

2004 PROGRESS REPORT

discovery

collaboration

community

→ change



MESSAGE FROM THE BOARD CHAIR

One of the great pleasures of leading PATH's board of directors is getting to know the committed staff behind the organization's efforts and hearing about their progress and recognition. Most important, however, is seeing the impact of PATH's work on a broad spectrum of health programs around the world.

As I interact with PATH's partners, I see concrete signs of PATH's commitment to community organizations and the diverse cultures that enlighten PATH's work. Whether it's the integration of a new technology into a national health system or the effect of innovative ideas and education on a small community, I am proud to be a part of the impact PATH achieves.

As this year's progress report illustrates, PATH is a source of strength and hope. The success of our partners, who have been inspired and encouraged by PATH's work, tells me that PATH is a true catalyst: an organization that enables families, villages, and nations to change the world.

PATH is grateful to the large family of partners and supporters who have joined together in working for better health in countries and communities around the world. It is our privilege to be the stewards of this global trust.

Sincerely,

Halida Hanum Akhter, MD, MPH, DrPh

Habela Certily

Charity Navigator salutes [PATH's] commitment to prudent fiscal management and congratulates you for receiving a 4-star rating. Receiving Charity Navigator's highest 4-star rating means that your organization outperformed most other charities in America in its efforts to efficiently manage its finances.

TRENT STAMP

Executive Director, Charity Navigator





MESSAGE FROM THE PRESIDENT

I am very pleased to share PATH's 2004 progress report with you. It has been a remarkable year. We achieved major impact in all the focus areas of our work: child and adolescent health, infectious diseases, maternal and reproductive health, and vaccines and immunization. Simultaneously, we forged the partnerships that make 2005 look even more promising.

PATH's mission is to improve the health of people around the world by advancing technologies, strengthening systems, and encouraging healthy behaviors. While in today's world change has become a constant, making positive changes in the lives of people in the poorest parts of the globe is a complex process. All three parts of our mission are required to make a real and sustainable difference. New and improved health technologies alone will not solve global health problems. We must also pursue the systems improvement and individual behavior change that support the diffusion of innovation. Bringing these three elements together to create new results is the essence of a catalyst.

Unlike a chemical catalyst, however, which—by definition—is not changed in the process of the reaction it sparks, the talented people who work for and with PATH are constantly learning, improving their skills through discovery, collaboration, and community engagement. It is an honor to serve the global health community. I would like to acknowledge and thank all those who make it possible: our staff, our partners, our donors, and—most of all—the people whose lives we strive to improve.

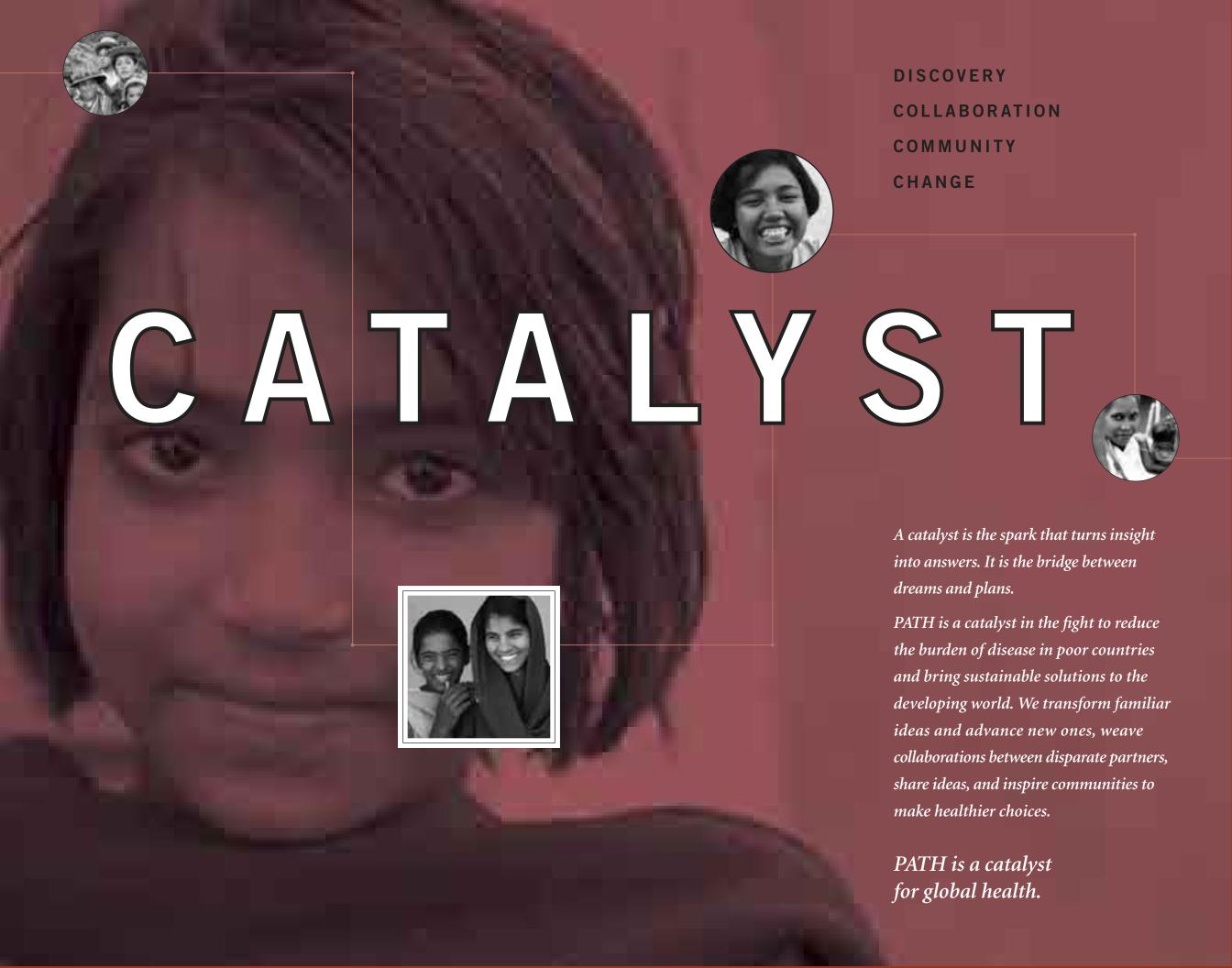
I hope you enjoy this report on our recent work. We welcome your interest, your ideas, your involvement, and your support.

