

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

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

OMB No. 1545-0047

2008Open to Public
Inspection**A** For the 2008 calendar year, or tax year beginning

and ending

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

Please use IRS label or print or type
See Specific Instructions**C** Name of organization**THE GLOBAL FUND TO FIGHT AIDS,
TUBERCULOSIS AND MALARIA**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

CHEMIN DE BLANDONNET 8

City or town, state or country, and ZIP + 4

CH-1214 GENEVA, SWITZERLAND**F** Name and address of principal officer **BARRY GREENE**
SAME AS C ABOVE**D** Employer identification number**98-0380092****E** Telephone number**41-58-791-1700****G** Gross receipts \$**4032291187.****H(a)** Is this a group return

for affiliates?

☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c) (3) (insert no) ☐ 4947(a)(1) or ☐ 527**J** Website: **WWW.THEGLOBALFUND.ORG****K** Type of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other ▶ "PSF" **L** Year of formation: **2002** **M** State of legal domicile: **SZ****Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA (THE GLOBAL FUND) IS AN INDEPENDENT,		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	20
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	20
	5	Total number of employees (Part VII, line 2a)	5	
	6	Total number of volunteers (estimate if necessary)	6	
	Revenue	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a
b		Net unrelated business taxable income from Form 990-T, line 34	7b	0.
8		Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9		Program service revenue (Part VIII, line 2g)	2,916,476,393.	3,742,569,371.
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	240,501,530.	289,721,816.
Expenses	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	0.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,156,977,923.	4,032,291,187.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	2,663,591,620.	2,322,443,957.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	1,864,511.	71,650,387.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 24,445,017.	0.	0.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	113,780,267.	93,153,426.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,779,236,398.	2,487,247,770.
	19	Revenue less expenses Subtract line 18 from line 12	377,741,525.	1,545,043,417.
	Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Year
21		Total liabilities (Part X, line 26)	5,508,327,227.	7,054,121,738.
22		Net assets or fund balances Subtract line 21 from line 20	2,950,958,745.	3,106,993,192.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign
Here

Signature of officer

Date

BARRY GREENE**CHIEF FINANCIAL OFFICER**

Type or print name and title

Paid
Preparer's
Use Only

Preparer's signature

Date

Check if self-employed ☐

Preparer's identifying number (see instructions)

CLARK NUBER, PS**10900 NE 4TH STREET, SUITE 1700
BELLEVUE, WA 98004****EIN ▶ 91-1194016****Phone no. ▶ 425-454-4919**

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

832001 12-18-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

SCANNED AUG 25 2009

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**THE GLOBAL FUND TO FIGHT AIDS,
TUBERCULOSIS AND MALARIA**

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Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA (THE GLOBAL
FUND) IS AN INDEPENDENT, NON-PROFIT FOUNDATION THAT WAS INCORPORATED
IN GENEVA, SWITZERLAND ON JANUARY 22, 2002. THE PURPOSE OF THE GLOBAL
FUND IS TO ATTRACT AND DISBURSE ADDITIONAL RESOURCES TO PREVENT AND

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes", describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 2,439,888,488. including grants of \$ 2,322,443,957.) (Revenue \$ 0.)
PROVIDING GRANTS TO LOCALLY-DEVELOPED PROGRAMS TO PREVENT AND TREAT
AIDS, TUBERCULOSIS AND MALARIA.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.)
 (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 2,439,888,488. (Must equal Part IX, Line 25, column (B).)

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>		X
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> (IFRS COMPLIANT)		X
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	0	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	0	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
b	If "Yes," enter the name of the foreign country: SWITZERLAND See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter: N/A		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter: N/A		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b	

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Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
1a Enter the number of voting members of the governing body	20	
b Enter the number of voting members that are independent	20	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6 Does the organization have members or stockholders?	6	X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
9a Does the organization have local chapters, branches, or affiliates?	9a	X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	X

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	X
13 Does the organization have a written whistleblower policy?	13	X
14 Does the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a The organization's CEO, Executive Director, or top management official?	15a	X
b Other officers or key employees of the organization?	15b	X
Describe the process in Schedule O. (see instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☒ Another's website ☐ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► BARRY GREENE - +41587911765
CHEMIN DE BLANDONNET 8, GENEVA, CH-1214 SWITZERLAND

