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“GAY MEN’S HEALTH CRISIS IS A TRANSFORMATIVE PLACE, WITH THE POWER TO ALTER LIVES. TODAY, ONE OF THE CHALLENGES TO ENDING THE PANDEMIC AS WE KNOW IT IS ONE OF RESOLVE. AT GMHC, OUR OWN RESOLVE IS INSPIRING AN INTENSIVE STRATEGIC PLANNING PROCESS TO RE-ENERGIZE PUBLIC DETERMINATION TO CREATE A WORLD WITHOUT AIDS. OUR HISTORY HAS TAUGHT US A LOT ABOUT FACING DOWN DEATH; TODAY OUR COMMITMENT IS FOCUSED ON LIFE.”

ANA OLIVEIRA

EXECUTIVE DIRECTOR

GMHC 2004 ANNUAL REPORT

“PEOPLE STILL HAVE SO MUCH ANXIETY ABOUT HIV, ESPECIALLY YOUNG PEOPLE WHO ARE CONFUSED AND JUST STARTING THEIR SEARCH FOR INFORMATION. SOMETIMES THEY’RE NOT EVEN SURE WHAT THEY’RE LOOKING FOR AND THEY JUST NEED SOMEONE TO TALK TO, OR HELP THEM SORT OUT PREVENTION AND OTHER ISSUES. THE HOTLINE IS A PLACE WHERE THEY CAN VOICE THEIR PAIN AND KNOW SOMEONE WILL LISTEN.”

ROGERIO BOREM

GHMC AIDS HOTLINE VOLUNTEER

GETTING HIV INTO PEOPLE’S MINDS BEFORE IT’S IN THEIR BODIES





“I WORKED FOR 25 YEARS BUT WHEN I STOPPED I DIDN’T QUALIFY FOR BENEFITS. I REALIZED THE SITUATION MUST BE EVEN WORSE FOR OTHERS. OUR HEALTHCARE SYSTEM CREATES BARRIERS FOR THE PEOPLE WHO NEED IT MOST. PEOPLE THINK THEY DON’T KNOW HOW TO CHANGE IT. EDUCATING PEOPLE IS PROBABLY THE MOST IMPORTANT WORK I DO. I ALWAYS TELL PEOPLE YOU CAN MAKE A DIFFERENCE. IF YOU DON’T DO IT, NO ONE ELSE WILL.”

JIM SHEA

VOLUNTEER HEALTHCARE ADVOCATE

FIGHTING FOR AFFORDABLE, ACCESSIBLE HEALTHCARE HERE AND ABROAD

“YOUNG PEOPLE KNOW AIDS IS STILL A PROBLEM BUT IT’S KIND OF HIDDEN. TOO MANY TAKE A ‘SEE NO EVIL, HEAR NO EVIL’ APPROACH BY NOT TAKING IT SERIOUSLY. WE TRY TO MAKE IT SERIOUS BY CONTINUING OUR OUTREACH, MAKING TESTING AND INFORMATION AVAILABLE. WE DEVELOP RELATIONSHIPS WITH THE YOUNG PEOPLE WE’RE SERVING. WE’VE OPENED UP OUR DOORS. WE LET THE KIDS WHO MIGHT FEEL FORGOTTEN IN THE GAY SCENE KNOW THAT WE’RE HERE FOR THEM.”

AISHA DIORI

HOUSE OF LATEX
REACHING YOUTH — A HIGH RISK GROUP



10/11



NEW YORK
★ 1935



“CRYSTAL METH TAPS INTO A LOT OF ISSUES THAT GAY MEN FACE AROUND SELF-ESTEEM, SELF-WORTH, AND HOW WE VALUE EACH OTHER. USERS OFTEN COME TO US FEELING VERY VULNERABLE AND ASHAMED. WE’RE INVESTED IN HELPING THEM FIGURE OUT WHAT THEY WANT TO DO DIFFERENTLY. OUR SUCCESS IN CREATING A SAFE, NON-JUDGMENTAL AND SUPPORTIVE ENVIRONMENT ALLOWS THE MEN WE WORK WITH TO MAKE REAL POSITIVE CHANGES.”

