0	\$0			\$0
Interest Income 2008				\$443,401	\$443,401
Other Income 2008				(\$695,307)	(\$695,307)
Total cash Received (2001-2008)	\$50,000,000	\$60,000,000	\$0	\$407,067	\$100,407,067
Total Expenditure (P/L) (Ops + Prog Exps)	\$44,317,640	\$50,749,778		\$0	\$95,067,418
Less Depreciation	(\$293,736)	(\$293,736)		\$0	(\$587,473)
Add Capital Expenditure (B/S)	\$397,193	\$397,193		\$0	\$794,386
Add Drs increase	\$145,508	\$145,508		\$0	\$291,016
Less Crs increase	(\$998,742)	(\$998,742)		\$0	(\$1,997,484)
Total Spent (Actual Cash)	\$43,667,863	\$50,000,000	\$0	\$0	\$93,667,863
Increase Bank and Cash balance at 31/12/08	\$6,432,137	(\$0)		\$407,057	\$6,839,194
Bank and cash balance b/forward 2001	\$0	\$0		\$0	\$0
Bank at Cash Balances at 31/12/08 (B/S)	\$6,432,137	(\$0)	\$0	\$407,057	\$6,839,194
YEAR 2009 Reconciliation	TMCF	GATES PHASE 1	GATES PHASE 2	Other Income	OVERALL
Grants Received in 2009	\$6,500,000	\$0	\$10,000,000		\$16,500,000
Interest Income				\$130,112	\$130,112
Other Income				\$283,928	\$283,928
Total cash Received	\$6,500,000	\$0	\$10,000,000	\$414,040	\$16,914,040
Total Expenditure (P/L) (Ops + Prog Exps)	\$9,211,843	\$203,528		\$0	9,415,371.72
Less Depreciation	(\$183,871)	\$0		\$0	(\$183,871)
Add Capital Expenditure (B/S)	\$480,697	\$0		\$0	\$480,697
Add revaluation of FA	\$21,778	\$0		\$0	\$21,778
Less Drs decrease	(\$218,227)	\$0		\$0	(\$218,227)
Add Crs decrease	\$1,140,627	\$0		\$0	\$1,140,627
Total Spent (Actual Cash)	\$10,462,647	\$203,528	\$0	\$0	10,666,175
Increase Bank and Cash balance at 31/12/2009	(\$3,952,647)	(\$203,528)	\$10,000,000	\$414,040	\$6,257,866
Bank and cash balance b/forward 2008	\$6,432,137	(\$0)	\$0	\$407,057	\$6,839,194
Bank at Cash Balances at 31/12/09 (B/S)	\$2,479,491	(\$203,528)	\$10,000,000	\$821,097	\$13,097,060
Summary of Grants Received	TMCF	GATES PHASE 1	GATES PHASE 2	Other Income	OVERALL
2001	\$2,492,186	\$2,260,734		(\$49,834)	\$4,703,086
2002	\$6,553,819	\$6,553,818		(\$30,101)	\$13,077,536
2003	\$8,094,438	\$8,094,438		(\$90,606)	\$16,098,270
2004	\$9,816,126	\$10,000,000		\$104,600	\$19,920,726
2005	\$6,000,000	\$6,000,000		(\$86,469)	\$11,913,531
2006	\$10,000,000	\$10,000,000		\$161,544	\$20,161,544
2007	\$7,043,431	\$7,091,010		\$649,828	\$14,784,269
2008	\$0	\$0		(\$251,905)	(\$251,905)
Cumulative to Dec 2008	\$50,000,000	\$60,000,000	\$0	\$407,067	\$100,407,067
2009	\$6,500,000	\$0	\$10,000,000	\$414,040	\$16,914,040
Cumulative other Income to Dec 2009 allocated	\$617,569	\$203,528	\$0	\$0	\$821,097
Overall	\$57,117,569	\$60,203,528	\$10,000,000	\$821,097	\$117,321,097
Spent to Date on Ops & Programs (2001-2009)	\$54,020,509	\$50,203,528	\$0	\$0	\$104,224,038
Unspent cash C/forward to 2009 activities	\$3,097,060	(\$0)	\$10,000,000	\$821,097	\$13,097,060

¹ Case Study: Country enhanced monitoring and evaluation for anti-retroviral therapy scale up. Analysis and use of strategic information in Botswana. World Health Organization, WHO, NACA.

¹¹ Stover J, Fidzani B, Molomo BC, Moeti T, Musuka G (2008). Estimated HIV Trends and Program Effects in Botswana. PLoS One 3 (11):e3729. Doi:10.1371/journal.pone.0003729

¹² National AIDS Coordinating Agency, Botswana 2008; HIV/AIDS in Botswana; Estimated Trends and Implications based on Surveillance and Modeling

¹³ Ministry of Health 2009; Botswana Second Generation HIV/AIDS Surveillance Preliminary Results (Department of HIV/AIDS Prevention and Care)

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PSCRIPT Page Separator

O'Sullivan, Barry J. (TAX)

From: Ehren, Stijn
Sent: Tuesday, August 03, 2010 4:07 PM
To: McGovern, Robert B; Henningsen, Gary A ; O'Sullivan, Barry J (TAX)
Subject: RE: Netherlands

Sensitivity: Confidential

Thanks Bob -

The Dutch announcements and reactions have taken a lot of time and attention

Happy to provide you with a more accurate update from the Dutch Supervisory Board

I have represented the interests of the shareholder, however I was outnumbered by the other two members

Will be in WHS tomorrow - possible we can catch up after the TTI session

Regards - Stijn

From: McGovern, Robert B [mailto:robert_mcgovern@merck.com]
Sent: Tuesday, August 03, 2010 03:55 PM
To: Ehren, Stijn; Henningsen, Gary A.; O'Sullivan, Barry J. (TAX)
Subject: FW: Netherlands
Sensitivity: Confidential

From: Elliott, Alastair
Sent: Tuesday, August 03, 2010 8:32 AM
To: McGovern, Robert B
Subject: Netherlands
Sensitivity: Confidential

Bob
This is an article in the local papers in Oss today. Not the best translation but hopefully the basic message is clear
Regards
Alastair

"Merck can not ignore SB Organon
by Henk Snijders Tuesday, August 3, 2010 | 8 47 | Last updated: Tuesday, August 3, 2010 | 11 00

The stubborn Supervisory Board (SB) of Organon is not simply sent home. This suggests consultant Peter Wakkie of the Supervisory Board. Ox in the case because there a so-called tier company.

"If the shareholders, in this case the U.S Merck, the Supervisory Board wishes to dissolve, this thirty days' notice and the works should be asked for advice And I do not agree with the Board that the resignation of the commissioners.

"Furthermore, dismissal of the commissioners volgens Wakkie only under strong arguments or malfunction "Not if the Supervisory Board, as is the case, simply does the work for which it is set "

This gives the employees of MSD Wakkie Organon hope that the announced dismissal of 2175 employees and moving the research department at least temporarily unable to continue.

The Supervisory Board has drawn the board of the company this weekend informed consent is not required to provide There are in the eyes of the Supervisory Board no arguments that justify the mass dismissal. Certainly not, because a healthy company. Organon Bioscience in 2009 made a net profit of 460 million euros, shows the registered accounts.

These data also show that the Organon Holding in 2008 had a capital of three billion

The American parent company Organon has two options, in the eyes of Wakkie "Whether the company shall abide by the opinion of the Supervisory Board or it comes with another plan, which this time they first consult with the Supervisory Board and OR "

Furthermore, the works at the Enterprise Chamber in Amsterdam, stepped to the decision to destroy The TA proposes that the Americans do not have responded to the rules of Dutch law.

Wakkie a supervisor suspects that the U S decision and the local managers have entrusted to run it While she completely ignores the Dutch rules.

Wakkie adviser gets to compare an issue in 2003 played in Corus, the former Hoogovens in IJmuiden. That decided the top of the English parent company of the Dutch branch of the aluminum division was sold and the proceeds would flow into the English treasury. "The Commissioners of the Dutch saw nothing in part because the proceeds would go straight to England "

Then came the Corus board the Enterprise to the commissioners from their duties to relieve The judges did not accept this because they thought that the SB had acted according to its own responsibility

Chief Commissioner Paul Bronze Organon BioSciences Netherlands has no response from the Executive of MSD Organon received "We do not insist on a quick response. The Dutch manager, in the person of Hans Kortlever should naturally be able to orient our thinking "Bronze further assumes that the issue should Kortlever feedback with the American bosses.

