OUR MISSION

African Services is a non-profit organization dedicated to improving the health and self-sufficiency of the African community.

We provide health, housing, legal, educational, and social services to over 10,000 newcomers each year in New York City with a focus on HIV prevention, care and support. We also work on the frontlines of the global AIDS epidemic; operating five clinics in Ethiopia and through advocacy and policy work in the U.S. and abroad.

ON THE COVER

AYOMIDE, CRYSTAL, AND LOLA

“Because of DACA and the ASC attorneys, the doors are open and I will succeed”

– Seydou, DACA Applicant

Cover Photography by Stephanie Kaplan
Cover and Report Design by Mackenzie Cline
DEAR FRIENDS,

Closing out the year by attending the African Services holiday party has become a ritual event for me – and a vivid reminder of the vibrant cloth that our city is cut from. And in one night, I am able to see, feel and talk to the incredible community that ASC has fostered in its three decades. I meet clients who have triumphed over incredible challenges and the ASC staff that helped secure those triumphs. I see old friends who come year after year to support the work that ASC does in providing crucial services to over 10,000 people in our city. I steal moments with the co-executive director, Kim Nichols, who has been instrumental in making ASC a go-to place for families affected by HIV while also being on the frontlines of international policy advocacy on behalf of our client base. And without fail, that night reconfirms how proud I am to serve on the board of the dynamic and grounded organization that ASC is today.

The United States has recently seen a shift in the dialogue on immigration, with voices from both sides of the aisle clamoring for reform. ASC has been entrenched in the conversation not only on a policy level, but in providing direct legal services to thousands of immigrants and their families. You will learn as you read this Report about several outstanding young men and women, including Crystal, Ayomide and Lola, who were brought here as children and were forced to live in the shadows without legal status. The African Services legal team stepped in to offer free legal services when President Obama instituted the Deferred Action for Childhood Arrivals program. The attorneys were instrumental to these young people’s ability to gain the temporary status and step out from the shadows to pursue their futures. The ASC legal department is expanding its immigration practice, of which these cases are just a few examples of the life-changing victories ASC is able to obtain on behalf of its clients.

I also wanted to highlight another example of ASC’s unique ability to respond to the specific needs of its client base. Seeing that many of its clients have been susceptible to deceptive and ineffective legal practices, ASC developed a nominal and sliding scale legal services clinic. This clinic reaches those who are willing and able to pay for quality legal services, but who are otherwise unable to find it. ASC now has staff that is able to take these cases with the dual benefit of generating income for the organization.

From the breadth of services provided both in New York and Ethiopia, to the people that come through its doors to provide and receive these services, to the true compassion and leadership that ASC has shown over the past three decades, I hope the content of this Annual Report spurs your own pride in this dynamic organization. And I look forward to seeing you at this year’s ASC holiday party.

All the best,

NADYA SALCEDO | Secretary, Board Member
NYAF / GIRLS EMPOWERMENT CAMP

Teenage girls today face a tremendous amount of pressure. Add in the difficulties that come with being an immigrant, and that can make the obstacles seem insurmountable. African Services Committee recognized this issue, and has been working to help young immigrant girls cope. In April 2012, the New York City AIDS Fund provided a generous grant that made it possible to organize a girls’ empowerment camp and support group. Working with Theater of the Oppressed, and staff in our case management program, ASC designed a program that gave the girls a platform to express themselves and have an open discussion about the unique obstacles they face as immigrant teens in American schools. The girls of the camp have named themselves the NYC D.I.V.A.S (Daring, Independent, Vivacious, Amazing, and Sophisticated). They have participated in the production of print material that discusses HIV prevention, reproductive health, and myths about sexuality, and they are sharing the pamphlet with their friends in an effort to spread awareness and address misconceptions.

TESTING CENTER / RESEARCH GRANTS & RELATIONSHIPS

For over thirty years, African Services Committee has been serving the African immigrant population, which puts the agency at a distinct advantage when outside organizations and institutions seek to reach this target audience. Because of our unique position in the community, we have been able to partner with many organizations to conduct demographic and health research and other studies within the African community.