Sincerely,

Christopher J. Elias, MD, MPH



For the second year in a row, Fast Company magazine named PATH one of the world's top social entrepreneurs—one of only 25 organizations to receive the honor.



A catalyst for DISCOVERY



Discovery is driven by creativity and dedication. PATH supports discovery from its starting point—a well-defined need—to its end—a widely used tool that is effective, affordable, and accessible in low-resource settings.

In 2004, PATH facilitated projects at every stage of discovery: developing and adapting ideas in our own lab and shop; partnering with the private sector to advance good products born in other laboratories; and collaborating with global health organizations, governments, businesses, and community groups. Wherever we could, we helped make discovery happen.





Breakthrough to a malaria vaccine

IN SUB-SAHARAN AFRICA, malaria kills more than one million children every year. PATH's Malaria Vaccine Initiative partnered with GlaxoSmithKline Biologicals and Manhiça Health Research Center in 2004 to carry out the largest pediatric trial of a malaria vaccine ever conducted in Africa. The vaccine reduced the risk of developing severe malaria by 58 percent among very young children. Public awareness of this success has helped change the way scientists and policymakers talk about malaria vaccines.

PATH also carried out a market assessment that told us what people in Africa, Asia, and Latin America need from a malaria vaccine and gave us information about the potential size of publicand private-sector markets. These results are shaping vaccine development and will help us build the case for future investment in a malaria vaccine.

This work showed that a vaccine many thought could never be developed is absolutely possible.

The missing ingredient in children's nutrition

ULTRA RICE®—PATH'S NUTRIENTfortified rice premix—made
major progress in 2004. Ultra
Rice is designed to fit seamlessly
into the cooking habits of families
in low-resource settings, whose
children bear the greatest burden
of malnutrition-related death and
sickness. The extra nutrients in
Ultra Rice also ensure healthier
pregnancies, helping children get
a good start for a healthy life.

For the last four years, PATH has worked with a rice mill in Colombia to bring the premix fortified with vitamin A, zinc, thiamin, and folic acid and mixed with rice—to the commercial market. In 2004, Ultra Rice reached the public sector for the first time, through a school feeding program in Medellin, Colombia, that serves 66,000 children. We also forged a new agreement with a Brazilian rice miller who expects to have Ultra Rice on the market in Brazil in 2005. We are laying the groundwork for similar collaborations in China and India.

Ultra Rice is a registered trademark of Bon Dente International, Inc.