At the end of the afternoon MSD Netherlands yesterday a detailed statement circulated, even among the staff, which the company claims that they are all forms of the Dutch participation law and respects the OR and the Supervisory Board the plans that lead to redundancies will further discuss . A spokesman says that the leading U S decision, but that it can be looked at how this plan can be tolerable for the Netherlands, including the establishment of a Life Science Park "



China- MSD HIV/AIDS Partnership (C-MAP)

2009 Annual Expenditure Report

March 2010

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Background

Memorandum of Understanding – To address the HIV/AIDS epidemic in China, in May of 2005, the Chinese government and Merck & Co., Inc. signed a Memorandum of Understanding to launch a public-private Comprehensive HIV/AIDS Prevention and Control Cooperative Project, known as "China-MSD HIV/AIDS Partnership (C-MAP)". Merck has committed 30 million USD in this partnership, while the Chinese government, led by the Ministry of Health (MoH), is facilitating the development and implementation of the project. This is the first large-scale public-private partnership in China in the fight against HIV/AIDS.

Governance Structure – An Oversight Committee (OC) comprising of key members from relevant parties was established to set the strategic directions, evaluate progress, approve Project Annual Work Plan, review and approve progress reports and findings, and advocate for the Project. In the light of decisions made at the C-MAP Oversight Committee meeting on December 21, 2006, the NCAIDS, China CDC, under the leadership of the MOH, drafted a new C-MAP Governance Structure. This new C-MAP Governance Structure was released by the MOH on September 17, 2007. According to the new Governance Structure, one National Project Office was established in Beijing to be responsible for day-to-day management of the Project. Two other Project Offices locates in Chengdu City and Xichang City, Sichuan Province, to manage local implementation respectively at provincial level and prefecture level.

Objectives – C-MAP aims at mitigating the public health impact of HIV/AIDS and preventing the HIV/AIDS epidemic from having a potentially devastating impact on China's economic growth and stability through developing a comprehensive, efficient, measurable and replicable model to support the Chinese Government to implement its HIV/AIDS control strategies and action plans.

Strategies – With the agreement of both parties, C-MAP developed following 6 strategies: 1) Provide training and education on HIV/AIDS to raise awareness & reduce discrimination among general population, 2) Deploy integrated risk-reduction approaches to decrease HIV transmission in high-risk and vulnerable population, 3) Establish a comprehensive service network to provide PLHA with successive treatment, care & support services, 4) Provide support and social relief to orphans and families affected by HIV/AIDS to reduce the negative impact of HIV/AIDS, 5) Build the capacity of professional staffs & organizations and develop new anti-HIV/AIDS strategies & techniques to ensure optimal, sustainable, long-term development on responding to HIV/AIDS, 6) Strengthen HIV surveillance, monitoring & evaluation and data analysis to track program implementation, evaluate outcomes, summarize and replicate best practices.

Target Areas – C-MAP started up 3 counties in Liangshan Prefecture of Sichuan Province, which is home to the largest group of the Yi ethnic minority and is hard hit

by HIV/AIDS epidemic. As C-MAP faced difficulties of big mountainous terrain, differences of Yi culture & language, poverty, illiteracy, highly-mobile population, limited resource & infrastructure, incapacities of healthcare workers and expanding HIV transmission mainly driving by intravenous drug users (IDU) during its implementation, this Project is believed to be the most challenging project in the world. To achieve broader impact, the Project expanded to cover 62 counties/districts in Sichuan Province in 2008 and may expand to other locations in China consistent with the goals of the Project, Chinese government priorities, and mutual consent by the Parties.

Beneficiaries - Beneficiaries of C-MAP include people living with HIV/AIDS and their families, intravenous drug users (IDU), female sex workers (FSW), men who have sex with men (MSM), sex transmitted disease (STD) clinic outpatients, local populations with potentially high-risks behaviors, pregnant women, youth, health workers, the general population, etc.

People Involved - C-MAP collaborates closely with around 11,500 people working in 1,600 organizations/institutions/government departments such as Chinese governments at all levels of HIV/AIDS Working Committees and health administration departments (ex. MOH, BOH), CDCs, medical and health institutes, civil societies, international organizations, grassroots health care workers, beneficiary groups such as people living with HIV/AIDS (PLHA), etc.

I. C-MAP Governance & Operations

(1) Governance

According to the new C-MAP Governance Structure released by the MOH on September 17, 2007, C-MAP reorganized its project team members and established 3 Project Offices early 2008 to implement initiatives respectively relating to national, provincial, prefecture levels.

National Project Office is base in Beijing City and supervised by National Center for AIDS/STD Control and Prevention (NCAIDS) according to the assignment of MOH. Sichuan Project Office is base in Chengdu City and supervised by Health Department of Sichuan Province. Liangshan Project Office is base in Xichang City and supervised by Bureau of Health, Liangshan Prefecture.

C-MAP Annual Work Plan is developed by the 3 Project Offices based on the input from the 3 levels of health authorities, target county CDC officials and experts from relevant fields. The National Project Office is responsible to consolidate the work plan and get review and approval from C-MAP Oversight Committee. After the approval

of this Work Plan, the 3 Project Offices need to work with respective implementing agencies at the 3 levels to develop action plan for each initiative. The 3 Project Offices should also provide needed trainings to implementing agencies, and monitor initiative progress, communicate key issues and needed support to respective health authorities.

The National Project Office is responsible to consolidate information of all initiatives of the 3 Project Offices and reports project progress and expenses to Beijing Rep. Office of C-MAP Foundation, NCAIDS and MOH on quarterly basis. The Beijing Rep. Office should submit annual project report and finance audit report to MOH and Ministry of Civil Affairs (MOCA) every March and also submit Annual Expenditure Report to Merck Foundation every April.

(2) Oversight Committee Meeting

The 5th C-MAP Oversight Committee meeting was held on March, 3rd, of 2009 in Beijing to review:

1. C-MAP 2008 project progress and financial summary
2. The implementation of the 9 major decisions in 2008 OC meeting
3. The second half of 2009 and 2010 strategies and key activities
4. 4 key proposals

2009 Key Proposals for OC Meeting Deliberation and decisions made

Proposal 1: The Financial year and the funding cycle: The OC meeting agreed to adjust the project financial year and the funding cycle. It was recommended that the annual project implementation is consistent with the Foundation financial year and natural year; a 1.5 year (2009.7-2010.12) workplan is developed, and a half-year based funding allocation instead of a quarterly basis funding allocation.

Proposal 2: Taking into account the HIV heavy epidemic in Butuo County, Butuo county will be listed as a key county for HIV/AIDS control. It was aimed at reducing the new infection and taking a comprehensive response. It was agreed that it is necessary for C-MAP to have an additional Butuo budget as one part of C-MAP 2009-2010 biannual plan. The additional Butuo budget should support Butuo Lab capacity building, set up screening lab at Butuo county hospital, set up HIV confirmation lab and CD4 test equipment allocation.

Proposal 3: Application for human resource allocation in the 52 project counties, Liangshan. It was agreed that human resources would be allocated in 52 project counties of C-MAP. To face the big challenges of healthcare human resources, the human resource allocation plan was presented in OC meeting. It is planned that an open recruitment of 185 full-time staff in Sichuan province, including 115 people in Liangshan Prefecture, and 70 people in Sichuan new project counties. The total

estimated budget is 3.612 million RMB.

Proposal 4: Application for equipping 36 service vehicles in 35 new project counties and 1 vehicle for Liangshan CDC. The cars will improve transportation capabilities for C-MAP project team members to implement the project in difficult terrains. Utilization of the 35 new vehicles will substantially improve the access to HIV care and services for people in need of program assistance in difficult-to-reach regions of Sichuan Province. These vehicles will be used for various activities, including HIV mass education, interventions on at-risk populations, HIV testing & counseling, diagnosis & treatments, care & support, capacity building, monitoring & evaluation, HIV surveillance, etc. The total budget is up to 4.295 million RMB.