YVES-MICHEL FONTAINE

COORDINATOR, SUBSTANCE USE COUNSELING AND EDUCATION
MOBILIZING AGAINST CRYSTAL METH

DEAR FRIENDS OF GMHC

As I write in the 23rd year of the epidemic, we find ourselves continuing to fight a disease that has posed daunting challenges to us. In the beginning, those challenges were mitigated by the outrage and the tremendous moral courage that mobilized advocates and organizations and forced a response and indeed a worldwide movement to resolve this crisis.

Clearly, progress was forged with the development of medicines that prolong lives and ameliorate the illnesses caused by HIV. But AIDS remains a lethal and devastating disease for which there is no vaccine and no cure.

We now have tremendous resources at hand: an arsenal of treatment approaches, innovative prevention interventions, and, most importantly, legions of people — people living with, fighting against, and hugely knowledgeable about HIV and AIDS. We know what needs to be done. We understand that AIDS occurs within social and historical contexts of great disparity, and that those inequities must be addressed in order for this plague to be stopped.

Today, one of the enormous challenges to ending the pandemic as we know it is one of resolve. At GMHC, our own resolve is inspiring an intensive strategic planning process to re-energize public determination to create a world without AIDS. Our history has taught us a lot about facing down death; today our commitment is focused on life.

The pages that follow highlight some of the increased focus that GMHC is placing on prevention and testing, on community education, and on tangible programs that allow people living with HIV and AIDS to achieve greater control, dignity, and self-sufficiency in their lives. We have also expanded our approach as we respond to the devastation of HIV and AIDS specifically in the lives of gay men and the lives of women.

The enormous expansion of HIV and AIDS over the years has demanded remarkable flexibility and resilience in our response. What hasn't changed — and what won't change — is our commitment to ending this plague.

While the distance we have to go far exceeds our progress, with your support I know we'll prevail.



ANA OLIVEIRA, EXECUTIVE DIRECTOR

15,000+

GMHC SERVED OVER 15,000 CLIENTS IN 2004



2004 HIGHLIGHTS

A PARADIGM SHIFT IN HIV PREVENTION

Last year GMHC embarked on a strategic paradigm shift with the expansion of our Institute for Gay Men's Health into a new collaboration with AIDS Project Los Angeles (APLA). The Institute now effectively combines the resources, expertise, and on-the-ground activities of two of the nation's most respected AIDS service and advocacy organizations from its two epicenters of people living with HIV/AIDS, New York and Los Angeles. By creating innovative research, intervention, and outreach models, the Institute for Gay Men's Health will magnify existing HIV prevention efforts and help transform strategies to improve gay men's health on national and global levels.

THE FIRST STEP IN HIV PREVENTION

Our David Geffen Center for HIV Prevention and Health Education was one of the first facilities in the nation to offer the Rapid Test. With results in less than an hour, the test plays a critical role in our prevention efforts, eliminating the long waiting periods that discouraged many people from getting tested in the past. In addition, we expanded access to testing by taking testing to Central Park during AIDS Walk New York. All testing became free in 2004.

HIV PREVENTION – GETTING TO THE SOURCE

MOBILIZING AGAINST CRYSTAL METH

One of our most concerted efforts this year addressed the growing crystal methamphetamine (crystal meth) crisis within the gay community and the link between crystal meth use and the increased risk of HIV transmission. GMHC convened a broad-based task force to address this public health problem. Comprised of public health advocates, community leaders, HIV/AIDS service organizations, researchers, and activists, the GMHC Task Force on Crystal Meth, Syphilis and HIV issued a report with recommendations for government and the lesbian, gay, bisexual, and transgender (LGBT) community.