DISCOVERY —

Diagnosis and treatment in a single visit

IN RESOURCE-POOR REGIONS,

sexually transmitted infections that are easily treated in the industrial world can cause serious disease among adults and poor birth outcomes for their children. PATH's point-of-care diagnostic test for gonorrhea will yield results in less than 30 minutes, which means that people who live far from the nearest health services can be tested and treated in a single visit. In 2004, PATH transferred the knowledge needed to produce our point-of-care strip test for gonorrhea to a manufacturer, the last step before commercial availability.

Working with the same manufacturer, PATH agreed to transfer the technology for our point-of-care test for chlamydia, after laboratory results showed that the test was effective and accurate. We believe that bringing affordable and easy-to-use tests to the commercial market will help alleviate the burden of these diseases in the developing world.



inventions—from health technologies are bringing real change to the fields of immunization, family planning,

President, Washington Biotechnology & Biomedical Association

PATH's many

to behavioral

interventions—

nutrition, and

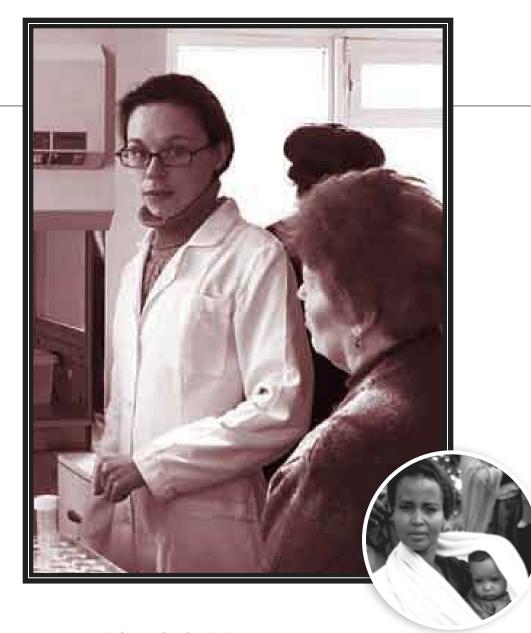
communicable diseases.



A broad net for identifying diarrheal disease

IN PARTNERSHIP with two

universities and a private company, PATH began developing the disposable enteric card, a microchip-sized piece of plastic that can simultaneously test for five infectious agents that cause diarrheal disease. Outbreaks of enteric disease are readily controlled with rapid diagnosis and immediate treatment. Once perfected, the lab-on-a-chip will make both possible, processing clinical samples directly and carrying out tests that currently require multiple pieces of laboratory equipment. This work is part of the creation of an entirely new kind of diagnostic tool—one that could help prevent many of the more than three million deaths that result from enteric disease every year.



Information is the key

PATH'S SECOND YEAR OF WORK ON TESTS that identify infection with cervical cancer causing types of human papillomavirus (HPV) ended with a new partner and a new line of research. Cervical cancer is preventable, but deadly if not identified in time—and in the developing world, regular Pap smears are not usually an option. A quick and accurate test for the cancer-causing virus would arm women with the information they need to protect themselves against the disease. PATH established an agreement with a privatesector corporation, forming a partnership focused on research for a rapid strip test that can assess samples in less than 20 minutes. This partnership will explore a format for HPV testing that works as simply and effectively as an over-the-counter pregnancy test.

CHANGE

A catalyst for COLLABORATION



On behalf of Vietnam's National Expanded Programme on Immunization, I would like to express sincere thanks to PATH for the close cooperation and effective assistance to EPI Vietnam in 2004.

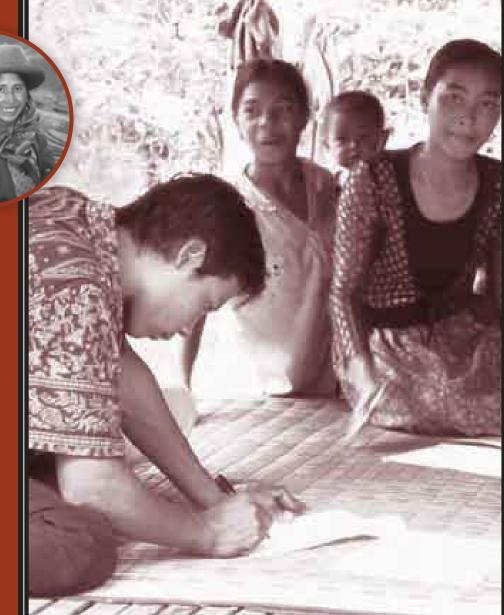
PROFESSOR DO SI HIEN, PhD Director, Vietnam National Expanded

Collaboration harnesses

capabilities. Based on complementary skills and shared commitments, it allows PATH and our partners to deepen our understanding and strengthen our collective capacity to effect change. Collaboration brings out the best in individuals and organizations and, in turn, amplifies their impact.