(3) Update the Project Management Guidance for Implementing Agencies

To tailor and improve the project management, the National Project Office updated the Project Management Handbook. It is included three parts, including project management, financial management and monitoring & evaluation in Sept. 2009. This handbook describes standard processes and requirements in the areas of project management, finance management, monitoring & evaluation, and attaches all templates of required reports based on the previous practices and implementation.

(4) Update the Administration Guidance for the 3 Project Offices

The National Project also updated the Administration Handbook in Sept. 2009 for the 3 Project Offices to have a clear role & responsibility for team members and provide clear working processes and guidance in the areas of office expenses, traveling expenses, activity expenses, procurement, communication, employee performance management and reporting...etc.

(5) C-MAP Beijing Representative Office

After successful registration for Beijing Representative Office in the MOCA on Sep. 18th 2007, C-MAP has had independent fund management and optimized payment flows thereafter. As MOH and MOCA request all foreign Foundations to submit annual project report and audit report every March, C-MAP Beijing Rep. Office completed an independent audit through a professional audit firm and timely submitted C-MAP 2009 Project Annual Report attaching with finance audit report to MOH and MOCA by end of March, 2010. This report was perceived as the best practice among all Foreign Foundations supervised by MOH.

(6) Document Filing

Since the establishment of National Project Office, share folders have been created in its server for document filing and information sharing. These shared information & documents include news letters, proposals, project progress reports, meeting reports,

activity reports, supporting documents, etc. Meanwhile, regular back-up system was established to ensure the security of all documents.

(7) Public Communication

To communicate what C-MAP is and what C-MAP is doing, the National Project Office developed a communication plan in 2009, and updated the progress several communication materials and held one public event in 2008. A list of communication activities, materials and the timeline is listed as below.

Activities	Responsible	2009	2010	2011	Status
Sharing & Learning in the International Harm Reduction Conference (IHRA), Liverpool, UK	Chen Hong		Apr 25-29		Registration in Jan/2010
Abstract/Poster in the International AIDS Conference, Vienna	Chen Hong		Jul 18-23 4 poster presentations		Submission in Q1/2010
Case presentations in the Conference of International Cooperation Program (MOH/NCAIDS)	Chen Hong	6 presentations in Nov	Nov	Nov.	Submission in each Aug
Activity reports on MOH/NCAIDS websites	Lili Wang	monthly	monthly	monthly	On going
Special column on AIDS website (chain net.cn)	Lili Wang	monthly	monthly	monthly	On going
C-MAP website	Lili Wang		Q1		Launch in Q1/2010
Public event to hand over vehicles to Sichuan Health Department	Daniel Tsai, Chen Hong, Wan Shaoping	Nov 30			Done
World AIDS Day TV Evening Event in Xichang, Liangshan	Daniel Tsai, Chen Hong, Li Chongxing	Dec 1			Done

Activities	Responsible	2009	2010	2011	Status
Activity reports on local TV/newspapers/magazines	Li Hui, Wan shaoping, Li Chongxing, Lili Wang	Dec 1	Dec 1	Dec 1	Proposal in each Q2
C-MAP Newsletter (twice a year)	Lili Wang	Done in Apr & Aug	Apr Aug	Apr. Aug	Propose draft in each Jan & Apr
C-MAP DVD (once a year)	Hugues Malonne	Updated in Nov	Q3	Q3	Start the production in each Q2
C MAP Leaflet	Lili Wang	Updated in Nov	Q3	Q3	Start the production in each Q2
C MAP Posters/Exhibition Stands	Lili Wang	Updated in Nov	Q3	Q3	Start the production in each Q2

1. TV and broadcasting: 17 project counties employed TV broadcasting to deliver HIV and AIDS knowledge and awareness amongst the public

2. Newspaper: 8 different newspapers. Sichuan Daily, Liangshung Daily, Meishang Daily, Ziyang Daily, Western financial newspapers, Chengdu financial newspapers, Huaxi City Daily, Chengdu Evening Newspaper.
3. Website: 20 websites.
Central and national levels: China News, Sina, Sohu, Tengxun, China Broadcast, China Public Network, QQ.com, CNR.cn, www.dzwww.com, www.cnpad.net, www.163.com,
Provincial and Local levels: www.sc.gov.cn, www.lsz.gov.cn , local county government website
Multi-sector websites, www.lsws.lsz.gov.cn, hospital and other department websites, for example, hospital, education and business.
4. Other media approaches: SMS messaging, billboards, bus information display.
5. Target audience: total number 1.17 million. Local leaders and civil society. Women, young students, migrants and other high risk groups (MSM, close settings), health care workers and so on.

(8) Partnership with Chinese Government

After the change of C-MAP governance structure in early 2007 and numerous actions have taken by C-MAP leader, the two parties have jointly developed the strategies & work plans, and identified certain partners and best practices to be employed in Project implementation. While there is still a long way to go in the battle against HIV/AIDS, there are signs that prevention efforts of earlier years are beginning to pay off. The local government has been highly appreciated C-MAP, and the great support of Liangshan and 35 other counties in 20 Sichuan project cities and prefectures for HIV/AIDS control.

(9) Financial Management

During 2009, two audits were conducted by independent professional audit firm. One was requested by Ministry of Health & Ministry of Civil Affairs for annual examination purpose and was conducted on C-MAP Beijing Representative Office with focus on 2008 accounting period. The audit result indicated that C-MAP financial statements fairly presented financial position of C-MAP operation in all material respects.

The second audit was conducted by independent professional audit firm on implementing organizations responsible for 2008 initiatives. Although no material misconduct was found, there were still areas for improvements. During 2009, three financial training workshops were provided to implementing organizations from Sichuan province and Liangshan prefecture respectively. For 2010, on-going follow ups, periodical on-site checks and annual audit have been planned to ensure continuous policy compliance.

The Merck Company Foundation committed US\$30 million over the planned period

to fund the operations of C-MAP. In addition, MSD China also donated \$500,000 to C-MAP in 2005. In total, C-MAP has \$30,500,000 committed fund by The Merck Company Foundation and MSD China.

In 2009, a total fund of \$4,515,000 was transferred from The Merck Company Foundation to C-MAP. As of December 31, C-MAP has spent an amount of \$5,405,820 during the year, which includes \$661,672 on administration expenses and \$4,744,147 on programs.

The total accumulative income of C-MAP in the 5 years period (2005~2009) is \$16,458,242 which includes cash transfer from the Foundation, donation from MSD China and CMAP bank interest. The total accumulative cost during the 5 years is \$11,585,852 which includes administration expenses and programs. The total accumulative net income during the 5 years is \$ 4,872,390.

II. Project Progress

(1) Initiative Number

In 2008 and during the first 6 months in 2009, C-MAP implemented total of 82 initiatives including 75 new initiatives and 7 initiatives started from Sep. 2007. National Project Office manages 33 out of these 82 initiatives, Sichuan Project Office manages 28 initiatives, Liangshan Project Office manages 21 initiatives.

From July, 2009 to the end of 2010, C-MAP implemented and will implement total of 72 initiatives. National Project Office manages 25, Sichuan Project Office manages 22 initiatives, Liangshan Project Office manages 25 initiatives.

(2) Implementation

75 new initiatives were originally planned to launch in May of 2008 right after the approval of the Work Plan. Because of snow storm, May 12 massive earthquake, flooding happened in Sichuan Province in first half of 2008, which drew big attention from all levels of Chinese government, the launch of these 75 new initiatives were significantly delayed until July 2008. These 75 initiatives were completed in June 2009. The other 7 initiatives started in 2007 had been closed in Dec. 2008.

72 new initiatives were planned to launch in July of 2009 right after the approval of the Work Plan. Sichuan and Liangshan kicked off the 2009-2010 annual plan in June and July, 2009 separately.

