OUR YEAR IN REVIEW
2010 ANNUAL REPORT

PATH
A catalyst for global health
From the President and Board Chair

Greetings,

We are pleased to present PATH’s 2010 annual report. We hope you’ll find this year’s review informative and enjoyable.

PATH is making significant strides in helping people around the world have a chance at a healthy life. One of our most visible milestones in 2010 was introduction of the MenAfriVac™ vaccine, which PATH and the World Health Organization developed together through our partnership in the Meningitis Vaccine Project. In December, 20 million people in Burkina Faso, Mali, and Niger were vaccinated against meningitis A, which has ravaged sub-Saharan Africa in epidemic waves for more than a century. In the process, the world witnessed how new global health models—pioneering partnerships, country-driven priorities, and an unrelenting focus on impact—are saving lives in some of the world’s poorest areas.

PATH has proven that simple and affordable technologies can be among the most effective. This is evident in the MenAfriVac story and in many of the projects described on the following pages. It holds true for our operations as well. This year’s annual report, like last year’s, conveys the year’s highlights on a single sheet of paper—and at less than a third of the printing cost of our previous reports. Innovation is at the core of what we do and how we do it.

We are most grateful for your continued engagement in our work and our vision of a world where innovation ensures that health is within reach for everyone. Thank you for your commitment to global health.

Sincerely,

Christopher J. Elias, MD, MPH  
President and CEO

Molly Joel Coye, MD, MPH  
Chair, Board of Directors
HEALTH WITHIN REACH. THAT’S OUR JOURNEY.

At PATH, our mission is to improve the health of people around the world by advancing technologies, strengthening systems, and encouraging healthy behaviors. In 2010, we moved forward in numerous ways—274 to be exact, the number of projects PATH and our partners advanced in more than 70 countries. On these pages, we highlight some of our most innovative, inspiring, and interesting milestones of 2010. We hope you enjoy this snapshot of our year.

The “innovation funding” icon identifies PATH projects that received flexible support, such as support from individual donors, at a critical phase of their development.

STOPPING MALARIA AT THE MOSQUITO

The PATH Malaria Vaccine Initiative (MVI) makes its first investment in vaccine approaches that aim to stop the malaria parasite from developing in mosquitoes, toward blocking transmission of the disease to humans.

Help for Haitian mothers

After a devastating earthquake strikes Haiti, the Infant and Young Child Nutrition Project—a US Agency for International Development (USAID) project led by PATH—trains more than 300 emergency health workers to counsel mothers on feeding their young children in temporary camps.

750,000 LIVES SAVED FROM MALARIA

In the last ten years, increasing coverage of malaria prevention tools has saved the lives of nearly 750,000 children in 34 African countries, according to a report co-authored by the MACEPA program at PATH. The report, the third of the Roll Back Malaria Progress and Impact Series, estimates that an additional three million lives could be saved by 2015 with continued increases in investment.

KENYA LEADS NEW CAMPAIGN AGAINST DIARRHEAL DISEASE

With help from PATH and our partners, Kenya renews its national policy guidelines to ramp up proven interventions and raise public awareness about the risks of diarrhea, the third leading cause of death for children under five years of age in the country.

TEXT MESSAGING TO TRACK DISEASE

During epidemics of H1N1 influenza and dengue fever, PATH helps health workers at 36 Nicaraguan health facilities use text messages to quickly send disease surveillance information to the comprehensive health service system in Managua.

January

February

March
HARNESSING TECHNOLOGY FOR HEALTH

As they have been since our founding, appropriately designed, affordable, and innovative health technologies are at the heart of much of our work. In 2010, PATH’s largest technology projects included the Safe Water Project, which sought to bring household water treatment and storage products to poor consumers around the world, and our jet injectors project, which focused on needle-free syringes for administering vaccines. Our Health Innovation Portfolio allowed us to explore and test new ideas, while Technologies for Health (HealthTech IV) focused on adapting, designing, developing, and advancing technology solutions—a goal it has pursued since 1987. These and other technology projects are helping to improve immunization, disease diagnosis, nutrition, child survival, and maternal and reproductive health in developing countries.