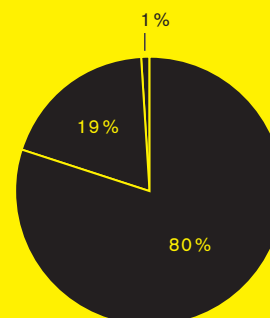
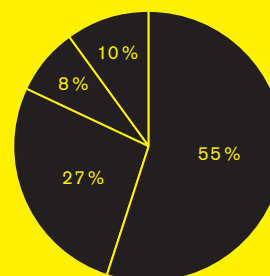
We reached communities through a public awareness campaign that included palm card distribution at key events and locations, posters in gay bars, ads in local gay media, and banner ads on popular gay Web sites. The campaign will soon be expanded to include bus shelter posters and other outdoor advertising. Images from the campaign may be found at www.gmhc.org.

REACHING YOUTH – A HIGH RISK GROUP

We know from experience that the best way to foster HIV prevention is by engaging members of the community directly. To that end, GMHC's House of Latex, which provides services for LGBT youth of color, held a poster competition to inspire its members to take ownership of HIV prevention and create their own safer sex messages to persuade their peers to get tested and become involved in HIV prevention. The House of Latex is a powerfully effective example of peer-to-peer outreach

CLIENTS BY SEXUAL ORIENTATION

GAY/LESBIAN: 55 %
HETEROSEXUAL: 27 %
BISEXUAL: 8 %
UNDISCLOSED: 10 %



CLIENTS BY GENDER

MALE: 80 %
FEMALE: 19 %
TRANSGENDER: (F) 1 %

(known as community-level, subculture-specific, peer-based intervention), mobilization, and creativity culminating with the annual House of Latex Ball, held last year at the Roseland Ballroom with more than 2,500 in attendance.

GETTING HIV INTO PEOPLE'S MINDS BEFORE IT'S IN THEIR BODIES

Both prevention and testing rely heavily on our ability to reach those who are at highest risk for contracting or transmitting HIV. Through social marketing campaigns, face-to-face interaction, and the Internet, GMHC strives to get prevention messages out to those who need them most.

To counter the "fatigue" associated with hearing messages about condom usage since the early 1980s, GMHC worked with a local advertising firm to design an ad that would capture the general public's attention with a direct appeal to practice safer sex. The ads, which appeared in a local magazine and were converted into printed materials for distribution to venues throughout the city, stirred controversy and a great deal of media attention when the body that runs the New York City subway system refused to display the subway posters, citing the content as "inappropriate." As a result, calls to the GMHC AIDS Hotline increased and there was additional traffic to our Web site for information about our testing services.

To get vital information directly into the hands of clients and the general public, GMHC launched a new design for our Web site, www.gmhc.org. A major stepping stone from the previous site, the new site showcases a wealth of both new and updated content, search tools and quick guides, online donation capability, HIV/AIDS-related content streams from Kaiser Networks and much more. The Web site now enables visitors to more easily access data on HIV and AIDS, locate services, learn about government policies that impact people living with or affected by HIV/AIDS, and view a community calendar of GMHC events and activities.

PREVENTION APPROACHES AND LIFE STRATEGIES FOR WOMEN

The absence of a female-controlled safer sex barrier is a key factor in the escalation of HIV transmission among women. For several years, GMHC has been a co-convenor of the New York Microbicides Work Group, which is raising public and political awareness about microbicides as a critical component for HIV prevention. Last year we created and distributed a microbicide education and advocacy curriculum that has been widely used in the public health field.

Our research partnerships with Memorial Sloan-Kettering (family access-to-care study), the Mailman School of Public Health at Columbia University (microbicide advocacy curriculum), and the United Way of New York City (an emerging needs study with the Women and Families with HIV/AIDS Initiative) are supporting the development of new approaches that can be replicated. Our future programs will build on our established strengths and utilize a multi-level application that focuses on services, prevention, and research. As 2004 saw the Institute for Gay Men's Health forge a new frontier in the epidemic, we look to 2005 to unveil a cutting-edge approach for women and families.