(3) Outcomes of 7 Initiatives Started in 2007

All the 7 initiatives mainly focused in 3 counties (Xichang City, Jhaojue County, Butuo County) of Liangshan Prefecture and were started in July of 2007 and closed in December of 2008. The outcomes of these 7 initiatives are listed as below:

Code	Metrics	Planned	Achieved	%
1202	No. of Yi minority villagers reached by Yi drama HIV mass education (96 performances)	100,000	108,000	108
1305	No. of middle school students trained (in 51 schools)	50,000	58,547	117
3104	No. of people received HIV test through PITC initiative	12,500	35,725	286
3203	No. of pregnant women received HIV test through PMTCT initiative	14,300	11,666	82
	No. of pregnant women received health counseling through PMTCT	11,000	13,666	124
5302	No. of lab staffs received training through capacity building initiative	120	160	133
5303	No. of health care workers trained	5,093	3,339	66
6102	No. of people received base line survey (7 target groups – IDU, FSW, youth, migrant workers, STD clinic outpatients, HIV+/AIDS, HIV+/AIDS' family)	8,600	6,655	77

(4) Outcome of 75 Initiatives Started in 2008

The metrics achievement of the 75 initiatives is updated as of June,31 of 2009 in below.

Strategy #1

Code	Metrics	Planned	Achieved	%
1101~1104	No. of government leaders received HIV training	12,380	12,532	101
1105	No. of justice officials & police received HIV training	6,600	6,882	104
1201	No. of migrant workers & received HIV information	4,120,020	3,805,189	92
1203	No. of Yi minority	24,000	56,596	236

	pop received HIV information			
1301	Evaluation report on HIV education of migrant workers & Yi minority		Final report	
1302/ 1303	No. of HIV TV ads	471	1953	415
1304/ 1306	No. of middle school students received HIV training	400,000	1,066,552	267
1402	C-MAP public communication		- Introduction leaflet - News letter - Introduction DVD - 144 news reports on local websites - Gimmicks	
1403/ 1404	Copies of HIV education materials	1,000,000	2,946,904	295

Strategy #2

Item	Metrics	Planned	Achieved	%
2101/ 2201/ 2202	No. of IDU received intervention (MMT, needle exchange, education)	14,366	20,654	144
2203/ 2204	No. of FSWs received intervention (condom, HIV test, education)	17,467	31,381	180
2205	No. of STD outpatients received intervention (HIV test, counseling)	4,250	6,581	155
2206	No. of MSMs received intervention (condom, HIV test, education)	12,990	31,714	244
2301	No. of lubricants for MSMs	30,000	30,000	100
2302	No. of condoms for FSWs	2,000,000	2,000,000	100
2303	No. of needles for IDUs	100,636	221,180	220

Strategy #3

Code	Metrics	Planned	Achieved	%
3101	PITC standard working flow & technical support		1. National PITC guideline finished 2. 58 PITC staffs trained	

	(NCAIDS' initiative)		3. Technical support onsite	
3102/ 3103	No. of people received PITC service	108,506	131,744	121
3201	Evaluation report and better approach on PMTCT and health care service for pregnant women		Completed final report	
3202/ 3204	No. of pregnant women receive HIV/syphilis test (PMTCT)	21,400	16,864	79
3301	Comprehensive management scheme on PLWHA in Liangshan & technical support (NCAIDS' initiative)		1. Provided technical support on PLWHA management 2. Completed "Comprehensive Management Scheme on PLWHA" for Butuo County 3. Formulated "Liangshan Action Plan – 6 strategies in One Center"	
3302/ 3303	No. of new identified HIV+ & AIDS p'ts filed with personal epidemic profile	3,000	5,282	176
	No. of new identified HIV+ & AIDS p'ts received CD4 testing	6,000	2,404	40
	No. of diagnosed AIDS p'ts received ART	600	147	25
3304	No. of PLWHA & their families join "New Rural Cooperative Medical Scheme"	10,000	8142	81
3305	A comprehensive management model for PLWHA in close setting/prison (Ministry of Justice'		1. Completed the translation of "The AIDS Prevention, Treatment, Care and Support for PLWHA in Close Settings"	

	initiative)		2. Completed research report on HIV prevention in close setting 3. Completed the draft of "Comprehensive Management Scheme on PLWHA in Closing Settings"	
3306	No. of PLWHA in close setting received follow up consultation (in 10 prisons)	400	0	-
3307	Research report on nutrition guidance for PLWHA in Liangshan		1. Field research finished (interviewed 70 people) 2. Data analysis processing 3. Final report finished	
3308	Research report on current anti-viral drug management system (NCAIDS' initiative)		1. Started in Dec./08 2. Completed qualitative evaluation toolkit	

Strategy #4

Item	Metrics	Planned	Achieved	%
4101	Research report on care & support model for PLWHA		1. Completed research questionnaire 2. Started needs assessment & expert panel	
4102	No. of HIV/AIDS care activities held at county level	84	89	106

Strategy #5

Item	Metrics	Planned	Achieved	%
5101	A HIV prevention model through combing New Rural Cooperative Medical Scheme with community health care (NCAIDS' initiative)		1. Interviewed 40 key stakeholders 2. Collected questionnaires from 1,243 villagers & 260 PLWHA 3. Evaluated hospital registration fee and hospitalization cost	
5102	Trainings for county level CDC staffs in		Will be implemented 1 half of 2009	

	35 counties of Sichuan Province			
5103	Evaluate good practices in other provinces and the need of Project expansion		Pending for more discussion with MOH & NCAIDS	
5104	Applied research fund		17 applications were approved and kicked off in Oct., 2008	
5201	Needs assessment on capacity building at target counties (NCAIDS' initiative)		1. Completed questionnaires 2. Completed field research 3. Preparing research report	
5202	Capacity building in C-MAP Project Offices		1. 19 C-MAP members trained 2. Completed "Project Management Guidance for Implementing Agencies" 3. Completed "Administration Guidance for the 3 Project Offices"	
5203/ 5204	No of implementing org. staffs receive project management training	160	394	246
5301/ 5304	No. of health care workers receive HIV/AIDS professional training	12,423	13,024	105
5305	No. of participants attended Sichuan Project launch meeting	240	250	104
5401	Provide technical assistance for the project areas (NCAIDS' initiative)		1. Developed 11 technical assistance schemes, 2. 568 person-time on technical assistant from technical experts	
5402/ 5403	Procurement of needed equipments for project areas		Completed	

5404	Procurement of HIV test reagents		Completed	
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Strategy #6

Item	Metrics	Planned	Achieved	%
6101	HIV drug resistance surveillance system in Liangshan		1. Scheme completed 2. 36 persons trained 3. 203 people investigated 4. Two reports finished	
6103	No. of (15-60 ages) reached by HIV Epidemic Mass Screening in Butuo County	66,515	31,111	47
6104	No. of IDUs receive base line survey	3,600	5,633	157
	No. of FSWs receive base line survey	6,600	3,880	108
	No. of students receive base line survey	17,000	17,286	102
	No. of general population receive base line survey	17,000	17,096	101
6105	No. of pregnant women in comprehensive surveillance	750	507	67
	No. of migrant populations in comprehensive surveillance	1,250	1,177	94
	No. of FSWs in comprehensive surveillance	500	527	105
	No. of IDUs in comprehensive surveillance	750	756	101
6106	Training for information management & M&E capacity		Completed the training, 58 people from 58 implementing agencies trained	
6107/6108	Submit project progress reports &	Quarterly	Completed by quarterly basis	

	finance reports			
6201/6202	M&E site checks at all levels (province, prefecture, county, township, village)		Had 266 M&E site checks at 62 target counties/districts as of June/09	
6203	Project evaluation by external agency		1. Field research and key persons interview finished 2. Report being composed	
6301	C-MAP project progress reports, finance reports, annual reports, data base management		1. Quarterly reports submitted 2. Annual reports submitted to MOH, MOCA 2. Data base and C-MAP website is done	
6302	Regular M&E reports		1. 11 regular monitoring & technical assistance finished 2. 2 comprehensive monitoring finished	
6401-6403	OC meeting, work plan development meetings, experience exchange meetings, symposia, project update meetings, project summary meetings		1. OC meeting held in March 4th, 2009 2. Several meetings for 2009-2010 work-plan held 3. Project update meetings held by quarterly basis at 3 levels of health authority	
6404	Attend National congresses, international AIDS congresses		1. Attended NACAIDS Annual Meeting 2. Attended X VII AIDS Conference in Mexico 3. Attended the fifth International Cooperation Conference in Shanghai	
6405/6406	Visit other provinces to learn best practices		Completed as planned	