In 2004, PATH cultivated collaborations that are having an impact on global health. Exchanging knowledge and experience with a *medley of partners—community* groups, governments, universities, policymakers, the private sector— PATH is building connections that achieve lasting change.





Partnering for prevention of cervical cancer

ON COMMUNITY, NATIONAL, AND INTERNATIONAL LEVELS, PATH and our partners in the Alliance for Cervical Cancer Prevention (ACCP) achieved significant gains against cervical cancer, a preventable disease that kills more than 288,000 women each year.

In Peru, PATH enabled health care providers and the ministry of health to strengthen their education and communityinvolvement activities, which connect women with preventive services. In Kenya, we helped the ministry of health develop a fiveyear strategy for preventing cervical cancer in up to 20 districts, with the expectation that the strategy will be scaled up nationally over the next decade. And on the global level, the ACCP partners validated simple prevention methods—such as visual inspection and screen-and-treat approaches—and produced technical guidelines endorsed by the World Health Organization.

After five years of collaboration, the ACCP partners have achieved milestones that are saving women's lives and paving the way for the long-term impact that an HPV vaccine could bring.



COLLABORATION





Surveillance leads to action

PRICE IS ONE OF THE STEEPEST CHALLENGES to the development of a meningitis vaccine that meets the needs of sub-Saharan populations. In 2004, the Meningitis Vaccine Project (MVP)—a collaboration between PATH and the World Health Organization—fostered partnerships to overcome this constraint.

MVP consulted African public health leaders while collecting accurate and timely data about the meningitis burden in Africa. The project brought together a consortium of manufacturers from three corners of the globe and helped build consensus toward a landmark goal: producing 250 million doses of a meningococcal A conjugate vaccine in the next ten years at a target cost of US\$0.40 per dose. The consortium produced clinical lots of the vaccine, and a Phase 1 trial is about to begin.

PATH and our partners are making a long-lasting meningitis vaccine an affordable option where it is needed most.



Research with rigor

HIGH-QUALITY RESEARCH CAN STRENGTHEN project performance and influence both policy and practice. Recognizing the importance of theoretical expertise as well as on-the-ground experience, PATH and the University of Washington collaborated on an innovative project to improve the quality of reproductive health research.

University faculty and PATH staff supported graduate interns who conducted research in PATH projects in Cambodia, China, Ghana, Indonesia, Mozambique, Nepal, Nicaragua, the Philippines, and Thailand. Project outcomes were enriched by the methodological rigor provided by students and faculty, who benefited from access to PATH's field projects and experience. Graduate students gained practical experience that will support their growth as the next generation of public health leaders. Most important, these activities contributed to research that can improve policies and practices that affect people's lives.

Advocacy generates support

MICROBICIDES—TOPICAL PRODUCTS that will one day allow women to protect themselves against HIV—could help change the face of the AIDS pandemic. As a unifying force for more than 55 partner groups and 200 endorsing organizations around the world, the Global Campaign for Microbicides is increasing the knowledge and support needed to advance microbicides.

In 2004, the Campaign's advocacy team, based at PATH, contributed to a groundbreaking milestone: a tripling of US federal support for microbicide research in 2005. Along with increased contributions from Canadian and European supporters, these resources are essential to accelerating the scientific process. The Campaign also developed a film—*In Women's Hands*—and a traveling museum exhibit—*Giving Women Power Over AIDS*—that are increasing awareness globally.

Together, the Campaign and its partners are moving microbicides from research to reality.

A catalyst for

COMMUNITY



The qualities that can stop the spread of HIV

and alleviate the burden of other infections already exist in communities around the world: hope, compassion, strength. PATH works to inspire individuals and communities to come together to provide better care for people who are dying of complications of AIDS, to engage youth in critical reflection about life skills and health information, and to open the door to healthier behaviors. In 2004, PATH helped communities in developing countries act on their commitment to the health and well-being of their families and neighbors.



Among friends

the final stage of PATH's Entre Amigas project, a two-year effort in an urban area in Managua, Nicaragua, where sexual violence and coercion are a constant threat to young women.

The project focused on strengthening relationships between girls just entering adolescence and their mothers and teachers, so that the girls would have better access to information about reproductive health and life skills. But the young girls who participated in the project provided the clearest vision. They were leaders in the peer education program, contributed to project assessments, and wrote for a nationally televised soap opera that dramatized the problems they face daily. Empowering these young women to take charge of their own development was Entre Amigas' greatest achievement.