REACHING COMMUNITIES THROUGH PHARMACIES

PATH helps pharmacy staff expand their technical knowledge and enhance their counseling skills to better serve clients. In Vietnam, an evaluation of newly trained pharmacy staff shows a four-fold increase in the percentage of clients who receive proper counseling on emergency contraceptives. In the Eastern European country of Georgia, PATH adapts materials to help pharmacy staff counsel vulnerable populations, including youth, on HIV and refer them to health care services.

SUPPORT FOR MOTHERS AND NEWBORNS IN INDIA

Since 2007, PATH’s Sure Start project has helped mobilize rural communities and establish more than 6,850 “mothers’ groups” in the state of Uttar Pradesh. One of many Sure Start activities, the mothers’ groups reach more than a half-million pregnant and nursing women and their mothers-in-law with information about pregnancy, breastfeeding, and government programs that support health.

Three-year total: 546,245 women reached.

CAMBODIA VACCINATES NEARLY 85,000 CHILDREN

Cambodia completes vaccination of almost 85,000 children against Japanese encephalitis, a debilitating viral infection. For the second year, PATH also brings the vaccine to North Korea, where nearly every eligible child under seven years of age in five target provinces and the city of Pyongyang has been vaccinated.

LEADING MALARIA VACCINE CANDIDATE ADVANCES

The large-scale, phase 3 clinical trial of the world’s leading malaria vaccine candidate completes enrollment of 8,900 participants. In all, more than 14,000 are enrolled by year’s end. Initial results of the study of RTS,S, the most advanced project in MVI’s portfolio, are expected in late 2011. WHO indicates that, if all goes well, it could recommend the vaccine as early as 2015.

CARE FOR TB AND HIV, TOGETHER

Across Tanzania, people who have HIV and TB are receiving integrated counseling and testing for both diseases in more than 800 public and private health care facilities. With PATH’s work and that of our partners, patients with multidrug-resistant TB are receiving diagnosis and treatment services.

April May June
Our work in vaccines and immunization accelerates research and development, expands access to new vaccines, and strengthens health systems. In 2010, three of our projects—Accelerated Vaccine Introduction, Optimize, and the Rotavirus Vaccine Program—found innovative ways to increase use of vaccines in the developing world. In the world of vaccine development, PATH worked with partners to advance development of safe, effective, and affordable new vaccines against malaria, pandemic influenza, pneumococcal disease, rotavirus, and bacterial causes of diarrheal disease. And the Meningitis Vaccine Project, a collaboration with the World Health Organization (WHO), introduced its new meningitis A vaccine into three African countries.

Other activities lessen the burden of emerging and epidemic diseases, including HIV/AIDS, tuberculosis (TB), and malaria. Multiple PATH projects helped to reduce the spread of HIV and help those living with HIV/AIDS, particularly in Africa and India, by enhancing HIV prevention for at-risk groups, preventing mother-to-child HIV transmission, strengthening care and treatment, and integrating related services. The Malaria Control and Evaluation Partnership in Africa (MACEPA) worked with global partners to help sub-Saharan African countries rapidly scale up and sustain malaria prevention and control efforts. And we addressed urgent needs for TB control by providing extensive technical assistance and support.

PATH partners with US policymakers to host a Congressional briefing to explore ways to reach women and children with innovative health technologies. Featured tools from PATH, such as an antishock suit to control a woman’s bleeding after childbirth and a solar-powered refrigerator for vaccine storage, are affordable, appropriate, and accessible for people in need worldwide.

In Uganda, the new Arise program aims to prevent HIV infections by addressing the unmet need for contraception among HIV-positive women. PATH and our partners are rigorously evaluating how averting unwanted pregnancies and increasing the “dual method” use of contraceptives—for example, using condoms along with another contraceptive—can help stop HIV transmission cost-effectively.