(5) Progress of key Indicators among 72 Initiatives Started in 2009

Item	Metrics	Project settings	Planned	Achieved	%
1103	No. of government leaders received HIV training	LS	20	21	105
1201	No. of migrant workers & received HIV information	SC	35000	103550	296
1203	No. of Yi minority pop. received HIV information	LS	20000	20287	101
1302	No. of Public HIV Prevention Media Promotion and Education	SC	420	543	129
1303	No. of Public HIV Prevention Media Promotion and Education	LS	204	1567	768
1304	No. of middle school students received HIV training	SC	350,000	229,925	66
1305	No. of middle school students received HIV training	LS	570	217	38
2201	No. of IDU received intervention (MMT, needle exchange, education)	SC	7150	8207	115
2202	No. of IDU received intervention (MMT, needle exchange, education)	LS	3000	8230	274
2203	No. of FSWs received intervention (condom, HIV test, education)	SC	10000	14205	142
2204	No. of FSWs received intervention (condom, HIV test, education)	LS	2200	1634	74
2205	No. of STD outpatients received intervention (HIV test, counseling)	SC	2008	2233	111
2206	No. of MSMs received intervention (condom, HIV test, education) in 10 cities	SC	6000	6085	101
	No. of MSMs received intervention (condom, HIV test, education) in Xichang	LS	200	233	117

2302	No. of condoms	SC	1,173,700	168,500	14
	No. of Clean needles	SC	53,460	95,900	179
2303	No. of condoms	LS	300,000	300,000	100
	No. of Clean needles	LS	100,000	100,000	100
3102	No. of HIV test (PITC/VCT/RCT)	SC	24940	26820	108
3103	No. of HIV test (PITC/VCT/RCT)	LS	35000	60705	173
3202	No. of pregnant women receive HIV/syphilis test (PMTCT)	SC	4000	6492	162
3204	No. of pregnant women receive HIV/syphilis test (PMTCT)	LS	9000	10997	122
3302	No. of new identified HIV+ & AIDS p'ts filed with personal epidemic profile	SC	200	686	343
	No. of new identified HIV+ & AIDS p'ts received CD4 testing	SC	200	736	368
	No. of new AIDS patients received ART	SC	100	124	124
3303	No. of new identified HIV+ & AIDS p'ts filed with personal epidemic profile	LS	2000	21,352	1,068
	No. of new identified HIV+ & AIDS p'ts received CD4 testing	LS	1,500	2,433	162
	No. of new AIDS patients received ART	LS	400	184	46
	No. of PLWHA & their families join "New Rural Cooperative Medical Scheme"	SC	700	299	43
3304	No. of PLWHA & their families join "New Rural Cooperative Medical Scheme"	LS	5000	1794	36
5203	No. of implementing org. staffs receive project management training	SC	110	116	105

5204	No. of implementing org. staffs receive project management training	LS	180	160	89
6104	No. of FSWs receive comprehensive surveillance	SC	4,000	4,008	100
	No. of IDUs receive comprehensive surveillance	SC	2,800	3,498	125
6105	No. of MSMs receive comprehensive surveillance	SC	1,200	454	38
	No. of students receive comprehensive surveillance	SC	14,000	13,494	96
	No. of urban residents receive comprehensive surveillance	SC	14,000	13,554	97
	No. of rural residents receive comprehensive surveillance	SC	14,000	13,638	97
	No. of migrant populations in comprehensive surveillance	LS	1,250	674	54
	No. of FSWs receive comprehensive surveillance	LS	750	529	71
	No. of IDUs receive comprehensive surveillance	LS	1,100	952	87
	No. of students receive comprehensive surveillance	LS	6,800	6,906	102
	No. of urban residents receive comprehensive surveillance	LS	6,800	6,650	98
	No. of rural residents receive comprehensive surveillance	LS	6,800	6,435	95
6201	No. of M&E site checks at provincial level	SC	16	7	44
	No. of M&E site checks at city level	SC	70	66	94
6202	No. of M&E site checks at prefecture level	LS	34	18	53
	No. of M&E site checks at county level	LS	96	97	101
	No. of M&E site checks at butuo county	LS	6	6	100

III. Financial Summary

(1) Funding Commitments

Overall, the Merck Company Foundation committed US\$30 million over the planned period to fund the administration and program of C-MAP. In 2009, a total of \$4,515,000 was granted by The Merck Company Foundation to C-MAP for administration and program.

(2) C-MAP Administration Expenditures

As of 31 December 2009, C-MAP spent a cumulative amount of \$661,672 on administration expenses during the year. This amount included staff costs, office expenses, business travel, office telecommunications, translation, legal and other outside services, depreciation, gains or losses due to exchange rate changes. In 2009, the recording currency of CMAP books has maintained as RMB according to local regulations. The 2009 Income Statement and Balance Sheet were converted from RMB to USD by using 2009 year-end exchange rate of RMB 6.8282/ USD 1.

(3) C-MAP Program Expenditures

As of 31 December 2009, C-MAP spent a cumulative amount of \$4,744,147 on programs during 2009 with six strategic focuses.

(4) Accounting for Grant from the Merck Company Foundation

1. Grant and Transfer of Funds

The Merck Company Foundation made grant in one installment of \$4,515,000 to C-MAP in August of 2009.

2. Expenditures During 2009

Total actual cash spent in 2008 was \$7,149,169 on administration and programs. The overall cash flow resulted in a closing cash balance of \$859,378 on 31 December 2009, including interest income. The closing cash balance will be carried forward and utilized to support programs and administration expenses of 2010.

Summary Table

TMCF + MSD Contribution + Interest Income

	Carryover from Last Year	Funds Received	Funds Spent	Remaining Balance
2005	0	1,150,371	0	1,150,371
2006	1,150,371	3,608,388	1,078,745	3,680,013
2007	3,680,013	4,145,388	1,675,774	6,149,627
2008	6,149,627	3,032,907	5,695,155	3,487,379

2009	3,487,379	4,521,169	7,149,169	859,378
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The C-MAP 2009 financial statement is attached at the end.

3. Capital Spending

Of the funds transferred in 2009, \$849 was spent on capital purchase.

4. Expenditure Responsibility

During 2009, all program funds were used for C-MAP and all administration funds were used in support of C-MAP programs. For programs originally initiated in 2007, leftover payments of \$175,115 were made under the signed contract terms. Program funds remained under the control of C-MAP. For programs initiated in 2008 and 2009, a grant of \$1,150,039, \$2,496,320 and \$2,716,239 were made to Chinese Center for Disease Control and Prevention, Sichuan Provincial Health Bureau and Liangshan Prefecture Health Bureau respectively on National, Provincial and Prefecture levels based on the 2008 and 2009 Annual Plans developed jointly by above three levels and approved by the C-MAP Board.

5. Use of Funds

All grant funds were expended for the purposes set forth in the grant letters from The Merck Company Foundation, and none of the funds were diverted from the purpose of the grants. None of the funds were used for any of the purposes described in section 4945(d) of the Code. No funds were used to carry on propaganda or otherwise attempt to influence legislation. No funds were used to influence the outcome of any specific public election or to carry on, directly or indirectly, any voter registration drives. The grants made by C-MAP to other organizations above are all related to its charitable purpose of advancing HIV/AIDS prevention, care, treatment and support in China. C-MAP does not undertake any activities for a non-charitable purpose.

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ANNEX : C-MAP Financial Statement as of 31 December 2009



2009 Annex

Reported by:

Hugues Malonne
Chief Rep of CMAP BJ Rep Office

April 13, 2010

Merck Childhood Asthma Network, Inc. (MCAN)

Expenditure Responsibility Report

2009

RESOURCES

Funding and Support The most important resource for MCAN is The Merck Company Foundation, which provides grant funding for operations (including salaries) and programs. In addition, Merck & Co., Inc. provides equipment, information technology, technical, financial, legal, and human resources support. MCAN reports administratively through Merck's Global Public Policy and Corporate Responsibility division, which provides assistance with communications and personnel management. In addition, MCAN receives financial support through a partnership agreement with the DeLaski Family Foundation.

Advice and Consultation MCAN benefits greatly from the expertise of its Board of Trustees and National Advisory Board (NAB). In 2009, MCAN utilized the consultation services of JTxCo, LLC, Visionary Health Education Consulting Services, LLC and the communications services of Health360 Strategies.