Acting for good health

IN KENYA, MATERNAL MORTALITY
rates are high, fertility rates are
increasing, and use of family-planning services has started to decline.
As part of the AMKENI project,
PATH helps communities reverse
these trends. We give women the
information they need to educate
each other about family planning,
bring families together to discuss
issues that were once taboo, and
assist village health committees in
coordinating outreach projects that
offer services to people who would
not otherwise have access.

In 2004, we saw impressive markers of the project's success: use of family-planning services increased by 78 percent at health facilities in communities with strong behavior change communication activities, and women who were involved with AMKENI had more information about reproductive health, were more likely to use contraception, and were more likely to have been tested for HIV. These changes have enhanced the project's influence in the region, and 256 new villages have independently adopted healthier practices modeled on AMKENI interventions.



COMMUNITY



Community at work

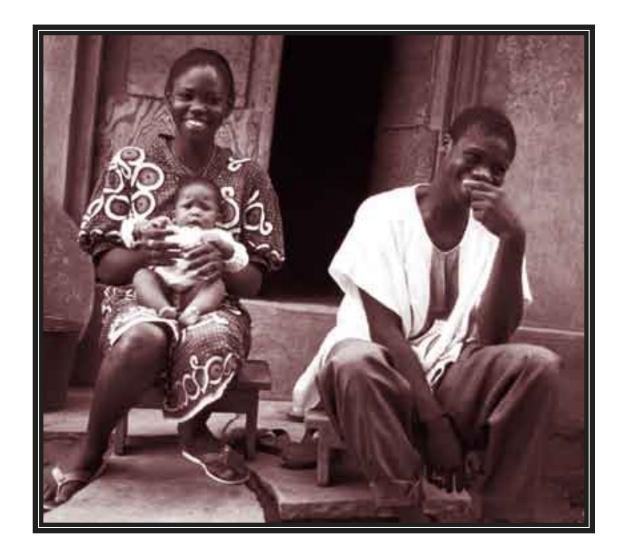
PATH HAS WORKED SINCE 2001 TO help workplaces in China offer life-planning skills training and support to young migrant workers who have left their families to seek employment and a better life. Through these programs, young men and women get information about reproductive health, including prevention of HIV infection, and learn other basic skills that help them protect their health and plan for the future. The project also equips employers to build stronger bonds with their young employees.

At Shenzhen, just 1 of 15 sites, the project reached more than 145,000 workers in 2004. At some companies, the successful approach has been integrated into employee orientation and on-the-job training sessions.

Good care at home

care kits are highly valued for the relief they offer people who are living with AIDS without access to hospitals or hospices. But problems with production and distribution systems mean that community caregivers may not be able to get kits when they need them.

In 2004, PATH began looking for ways to make the kits more widely available and effective, to improve quality of life for those who give care and those who receive it. The kits contain simple items (bandages, antiseptics, basic medicines) that many families cannot afford to keep at home. Through a national assessment, PATH identified obstacles to reliable supply and defined training needs for caregivers. Our work was the first step in changes that will consistently put the right tools in the right hands.

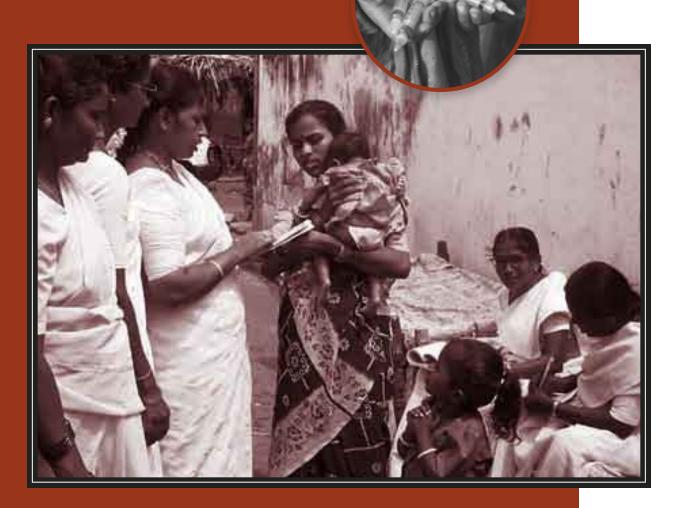


I am especially impressed with PATH's work to promote women's health and access to health care in developing countries. PATH's efforts to empower young girls and women to understand and take responsibility for their reproductive and sexual health are among the most innovative in the field.