The one millionth person takes part in voluntary, provider-initiated, or home-based HIV testing and counseling through APHIA II Western. PATH leads this four-year USAID project that promotes health among the residents of Kenya's Western Province. Over four years, the project provided HIV testing and counseling to nearly 1.46 million people, helping them understand how to prevent HIV transmission and seek treatment.

The world’s largest school lunch program—the Government of India’s Midday Meal Programme—continues to introduce Ultra Rice, a rice-fortification technology developed by PATH. Mixed with local rice, micronutrient-enriched grains manufactured with the Ultra Rice technology help bridge dietary gaps and prevent malnutrition. In December, the fortified rice reaches more than 185,000 schoolchildren in Rajasthan each school day. Meanwhile, similar pilot projects are under way in Brazil, reaching more than 50,000 children.

A sentinel influenza surveillance system, developed by the Government of Ukraine with PATH’s assistance, comes fully online. The system includes 18 hospitals and clinics in four sentinel sites and provides influenza program managers with high-quality information essential for responding to outbreaks.
PATH is also advancing promising solutions that address leading causes of death for women and children. Our projects in maternal and child health focus on safe birth and newborn care, nutrition, and the control of diarrheal disease. In 2010, key projects included the Infant and Young Child Nutrition Project, which worked to improve nutrition from pregnancy through the first two years of life; the Oxytocin Initiative, which helped reduce the risk of excessive bleeding after childbirth through the use of the drug oxytocin; and Sure Start, which worked through many partners to reduce infant and maternal illness and death in India.

In reproductive health, we work to prevent cervical cancer, advocate for services and supplies, address family-planning needs, introduce contraceptive technologies, expand options for abortion-related care, and encourage healthier behaviors. Our 2010 efforts included multicountry research of the most effective strategies for human papillomavirus (HPV) vaccination and a project to advance low-cost tests for the types of HPV that cause cervical cancer. We also served as secretariat of the Reproductive Health Supplies Coalition, a partnership dedicated to ensuring widespread access to reproductive health supplies.

- **PROTECTION FROM CERVICAL CANCER**
  PATH and our partners complete vaccination of 57,000 girls in India, Peru, Uganda, and Vietnam against HPV, the primary cause of cervical cancer. The six-year project is building evidence on the most effective strategies for delivering the vaccine.

- **STRENGTHENING HEALTH INFORMATION SYSTEMS**
  PATH and our partners develop methods that help countries determine user and system requirements for health information systems. Beginning with a set of common requirements for computerized logistics management information systems, the team helps Zambia’s Ministry of Health establish a road map to improve the country’s supply chain system.

- **HOPE FOR AN END TO EPIDEMIC MENINGITIS**
  The people of Burkina Faso gather to receive a new vaccine that could end epidemics of meningococcal meningitis A, which in the last century has killed or disabled hundreds of thousands in sub-Saharan Africa. The new vaccine, called MenAfriVac, is the culmination of nearly a decade of work by the Meningitis Vaccine Project (MVP), a partnership between PATH and WHO. MVP and its many collaborators developed and introduced a vaccine that provides long-lasting protection, can be used preventively, and—at less than US$0.50 a dose—was developed with affordability for African countries in mind.

  In just one month, nearly 20 million people in Burkina Faso, Mali, and Niger receive the vaccine. In the next few years, PATH and WHO plan to bring MenAfriVac to as many as 315 million more children and young adults in Africa. WHO estimates that, if enough people receive the vaccine, MenAfriVac will save nearly 150,000 lives.
As the stories on these pages demonstrate, hope can start small—and still end very big. We’re deeply grateful to the individual supporters who help us through that journey.