2009 ACTIVITIES

Strategic Planning

The Merck Company Foundation established the Merck Childhood Asthma Network, Inc. in 2005 as a separate non-profit, 501(c)(3) organization to "address the complex and persistent problem of asthma among children in the United States and enhance access to quality asthma management and care" with a \$20 million commitment through 2009. In the fourth and final year of the original funding commitment, MCAN dedicated time and resources to refining its strategic plan for "MCAN Phase 2", which would begin in 2010 and continue through 2014.

Care Coordination Protocol Meeting with MCAN Phase 1 Program Sites

MCAN convened Program Site principal investigators and key program site staff in Washington DC in March 2009 to discuss the strategic planning process and the possibility of providing sustainability funding to support common elements of MCAN phase 1 sites. The meeting focused on the 'Care Coordination' models of the MCAN Program Sites and the common elements of these models that may possibly be sustained and contribute to MCAN's implementation research portfolio. Common elements that were identified include:

- Each site has significant community involvement and partnerships
- Each site's model assesses the health care and associated needs of child and subsequently implements actions to address those needs & optimize quality asthma care
- Evaluation of effectiveness of options and services chosen to meet child's/family's needs

Scientific Advisory Board Meeting

In March 2009, MCAN assembled an interdisciplinary Scientific Advisory Board (SAB) comprised of experts in implementation research and evidence-based asthma interventions to provide input into the study design, structure, and evaluation methodologies to address Goal 1, Objective A., which states 'fund a multi-year, multi-site implementation research program using a common protocol and focused on individual risk assessment and interventions tailored to the child and his or her family in selected communities with significant childhood asthma outcome

disparities.' Advisors assembled and discussed 1) evidence-based intervention (EBI) implementation research as applied to MCAN's mission: goals, essential elements, strengths, weaknesses, challenges, etc. 2) candidate EBI(s) for phase 2 and rationale 3) approaches to demonstrate effectiveness (including cost), adaptability, public health impact, fidelity issues, and potential sustainability 4) study design(s), population, and evaluation approaches, and 5) essential elements of a Call for Proposals (CFP), including criteria for review and evaluation of proposals. The advisors recommended that respondents to the CFP should be a partnership between a community-based group and a health care providing network (managed care organization, community health center, public health department) that serves low income children. The partners should be charged to deliver a tailored or individualized evidence-based intervention (e.g., asthma counselor/environmental home-based trigger mitigation) using an operational electronic tracking system to facilitate implementation. In the advisors' collective opinion, requiring that one of the partners be a "system" of care serving disadvantaged children enhances the probability of having data from a comparison group and the sustainability of the program within an existing system of care.

Following the recommendations of the advisors, MCAN explored the feasibility of utilizing Community Health Center Networks to implement a common evidence-based intervention as recommended by the SAB. As a result, MCAN engaged in preliminary discussions with George Washington University's School of Public Health and Health Services and the National Association of Community Health Centers' (NACHC) Center for Health Quality to explore the feasibility of engaging these Networks in implementation studies.

MCAN's Phase 2 Strategic Plan was approved in September 2009, with MCAN Phase 2 funding beginning in 2010.

MCAN Program Sites

New York, Philadelphia, Chicago, Los Angeles, San Juan

MCAN continued to work closely with the five program sites to ensure timely fulfillment of goals and objectives for the final project year. Through site visits, formal progress reports, and informal communication, Program Sites regularly updated MCAN on their programmatic and financial progress, their preliminary findings, and any implementation challenges they encountered. The sites benefited from the technical expertise of MCAN Executive Director, a nationally recognized asthma expert experienced in community-based asthma interventions, and RTI International, evaluation consultants.

In 2009, MCAN's site visit protocol emphasized data analysis and review and sustainability planning. Sites were asked to prepare a comprehensive overview of their outcomes and plans for dissemination. Sites were also asked to present their sustainability strategies for funding beyond the MCAN grant, and to describe the components of their care coordination model that they feel are important to continue in their communities.

Cross-site Evaluation

MCAN, RTI International and the five MCAN Program Sites continued to work collaboratively on the Cross-Site Evaluation in 2009. The evaluation has a data collection approach which relies on (1) secondary data collection and management; (2) qualitative data collection through focus groups, individual interviews, and document review; and (3) pooled data analysis (4) site visits and (5) site reports. Cross-site evaluation activities in 2009 were focused on completing both qualitative and quantitative (pooled) data collection, data cleaning, and preliminary analysis. The

cross-site evaluation team also closely monitored recruitment targets in 2009 to ensure the pooled analysis would have appropriate power to determine change in outcomes.

Publications and Presentations Committee

The Publications and Presentations Committee (PPC) consists of up to two representatives from each of the five MCAN funded sites, representatives from MCAN, and the Cross-Site Evaluation leader from RTI. The Chairperson of the Committee is Dr. Tyra-Bryant Stephens, Co-Principal Investigator of MCAN's Philadelphia site.

In 2009, the PPC met via teleconference on a bi-monthly basis and in person at the MCAN Annual Meeting in Puerto Rico. The Committee assembled itself into writing groups at the Annual Meeting to develop and refine manuscript ideas and timelines. The writing groups convened themselves on an ongoing basis for the remainder of the year.

The PPC, MCAN staff and RTI International successfully collaborated on three abstracts that were presented at the American Public Health Association Annual Meeting in 2009: Evidence-based interventions in school health: Implementing Open Airways in urban schools (Marielena Lara, MD, MPH, Gilberto Ramos, DrPH, Kimberly Uyeda, MD, MPH and Adriana Matiz, MD); Implementation of evidence-based interventions (EBIs) in school settings: The Merck Childhood Asthma Network (MCAN) experience (Meera Viswanathan, PhD, Lucia Rojas Smith, DrPH, MPH, Carol L. Woodell, BSPH, Linda Lux, MPA, Kimberly Uyeda, MD, MPH, Marielena Lara, MD, MPH, Michael Rosenthal, MD, Adriana Matiz, MD, Vicky Persky, MD, Yvonne U. Ohadike, PhD, Julie Kennedy Lesch, MPA and Floyd J. Malveaux, MD, PhD); Assessing outcomes from the Merck Childhood Asthma Network (MCAN): Challenges and results Carol Anne Mansfield, PhD, Meera Viswanathan, PhD, Carol L. Woodell, BSPH, Lucia Rojas Smith, DrPH, MPH, Niamh Darcy, Yvonne U. Ohadike, PhD, Julie Kennedy Lesch, MPA and Floyd J. Malveaux, MD, PhD

MCAN and RTI also presented the following poster at the AcademyHealth Annual Meeting and the AcademyHealth Child Health Services Research Meeting: Integration of community health workers in community-based asthma interventions: Challenges and opportunities (Lucia Rojas Smith, DrPH, MPH, Meera Viswanathan, PhD and Floyd J. Malveaux, MD, PhD).

The PPC collaborated to submit a proposal for a think tank session at the 3rd Annual NIH Conference on the Science of Dissemination and Implementation- the proposal, 'Measuring Fidelity of Evidence-based Interventions in Communities' was accepted at the end of 2009.

MCAN, RTI, and the PPC submitted a proposal for a supplement to the journal *Health Promotion Practice*, which was accepted. The supplement will focus on the experiences of MCAN and its investigators as a case study of community-based implementation of evidence-based interventions. The anticipated publication date is late 2011.

Annual Meeting of MCAN Program Sites and National Advisory Board

In May 2009, MCAN Program Sites and the MCAN National Advisory Board (NAB) came together in San Juan, Puerto Rico for their third annual meeting. MCAN focused this annual meeting on the Program Sites' writing activities and dedicated significant time during the meeting for writing groups to assemble and work on manuscript ideas. RTI presented results from the qualitative analysis of the cross-site evaluation as well as preliminary findings from the quantitative pooled analysis for discussion and review by the Program Sites and NAB. In addition, MCAN Program Sites presented preliminary data and program updates from their individual sites and were able to solicit feedback and advice from peers and the MCAN NAB.

MCAN concluded the three day meeting with a closed session for the NAB. During this session, MCAN Executive Director Floyd Malveaux presented the MCAN Strategic Plan to solicit feedback and direction from the advisors on MCAN Phase 2 (2010-2014) priorities.