PREPARING PEOPLE FOR THE FUTURE

A decade after the advent of protease inhibitors, growing numbers of clients face the need to enter or re-enter the workforce. Professional training and skills-building are essential for personal transformation, and GMHC has two new initiatives designed to address our clients' needs aggressively.

The Moving Ahead Toward Career Horizons (MATCH) Program offers comprehensive vocational assessment, training, academic and job placement assistance, helping clients to enhance their skills, obtain employment, and achieve greater financial independence while building self-esteem and confidence.

As the fiscal year ended in June 2004, we were in the process of establishing a state-of-the-art technology lab at GMHC to provide people at all levels of experience with equipment and interactive media software to enhance their skills, their employability – and their possibilities – thereby benefiting themselves as well as their communities. In partnership

with the SUNY Center for Academic and Workforce Development, the Advanced Technology Training and Information Networking (ATTAIN) lab at GMHC will be the first of its kind in any HIV/AIDS service organization in New York State.

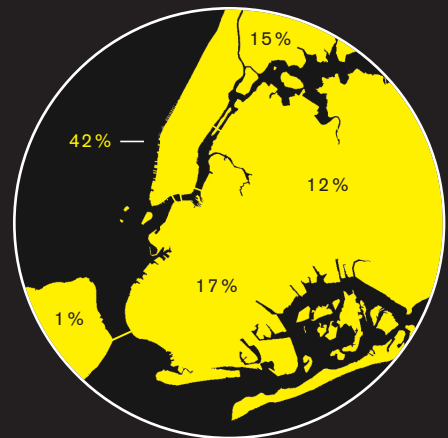
OUR ISSUES ARE YOUR ISSUES: FIGHTING FOR AFFORDABLE, ACCESSIBLE HEALTHCARE HERE AND ABROAD

The strength and importance of GMHC's healthcare advocacy in New York City were demonstrated last year in our successful efforts to retain and increase funding in the City's budget for an initiative targeting communities of color. As a result of intense and lengthy negotiations, funding of the initiative was not only maintained but broadened to include community-based agencies that were on the verge of losing their funding.

On a national level, GMHC is actively fighting against the burden of rising healthcare costs and challenging drug pricing and importation policies. A major victory for us last year was the defeat of the 2003 Medicaid block grant, protecting the benefits of millions of people.

In 95 percent of the world, people with HIV have little or no access to medical care, drugs, or diagnostic tools. Working in partnership with the Treatment Action Campaign in South Africa, GMHC helped to organize the first International Treatment Preparedness Summit, where a group of people living with HIV/AIDS and their advocates from around the world formed the International Treatment Preparedness (ITP) Coalition. GMHC helped the coalition organize the first-ever meeting between people living with HIV/AIDS, advocates, the Director General of the World Health Organization (WHO) and the Executive Director of the Global Fund. With our active involvement, the coalition embarked on a partnership with the Tides Foundation to raise funds to support local treatment advocacy and education efforts around the world. Through this collaborative effort, \$3 million has been raised, including \$1 million from WHO. Last year, GMHC, with support from the Bill and Melinda Gates Foundation, worked successfully with experts in the field to design an initiative to develop and manage a "pipeline" for the development and deployment of low-cost and easy-to-use monitoring and diagnostic tools. This included identifying and assessing key issues, such as intellectual property rights and patent issues, and drafting a proposal and strategic plan for moving forward.

With the advent of the 2004 elections, GMHC initiated voter registration efforts throughout New York City and successfully registered hundreds of new voters. In addition, GMHC raised voter awareness by comparing the healthcare proposals of the two presidential candidates in a report entitled "Prescriptions for Reform: A Comparison of the Bush and Kerry Health Care Access Proposals and their Impact on People with HIV/AIDS." The report, scheduled for release in the Fall of 2004, also provided an assessment of how each plan might impact people living with HIV/AIDS.