ADRIENNE GERMAIN
President, International Women's Health Coalition



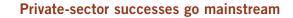
A catalyst for CHANGE





on every level—health workers who improve their skills, health systems that incorporate new technologies, governments that adopt timely policies. These changes are anchored in sound evidence, solid expertise, and a passion for better health.

In 2004, PATH encouraged vital changes in health practices and perspectives. Equally important, we provided the guidance and support needed to make these changes take hold on sustainable ground.



PATH HAS A LONG HISTORY OF BUILDING PHARMACISTS' CAPACITY to help individuals—especially adolescents—manage common reproductive health concerns. In 2004, these activities resulted in increased access to emergency contraception (EC) in both the public and private sectors. Greater access means that women and their partners have a better chance of preventing unintended pregnancy after unprotected intercourse or contraceptive failure.

In Cambodia, strong partnerships with the ministry of health, the pharmacy association, and a social marketing group resulted in the registration of a dedicated EC product for the national market. PATH helped shape policy and laid the groundwork for product registration. We will now help introduce the product and make it available to Cambodian women for the first time.

In Kenya, where EC was not available through the public sector, PATH worked with the ministry of health and other partners to generate support for a five-year supply of 700,000 EC doses for the national family planning program.



Sound practices, safe injections

PATH DOESN'T JUST INVENT INJECTION TECHNOLOGIES—we ensure that they are available and that health staff know how to use them correctly.

Under the US President's Emergency Plan for AIDS Relief, PATH procured needles and syringes to meet the needs of programs in 12 African and Latin American countries, where unreliable or insufficient supplies can prompt health staff to reuse syringes and potentially transmit HIV. We provided decision-makers with information about equipment options, quantified countries' needs, procured 15 million syringes with built-in safety features, and began to strengthen in-country capacity to sustain the supplies.

In India, where safe injection is also a concern, we helped programs reduce unnecessary injections, promote safe practices, and improve disposal of used needles and syringes. Training more than 5,000 health staff, PATH and its partners helped Andhra Pradesh become the first state in India to introduce syringes that automatically disable after use. Soon after, the Indian government mandated that autodisable syringes be used for all immunizations nationwide.



DISCOVERY • COLLABORATION • COMMUNITY • CHANG

CHANGE



As countries work to address global poverty, sustainable development, and world health, PATH sets a powerful example with its sustainable, culturally relevant solutions to these challenges. I am proud to work with such a forward-thinking organization.

THE HONORABLE
ADAM SMITH
US House of Representatives,
9th District, Washington



New vaccines combat an age-old virus

PATH ADVANCED MAJOR EFFORTS to control the Japanese encephalitis (JE) virus, a close relative of the West Nile virus and the leading cause of viral encephalitis and disability in Asia.

A PATH-led team with clinical, manufacturing, and regulatory expertise assessed a promising JE vaccine developed in Chengdu, China. After reviewing data from trials that included more than one million children, the team found that the data showed the vaccine to be safe and effective. PATH began working with the manufacturers—who plan to submit the vaccine for World Health Organization prequalification—to ensure more widespread availability and future supplies.

Recognizing that countries need information and support, PATH developed a JE module for the Advanced Immunization Management e-Learning website (http://aim-e-learning.stanford.edu/)— a tool that PATH and Stanford University developed to help immunization managers determine whether and how new vaccines should be added to their programs.



Stemming the tuberculosis tide in Ukraine

IN UKRAINE, WHERE TUBERCULOSIS INCIDENCE HAS RISEN for the last ten years, HIV and AIDS are poised to fuel the epidemic. To mitigate these effects, PATH and its partners introduced the directly observed treatment, short-course (DOTS) strategy—an approach that has been proven to reduce tuberculosis illness and death.

In 2004, PATH improved techniques for tuberculosis detection and treatment monitoring—including smear microscopy, culturing techniques, and drug sensitivity testing—by training lab workers in quality-control measures and preparing a cadre of trainers to expand training to other regions. PATH also developed guidelines on laboratory procedures for diagnosing tuberculosis in general labs. Now endorsed by the government, these guidelines are the only comprehensive, ready-to-use resource on this topic in the country.

By implementing these and a host of complementary activities, PATH and our partners are slowing the spread of tuberculosis in Ukraine.

Supervision improves success

Working with the Government of Andhra Pradesh, PATH and in-country partners strengthened immunization services by using supportive supervision to improve the performance of health care staff.

Before PATH's involvement, immunization staff had access to supplies and occasional training, but actual performance was often poor—particularly when it came to handling used needles, discarding medical waste, and storing vaccines properly within the cold chain. Focusing on essential immunization activities, such as introducing hepatitis B vaccine, PATH observed service delivery in 18 of 23 districts and developed a strategy for addressing common problems. The result was a supportive—rather than punitive—approach to providing on-the-job guidance, better staff orientations, and tools that help staff ensure the high quality of their work on an ongoing basis.