For example, the United States Department of Defense and Genocea Biosciences have been conducting a study in order to develop a vaccine for malaria, and African Services has contributed to the fight against malaria by partnering with them in the search for new malaria antigens. Although malaria is preventable and curable, more than half a million people die of this debilitating disease each year – over 95% of them in Sub-Saharan Africa. A malaria vaccine, the ultimate form of prevention, would be revolutionary for the health of people in Africa and all over the world.
ETHIOPIA

Despite budget constraints, in collaboration with Castel Wineries and BGI Ethiopia, we were able to open a fifth clinic in Hawassa Ethiopia. So far, 6,000 people have been served at this clinic, over 2,000 have been tested for HIV, and 42 are enrolled in the Positive Kids program for children living with HIV. African Services has also partnered with other organizations to enhance services that this clinic provides. Among our partners are Save the Children, who has supplied all of our clinics with Plumpy’Nut, a ready-to-use packaged therapeutic food that supplements children at risk of malnutrition. We continue our successful partnerships with Vitamin Angels to supply vital multivitamins/minerals to children and pregnant and lactating mothers, and TOMS Shoes continues to donate 17,000 pairs of new children’s and adolescents’ shoes each year as part of our community health intervention.

CASE MANAGEMENT - MENTAL HEALTH SUPPORT WORK

Immigrants often face a unique set of challenges that can take an emotional toll. Whether facing poverty, be it in a home country or in the United States, an HIV diagnosis, prejudice, or a traumatic event, it can be a retreat to talk to a professional about one’s problems. Although the need is there, barriers related to language, stigma, or finances often keep immigrants from developing countries from receiving the mental health care that they need.

For this reason, African Services has begun offering mental health services in French and English by teaming up with licensed psychotherapist Natalie Weeks, who receives referrals from the legal and case management departments. Dozens of people have sought counseling, and the reception has been incredibly positive. Now, African Services can help people to take care of their bodies and their minds.
IMMIGRATION

CHAMPIONING THE NEXT GENERATION OF NEW AMERICANS

Undocumented Pulitzer Prize winner Jose Antonio Vargas remarked “[e]very social movement in the world is led by young people, and . . . [the youth] are the beating heart of this growing immigrant rights movement. ‘Like generations of immigrants before them, they have insisted on a better life not just for themselves and their families but for the country they love.’” It is largely because of the undocumented youths’ relentless, tireless activism and unyielding demand for change that a comprehensive, rights-based immigration reform policy has taken flight.

2012 has been an exciting year for immigration policy; particularly here in the United States, as immigrant groups have rallied together to demand that our government take action on the issue of comprehensive immigration reform. African Services Committee’s Advocacy and Legal Departments are deeply involved in this issue – attending immigration reform rallies, partnering with other local immigrant organizations, bringing the African community into the fold of the national debate, as well as providing legal assistance. With gratitude for the generous support of the New York Community Trust, African Services has been able to aid young undocumented immigrants in assessing their eligibility and in applying for temporary relief under the Deferred Action for Childhood Arrivals (“DACA”) program, alleviating the stresses and barriers of being an undocumented immigrant. Benefits for young men and women enrolled in DACA include the ability to attend college, attain a work permit and a driver’s license, and a reprieve from potential deportation.

Working with City, State and National partners, the ASC legal department has played a leading role in informing the local community and organizing local DACA events alongside some of the largest
immigration service providers in the United States. African Services also launched our desperately needed nominal-fee immigration clinic, and only a few months after the announcement of DACA, had assisted over 100 young and undocumented immigrants in applying for temporary immigration relief.

The depth of their work is not limited to DACA cases, but also includes a wide range of immigration matters including cases involving asylum, trafficking and gender-based violence. Additionally, our staff assists clients with cases involving public benefits, housing, custody, permanency and guardianship. In the past year, our small, but undaunted staff of six attorneys has assisted over 700 clients with various legal matters. The ASC legal department was also heavily involved in the implementation of a deferred action application streamlining process, working directly with the leadership of U.S. Citizenship and Immigration Services to create a procedure whereby undocumented individuals with HIV/AIDS may seek permission to remain in the United States.