In 2010, the fight against Japanese encephalitis reached a significant milestone: the conclusion of a two-year campaign to vaccinate North Korea’s children against Japanese encephalitis. In Asia, the disease kills many, especially children, and leaves almost half of all survivors with permanent neurological damage.

Early in the campaign, we faced a critical moment: With help from PATH, North Korea had reached a point of readiness to introduce the vaccine. The vaccine was packaged for delivery. But a gap in funding—for the costs associated with shipping and distributing the vaccine—stalled the effort.

That’s when our donors stepped in, matching funds from another individual donor and a private foundation to get the vaccine into health workers’ hands. Just two weeks after the vaccine shipped, 455,000 children were protected. Today, nearly every eligible child under seven years old in the city of Pyongyang and five provinces has received the vaccine.

Individuals can be catalysts

This is just one example of how our donors’ support can change hundreds of thousands of lives. Flexible “innovation funding” from people like you allows us to act decisively and respond in the moment to critical needs.

In 2010, individual donors and family foundations contributed more than $2.1 million of innovation funding, primarily through gifts to PATH’s Catalyst Fund. These gifts allow us to launch new initiatives, leverage major grants, and meet strategic priorities—to be flexible and effective in response to the world’s greatest health challenges, both old and new.

Our donors’ trust

We are honored by our donors’ confidence in us, and we aim to use those gifts in the most effective way possible. Charity Navigator, America’s largest independent evaluator of nonprofits, has awarded PATH its highest possible rating for sound fiscal management—a designation we’ve received for seven years in a row. Only 2 percent of the rated charities have received four stars for at least seven consecutive years.

We take hope from the progress we’ve made—in North Korea, in West Africa, in Southeast Asia, and around the world. It’s hope we know you share. Thank you.

2010 by the numbers

$2.1 million Total contributed by individuals and family foundations.

1,611 Number of people who took action by donating to PATH.

37 Number of activities to launch or pursue new initiatives made possible by our donors.

9 Major grants leveraged by innovation funding.

7 Years as a Charity Navigator 4-star charity.

5 Number of countries where we expanded our work with help from our donors.

4 Number of programs that were able to increase their scope with innovation funding.

2 Number of new leaders we could not have hired without our supporters’ help.
### 2010 FINANCIAL SUMMARY

#### 2010 financial summary (audited)

**REVENUE** (in thousands)

<table>
<thead>
<tr>
<th>Source of Revenue</th>
<th>Amount (in thousands)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundations</td>
<td>$179,122</td>
</tr>
<tr>
<td>Corporations</td>
<td>640</td>
</tr>
<tr>
<td>US Government</td>
<td>67,277</td>
</tr>
<tr>
<td>Other governments, nongovernmental</td>
<td>24,778</td>
</tr>
<tr>
<td>organizations (NGOs), multilaterals</td>
<td></td>
</tr>
<tr>
<td>Individuals/other</td>
<td>7,600</td>
</tr>
<tr>
<td>Investments</td>
<td>3,860</td>
</tr>
<tr>
<td><strong>Total revenue</strong></td>
<td><strong>$283,277</strong></td>
</tr>
</tbody>
</table>

**EXPENSES** (in thousands)

<table>
<thead>
<tr>
<th>Expense Category</th>
<th>Amount (in thousands)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Program services</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Programs:</strong></td>
<td></td>
</tr>
<tr>
<td>Emerging and epidemic diseases</td>
<td>$30,158</td>
</tr>
<tr>
<td>Health technologies</td>
<td>13,424</td>
</tr>
<tr>
<td>Maternal and child health</td>
<td>11,497</td>
</tr>
<tr>
<td>Reproductive health</td>
<td>13,103</td>
</tr>
<tr>
<td>Vaccines and immunization</td>
<td>39,459</td>
</tr>
<tr>
<td><strong>Subtotal programs</strong></td>
<td>107,641</td>
</tr>
<tr>
<td>Program subawards</td>
<td>$142,644</td>
</tr>
<tr>
<td><strong>Subtotal program services</strong></td>
<td><strong>$250,285</strong></td>
</tr>
<tr>
<td><strong>Support services</strong></td>
<td></td>
</tr>
<tr>
<td>Management and general</td>
<td>28,082</td>
</tr>
<tr>
<td>Bid and proposal</td>
<td>2,375</td>
</tr>
<tr>
<td>Fundraising</td>
<td>1,863</td>
</tr>
<tr>
<td><strong>Subtotal support services</strong></td>
<td><strong>32,320</strong></td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td><strong>$282,605</strong></td>
</tr>
</tbody>
</table>