After introducing the supportive-supervision approach at nearly 1,000 health centers, districts such as Medak have seen the proportion of well-performing centers grow from 7 to 59 percent in a single year. The government is now building on these successes.

2004 FINANCIAL SUMMARY

Financial summary (unaudited)

(for the 12-month period ending December 31, 2004)

Revenues

Foundations	\$59,153,880
US Government	13,789,498
Other governments, multilaterals	

and global alliances 10,918,756 Investments/other 3.451.342 Individuals 512,013

87.825.489 Total revenues

Expenses

Programs 38,262,734 Program subawards 36,624,043 **Fundraising** 309,957 Management 12,129,277 Total expenses \$87.326.011

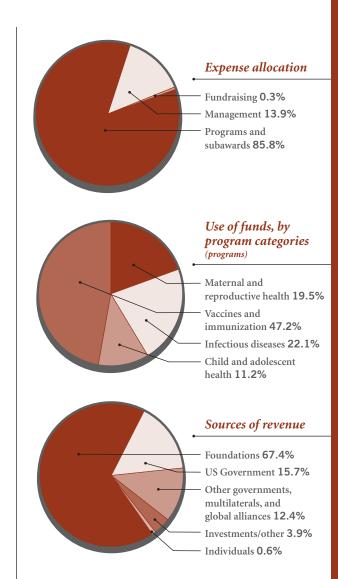
PATH is an international, nongovernmental, nonprofit organization Contributions to PATH are tax-exempt under US IRS code 501(c)(3).

Notes:

Revenues are recognized as net assets released from deferred program revenues that cover current-year expenditures

Total revenue includes other miscellaneous revenues and does not include restricted gifts to the endowment

Copies of PATH's audited financial statements are available upon request.

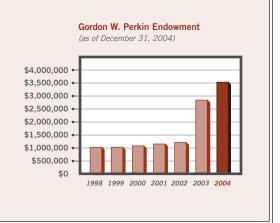


PATH's endowment fund

Named for one of PATH's founders, the Gordon W. Perkin Endowment is vital to PATH's continued growth and impact.

Restricted grants and contracts currently provide 99 percent of PATH's funding. The investment income generated by the endowment fund will offer a reliable source of unrestricted funds that foster innovative ways to meet global health needs, enable PATH to meet co-funding requirements on major grants, and strengthen the organization's infrastructure.

Over the past two years, the endowment has shown promising growth, thanks to a \$1.5 million challenge grant awarded by the Andrew W. Mellon Foundation that matches all endowment contributions dollar for dollar.



SUPPORTERS



PATH is grateful to the foundations, government funding agencies, corporations, and individuals that made our work possible in 2004. This support is truly appreciated and vital to our continued success.

To diversify our funding base, PATH seeks support from a variety of private foundations and government agencies, and we are working to build relationships with a small but growing group of individual supporters. Although individual donations represent a relatively small percentage of our budget, they are key to PATH's continued ability to innovate.

PATH Associates

We recognize individual donors who contribute \$1,000 or more annually as "PATH Associates" for their generous support of PATH's mission.

Nancy and Ellsworth C. Alvord, Jr. Michael and Lisa Anderson Brian Arbogast and Valerie Tarico Libby and Doug Armintrout Kristin Bedell and Vincent DePillis Clara Bingham and David Michaelis Margaret Dodd Britton Ronald and Laurie Brown Tilda Brown

Florence Camus-Bablon and Jacques Bablon Lisa and Tom Cohen

Fllen Cole and Michael Daum

Molly Joel Coye Steve Crane

Brenda I Crowe

Murray and Daphne David

Martha and Carl M. Davis Family Steve Davis and Bob Evans

Gordon and Nancy Duncan Maria Eitel

Christopher J. Elias and Therese

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Kathryn Gardow and David Bradlee

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Michele and David Hasson F. Ann Haves

Christopher Hedrick and Jennifer Beaston Hedrick

David and Jane Huntington lanet Aldrich Jacobs and Bernie L. Jacobs, Jr.

Howard and Nancy Johnson Kristina M. Johnson in honor of

Melinda Gates

Mark and Saralee Kane Justin R. Keat

Kevin and Jean Kelly

W. James and Heidi Kent

* Deceased.

Please contact us to report any errors or omissions.