African Services is committed to assisting undocumented youth because these young men and women will become future American leaders. The possibility of their success is the driving force behind the movement towards a fair immigration policy. It is the stories of young immigrants such as Seydou, Lola, Crystal, and Ayomide that fuel our dedication to the next generation. Amidst the chaos of congressional debate occurring behind closed doors in Washington, the voices and stories of these young men and women highlight the need for immigration reform as urgent and vital. Their determination to make the most of their lives amid difficult situations demonstrate the importance of DACA, the necessity of forthcoming legislation, and the importance of our work in this area.

I feel so blessed that I was introduced to African Services! I fortunately attended community college and received my associates degree. However, I am not able to continue my education because of costs and my inability to obtain steady employment to bankroll the tuition. Now, I have a work permit through Deferred Action for Childhood Arrivals, and I can begin my life!
I graduated from high school in June. I feel unequal to my peers because I cannot secure financial aid to attend college and am unable to apply for most scholarships. But, I am determined to attend college. I want to be a certified nurse anesthetist; I want to give back and I want to help. My hopes are handicapped because I was not born in the U.S., and I do not even have a Green Card. I love the United States and my life here. I want to participate and to do more, though. My future rides on DACA and African Services providing the help needed with the DACA application to begin my life.”
I learned I was an undocumented immigrant when I tried to apply for a coveted driving permit. Yet, I lacked the paperwork. I was disappointed, but shrugged it off. It was not until college, though, that the ramifications of being undocumented became real. Because of my immigration status (or, rather, lack thereof) I was unable to participate in so many parts of life and didn’t feel like I belonged anywhere. In October 2012, I was referred to ASC. The attorneys assisted me and submitted my DACA application, which was approved in June. Now, because of DACA and African Services’ help, I have that elusive driving permit!“

<< LOLA
Country: England and Nigeria
Current Age: 26
Arrival Age: 12

“I was overwhelmed with the reality of the U.S. – a dream come true. But, now that reality is changing. I graduated from high school with high honors and completed my second year of college in May. I am grateful for the education, yet my future is limited. Or, so I thought. My father sent me to ASC; I met with the attorneys and quickly began putting together my DACA application. I want to continue my life in the United States: to earn a Master’s degree, enter the workforce as a professional, contribute to society. Because of DACA and the ASC attorneys, the doors are open and I will succeed.”
The scope of the African Services Committee’s services is expansive: with programs ranging from HIV testing, legal aid, and ESL classes, the agency transcends categories and reaches out across populations from across the African Diaspora. In an organization with such a wide scope, what holds it all together?

Each and every organization requires basic maintenance: programs need to be managed and funded, the building systems need equipment to function, and human resources need support. These essential tasks and responsibilities, among many others, can be largely attributed to the work of Office Administrator Muna Hamouie and Fiscal Manager, Sarah Park. These two women are integral to keeping African Services running on a day to day basis: maintaining the pulse for an organization united in purpose, and diverse in programming. Their work, foundation as it is, is primarily behind the scenes.

Muna and Sarah share an office, where they work both collaboratively and independently. Fiscal Manager Sarah oversees and manages the accounting system at ASC. From taking care of day-to-day invoices, monthly fiscal reporting for grants, to periodic grant monitoring, Sarah explains plainly, “Every time the dollar moves, I do something.” Similarly, Muna’s responsibilities are broad and far-reaching. Responsible for human resources, vendor relationships, issues related to banking and petty cash, or ruffled clientele, among a myriad of other tasks, Muna explains, “Anything needed by the staff, they ask on a walk-in basis.”

For Muna and Sarah, versatility is key: responsibilities on the job are often unexpected, and the women must have a broad skill set. Muna explains that a typical day at African services doesn’t exist, but instead, “...we work across the board: any gaps that are missing, we fill them in.” In addition to her responsibilities as administrator, Muna also functions as African Services’ resident IT worker and fix-it woman.

Similarly, Sarah assists the agency in unexpected ways, working extensively with a wide range of departments and individuals. Much like Muna, she
now chatty nine year old Mamadou, who walks freely into her office just as he did as a toddler. Muna adds, “The work is the bigger picture, seeing what the agency does to change people’s lives, seeing things from start to finish: I am glad to be part of it, even if I am behind the scenes.”

