



Minnesota AIDS Project™



2000 Annual Report

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Message From Lorraine Teel, Executive Director

A very appropriate African proverb says, "The best time to plant a tree is 20 years ago. The second best time is today." How true that is for HIV prevention. Had we as a community, a state, a country, a world planted that tree of prevention 20 years ago, in 2000 we would not see the worldwide devastation caused by this virus. But we didn't. Instead we spent our time arguing over the morals of sexual expression. We debated the pros and cons of making sterile syringes available to drug users. And as we did so, the suffering continued. Finally, people from throughout the world gathered in Durban, South Africa in July 2000 and stated emphatically "Enough is enough." We then all rededicated ourselves to this work, agreeing to come home and plant that tree of HIV prevention.

The International Conference on AIDS held in Durban was historic. It was the first international conference held on the very continent devastated by this modern day plague. While 10 percent of the world's population lives on the African continent, 70 percent of HIV infections occur there. 92 percent of AIDS orphans are in Africa. More disturbing are the rates of HIV infection in the adult population. The rate varies from an average of 8.8 percent to over 35 percent, depending on the country. However, all is not lost. Some countries have had the political courage, wisdom and strength to attack HIV. And they have seen results. HIV rates are dropping in Uganda, one of the first countries besieged by HIV. If only here in America we would have that same courage, we too would see declining rates of infection.

I was fortunate enough to attend this conference in South Africa and come back filled with the wonder of what can happen both on a macro and micro level if one only has the courage. Here in the United States, we have seen that courage in the gay men's community. First, gay men came together to educate each other about the virus, and when it became apparent that HIV was here to stay, they worked together to design programs like PrideAlive that incorporate the HIV prevention message into the more complex realities of gay men's lives. In effect, they have planted the tree of prevention so that it will grow, thrive and prosper. And this year, Prism has worked to utilize the "power of one" and plant a tree to bring together those living with HIV to design, implement and direct a self-care and advocacy program for long-term survivors of the virus. It is through this recognition that individuals living with HIV will strengthen the tree of HIV prevention.

While I was not present at MAP's founding in 1983, I feel certain that the six gay men who created this agency never believed there would be a need for these services in the next millennium. It was perhaps too painful to consider. But it is fortunate that they planted the tree of HIV prevention 17 years ago. The tree has grown, blossomed and transformed itself many times. And now we know that our best strategy is to be a bit like Johnny Appleseed was 200 years ago. We must continue to travel and plant the seeds of HIV prevention at both the person-to-person and national levels. We will work with communities, large and small, in this work. The message of HIV prevention must never end until there is not even one new infection in this world. That is MAP's vision - a world free of AIDS.

Housing is an HIV Issue

Minnesota's tight housing market fosters a difficult living situation, especially for HIV-positive and low-income individuals. That's why MAP is constantly working to increase affordable housing options for HIV-positive individuals and families in the state.

According to the "HIV Comprehensive Needs Assessment Report" prepared in April 2000 for the Minnesota HIV Services Planning Council, over half of HIV-positive Minnesotans surveyed felt that affordable housing was a problem, and 21 percent reported having unstable housing.

A combination of factors leads to this perilous housing situation. HIV makes it difficult for many individuals to work, because of fatigue, illness or workplace discrimination, usually resulting in lost income. Extremely low vacancy rates and rapidly escalating rents in the Twin Cities metropolitan area, make things especially difficult for these low-income individuals. This is exacerbated if they have poor rental history, bad credit or criminal records.

"Safe and affordable housing is central to care for people who are HIV-positive," explained Kim Lieberman, MAP housing systems advocate. "These individuals need shelter and a home where they can rest and relax, prepare healthy meals and keep medications refrigerated. Once their housing is stabilized, they can access medical care more reliably and are better able to deal with other issues. For people who are HIV-positive, housing is health care."

Regina Rippel, MAP housing services manager, added, "In addition, being homeless exacerbates HIV, because of barriers such as a lack of health care and difficulty adhering to strict medical regimens. Survival on the streets often necessitates increased risk-taking behaviors, which in turn increases the spread of HIV and other diseases."

According to the National Coalition for the Homeless, up to 50 percent of people living with HIV are expected to need some type of housing assistance during their lifetimes. MAP's Housing Services works to provide transitional housing for HIV-positive individuals who are homeless or at-risk of homelessness. MAP enables clients to live independently in the community while maintaining optimal health, by assisting them in locating safe and affordable housing, providing short-term subsidies and tenant education, and eventually helping successful clients secure long-term housing assistance. In 2000, MAP provided housing subsidies to 111 households.

MAP works to improve and increase housing opportunities for people living with HIV. Through education and advocacy, MAP is also supporting efforts to increase affordable housing while simultaneously reducing housing barriers for the impoverished.

"I wouldn't have had anywhere to go, I would be homeless, if it weren't for MAP's help. It's very hard up here in Minnesota. But knowing I can go to my own home and get in my own bed is so great." -Anonymous MAP client

HIV & Substance Use: Twin Epidemics

According to the Centers for Disease Control and Prevention, drug and alcohol using behaviors and sexual behavior associated with substance use account for a major portion of all HIV cases in the United States. Three out of four of the estimated 40,000 new cases of HIV in the United States each year are happening to people who use legal and illicit substances, their sexual partners and their newborn children.