Mr. and Mrs. Lee Zuker

Sara and Joseph P. Lemmer George M. Lhamon*

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Tim Volwiler

Bev Taylor

Morton and Martha Wood

Anne Wilson John and Debbi Wilson Margot and Paul Zimmerman Anonymous (5)

Other individuals

Anne Barber-Shams in honor of Joyce Erickson Linda S. Barnes

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R. Thomas Robinson and Carla Murray in memory of Kathleen M. Tripp

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Curran

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litendra Singh and

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Paul and Mimi Spielberg

Andrea D. Spuck and Tim Southerst

Pamela Starr in honor of Joyce Erickson

Craig Stephens

Scott C. and Colleen Stromatt

Lillian Surko in honor of Joyce

Erickson

Richard B. Thorvilson

Richard and Marilyn Tilbury

Dennis Torres and Brad Steiner

Kathleen M. Tripp*

W.H. and Ginger Van Ry Family

Gilbert G. VanGuilder

Darryl S. Vhugen Hart Wagner

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Elisa Wells and Seth Moran in honor of Joyce Erickson

Gregory G. Westin Barbara S. White

Janis Wignall

Gerald F. and Amy Williamson

Steve and Julie Woodward

Nicole Yoon

Nancy Young

Foundations

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Amgen Matching Gift Foundation Andrew W. Mellon Foundation

Bill & Melinda Gates Foundation

Atlantic Philanthropies

The Brush Foundation

Chai a Day Global Philanthropy

Channel Foundation

Chiron Foundation Cleveland H. Dodge Foundation

Compton Foundation

Concept Foundation

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Foundation

Elton John AIDS Foundation

Epstein Philanthropies

Fisher Fund of the Tides Foundation

The Ford Foundation

Foundation for Advanced Studies on International Development

Fred H. Bixby Foundation

Harrington-Schiff Foundation I Do Foundation

John D. and Catherine T. MacArthur Foundation

> JP Morgan Chase Foundation The McKnight Foundation

Microsoft Matching Gift Program Mildred and Mary Wohlford Fund of the Tides Foundation

Moriah Fund

Open Society Institute

The Overbrook Foundation Pride Foundation

Public Welfare Foundation

The Rockefeller Foundation

Sapling Foundation

United Nations Foundation Wallace Global Fund

William and Flora Hewlett

Anonymous (2)

Other organizations and corporations

Abbott Laboratories

Association of PVO Financial Managers

Bio Farma

Calvert Group

Commerce Bank of Washington Davis Wright Tremaine, LLP

Gibson Kinerk, LLP Georgetown Institute for

Reproductive Health GlaxoSmithKline Biologicals

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European Commission Global Alliance for Vaccines and Immunization

Global Fund to Fight AIDS, Tuberculosis and Malaria

International HIV/AIDS Alliance

Joint United Nations Programme on HIV/AIDS Ministry of Public Health,

Thailand National Institutes of Health

Ohio Department of Health Swedish International **Development Cooperation**

Agency

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Committee on Nutrition United States Agency for International Development

United States Centers for Disease Control and Prevention

United States Committee for United States Department of

United States Fund for the

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World Food Programme

United Nations Population Fund

United Nations Children's Fund

The World Bank

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*Deceased

Please contact us to report any errors or omissions.

> PATH honors the memory of George M. Lhamon, who passed away on March 11, 2005. Mr. Lhamon was the first member of PATH's Leadership Council and a founding member of PATH Associates, a group of individuals who provide unrestricted contributions of \$1,000 or more that are essential to PATH's ability to innovate. Mr. Lhamon's enthusiasm and dedication to PATH encouraged many others to participate. He will be missed.

Collaboration and partnerships are essential to the success and sustainability of our work. PATH collaborates extensively with international agencies, government ministries, other nongovernmental organizations, foundations, and local groups in the communities we serve. We also form unique agreements with the private sector, ensuring that our technologies and strategies are available where they are needed most.

Due to the nature of these collaborations, it is impossible to capture all of our 2004 partners and their locations on these pages. We are deeply grateful to all who are working with PATH and others to improve global health.

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Global Alliance for Improved

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International HIV/AIDS Alliance Pan American Health Organization United Nations Children's Fund

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African Block Denmark

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PROFAMILIA/Dominican

Republic Eritrea

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Interfaith Council Ministry of Education Ministry of Health Ministry of Information

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Ministry of Social Support Ministry of Transport National Union of Eritrean National Union of Eritrean

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(KTL)

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Georgia

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countries. Each year our projects bring innovative solutions to more than

100 countries. We work to meet the needs of geographically and culturally

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