Without the work of Sarah and Muna, the changes in the lives of the clientele would be largely unrealized. Their constant work is a primary force propelling the agency forward. At the end of the conversation, Dale, a member of the maintenance staff came to ask Muna about mops. She told him: Sorry; there won’t be extra mops today, maybe tomorrow. She turned, smiling in jest, adding, “Did I mention that I also manage the janitorial staff?”
When Tyrone walked into the Housing Department at African Services in February of 2013, he was skeptical. After spending 5 years living on the streets of New York City, he didn’t think it was possible to find housing. Tyrone came to the United States from Jamaica in the late 1970s. During these last few years on the streets, Tyrone’s health was declining. He recalls, “When I was on the street, I lost a lot of weight, I was weak, and got sick often: I slept outside in the winter, wasn’t eating right, had a lot of accumulated stress: I ended up in the ER several times.” When he came into African Services, Housing Department Director Aida Diallo-Diagne remembers how Tyrone insisted that they couldn’t help him. However, after several phone calls, Aida found a room for him, with all utilities included. Since he moved in, Tyrone has made remarkable progress in his health and happiness. While living in the same place for six months, Tyrone has had the time and resources to focus on his health: he has a kitchen to cook in, is enrolled in African Services’ nutrition program, and can exercise in the park.

The women that comprise the Housing Department, Coumba Gueye, Aida Diallo-Diagne and Irma Jimenez, participate and facilitate these personal revolutions from 9 to 5 each day. The Housing Department’s objectives are straightforward: to find residences for clientele in need. Without a home, clients do not have a foundation from which to build a life in the United States: a residence provides not only stability but also creates space for progress. Explains Aida, “We are the way into African Services- we hear it all, they come in with nothing, no Social Security number, no documents, no money, no family, and we try and give them everything.”

The Housing Department is nestled into a corner on the second floor, where the three women sit several feet away from one another, always busy with a client or haggling with a broker. Aida and Irma have been working at African Services for 12 years, and Coumba joined the team 5 years ago. Despite their practice and efficacy as a team, the task of
finding housing placements is consistently challenging. African Services receives generous funding from various sources, such as the MAC AIDS Fund and HOPWA (administered by the NYC Department of Health and Mental Hygiene), to assist in defraying housing costs for 100 clients each year. The challenges, however, are numerous: clients often do not have a Social Security number, or sufficient income to spend on housing. The women in the housing department work to find apartments, within the five boroughs, that pass inspection, include utilities, and are within their budget as housing prices in the city rise. Access to affordable housing is becoming increasingly difficult. The apartments are mostly in Brooklyn, or the Bronx; occasionally Queens. Aida explains, “It has been two years since we’ve found something in Manhattan; we used to find apartments in Washington Heights, Inwood...then there is the gentrification of Harlem, and we’ve really felt that.”

Finding sufficient housing requires constant networking: the team are always seeking out new brokers and property managers. These relationships with brokers and managers are delicate; if one client doesn't pay on time, the relationship can be severed. Aida jokes that the department is like a little Wall Street: always making deals from one broker to the next, always networking, and forming new relationships.

Despite any comparisons with Wall Street, locating housing requires humanity and compassion. The Housing department works in a variety of ways to provide clientele with homes. They not only assist clients with finding housing, but also help them turn their new apartment into a true ‘home.’ The women are constantly taking trips to Ikea and Walmart to buy furniture, sheets and appliances – a new home ‘starter kit,’ as they affectionately call it.

The task of finding housing is often stressful and overwhelming, however, they explain, changing clients' lives is a constant inspiration. The women speak about Tyrone with pride and affection, recalling how when he first came to his apartment, he marveled, “Is this really my apartment, do I pay for water?” Today, they reflect on his transformation: he is healthy, revitalized, and strong, almost unrecognizable from six months ago. Coumba explains, “That’s the joy for us...that’s what makes it worthwhile.”
Since 1981, African Services has been a beacon in the African and Caribbean community. We have welcomed hundreds of thousands of immigrants from across the African Diaspora and the Caribbean, all from different countries and with different mother tongues, but all with similar hopes and dreams.