**Assets and liabilities**

**ASSETS** (in thousands)

<table>
<thead>
<tr>
<th>Asset Category</th>
<th>Amount (in thousands)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants receivable</td>
<td>$398,329</td>
</tr>
<tr>
<td>Invested grant funds</td>
<td>309,453</td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>33,740</td>
</tr>
<tr>
<td>Other</td>
<td>26,154</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td><strong>$767,676</strong></td>
</tr>
</tbody>
</table>

**NET ASSETS AND LIABILITIES** (in thousands)

<table>
<thead>
<tr>
<th>Net Asset/ Liability Category</th>
<th>Amount (in thousands)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temporarily restricted</td>
<td>$684,915</td>
</tr>
<tr>
<td>Unrestricted</td>
<td>18,149</td>
</tr>
<tr>
<td>Permanently restricted</td>
<td>3,367</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td><strong>706,431</strong></td>
</tr>
<tr>
<td><strong>Total liabilities</strong></td>
<td><strong>61,245</strong></td>
</tr>
<tr>
<td><strong>Total net assets and liabilities</strong></td>
<td><strong>$767,676</strong></td>
</tr>
</tbody>
</table>

#### Sources of revenue

- Foundations: 63.3%
- US Government: 23.7%
- Other governments, NGOs, multilaterals: 8.7%
- Individuals/other: 2.7%
- Investments: 1.4%
- Corporations: 0.2%

#### Expense allocation

- Program services: 88.6%
- Management and general: 9.9%
- Bid and proposal: 0.8%
- Fundraising: 0.7%

#### Use of funds

- Vaccines and immunization: 36.6%
- Emerging and epidemic diseases: 28.0%
- Health technologies: 12.5%
- Reproductive health: 12.2%
- Maternal and child health: 10.7%

Notes: The above financial summary is an excerpt from PATH’s audited financial statements, which are audited by the firm Clark Nuber P.S. Full copies are available on our website at www.path.org. PATH is an international nonprofit, nongovernmental organization. Our mission is to improve the health of people around the world by advancing technologies, strengthening systems, and encouraging healthy behaviors. Contributions to PATH are tax-exempt under US IRS code 501(c)(3).
**EXECUTIVE AND PROGRAM LEADERSHIP**

**Board of directors**

PATH’s board members are public health and business leaders from the countries we serve, Europe, and the United States. The board provides governance and fiduciary oversight, sets policy, and assesses PATH’s overall performance.

- **Dean Allen**, Treasurer
  United States
  CEO, McKinstry
  Seattle, WA USA

- **Supamit Chunsuttiwat**, MD, MPH
  Thailand
  Senior Expert in Disease Control
  Ministry of Public Health
  Bangkok, Thailand

- **Avva Marie Coll-Seck**, MD, PhD
  Senegal
  Executive Secretary, Roll Back Malaria Partnership Secretariat
  Geneva, Switzerland

- **Vera Cordeiro**, MD, Vice Chair
  Brazil
  Founder and CEO, Associação Saúde Criança
  Rio de Janeiro, Brazil

- **Molly Joel Coye**, MD, MPH, Chair
  United States
  Chief Innovation Officer, UCLA Health System
  Los Angeles, CA USA

- **Alex Chika Ezeh**, PhD, MSc
  Nigeria
  Executive Director, African Population & Health Research Center
  Nairobi, Kenya