In conjunction with MCAN's Annual Meeting, RTI International and the U.S. Department of Health and Human Services' Office of the Assistant Secretary for Planning and Evaluation (HHS, ASPE) held a workshop entitled 'Understanding Fidelity Issues in Implementing Evidence-Based Asthma Interventions in Community Settings.' They convened an expert panel from government, academia, advocacy groups, and other concerned stakeholders who had experience in the design or translation of evidence-based interventions to discuss and explore implementation and translation of interventions into schools, clinics, homes, etc. Several MCAN Principal Investigators, MCAN's Executive Director, and several MCAN National Advisory Board members were a part of the expert panel.

Supplement to *Pediatrics*, the journal of the American Academy of Pediatrics

In March 2009, the MCAN sponsored supplement to *Pediatrics*, 'The State of Childhood Asthma and Future Directions: Strategies for Implementing Best Practices' was published online and distributed with the March edition of the journal to print subscribers. This supplement summarized the presentations, discussion and recommendations of childhood asthma experts and thought leaders convened by MCAN to tackle the unacceptable gap between what we know about effective asthma management and actual practice. *Pediatrics* has the second highest impact factor (4.789) of the 85 pediatrics journals indexed in the 2008 Journal Citation Reports (from Thomson Reuters).

HEAL Project

The objectives of the HEAL (Head-off Environmental Asthma in Louisiana) Project are to evaluate effectiveness of asthma case management intervention (emphasizing environmental risk control) in a natural disaster setting; to characterize relationships between environmental allergens, exposures and asthma morbidity; to characterize asthma prevalence, living conditions, and stress among families of children (4-12 y.o.); and to collect and bank biospecimens to support other genetic and gene/environment studies. MCAN supports this project through a partnership managed by the Foundation for the NIH with the National Institute of Environmental Health Sciences and the National Center on Minority Health and Health Disparities.

In 2009, data collection for the HEAL study concluded, including the asthma counselor case management sessions. Preliminary results suggest that mold levels are decreasing gradually but sensitization is prevalent; there continue to be significant medical and non-medical needs especially in Orleans Parish; the asthma counselor/environmental intervention appears to have been effective. Data analysis, publication and presentation activities are underway.

In 2009, MCAN provided technical assistance and other project implementation guidance to the HEAL Project, including:

- time and expertise of MCAN Executive Director on the asthma case management portion of the project
- participation and input in the HEAL Project Executive Committee convened by the Foundation for NIH, the project's Steering Committee and the Community Advisory Board

- exploration of funding to sustain portions of the HEAL project beyond the MCAN/NIH commitment

Childhood Asthma Policy Reform Initiative

MCAN partnered with the George Washington University School of Public Health and Health Services Department of Health Policy (GW), The Geiger Gibson Program, and the RCHN Community Health Foundation in a collaborative project to develop an evidence-based policy reform roadmap and action plan for reducing and controlling the prevalence and symptoms of childhood asthma. MCAN provided strategic input and review throughout 2009 as the GW team surveyed the childhood asthma literature and local and federal health policy landscapes. GW also benefited from a national advisory committee made up of experts in healthcare policy, asthma clinical research, public health and health disparities.

Childhood Asthma Policy Roundtable and Workshop

The purpose of the workshop was to obtain input from selected community-based and state asthma programs, networks, and coalitions engaged in asthma policy development and implementation. Sara Rosenbaum, JD, Chair of the GWU Department of Health Policy and the Director of the Childhood Asthma Policy Reform Initiative developed the agenda and facilitated the meeting. The workshop was purposely scheduled the day before the 2009 EPA Communities in Action National Asthma Forum so that workshop invitees could take advantage of attending both meetings. MCAN worked in close collaboration with the EPA Office of Radiation and Indoor Air Environments Division and the CDC Air Pollution and Respiratory Health Branch to identify participants and co-fund expenses. There were 44 attendees from 17 states and the District of Columbia, representing 22 mature regional, state and local asthma programs. Participants were given the opportunity to briefly share experiences and suggest a priority need requiring policy reform. At the conclusion of the workshop, representatives from the National Heart, Lung, and Blood Institute, Centers for Disease Control and Prevention and the Environmental Protection Agency shared their organizations' perspectives on health reform and asthma management.

Webinar: A Health Reform Update for Childhood Asthma Advocates, An Insider View

On September 17th, MCAN, GW and RCHN Community Health Foundation hosted a national webinar focused on the current health reform debate and what it may mean for children, particularly those with asthma. The webinar, which was attended by 120 participants, provided a chance for asthma policy and practice leaders and those in the child health policy, caregiver, and public health communities to hear from and interact with health care and policy experts. This webinar also provided the GW team with the opportunity to hear the questions and concerns of childhood asthma stakeholders regarding health reform.

Asthma Health Reform Leadership Letter

In June 2009, Floyd Malveaux, MCAN's Executive Director, Sara Rosenbaum, JD, Chair of the GWU Department of Health Policy and the Director of the Childhood Asthma Policy Reform Initiative and Julio Bellber, President and CEO of the RCHN Community Health Foundation wrote letters to the Majority and Minority Leaders in the US Senate and the Speaker and Republican Leader of the US House of Representatives on childhood asthma and the opportunities it presents in improving chronic disease management through health reform.

Briefing with Senator Kirsten Gillibrand's Office

MCAN's Executive Director, Floyd Malveaux met with Senator Gillibrand's health legislative aide to tell her more about MCAN, specifically the Childhood Asthma Policy Reform Initiative

and the WIN for Asthma program that MCAN funds in New York. Dr. Malveaux also provided input and education about effective childhood asthma management strategies in light of Senator Gillibrand's proposed legislation to reduce the burden of childhood asthma in New York.

RAND-MCAN Study: Assessing the Business Case for Better Asthma Care

In 2007-2008, MCAN commissioned RAND to examine the relationship between asthma maintenance drug adherence and health care utilization by looking at a sample of asthmatic patients from medical claims records filed with private insurers. One of the conclusions from this study was that savings generated by a reduction in high-cost events like emergency department visits don't offset the increased payments for maintenance drugs in more adherent patients, except for selected high-risk patients. In late 2009, RAND submitted a manuscript entitled "Anti-inflammatory Medication Adherence and Cost and Utilization of Asthma Care in a Commercially Insured Population" to the *Journal of Asthma* which was accepted for publication in 2010.

In 2009, RAND and MCAN applied this same research question among children in Medicaid and CHIP. One of the findings from this phase of the study was that a business case for disease management interventions that aim to improve adherence to anti-inflammatory drugs cannot be proposed because of the increased costs of care. RAND submitted an abstract to the American Thoracic Society and AcademyHealth on this phase of the study and will submit a manuscript to *Pediatrics* in early 2010.

NIH Asthma Outcomes Workshop

The concept behind the NIH Asthma Outcomes Workshop began in 2007 when MCAN commissioned RAND to conduct a meta-analysis and provide consensus estimates for the cost and benefits of better asthma care for children. RAND was not able to compare across studies to obtain these estimates because there was little standardization in outcome definitions. These findings were presented at MCAN's State of Childhood Asthma Conference and one of the recommendations resulting from this conference was that the NIH should lead a consensus process to establish and promulgate a set of standard definitions for key variables in asthma-related clinical trials and other research. In January 2008, MCAN held a briefing with representatives from the National Heart, Lung, and Blood Institute (NHLBI) and the National Institute of Allergy and Infectious Diseases (NIAID), the two primary funders of asthma research. MCAN presented them with this recommendation and the research behind it. Both Institutes immediately saw the need and benefit of the initiative and established a planning committee and committed funds. As planning continued throughout 2008, three other NIH entities joined the planning committee and committed funds (National Center for Minority Health and Health Disparities, National Institute of Child Health and Human Development, and the National Institute of Environmental Health Sciences). The Agency for Healthcare Research and Quality also became a member of the committee and committed funds. In addition, MCAN engaged the Robert Wood Johnson Foundation for support and participation. The workshop will take place March 15-16, 2010 in Bethesda, MD. Participants will include up to 80 leaders in NIH sponsored asthma clinical research, representatives of government agencies and members of communities who rely on clinical research findings, such as developers of clinical practice guidelines, health care providers, insurance providers, pharmaceutical companies, and community organizations. Workshop proceedings will be published, and NHLBI and NIAID have indicated that they will consider workshop recommendations in determining policies and protocols for funded research projects and clinical trials in the future.