The beauty of the African Diaspora in the United States is the overwhelming diversity of each country and culture. However, African Services recognizes the importance of the Diaspora community coming together and working towards common goals. Since our inception, African Services Committee has been working to unite the New York Diaspora community, and empowering them to enter into the political dialogue and make their voices heard. In 2012, it was particularly important, as the national debate for comprehensive immigration reform and health care was placed center stage during the presidential election.

African Services Committee has always recognized the importance of motivating our clients to take ownership of the discussion and to help bring the ‘African’ perspective into the national dialogue. We have been fortunate enough to share this passion with the Ford Foundation, and since 2009 they have generously supported our advocacy efforts, particularly around the intersection of HIV and immigration – the first ever grant awarded by the foundation solely for human rights advocacy for HIV positive African immigrants and asylum-seeking populations. Since that time, we have focused our attention on the fastest growing form of incarceration in the United States – immigration detention. On any given day, the US imprisons more than 33,000 immigrants, many of who are refugees and survivors of torture or human trafficking. The African Services Advocacy department has worked closely to research and document this issue, and in March 2012 welcomed progressive change in the Immigration and Customs Enforcement’s Performance Based National Standards. ASC’s Director of Advocacy, Amanda Lugg, was also elected to the board of the Detention Watch Network, where she is able to continue to advance the issues of our clients.
In addition to our work in immigration detention, African Services Case Manager and Immigration Advocate, Bakary Tandia, has been tirelessly working with local partners, including the New York Immigration Coalition, to mobilize African Services’ clients, and the African community as a whole, for advocacy in Albany and in Washington, D.C. Bakary empowers clients and community members to fight for fair and equitable immigration reform, rights for HIV positive individuals, health care access and more. In July 2012, African Services filled two buses of clients and supporters to attend the Washington, D.C. International AIDS Conference “We Can End AIDS” rally, which had over 25,000 people in attendance.

African Services fills an important gap, not only in African immigrants’ access to social services, but also in their capacity to secure their civil and human rights. Our deep gratitude and appreciation goes out to the Ford Foundation in recognizing this role that ASC has to play and for allowing us the resources to be engaged in this critical dialogue.

Few will have the greatness to bend history itself; but each of us can work to change a small portion of events, and in the total; of all those acts will be written the history of this generation. – ROBERT KENNEDY
The gates creak open, and clients begin trickling in. Commercial sex workers from the neighboring market head to the outreach coordinators to get a stock of condoms, a group of young men sign-in for voluntary HIV testing, young mothers line up to get their weekly nutrition supplements as wide-eyed children strapped to their back stare out at the surroundings, and couples sit patiently in the waiting room for family planning consultations. You can hear the gentle whirring of the CD4 machines, as on-staff lab technicians complete CD4 tests. From the moment the gates open, to the moment they are shut at night, the courtyard bustles with energy and action as African Services health officers, nurses, outreach workers, counselors, testers and pharmacists go about assisting the dozens that flow through the gates each day.

When Co-Executive Director, Asfaha Hadera, imagined going back to Ethiopia – his country of origin – he never imagined that the response would be so great and the demand so high. However, in 2012, as African Services celebrates its first decade of service in Ethiopia, he looks back with quiet pride at all that has been achieved, “I knew the need was great, but I never knew how overwhelming the response would be to our services, and how much we were going to grow in such a short time.”

In 2003, Asfaha Hadera made the decision to return to his home country of Ethiopia and take the African Services’ HIV/AIDS outreach, testing and care model to a country and a community deeply affected by the HIV crisis. Our beginnings were humble, in a small storefront stall in the Shola Market, in Addis Ababa. Since that time, the clinic itself has expanded to a compound of 13 rooms and serves over 6,000 people each year, offering a wide range of services including: HIV and TB prevention education, testing, treatment and care, vitamin & nutritional supplement distribution, reproductive health and family planning, pediatric HIV/AIDS case management, micro-lending and income generating activities (IGA), and children’s shoe distribution through our partner, TOMS Shoes.
The growth didn’t stop simply at our work in Shola. In the nine years since our establishment, African Services’ expanded our presence in the country to new regions – North and South – thanks to a fruitful partnership with local companies, BGI Ethiopia and Castel Wineries. Clinic locations opened in the northern region of Ethiopia in Kombolcha and Mekele, each of which serve over 6,000 clients per year. In the southern region, clinics were opened in the bustling cities of Ziway and Hawassa. Although in their nascent stages, they have already served tens of thousands of individuals. Since our arrival to Ethiopia in 2003, our clinics combined have provided voluntary testing and counseling to over 137,000 individuals and distributed over 2.5 million condoms to clients and commercial sex workers.