CLIENTS BY RESIDENCE

- MANHATTAN: 42%
- BRONX: 15%
- BROOKLYN: 17%
- QUEENS: 12%
- STATEN ISLAND: 1%
- OTHER: 13%

FROM THE CO-CHAIRS OF THE BOARD OF DIRECTORS

We are proud and grateful to be writing to you on behalf of the GMHC Board. Proud because the agency is strong and brimming with vitality. And grateful because we are on solid financial footing thanks to the steadfast commitment of our supporters and the tenacity of our management team. To our open-hearted individual donors, our miraculous volunteers, our inspired corporate and foundation leaders, and our thousands of dedicated AIDS Walkers, we want to extend the deepest thanks from the Board of Directors and the staff for all of your efforts.

We have a unique perspective that enables us to bear witness to the tangible, lasting impact our donors have on the lives of thousands of men, women, and children who rely on GMHC directly, and the many thousands more who access our information and resources through our community outreach, Internet, and Hotline activities.

With the generous and perceptive support of the private sector, GMHC has been able to break new ground in HIV prevention, treatment advocacy, and public policy — all of which are so dependent on general, unrestricted dollars. Just as our clients rely on our support and services to help them lead more productive, autonomous lives, the strength and reach of GMHC relies on independent resources.

To our donors and friends who help keep GMHC both stable and flexible, thank you for keeping GMHC among your personal priorities as you join us in the fight in so many ways. We take your support very seriously and pledge to continue making GMHC a place that generates pride as well as progress.

BOARD OF DIRECTORS

JULY 2003-JUNE 2004

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WILLIAM S. FLOYD
CO-CHAIR,
GMHC BOARD OF DIRECTORS



RON MARTIN
CO-CHAIR,
GMHC BOARD OF DIRECTORS

GMHC PROGRAM GUIDE

SINCE 1981, GMHC HAS OFFERED A CONTINUUM OF COMPREHENSIVE SERVICES FOR PEOPLE LIVING WITH AND AFFECTED BY HIV AND AIDS. OUR SERVICES KEEP EVOLVING TO MEET THE INCREASINGLY CHANGING DYNAMICS OF THE EPIDEMIC. THE AGENCY'S PRINCIPLE PROGRAMS INCLUDE:

THE DAVID GEFFEN CENTER FOR HIV PREVENTION AND HEALTH EDUCATION combines a highly successful HIV and STI testing and counseling center with follow-up and immediate connection to care. Its programs also empower clients with the knowledge to maximize their well-being in the context of broader health concerns. To this end we offer an extensive treatment library, treatment education workshops, and one-on-one treatment adherence support.

THE GMHC AIDS HOTLINE responds to over 35,000 phone calls and Internet requests yearly with detailed information, emotional support, and an expansive referral service.

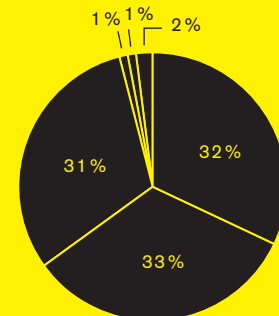
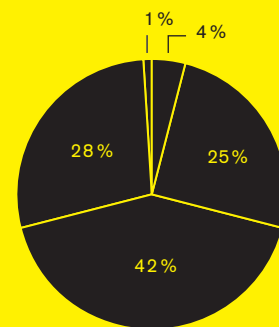
THE MICHAEL PALM CENTER FOR AIDS CARE AND SUPPORT is the primary vehicle of entry to services for new clients, ensuring effective linkage to and coordination of care, both internally at GMHC and externally in collaboration with our community partners. It has two units: **Coordinated Care** — which includes new client intake and assessment, crisis intervention, case management, and client advocacy; and **Counseling and Support** — which includes in-home “Buddy” services, short-term individual counseling, support groups, and a social day care program which ensures that long-term needs are addressed.

THE MEALS AND WELLNESS PROGRAM provides a safety net for impoverished clients at high risk of losing essential services and resources by providing hot, delicious meals in a cheerful, congregate setting. More than 85,000 meals were served last year. We also provide individualized nutrition counseling, nutrition groups, workshops, classes in cooking, therapeutic art, exercise programs, and complementary therapies.

