

YEAR  
**2006**

# California Exempt Organization Annual Information Return

FORM  
**199**

For calendar or fiscal year beginning month 07 day 01 year 2006 and ending month 06 day 30 year 2007

**IMPORTANT: Your number is required.**

California corporation number <b>2361159</b>	Federal employer identification number (FEIN) <b>91 2167423</b>
Corporation/Organization name <b>Pangaea Global AIDS Foundation</b>	
Address including Suite, Room, or PMB no. <b>995 Market Street, Suite 200</b>	
City <b>San Francisco</b>	State <b>CA</b>
ZIP Code <b>94103</b>	

**A** Final return? Check applicable box:  Yes  No  
 Dissolved  Withdrawn  Merged/Reorganized (attach explanation)  
 If a box is checked, enter date: \_\_\_\_\_

**B** Check forms filed this year: State:  109  100  100S  100W  
 Federal:  990  990EZ  990T  990PF  1041  1120H  1120

**C** If organization is exempt under R&TC Section 23701d and is a school, public charity, religious organization, or is controlled by a religious operation, check box: See General Instruction F. No filing fee is required.

**D** Is this a group filing? See General Instruction N.  Yes  No

**E** Accounting method used: Accrual

**F** Type of organization:  Exempt under Section 23701 D (insert letter)  
 IRC Section 4947(a)(1) trust

**Part I Complete Part I unless not required to file this form. See General Instructions B and C.**

<b>Receipts and Revenues</b> <small>(Enclose, but do not staple, any payment.)</small>	1 Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	7,493
	2 Gross dues and assessments from members and affiliates	2	
	3 Gross contributions, gifts, grants, and similar amounts received. See instructions	3	1,953,924
	4 Total gross receipts for filing requirement test. Add line 1 through line 3. <b>This line must be completed. If the result is less than \$25,000, see General Instruction C.</b>	4	1,961,417
<b>Expenses</b>	5 Cost of goods sold	5	
	6 Cost on other basis, and sales expenses of assets sold	6	
	7 Total costs. Add line 5 and line 6	7	
	8 Total gross income. Subtract line 7 from line 4	8	1,961,417
<b>Filing Fee</b>	9 Total expenses and disbursements. From Side 2, Part II, line 18	9	1,904,758
	10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	56,659
	11 Filing fee \$10 or \$25. See General Instruction F	11	
	12 Penalty for failure to file on time. See General Instruction I	12	
	13 Use tax. See "General Instruction M"	13	00
	14 <b>Balance due.</b> Add line 11, line 12, and line 13	14	

- 15 If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? If "Yes," complete and attach form FTB 3509, Political or Legislative Activities by Section 23701d Organizations.  Yes  No
- 16 Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not been reported to the Franchise Tax Board? If "Yes," complete an explanation and attach copies of revised documents.  Yes  No
- 17 Is the organization exempt under R&TC Section 23701g?  Yes  No  
 If "Yes," enter amount of gross receipts from nonmember sources \$ \_\_\_\_\_
- 18 Did the organization file Form 100, Form 100S, Form 100W, or Form 109 to report taxable income?  Yes  No  
 If "Yes," enter amount of total income reported \$ \_\_\_\_\_
- 19 The financial records are in care of Deputy Exec. Director of Finance & Administration Daytime telephone (415)487-3000  
 located at 995 Market Street, Suite 200 San Francisco, CA 94103

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

**Please Sign Here**

Original signed by Marty Low  
 Signature of officer \_\_\_\_\_ Date \_\_\_\_\_  
 Director of F & A • (415)487-3000  
 Title \_\_\_\_\_ Daytime telephone \_\_\_\_\_

**Paid Preparer's Use Only**

Paid Preparer's signature Original signed by PWC, LLP  
 Date 11/9/06  
 Check if self-employed  Paid preparer's SSN or PTIN \_\_\_\_\_  
 Firm's name (or yours, if self-employed) and address PricewaterhouseCoopers LLP  
 FEIN 13 4008324  
 350 S. Grand Avenue Los Angeles, CA 90071 • Daytime telephone (213) 456-6000

A COPY OF FEDERAL FORM 990 WAS ATTACHED TO  
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