African Services also continues to diversify our services as the needs of our clients grow and change. African Services is proud to partner with Save the Children to distribute Plumpy’Nut, a ready-to-use food supplement designed to treat marginal to severe malnutrition in infants and children – an issue that continues to plague our clients. We are also honored to continue our partnership with Vitamin Angels, who for the last 5 years, has provided vitamins and nutritional supplements to African Services clinics, enabling us to supplement the diets of the adults and children enrolled in our HIV care programs. In addition, TOMS Shoes continues their generous support by providing thousands of pairs of shoes to clinics for distribution to the families in the surrounding communities we serve.

As we approach a decade of service in Ethiopia, we not only look back with pride at what we’ve accomplished, but continue to look ahead to the future of our work, and how we can better serve the needs of the Ethiopian people. Our grassroots approach to outreach, testing, treatment, counseling and education has become a proven model in Ethiopia that other NGO’s strive to replicate. “The sky is the limit for what we can accomplish,” says Hadera, “and I am inspired and motivated by all the faces that flow through our gates, and won’t stop until our goals have been achieved.”
# Financial Statement

## Support & Revenue

### Support

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants and Contracts</td>
<td>1,518,911</td>
<td>2,163,496</td>
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<tr>
<td>Contributions</td>
<td>209,550</td>
<td>490,716</td>
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<tr>
<td><strong>Total Support</strong></td>
<td><strong>1,728,461</strong></td>
<td><strong>2,654,212</strong></td>
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### Revenue

<table>
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<tr>
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<tr>
<td>Miscellaneous Income</td>
<td>15,721</td>
<td>13,001</td>
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<tr>
<td><strong>Total Support &amp; Revenue</strong></td>
<td><strong>1,744,182</strong></td>
<td><strong>2,667,213</strong></td>
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</table>

## Expenses

### Program Services

<table>
<thead>
<tr>
<th>Service</th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Services</td>
<td>455,165</td>
<td>1,148,139</td>
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<tr>
<td>Housing Services</td>
<td>193,947</td>
<td>319,904</td>
</tr>
<tr>
<td>Legal Assistance</td>
<td>360,951</td>
<td>316,473</td>
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<tr>
<td>Social Services</td>
<td>426,413</td>
<td>394,214</td>
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<tr>
<td>International Program</td>
<td>228,758</td>
<td>459,458</td>
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<tr>
<td><strong>Total Program Services</strong></td>
<td><strong>1,665,234</strong></td>
<td><strong>2,638,188</strong></td>
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</tbody>
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### Supporting Services

<table>
<thead>
<tr>
<th>Service</th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management and General</td>
<td>191,449</td>
<td>474,180</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>1,856,234</strong></td>
<td><strong>3,112,368</strong></td>
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## Change in Net Assets

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net Assets (deficit)</td>
<td>-112,501</td>
<td>-145,180</td>
</tr>
<tr>
<td>Beginning of Period (as adjusted)</td>
<td>1,134,523</td>
<td>1,279,678</td>
</tr>
<tr>
<td><strong>Net Assets at End of Year</strong></td>
<td><strong>1,022,022</strong></td>
<td><strong>1,134,523</strong></td>
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</tbody>
</table>

*ASC has adopted a Jan. 1 - Dec. 31 fiscal year; most recent audit covers last 7 months of 2012 to complete the fiscal year.
FUNDING AND SUPPORT

GOVERNMENT

FEDERAL
Federal Emergency Management Agency
Center for Disease Control and Prevention