THE INSTITUTE FOR GAY MEN'S HEALTH is committed to HIV prevention in the context of wellness among gay men, men who have sex with men (MSM) and their affiliated communities. Addressing a multiplicity of health issues and social contexts, the Institute embraces a broader health agenda through HIV and STI prevention services, leadership development, community-building, education, and community-based research. Component programs include Soul Food, an outreach, community mobilization, and HIV prevention/sexual health promotion program targeting black MSM; Proyecto P.A.P.I., a counterpart targeting Latino, predominantly immigrant, MSM; and the House of Latex Project, an initiative serving black and Latino lesbian, gay, bisexual, and transgender youth and young adults involved in New York City's house/ball community.

CLIENTS BY AGE

UNDER 29: 4%
30-39: 25%
40-49: 42%
50+: 28%
UNDISCLOSED: 1%



CLIENTS BY RACE & ETHNICITY

WHITE: 32%
BLACK: 33%
HISPANIC: 31%
ASIAN/PACIFIC ISLANDER: 1%
NATIVE AMERICAN: 1%
UNDISCLOSED: 2%



GMHC'S GEFFEN CENTER SAW AN INCREASE OF 33% IN PEOPLE COMING IN FOR TESTING

SIX MONTHS

39% OF NEW CLIENTS CAME TO GMHC WITHIN 6 MONTHS OF THEIR HIV DIAGNOSIS

CHILDREN

AT LEAST 25% OF CLIENTS HAD 1 OR MORE CHILDREN IN THEIR HOUSEHOLD

LESS THAN

70% OF OUR CLIENTS REPORTED AN ANNUAL INCOME OF LESS THAN \$10,000

WOMEN AND FAMILY SERVICES provides outreach, education, early intervention and support for women, parents and families at risk for or living with HIV/AIDS. The department targets at-risk and HIV-positive women and affected families. The Child Life Program serves parents, caregivers and their families living with and affected by HIV/AIDS with a wide range of family health and nutrition services, including a widely-used food pantry. The Lesbian AIDS Project targets lesbian, bisexual and other women who partner with women who are at risk for or living with HIV/AIDS. Women in Action is our harm reduction program serving HIV-positive women challenged by substance use. The Latina Initiative focuses on linguistic and culturally competent outreach and supportive services, and the Peer Leadership Initiative builds leadership skills for HIV-positive women.

THE LEGAL SERVICES DEPARTMENT offers legal services critical to obtaining and maintaining access to food, housing, medical care, and employment. The department focuses on discrimination, employment, bankruptcy, homelessness prevention, family law, child custody, permanency planning, immigration, and access to benefits and entitlements. Legal Services works in the field in immigrant communities throughout the city. The Sustainable Living Fund provides rental assistance to clients.

THE TERRY K. WATANABE VOLUNTEER AND WORK CENTER recruits, provides training for, and supports thousands of volunteers and interns in the fight against AIDS. These volunteers staff critical programs and administrative functions at GMHC. Through our Community Education Program, trained volunteer educators provide HIV education at approximately 65 events each year in New York City. The Watanabe Center also houses the Moving Ahead Toward Career Horizons (MATCH) Program which helps people living with or at risk for HIV/AIDS to succeed in the workforce. The program offers comprehensive vocational assessment, training, job placement assistance and retention services to ensure a successful transition to work.

THE PUBLIC POLICY DEPARTMENT is an aggressive advocate, at the city, state, and federal levels, for fair and effective HIV- and AIDS-related policies. Through its public policy efforts, GMHC keeps HIV prevention, treatment and care, and a cure for HIV as urgent items on global, national, and local agendas.

The Treatment and Prevention Advocacy arm of the Public Policy Department focuses the agency's advocacy efforts on the development of new, better, and less expensive methods for the prevention, diagnosis, and treatment of HIV and AIDS. *Treatment Issues*, an internationally-recognized monthly newsletter, reporting on the latest medical and scientific information in HIV and AIDS policy and care, is published by the Public Policy Department.