In 2009, MCAN participated in the ongoing planning of this workshop by serving on the Executive Committee. Responsibilities have included providing input into the designation of outcome areas for discussion, contributing to the process of designing a structure for the workshop (pre-workshop research, consensus building through presentations) and reviewing pre-workshop preparation from committee chairs.

American Academy of Pediatrics Comprehensive Asthma Project

MCAN and the American Academy of Pediatrics (AAP) partnered in 2008 on the Comprehensive Asthma Project (CAP) to improve the care of pediatric asthma patients by facilitating the implementation of the 2007 National Asthma Education and Prevention Program (NAEPP) asthma guidelines within pediatric medical homes. CAP is a three phase project, the first phase, the Chapter Asthma Quality Improvement Project, began implementation in July 2008 and is funded by MCAN and the American Board of Pediatrics. In 2009, nearly 60 practices in Alabama, Maine, Ohio and Oregon were recruited to participate in this innovative pilot project using quality improvement strategies and the latest treatment guidelines to improve asthma outcomes. Also in 2009, MCAN funded the second phase of CAP, the Medical Home Chapter Champions Program on Asthma, which will engage Medical Home Chapter Champions from all 66 AAP chapters (representing 60,000 pediatricians) to promote and facilitate the dissemination of best practices related to the implementation of the asthma guidelines within medical homes. The chapter champions will advocate for the implementation of quality asthma care within medical homes to other health care providers and to policy makers. MCAN and AAP announced the second phase of CAP at the AAP National Conference in Washington DC through a joint press release and presentation, which served as a great recruiting mechanism for potential Chapter Champions.

National Education Association Health Information Network online asthma curriculum, "Managing Asthma in the School Environment: What NEA Members Need to Know"

MCAN partnered with the National Education Association Health Information Network (NEA HIN) to develop, evaluate and market an online curriculum designed to provide teachers and education support professionals with accurate, clear, and useful information about asthma and the best ways to help students manage it within the school environment. With input from MCAN, NEA HIN finalized the course content and technical layout and the course will be offered for free on NEA Academy, the NEA's online resource for professional development. The objectives of the course are to increase the ability of teachers and education support professionals to identify and work with students with symptoms of asthma and poor asthma management. The course, which will begin enrollment in 2010, will also include a pre and post test to evaluate users' knowledge retention.

Partnership Development

DeLaski Family Foundation

MCAN and the DeLaski Family Foundation continued their partnership to further MCAN's goal of advancing comprehensive community-based approaches that facilitate the adoption of effective asthma interventions that improve access to quality healthcare services for children and families. This partnership allowed MCAN to provide additional consultative and hands-on support to the HEAL Project in the implementation of the asthma case manager intervention.

Environmental Protection Agency (EPA)

MCAN Executive Director, Floyd Malveaux was nominated to the EPA Science Advisory Board (SAB). The objective of the SAB is to provide independent advice and peer review to EPA's Administrator on the scientific and technical aspects of environmental issues. MCAN has also continued to develop its relationship with the EPA Indoor Environments Division, becoming a "go to" credible partner and key collaborator with this group which is evidenced by MCAN's involvement in EPA's 2009 National Asthma Forum (host of pre-Forum workshop, Floyd Malveaux provided welcome and introductory remarks at the Forum).

Communications

Philadelphia MCAN Site Visit with HHS Secretary Sebelius

Secretary Sebelius' office contacted MCAN to locate an elementary school where the Secretary could view the President's national address on education and visit with students to stress the importance of education, decreasing absenteeism and staying healthy in order to stay in school. The Secretary's office noted that she would also provide students with steps they can take to protect themselves against the H1N1 flu virus as they return back to school. Thurgood Marshall Elementary was selected because it is a partner school with the Philadelphia MCAN project. MCAN Executive Director Floyd Malveaux was able to meet briefly with the Secretary before the event to tell her more about MCAN and its work on behalf of children with asthma and their families. Floyd Malveaux and MCAN Philadelphia staff also met Philadelphia Mayor Nutter and Senator Casey (D-PA) during the pre-event meet and greet. MCAN was able to leverage the Administration's "Back to School" day to deliver positive messages about managing childhood asthma- three national news wire stories carried the story about Secretary Sebelius' visit to MCAN Philadelphia, all quoted Floyd Malveaux and described MCAN Philadelphia; news reports ran on a number of consumer news sites including U.S. News & World Report, NPR.org, USA Today, Yahoo!News and AOL News.

Primera Hora, 5/13/09, 'Los Niños y el Asma'

The second largest paper in Puerto Rico, *Primera Hora*, published an article on childhood asthma and interviewed Puerto Rico MCAN Program Site Principal Investigator, Dr. Marielena Lara. The article, which ran as the lead story in the health section, quoted Dr. Lara and mentioned her work reducing asthma morbidity in the public housing communities in San Juan.

eMCAN Alerts

In 2009, MCAN communicated with stakeholders, partners, Merck colleagues, and policymakers through an emailed newsletter called an 'eMCAN Alert.' Sent out on a periodic basis, this email communication provided these important groups with pertinent and timely information on exciting MCAN happenings such as MCAN's supplement to *Pediatrics*, the health policy reform webinar, Secretary Sebelius' visit to MCAN Philadelphia, and the launch of the second phase of the Comprehensive Asthma Project with the American Academy of Pediatrics. The eMCAN Alerts in 2009 had an average "click-through" rate of 24.7% (meaning 24.7% of readers clicked through at least one of the links in the email). This rate was higher than the industry standard for government agencies (6.9%) and non profits (11.6%).

MCAN Exhibits

MCAN sponsored and participated in exhibits at the following meetings in 2009: American Thoracic Society, American Academy of Allergy Asthma and Immunology, American Academy of Pediatrics, American College of Chest Physicians. Exhibits highlighted MCAN's Program Sites and the latest childhood asthma data by distributing MCAN brochures, CDC National Center for Health Statistics' State of Childhood Asthma, United States, 1980-2005 and the CD-

ROM multi-media presentation, 'Using Evidence-Based Interventions to Improve Childhood Asthma Outcomes.'

MCAN Website: www.mcanonline.org.

MCAN continued to update and maintain its website as a comprehensive childhood asthma information portal with information on the Project Sites and other MCAN initiatives, MCAN Staff, Trustees, Mission, Vision as well as an extensive Resources section organized with information appropriate to MCAN's different stakeholders-kids, parents, health professionals, researchers, school personnel, etc. Total visits in 2009: 69,461 (up from 54,583 total visits in 2008).

ACCOUNTING FOR GRANT FROM THE MERCK COMPANY FOUNDATION

The Merck Company Foundation made a grant to MCAN of \$3,987,315 during 2009. Of this amount, \$3,746,340.67 was spent during 2009 on MCAN operations and programs. Financial statements for 2009 are available. All additional expenditures referred to above were approved by The Merck Company Foundation. All of MCAN's activities are related to its charitable purpose of supporting and advancing evidence-based programs that improve the quality of life for children with asthma and their families and reducing, through the dissemination of effective interventions, the burden of the disease on them and society.

Floyd J. Malveaux, MD, PhD
Executive Director
March 10, 2010

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

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer identification number
	Merck/Company Foundation	22-6028476
	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only
	One Merck Drive, P.O. Box 100	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	Whitehouse Station, NJ 08889	

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

☐ Form 990	☒ Form 990-PF	☐ Form 1041-A	☐ Form 6069
☐ Form 990-BL	☐ Form 990-T (sec. 401(a) or 408(a) trust)	☐ Form 4720	☐ Form 8870
☐ Form 990-EZ	☐ Form 990-T (trust other than above)	☐ Form 5227	

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

- The books are in the care of ☒ **Taxpayer**
 Telephone No ☐ 908-423-1000 FAX No. ☐ 908-735-1280
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐ . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until November 15, 2010.
 5 For calendar year 2009, or other tax year beginning , and ending .
 6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
 7 State in detail why you need the extension Additional information is needed in order to file an accurate return

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$	135,938
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$	140,000
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$	0

Signature and Verification

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

Signature ☒ Title ASST. TREASURER Date 7/22/10

Form 8868 (Rev. 4-2009)