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
RAJAT KUMAR GUPTA BOARD MEMBER, CHAIR	10.00	X		X				0.	0.	0.
ELIZABETH MATAKA BOARD MEMBER, VICE-CHAIR	10.00	X		X				0.	0.	0.
JAVIER HOURCADE BELLOCQ BOARD MEMBER	10.00	X						0.	0.	0.
ASIA RUSSEL BOARD MEMBER	10.00	X						0.	0.	0.
ALEXANDER KONUZIN BOARD MEMBER	10.00	X						0.	0.	0.
LUIS RIERA FIGUERAS BOARD MEMBER	10.00	X						0.	0.	0.
ABDALLAH A. MIGUIL BOARD MEMBER	10.00	X						0.	0.	0.
SHEILA DINOTSHE TLOU BOARD MEMBER	10.00	X						0.	0.	0.
AMB VIOSSAT BOARD MEMBER	10.00	X						0.	0.	0.
MARTINA METZ BOARD MEMBER	10.00	X						0.	0.	0.
ALAIN GIORGIO MARIA BOARD MEMBER	10.00	X						0.	0.	0.
JUN YAMAZAKI BOARD MEMBER	10.00	X						0.	0.	0.
DR. JORGE SAAVEDRA BOARD MEMBER	10.00	X						0.	0.	0.
DR. REGINA RABINOVICH BOARD MEMBER	10.00	X						0.	0.	0.
AMB SIGRUN MOGEDAL BOARD MEMBER	10.00	X						0.	0.	0.
DR. BROTO WASISTO BOARD MEMBER	10.00	X						0.	0.	0.
DR. CAROLE PRESERN BOARD MEMBER	10.00	X						0.	0.	0.

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DR. WILLIAM STEIGER BOARD MEMBER	10.00	X						0.	0.	0.
HON BEDOUMA ALAIN YODA BOARD MEMBER	10.00	X						0.	0.	0.
DR. JIEFU HUANG BOARD MEMBER	10.00	X						0.	0.	0.
PROF MICHEL KAZATCHKINE EXECUTIVE DIRECTOR	50.00			X				290,691.	0.	0.
BARRY GREENE CHIEF FINANCIAL OFFICER	50.00			X				267,907.	0.	0.
JOHN PARSONS INSPECTOR GENERAL	50.00				X			311,854.	0.	0.
HELEN EVANS DEPUTY EXEC. DIRECTOR	50.00				X			272,402.	0.	0.
INES GARCIA DIRECTOR, CORP SVCS	50.00				X			269,310.	0.	0.
DR. CHRISTOPH BENN DIRECTOR, EXTERNAL RELAT	50.00				X			281,441.	0.	0.
BARTOLOMEO MIGONE DIRECTOR, LEGAL UNIT	50.00				X			286,494.	0.	0.
1b Total								3,294,838.	0.	0.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization

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- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
WORLD HEALTH ORGANIZATION , GENEVA, SWITZERLAND	PERSONNEL CONTRACT SERVICES	54,362,654.
PRICEWATERHOUSE COOPERS , GENEVA, SWITZERLAND	LOCAL FUND AGENT FEES	15,055,444.
KPMG , GENEVA, SWITZERLAND	LOCAL FUND AGENT FEES	11,302,998.
MACRO INTERNATIONAL INC , GENEVA, SWITZERLAND	MANAGEMENT CONSULTANCY	7,044,058.
ATOS CONSULTING LTD , LONDON, UNITED KINGDOM	MANAGEMENT CONSULTANCY	6,514,047.

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization

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SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Form 990 (2008)

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Form 990 (2008)

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Part VIII Statement of Revenue				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	3562999000.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	179,570,371.				
	g Noncash contributions included in lines 1a-1f \$						
h Total. Add lines 1a-1f				3,742,569,371.			
Program Service Revenue			Business Code				
	2 a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			289,721,816.			289,721,816.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross Rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
		c Net income or (loss) from fundraising events					
	9 a Gross income from gaming activities. See Part IV, line 19	a					
		b Less: direct expenses	b				
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
11 a							
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d							
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e				4,032,291,187.	0.	0.	289,721,816.