**“I HAD BEEN OUT OF THE WORK-
FORCE FOR ALMOST 20 YEARS,
LIVING ON PUBLIC ASSISTANCE
AND NOT CARING ABOUT MY
FUTURE. I HAD A BAD ATTITUDE.
COMING HERE GAVE ME NEW
OBJECTIVES. THE MATCH PROGRAM
HELPED BRING SOMETHING OUT
IN ME. THEY DIDN'T GIVE ME
A JOB — I WENT OUT AND GOT IT.
I WAS ABLE TO PROVE MYSELF.
NOW, THE PEOPLE IN MY LIFE
KNOW THEY CAN COUNT ON ME.
IT'S A GOOD FEELING.”**

LYDELL WILLIAMS

MOVING AHEAD TOWARD CAREER HORIZONS (MATCH) PROGRAM GRADUATE
PREPARING PEOPLE FOR THE FUTURE



22/23





"I THINK THE EASE OF RAPID TESTING HAS OPENED UP SO MANY OPTIONS FOR PEOPLE. IT'S ALSO INCREASED AND EXPANDED WHO COMES IN FOR TESTING. WE SEE SO MANY MORE YOUNG PEOPLE AND WOMEN, INDIVIDUALS OF DIFFERENT SEXUAL ORIENTATIONS, AND MORE PEOPLE OF COLOR. NOW THAT RESULTS ARE AVAILABLE IN LESS THAN AN HOUR INSTEAD OF WAITING A WEEK, IT'S A MUCH LESS DAUNTING EXPERIENCE. IT HELPS US AS COUNSELORS DO OUR WORK BETTER."

RITA ZILBERMAN

VOLUNTEER HIV TESTING COUNSELOR
THE FIRST STEP IN HIV PREVENTION

“IT’S BEEN A POSITIVE EXPERIENCE TO HELP OTHER WOMEN. MANY TIMES WOMEN DON’T THINK THEY CAN ASK FOR HELP. SOMETIMES THEY’RE HAVING DIFFICULTY WITH THEIR ILLNESS OR THEIR CHILDREN, OR JUST TRYING TO COPE. THEY CAN COME HERE AND TAKE SOME TIME FOR THEMSELVES AND TAKE CARE OF THEIR NEEDS. MOST IMPORTANT, THEY CAN SPEND TIME WITH OTHER WOMEN WHO UNDERSTAND THEIR SITUATION. IT MEANS A LOT TO BE ABLE TO PROVIDE THAT SPACE.”

EVELYN BURGOS

**CHILD LIFE PEER HEALTH EDUCATOR
PREVENTION APPROACHES AND LIFE STRATEGIES FOR WOMEN**



FROM THE TREASURER OF THE GMHC BOARD OF DIRECTORS

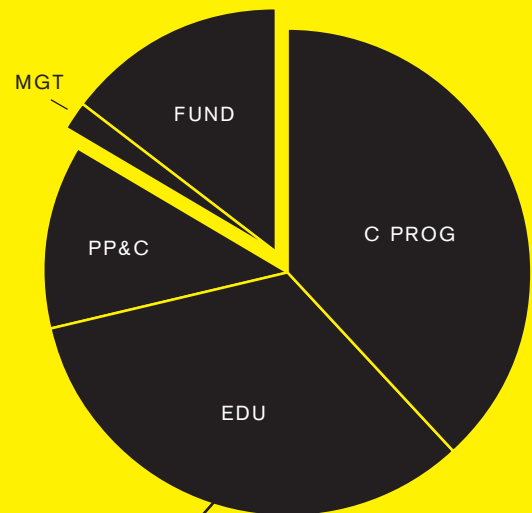
As the treasurer of GMHC’s Board for the past six years, it is with great pride that I report that GMHC continues to operate in a fiscally sound manner while responding to the challenges and forging new ground in the fight against HIV and AIDS.