- **George Gotsadze**, MD, PhD
  Republic of Georgia
  Director, Curatio International Foundation
  Tbilisi, Georgia

- **Eivor Halkjaer**, Sweden
  Former Swedish Ambassador and Former Senior Advisor to the Director General, Swedish International Development Cooperation Agency
  Stockholm, Sweden

- **Vincent McGee**, United States
  Senior Advisor, The Atlantic Philanthropies
  New York, NY USA

- **Kevin Reilly**, MBA
  United States
  Former President, Wyeth Vaccines and Nutrition
  Rosemont, PA USA

- **Jay Satia**, PhD, Secretary
  India
  Senior Advisor, Public Health Foundation of India, and Director, Indian Institute of Public Health
  Gandhinagar, Gujarat, India

**Executive leadership team**

- **Ayorinde Ajayi**, MD, MPH
  Vice President, Field Programs

- **Christopher J. Elias**, MD, MPH
  President and CEO

- **Scott Jackson**, MBA, CFRE
  Vice President, External Relations

- **Jacqueline Sherris**, PhD
  Vice President, Global Programs

- **Eric Walker**, MA
  Vice President, Corporate Services

**Program Leaders**

- **John Boslego**, MD
  Vaccine Development

- **Catherine Brokenshire-Scott**, MPH
  South Africa

- **Mona Byrkit**, MPH
  Vietnam

- **Carlos C. (Kent) Campbell**, MD, MPH
  Malaria Control

- **Dwan Dixon**, MA, MPH
  Ethiopia

- **Michael J. Free**, PhD
  Technology Solutions

- **Kateryna (Katya) Gamazina**, MD
  Ukraine

- **Michelle Gardner**, MSc
  Cambodia

- **Jane Hutchings**, MPH
  Reproductive Health

- **F. Marc LaForce**, MD
  Meningitis Vaccine Project

- **Joan Littlefield**, MBA, MPH
  Zambia

- **Christian Loucq**, MD
  Malaria Vaccine Initiative

- **Mohammed Makame**, MD, MPH
  Tanzania

- **Julie Pulerwitz**, ScD
  HIV/AIDS and Tuberculosis

- **Margarita Quintanilla**, MPH
  Nicaragua

- **Catharine Taylor**, MSc Econ
  Maternal and Child Health and Nutrition

- **Rikka Trangsrud**, MA
  Kenya

- **Taran Vij**, MBA
  India

- **John Wecker**, PhD
  Vaccine Access and Delivery

- **Pawana Wienrawee**, MPH
  Thailand

- **Jiankang (Jack) Zhang**, MS, MBA
  China
INSTITUTIONAL SUPPORTERS

We are grateful to all of our supporters. This list includes institutions that contributed $1,000 or more in donations or in-kind contributions to PATH. In addition, more than 1,600 individuals contributed flexible funds for PATH innovations. Due to space constraints, we are unable to list all of our individual supporters on this page.

Foundations
Bill & Melinda Gates Foundation
Brookshire-Green Foundation
Charles Spear Charitable Trust
Cleveland H. Dodge Foundation
Elizabeth Clasen Pediatric AIDS Foundation
ExxonMobil Foundation
Foundation for Innovative New Diagnostics
Frankel Family Foundation
International Child Support
The John D. and Catherine T. MacArthur Foundation
Keith & Mary Kay McCaw Family Foundation
Kellogg Family, LLC
Kuehnlau Family Foundation
Laird Norton Foundation
Lee Family Charitable Lead Trust
The Lerner Foundation
Martin Fabret Foundation
McKinstry Charitable Foundation
Michael & Susan Dell Foundation
MJ Murdoch Charitable Trust
Moccasin Lake Foundation
Nike Foundation
The Nordcliffe Foundation
Overbrook Foundation
Qwest Foundation
Raikes Foundation
Robert Wood Johnson Foundation
The Rockefeller Foundation
Sapling Foundation
Satya and Rao Remala Foundation
Seattle International Foundation
Shickman Family Foundation
Susan and Gerald Bereika Family Foundation
Wallace Alexander Gerbode Foundation
The William and Flora Hewlett Foundation
Yvonne Maxine Betson Charitable Remainder Unitrust