**THE GLOBAL FUND TO FIGHT AIDS,
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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	2,322,443,957.	2,322,443,957.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,980,099.	1,168,258.	376,219.	435,622.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	69,670,288.	41,105,470.	13,237,355.	15,327,463.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management	23,445,085.	17,449,810.	3,597,165.	2,398,110.
b Legal	200,731.	100,365.	30,110.	70,256.
c Accounting	605,106.	302,553.	90,766.	211,787.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	27,068,913.	27,068,913.		
12 Advertising and promotion				
13 Office expenses	9,106,747.	6,830,060.	910,675.	1,366,012.
14 Information technology	1,864,032.	1,398,024.	186,403.	279,605.
15 Royalties				
16 Occupancy	7,139,972.	5,354,979.	713,997.	1,070,996.
17 Travel	9,621,244.	7,211,906.	963,735.	1,445,603.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,702,620.	2,026,965.	270,262.	405,393.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a COMMUNICATION MATERIAL	3,729,127.	2,724,972.	401,662.	602,493.
b ADMINISTRATIVE SERVICES	2,505,375.	0.	1,879,031.	626,344.
c TRUSTEE FEES	2,400,000.	2,280,000.	120,000.	0.
d CNTRY COORD. MECH. FUND	1,395,590.	1,395,590.	0.	0.
e				
f All other expenses	1,368,884.	1,026,666.	136,885.	205,333.
25 Total functional expenses. Add lines 1 through 24f	2,487,247,770.	2,439,888,488.	22,914,265.	24,445,017.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

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Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	279,076.	1	60,496.
	2 Savings and temporary cash investments	4,337,356,509.	2	5,156,053,363.
	3 Pledges and grants receivable, net	674,443,000.	3	1,442,657,457.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	496,141,000.	7	452,547,714.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	107,642.	9	2,802,708.
	10a Land, buildings, and equipment: cost basis	10a		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b	10c	
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	5,508,327,227.	16	7,054,121,738.	
Liabilities	17 Accounts payable and accrued expenses	3,807,745.	17	49,340,615.
	18 Grants payable	2,947,151,000.	18	3,057,652,577.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	2,950,958,745.	26	3,106,993,192.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,557,368,482.	27	3,947,128,546.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	2,557,368,482.	33	3,947,128,546.
	34 Total liabilities and net assets/fund balances	5,508,327,227.	34	7,054,121,738.

Part XI Financial Statements and Reporting

- 1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits?

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

**THE GLOBAL FUND TO FIGHT AIDS,
TUBERCULOSIS AND MALARIA**

Schedule A (Form 990 or 990-EZ) 2008

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1369323078.	1362018629.	2408720944.	2916476393.	3742569371.	11799108415.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 - 3	1369323078.	1362018629.	2408720944.	2916476393.	3742569371.	11799108415.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						299,028,199.
6 Public Support. Subtract line 5 from line 4						11500080216.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	1369323078.	1362018629.	2408720944.	2916476393.	3742569371.	11799108415.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	33,819,088.	58,941,240.	126,497,984.	240,501,530.	289,721,816.	749,481,658.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						12548590073.
12 Gross receipts from related activities, etc. (see instructions)				12		

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	91.64	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	90.66	%
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>			

Schedule A (Form 990 or 990-EZ) 2008

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15		%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16		%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17		%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18		%

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Schedule F
(Form 990)Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**▶ **Attach to Form 990. Complete if the organization answered "Yes" to
Form 990, Part IV, line 14b, line 15, or line 16.**

OMB No 1545-0047

2008**Open to Public
Inspection****Name of the organization****THE GLOBAL FUND TO FIGHT AIDS,
TUBERCULOSIS AND MALARIA****Employer identification number****98-0380092****Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes"
to Form 990, Part IV, line 14b.**1 For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the
grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No****2 For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.**3 Activities per Region** (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
SUB-SAHARAN AFRICA	0	0	GRANTS TO PRINCIPAL RECIPIENT LOCATED IN THE REGION		163,787,296.
EAST ASIA AND THE PACIFIC	0	0	GRANTS TO PRINCIPAL RECIPIENT LOCATED IN THE REGION		211,124,737.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	GRANTS TO PRINCIPAL RECIPIENT LOCATED IN THE REGION		98,889,215.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS TO PRINCIPAL RECIPIENT LOCATED IN THE REGION		105,187,139.
SOUTH ASIA	0	0	GRANTS TO PRINCIPAL RECIPIENT LOCATED IN THE REGION		150,810,325.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTS TO PRINCIPAL RECIPIENT LOCATED IN THE REGION		160,925,620.
EUROPE (INCLUDING ICELAND AND GREENLAND)	1	392	OPERATIONS OF THE ORGANIZATION		165,643,430.
Totals ▶	1	392			253,045,343.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2008

**THE GLOBAL FUND TO FIGHT AIDS,
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Schedule F (Form 990) 2008

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Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any

recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

Use Schedule F-1 (Form 990) if additional space is needed.