As a donor and active volunteer, I can also tell you first-hand that GMHC’s ability to get ahead of the epidemic is because of the family of donors, volunteers, and community partners who commit their resources, their talent, and their invaluable spirit so generously each year.

Our total combined support and revenue was \$23.8 million — \$12.7 million from private contributions, donated services, and special events, \$11.1 million from government grants, and the remainder from specific services fees, contributed services, and sales of publications. GMHC recorded a surplus for the third year in a row. A strong indication of our proficient use of resources is that 83 percent of expenses go to support our programs — and the vast majority of our donors’ contributions were directly allocated to client services.

As we continue to streamline our operations and enhance our programs and services to better serve our clients, the GMHC Board remains committed to exploring and developing new sources of revenue that complement our mission while serving the changing needs of those living with HIV and AIDS and the global pandemic.

Thank you for your continued confidence in the fiscal management of GMHC.



83.5¢/\$1
 AT GMHC, 83.5 CENTS OF EVERY DOLLAR IS USED FOR DIRECT SERVICES AND PROGRAMS.

WHERE THE MONEY GOES

- CLIENT PROGRAMS: 38.1%
- EDUCATION: 33.2%
- PUBLIC POLICY AND COMMUNICATIONS: 12.2%
- MANAGEMENT: 1.9%
- FUNDRAISING: 14.6%

JAMES F. CAPALINO
 TREASURER, BOARD OF DIRECTORS

FINANCIAL SUMMARY

AT JUNE 30, 2004

CONDENSED CONSOLIDATED STATEMENT OF FINANCIAL POSITION

ASSETS	2004	2003
Cash and investments	\$ 4,467,828	\$ 3,066,602
Government grants receivable	1,918,988	2,927,105
Pledges receivable	1,004,217	1,110,093
Property and equipment	7,521,914	8,247,160
Other assets	1,366,056	1,208,427
TOTAL ASSETS	\$ 16,279,003	\$ 16,559,387
LIABILITIES AND NET ASSETS		
Government contract and advances	1,169,940	1,276,725
Other liabilities	1,242,706	1,656,301
Total liabilities	2,412,646	2,933,026
Net assets	13,866,357	13,626,361
TOTAL LIABILITIES AND NET ASSETS	\$ 16,279,003	\$ 16,559,387

CONDENSED STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS

SUPPORT AND REVENUE

Contributions	\$ 6,948,850	\$ 7,880,698
Special events	5,754,267	5,576,661
Government contracts	9,274,506	10,060,368
Other revenue	1,793,417	1,778,112
TOTAL SUPPORT AND REVENUE	\$ 23,771,040	\$ 25,295,839

EXPENSES

Program services	19,643,745	20,198,870
Supporting services	444,656	912,537
Fundraising	3,442,643	3,745,798
TOTAL EXPENSES	\$ 23,531,044	\$ 24,857,205
Change in net assets	239,996	438,634
Net assets, beginning of year	13,187,726	13,187,726
NET ASSETS, END OF YEAR	\$ 13,866,357	\$ 13,626,360

THE CONSOLIDATED STATEMENT OF FINANCIAL POSITION OF GAY MEN'S HEALTH CRISIS, INC. AND AFFILIATES AS OF JUNE 30, 2004 AND 2003 AND RELATED CONSOLIDATED STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS, AND OF CASH FLOWS FOR THE YEARS THEN ENDED WERE AUDITED BY MITCHELL AND TITUS, LLP. THE CONDENSED CONSOLIDATED FINANCIAL STATEMENTS HAVE BEEN DERIVED FROM THE CONSOLIDATED AUDITED FINANCIAL STATEMENTS. COPIES OF THE AUDIT REPORTS AND THE COMPLETE CONSOLIDATED FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST TO HARVEY KASDAN, CHIEF FINANCIAL OFFICER AT 119 WEST 24TH STREET, NEW YORK, NY 10011.