INTERGOVERNMENTAL
United Nations Population Fund (UNFPA)

STATE AND LOCAL
New York State Department of Health; AIDS Institute
New York State Employees Federated Appeal
New York City Council
New York City Department of Health and Mental Hygiene
New York City Department of Youth and Community Development
City University of New York Campaign

CORPORATIONS & FOUNDATIONS

AfriMETRO
Amerigroup Foundation
American Express
American Liver Foundation
Bank of America
BGI Ethiopia/Castel Winery
Broadway Cares Equity Fights AIDS
Budge, Inc.
Champion Courier
Chembio Diagnostic Systems
Children Affected by AIDS Foundation
City College 21st Century Foundation
Dell Employee Giving Program
Epstein Family Foundation
Ethiopian Airlines
Fairway Market
First Republic Bank
Ford Foundation
Gilead Sciences
High Mowing Seeds
H. van Ameringen Foundation
Health Trust Purchasing Group
The Hyde and Watson Foundation
The International Foundation
The Izumi Foundation
Kikkerland Design, Inc.
Lester Poretsky Family Foundation, Inc.
Lucky Dog Vodka
MAC AIDS Fund
Macy’s Inc.
Minkwon Center for Community Action
Moving Man, Inc.
The New York City AIDS Fund
Park Avenue Charitable Fund
Rockefeller Foundation
United Way of New York City
FUNDING AND SUPPORT

SPECIAL PARTNERS

ACRIA
Aid for Africa
AIDS Walk New York
Africa Action
American Liver Foundation
Becton, Dickinson and Company
Blue Marble Ice Cream
Bronx Lebanon Hospital Center
Brooklyn Law School
Cardoza School of Law
Central Harlem Community
Supported Agriculture Program
City Council Member Inez Dickens
City Council Member Robert Jackson
Columbia University School of Social Work
Columbia University School of Law
Mackenzie Crone
Ethiopia Federal Ministry of Health
Sydney Dennison
The Fresh Air Fund
GMHC
Sue & Judy Greenwald

Ruth Gruen
Harm Reduction Coalition
Health GAP
HIV Law Project
Literary Assistance Center, Inc.
The Mayor’s Office of Immigrant Affairs
Medica Pharma
New York State Department of Health
New York City Department of Health
and Mental Hygiene
New York City Health and Hospitals Corporation
New York Cares
New York Immigration Coalition
Office of Minority Health Resource Center
PS/MS 161
Public Health Solutions
Queen of Sheba Ethiopian Restaurant
Sicomac Elementary School
TOMS Shoes
UNAIDS
United Way of NYC
Vitamin Angels

INDIVIDUAL DONORS BY GIVING LEVEL

$10,000 - $14,999
Addie Guttag

$5,000-$9,999
Dr. Michael Smith

$3,000-$4,999
Gary and Laurie Cohen
Steven Zelin

$1,000-$2,999
Nancy Kaplan
Michele Raimo
Sara Riese
Nadya Salcedo
James Webster
Nathalie Weeks

$500-$999
Dennie Beach
T. Richard Corcoran
Khalil Ghassan
Mary Beth Kelly
Neeraj Mistry
Patricia Romero
Carl and Afaf Mahfouz Schieren
Betty Williams

$300-$499
Pamela Brown-Peterside
Susan Greenwald
Ann Nichols
David & Christine Nichols
Greg Nichols
Inbal Samin
Ruth Titus
Marijke Velzeboer & Daniel Salcedo

$200-$299
Brook & Judith Baker
Carolyn Bancroft
Kwame Dougan
Judith Greenwald
Ron & Carley Claghorn Ross
Victor & Sarah Kovner
Gertrude Lepine
Jeanette Lepine
Joel Maxman
Mary Moran
New York State Department of Health
New York City Department of Health
and Mental Hygiene
New York City Health and Hospitals Corporation
New York Cares
New York Immigration Coalition
Office of Minority Health Resource Center
PS/MS 161
Public Health Solutions
Queen of Sheba Ethiopian Restaurant
Sicomac Elementary School
TOMS Shoes
UNAIDS
United Way of NYC
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