▶ ☒ **X**

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	147,079,204.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	134,572,115.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	133,928,349.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	116,029,986.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	109,694,394.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	94,482,489.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	82,392,818.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	70,012,565.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

▶ **150**

3 Enter total number of other organizations or entities

▶ **0**

Schedule F (Form 990) 2008

Part III	Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
-----------------	---

Use Schedule F-1 (Form 990) if additional space is needed

[illegible]

Part IV

Supplemental Information

Complete this part to provide the information required by Part I, line 2, and any other additional information.

SCHEDULE F, PART I, LINE 2: ALL GRANT FUNDS OF THE GLOBAL FUND ARE
DISBURSED OUTSIDE THE US. THE GLOBAL FUND FOLLOWS PERFORMANCE BASED
FUNDING WHEREIN FURTHER DISBURSEMENTS TO THE PRINCIPAL RECIPIENT IS
DETERMINED BASED ON THE PROJECT REPORTS AND CASH REQUESTS THAT ARE
REVIEWED AND APPROVED BY THE FUND PORTFOLIO STAFF BASED ON THE
RECOMMENDATION OF THE LOCAL FUND AGENTS (LFA). DEPENDING UPON THE RISK
ASSESSMENT AND PROJECT STATUS, LFA MAY BE REQUESTED TO UNDERTAKE SPECIFIC
IN-COUNTRY MONITORING ACTIVITIES.

SCHEDULE F, PART I, LINE 3, COLUMN (F): AMOUNTS ON PART I OF SCHEDULE F
ARE REPORTED IN ACCORDANCE WITH INTERNATIONAL FINANCIAL REPORTING
STANDARDS (IFRS) INSTEAD OF ON A U.S. TAX-BASIS. THEREFORE, THE
FOLLOWING IS A RECONCILIATION BETWEEN FROM 990, PART IX, LINE 25A AND
SCHEDULE F, PART I:

TOTAL REPORTED ON FORM 990, PART IX, LINE 25A:	\$2,487,247,770
LESS - UNREALIZED FOREIGN EXCHANGE:	(4,940,971)
PLUS - DISCOUNTING TO NET PRESENT VALUE OF	
FUTURE CASH FLOWS (SFAS 116):	47,307,015
PLUS - DONATED SERVICES:	839,616
TOTAL REPORTED ON FORM 990, SCHEDULE F,	
PART I, LINE 3, COLUMN (F):	\$2,530,453,430

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Schedule F-1 (Form 990) 2008

Part II Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	63,606,668.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	58,252,118.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	57,823,237.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	47,780,966.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	43,489,253.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	41,666,516.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	40,388,725.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	37,596,337.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	35,735,007.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	33,553,614.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			MIDDLE EAST AND NORTH AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	33,512,896.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	32,857,817.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	30,655,749.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EAST ASIA AND THE PACIFIC	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	29,336,203.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	28,945,520.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	28,492,739.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	25,847,144.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	25,548,872.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

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			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	23,027,805.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	20,613,313.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	19,791,658.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	19,104,779.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	18,889,978.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	18,876,517.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EAST ASIA AND THE PACIFIC	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	18,640,828.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	18,015,037.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	17,030,594.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

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1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	16,007,746.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.			
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	15,986,220.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.			
		SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	15,487,147.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.			
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	15,078,417.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.			
		SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	14,760,034.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.			
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	14,448,361.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.			
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	13,802,195.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.			
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	13,390,383.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.			
		SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	13,232,274.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.			