Governments and international agencies
Agencia Española de Cooperación Internacional Para el Desarrollo
Canadian International Development Agency
Department for International Development, United Kingdom
Department of Science and Technology, South Africa
El Consejo de Ministras de la Mujer de Centroamérica y República Dominicana
CAVI Alliance
Global Alliance for Improved Nutrition
The Global Fund to Fight AIDS, Tuberculosis and Malaria
Ibero-American States for Education, Science and Culture
International Potato Center/Centro Internacional de la Papa
Joint United Nations Programme on HIV/AIDS
Ministry of Foreign Affairs, the Netherlands
Ministry of Foreign Affairs, Norway
Ministry of Public Health, Thailand
National Center for Parasitology, Entomology, and Malaria Control, Cambodia
National Health Security Office, Thailand
National Institutes of Health
National Lung Health, Vietnam
Norwegian Agency for Development Cooperation
Office of Economic Development, Seattle
Pan American Health Organization
Royal Netherlands Tuberculosis Association
Swedish International Development Cooperation Agency
Thai Health Promotion Foundation
United Nations Children’s Fund
United Nations Development Fund for Women
United Nations Population Fund
US Agency for International Development
US Centers for Disease Control and Prevention
US Department of Agriculture
US Department of Defense
US Department of Health and Human Services
World Health Organization

Other organizations and corporations
Aetna
Akany African & Tribal Art
APCO Worldwide Inc.
Arbor Vita Corporation
Bank of America Merrill Lynch
Becton, Dickinson and Company
Bel Harbor International Conference Center
Blistex Inc.
Boeing
CB Richard Ellis
Chemontics International
Chevron Corporation
Cooley Godward Kronish LLP
CoreRx™ Pharmaceuticals
Costco Wholesale Corporation
Crucell
Davis Wright Tremaine LLP
Dell
Eli Lilly and Company
Evergreen Associates, Ltd.
ExOfficio LLC
GlaxoSmithKline
GMMB
Goldman Sachs
Health Partners International
Hewlett-Packard Development Company L.P.
Hotchkins and Wiley Capital Management
ICF Macro
Infoscitech Corporation
Initiatives Inc.
JPMorgan Chase & Co.
LinkedIn Corporation
Machado Medical Evaluations, Inc.
Matthew G. Norton Co.
McCrea Cellars
MedImmune, LLC

Universities and nongovernmental organizations
Academy for Educational Development
Basic Health International
Cambodian Women for Peace and Development
Center for Global Development
EngenderHealth
Family Health International
Georgia Institute of Technology
Global Partnerships
Group Health Cooperative
Health Systems Research Institute
Imperial College London
International Center for Research on Women
International Partnership for Microbicides
International Planned Parenthood Federation
International Rescue Committee
IntraHealth International, Inc.
Jhpiego
John Snow, Inc.
Johns Hopkins Bloomberg School of Public Health
Keck Graduate Institute of Applied Life Sciences
Landesa
Operation Smile
Plan International
Promundo
RTI International
Save the Children Federation, Inc.
Tearfund
Tulane University
University of Bristol
University of California, Davis
The University of Georgia
University of Maryland
University of Washington
Washington State University
Women Deliver, Inc.
OUR GLOBAL PRESENCE

Headquartered in Seattle, Washington, United States, PATH works in more than 70 countries in the areas of health technologies, maternal and child health, reproductive health, vaccines and immunization, and emerging and epidemic diseases (including AIDS, malaria, and tuberculosis). We have offices in 31 cities in 23 countries.