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	13,182,390.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	13,156,083.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	13,120,546.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	12,485,792.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	12,020,778.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EAST ASIA AND THE PACIFIC	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	11,926,329.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	11,845,090.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	11,244,263.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EAST ASIA AND THE PACIFIC	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	11,109,029.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

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			EAST ASIA AND THE PACIFIC	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	10,757,078.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	10,626,665.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			MIDDLE EAST AND NORTH AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	10,568,459.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			MIDDLE EAST AND NORTH AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	10,403,188.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	10,175,807.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	9,981,773.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	9,487,078.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	9,462,369.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	9,246,548.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EAST ASIA AND THE PACIFIC	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	9,059,910.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			MIDDLE EAST AND NORTH AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	8,732,844.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			MIDDLE EAST AND NORTH AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	8,537,857.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	8,330,619.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			MIDDLE EAST AND NORTH AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	8,013,694.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	7,338,324.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	7,327,690.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	7,024,844.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	6,902,350.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

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			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	6,735,303.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	6,734,717.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	6,303,791.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	6,269,357.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	6,209,872.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	6,199,554.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			MIDDLE EAST AND NORTH AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	6,172,805.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	6,071,081.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	6,020,779.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

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			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	5,650,022.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			MIDDLE EAST AND NORTH AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	5,320,880.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			MIDDLE EAST AND NORTH AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	5,014,330.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	5,003,911.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	4,628,947.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			MIDDLE EAST AND NORTH AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	4,428,027.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	4,424,177.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	4,366,852.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	4,075,679.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

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			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	4,018,177.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	3,760,839.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EAST ASIA AND THE PACIFIC	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	3,466,139.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EAST ASIA AND THE PACIFIC	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	3,211,108.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	2,944,832.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	2,868,542.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	2,768,486.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	2,641,963.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	2,611,509.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

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			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	2,471,602.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	2,375,500.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	2,313,262.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EAST ASIA AND THE PACIFIC	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	2,237,912.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	2,149,206.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	2,116,564.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	2,046,986.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EAST ASIA AND THE PACIFIC	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	1,992,965.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	1,827,531.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	1,816,996.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	1,776,178.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	1,733,735.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	1,722,700.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	1,715,282.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			MIDDLE EAST AND NORTH AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	1,697,538.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	1,680,508.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	1,642,417.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	1,615,187.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

Schedule F-1 (Form 990) 2008

**THE GLOBAL FUND TO FIGHT AIDS,
TUBERCULOSIS AND MALARIA**

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Schedule F-1 (Form 990) 2008

Part II Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)									
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	1,027,748.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	989878.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	740385.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	550000.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	495898.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	492699.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	311117.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	107368.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	81,316.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

Schedule F-1 (Form 990) 2008

**THE GLOBAL FUND TO FIGHT AIDS,
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Part II Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	43,052.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	43,000.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	43,000.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		MIDDLE EAST AND NORTH AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	43,000.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		SOUTH ASIA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	43,000.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	43,000.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	42,994.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	42,987.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	42,950.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

Schedule F-1 (Form 990) 2008

**THE GLOBAL FUND TO FIGHT AIDS,
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Part II Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)									
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	42,943.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	42,920.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EAST ASIA AND THE PACIFIC	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	42,910.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	42,906.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	42,792.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	42,592.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	42,580.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	42,227.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
			MIDDLE EAST AND NORTH AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	41,910.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

Schedule F-1 (Form 990) 2008

**THE GLOBAL FUND TO FIGHT AIDS,
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Part II Continuation of Grants and Other Assistance or Entities Outside the United States. (Schedule F (Form 990), Part II)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	41,552.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	41,432.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		SUB-SAHARAN AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	40,293.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	37,960.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		EAST ASIA AND THE PACIFIC	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	36,800.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		MIDDLE EAST AND NORTH AFRICA	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	35,652.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		
		EAST ASIA AND THE PACIFIC	GRANTS APPROVED FOR HIV-AIDS/TUBERCULOSIS MALARIA	27,405.	PERFORMANCE BASED FUNDING THROUGH TRUSTEE	0.		

Schedule F-1 (Form 990) 2008

**SCHEDULE J
(Form 990)**Department of the Treasury
Internal Revenue Service**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees▶ Attach to Form 990. To be completed by organizations that
answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008Open to Public
InspectionName of the organization **THE GLOBAL FUND TO FIGHT AIDS,
TUBERCULOSIS AND MALARIA**Employer identification number
98-0380092**Part I Questions Regarding Compensation**

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a:

- a** Receive a severance payment or change of control payment?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
b Any related organization?

If "Yes," to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

X

X

X

X

X

X

X

X

X

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2008

**THE GLOBAL FUND TO FIGHT AIDS,
TUBERCULOSIS AND MALARIA**

Schedule J (Form 990) 2008

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Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
PROF MICHEL, KAZATCHKINE	(i) 223,653.	0.	67,038.	0.	0.	290,691.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
BARRY GREENE	(i) 194,196.	0.	73,711.	0.	0.	267,907.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
JOHN PARSONS	(i) 205,512.	0.	106,342.	0.	0.	311,854.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
HELEN EVANS	(i) 206,406.	0.	65,996.	0.	0.	272,402.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
INES GARCIA	(i) 207,333.	0.	61,977.	0.	0.	269,310.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
DR. CHRISTOPH BENN	(i) 201,639.	0.	79,802.	0.	0.	281,441.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
BARTOLOMEO MIGONE	(i) 196,395.	0.	90,099.	0.	0.	286,494.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
JON LIDEN	(i) 199,184.	0.	57,728.	0.	0.	256,912.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
JEAN-CLAUDE CREPY	(i) 194,788.	0.	88,410.	0.	0.	283,198.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
DR. STEFFANO LAZZARI	(i) 192,980.	0.	59,896.	0.	0.	252,876.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
KINGSLEY B. MOGHALU	(i) 197,120.	0.	61,347.	0.	0.	258,467.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
DR. ELMAR VINH-THOMAS	(i) 194,236.	0.	69,050.	0.	0.	263,286.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						

Schedule J (Form 990) 2008

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No. 1545-0047

2008

Open to Public Inspection

Employer Identification number
98-0380092

[illegible]

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

THE GLOBAL FUND TO FIGHT AIDS,
TUBERCULOSIS AND MALARIA

Employer identification number
98-0380092

FORM 990, PART I, ITEM K, OTHER ORGANIZATION TYPE:

"PSF" PRIVATE SWISS FOUNDATION

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

NON-PROFIT FOUNDATION THAT WAS INCORPORATED IN GENEVA, SWITZERLAND ON
JANUARY 22, 2002. THE PURPOSE OF THE GLOBAL FUND IS TO ATTRACT AND
DISBURSE ADDITIONAL RESOURCES TO PREVENT AND TREAT AIDS, TUBERCULOSIS
AND MALARIA. THE GLOBAL FUND PROVIDES GRANTS TO LOCALLY-DEVELOPED
PROGRAMS, WORKING IN CLOSE COLLABORATION WITH GOVERNMENTS,
NON-GOVERNMENTAL ORGANIZATIONS, THE PRIVATE SECTOR, DEVELOPMENT
AGENCIES AND THE COMMUNITIES AFFECTED BY THESE DISEASES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TREAT AIDS, TUBERCULOSIS AND MALARIA. THE GLOBAL FUND PROVIDES GRANTS
TO LOCALLY-DEVELOPED PROGRAMS, WORKING IN CLOSE COLLABORATION WITH
GOVERNMENTS, NON-GOVERNMENTAL ORGANIZATIONS, THE PRIVATE SECTOR,
DEVELOPMENT AGENCIES AND THE COMMUNITIES AFFECTED BY THESE DISEASES.

FORM 990, PART VI, SECTION A, LINE 10: THE FORM IS FILLED BY THE FINANCE
OFFICER WITH THE ASSISTANCE OF US BASED TAX ADVISOR WHICH IS THEN REVIEWED
FOR ACCURACY BY FINANCIAL CONTROLLER AND CFO. THE FORM IS FINALLY
AUTHORIZED BY THE CEO.

FORM 990, PART VI, SECTION B, LINE 12C: THE GLOBAL FUND'S ETHICS POLICY
APPLIES TO ALL MEMBERS OF THE BOARD, ALTERNATES, MEMBERS OF BOARD
COMMITTEES, TASK FORCES, THE TECHNICAL REVIEW PANEL, OR ANY OTHER

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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SUBSIDIARY BODY OF THE GLOBAL FUND, AND PROFESSIONAL EMPLOYEES OF THE SECRETARIAT. COMPLIANCE WITH THE GLOBAL FUND'S ETHICS POLICY IS OVERSEEN BY THE BOARD'S ETHICS COMMITTEE. ANY POTENTIAL AND ACTUAL CONFLICTS OF INTEREST ARE REFERRED TO THE ETHICS COMMITTEE FOR CONSIDERATION.

DECLARATION OF INTEREST FORMS ARE MAINTAINED BY THE ETHICS OFFICIAL AND MADE AVAILABLE FOR INSPECTION BY THE ETHICS COMMITTEE, AND, ONLY AS DEEMED APPROPRIATE BY THE ETHICS COMMITTEE, BY THE BOARD.

FORM 990, PART VI, SECTION B, LINE 15: IN 2008, THE GLOBAL FUND FOLLOWED THE HUMAN RESOURCE POLICIES OF THE WORLD HEALTH ORGANIZATION, (WHO), IN ACCORDANCE WITH AN ADMINISTRATIVE SERVICES AGREEMENT BETWEEN THE TWO ORGANIZATIONS. THE DETERMINATION OF COMPENSATION IS INDEPENDENT OF THE RECRUITMENT PANEL. IN CASE OF RECRUITMENT OF THE EXECUTIVE DIRECTOR, THE GRADE AND COMPENSATION PACKAGE IS PROPOSED BY THE GLOBAL FUND HR MANAGER AND APPROVED BY THE HR DIRECTOR OF THE WHO IN CLOSE CONSULTATION WITH THE CHAIR OF THE GLOBAL FUND BOARD. FOR OTHER OFFICERS AND KEY EMPLOYEES, THE COMPENSATION PACKAGE AS RECOMMENDED BY THE HR MANAGER IS APPROVED BY THE EXECUTIVE DIRECTOR IN CONSULTATION WITH THE DEPUTY EXECUTIVE DIRECTOR. THE PROCESS OF DETERMINING THE COMPENSATION PACKAGE IS BASED ON THE EMPLOYEE'S QUALIFICATIONS, EXPERIENCE AND PAST EMPLOYMENT HISTORY. THE PROCESS IS DOCUMENTED ON THE SALARY DETERMINATION FORM.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO
MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

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Inspection

Name of the organization

THE GLOBAL FUND TO FIGHT AIDS,
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Employer identification number
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FORM 990, PART VI, SECTION C, LINE 19: ALL GOVERNING DOCUMENTS AND THE
ETHICS POLICY ARE MADE AVAILABLE ON THE GLOBAL FUND'S WEBSITE.

FORM 990, PART IV, LINE 12 AND PART XI, LINE 2B:

THE AUDITED FINANCIAL STATEMENTS WERE PREPARED IN ACCORDANCE WITH
INTERNATIONAL FINANCIAL REPORTING STANDARDS (IFRS).

FORM 990, PART V, LINE 4B:

FOREIGN ACCOUNTS

THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA HOLDS SIGNATURE
AUTHORITY OVER BANK ACCOUNTS IN SWITZERLAND. THERE ARE NO U.S. PERSONS
HOLDING SIGNATURE AUTHORITY, AND THEREFORE, FILING THE TDF 90-22.1 IS
NOT REQUIRED.

FORM 990, PART VI, SECTION B, LINE 12B

ALL OFFICERS, DIRECTORS AND ALL PROFESSIONAL EMPLOYEES HAVE A DUTY TO
DISCLOSE THE EXISTENCE OF ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST,
INCLUDING THOSE THAT DERIVE FROM ASSOCIATED PERSONS OR INSTITUTIONS,
AND THE NATURE OF SUCH CONFLICT, WHENEVER HE OR SHE BECOMES AWARE THAT
A CONFLICT EXISTS OR THAT A CONFLICT IS REASONABLY LIKELY TO OCCUR OR
THAT THERE IS THE APPEARANCE OF A CONFLICT. ALL SUCH INDIVIDUALS MUST
COMPLETE AND SUBMIT A STANDARD FORM "DECLARATION OF INTEREST" TO THE
GLOBAL FUND'S DESIGNATED "ETHICS OFFICIAL" (CURRENTLY THE LEGAL COUNSEL
OF THE GLOBAL FUND). THESE FORMS ARE REQUIRED TO BE UPDATED ANNUALLY
AND WHENEVER THERE IS A MATERIAL CHANGE IN THE INFORMATION THEY
CONTAIN.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

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Name of the organization

THE GLOBAL FUND TO FIGHT AIDS,
TUBERCULOSIS AND MALARIA

Employer identification number
98-0380092

FORM 990, PART VII, SECTION A, LINE 1A, COLUMN (B):

AVERAGE HOURS PER WEEK

AVERAGE HOURS PER WEEK GENERALLY REPRESENT THE MINIMUM HOURS PER WEEK.

FORM 990, PART IX, LINE 11G

LOCAL FUND AGENT FEES

THE AMOUNTS REPORTED ON THIS LINE ARE RELATED TO LOCAL FUND AGENT FEES.