Thus, MAP is undergoing a strategic initiative to fight the twin epidemics of substance use and HIV. Goals of MAP's substance use advocacy program include reducing the spread of HIV infection, increasing access to medical and chemical dependency care, and improving the health outcomes of HIV-positive and chemically dependent Minnesotans, as well as those at risk of HIV infection due to substance use or substance use-induced sexual risk-taking behaviors.

"The similarities and connections between HIV and substance use are numerous – both are chronic, acute and life-threatening diseases that are amplified by social stigma," said Bill Seed, MAP substance use systems advocate. "So, there is a demonstrated need to integrate treatment and prevention messages."

Another factor playing a role in the prevalence of this twin epidemic is the reluctance of many substance use treatment facilities to provide HIV prevention education and safer sex materials.

MAP's initiative to fight these twin epidemics includes several actions:

- Seek new resources and find unique ways to use existing resources
- Support policy initiatives that address the service needs of HIV-positive individuals with chemical health issues
- Empower consumers with self-care and advocacy skills
- Advocate for the integration of HIV and substance-use services
- Share the responsibility of meeting the needs of those affected by both epidemics with substance use prevention and treatment service providers, as well as other AIDS service organizations
- Improve access to HIV testing and counseling in or following substance use treatment programs

"I immediately felt your care and concern for people afflicted and struggling with addiction, HIV, AIDS and HCV issues. I'm incredibly impressed with your commitment to provide services, to collaborate with a wide range of organizations and professionals, your range of network and your efforts to disseminate information." –Bruce Larson, Hazelden

Case Managers Serve Diverse Clientele

Minnesota AIDS Project case managers work closely with HIV-positive Minnesotans to provide ongoing needs assessment and service coordination. They are a vital part of MAP programming, because they serve as advocates on behalf of clients and have an important role in securing a broad array of services for them. In 2000, approximately 310 clients in Minnesota were served through the case management program.

Case management has changed in the years since MAP first began serving clients. "We're working with people who aren't necessarily at the end of life anymore," explained Gayle Caruso, MAP case management manager. Caruso credits better medications and health care, as well as improved support services.

Also, the characteristics of MAP's client base have changed. In 2000, 46 percent of clients had a mental health or dementia diagnosis, and 35 percent had a self-reported chemical dependency diagnosis. "We've done a lot to meet the changing needs of our clients, from continuing education for our staff to forming new connections in the community with mental health and chemical dependency treatment centers," said Caruso.

With clients living longer, often with other health issues that are not related to HIV diagnosis, case managers spend a great deal of time assisting clients with basic living needs. They make referrals to other MAP services as well as organizations throughout the state. Another concern is helping clients find natural support systems, often through groups such as Prism at MAP.

Again in 2000, a primary focus of case managers was consistently working on access to affordable health care for clients. Case managers help clients obtain comprehensive health care insurance, assist with finding medical providers, support clients in maximizing the effectiveness of medical care, assist with determining drug adherence programs, give referrals to treatment-specific support groups and attend doctor's appointments with clients. They also arrange adult foster care, nursing home placements, home health care and hospice, and assist in obtaining prescriptions.

MAP case management also has focused its outreach and service efforts on forming key relationships with several Minnesota organizations, including the Minnesota Correctional Facilities and chemical dependency treatment centers, St. Cloud Red Cross, Pride Institute, Lutheran Social Services, the African AIDS Prevention Center and the International Institute of Minnesota. Case managers provide direct service through unique partnerships with both Park Nicollet Medical Center and the Duluth Infectious Disease Clinic.

Caruso noted, "We've put a lot of energy into coordinating services, so clients get what they need. Our goal is to continue these collaborations to better serve our diverse clientele."

"Case management has helped me a lot. When I need things, they make sure they get done. When I'm trying to find help, with housing, with transportation, with finding a doctor, my case manager makes recommendations. There's a lot of help at MAP." -Al Clark, MAP client



Empowering HIV-Positive Individuals

In 2000, MAP expanded Prism™, a self-care and self-advocacy group for people in Minnesota living with HIV. A community building initiative, Prism focuses on uniting the HIV community and encouraging healthy living.

"People with HIV are often marginalized from society. Many Prism participants are further isolated, because they are gay, from communities of color or women," explained Jason Little, Prism coordinator. "Prism gives people a way to come together and creates a vital sense of empowerment."

Little continued, "When we're told we have HIV, most of us feel very powerless. Prism helps people living with HIV to become their own advocates, with health and insurance issues, with legal and political issues, and with society in general."

With approximately 40 regular attendants to date, Prism provides three to four educational and social opportunities for HIV-positive individuals each month. Educational forums have included prescription drug side effects and alternative therapies, relationships, voting and political activism, and benefits.

As an important adjunct to educational activities, Prism's social events have ranged from a Halloween party and camping to snow tubing and bowling. "Social events have been one of the most powerful and successful ways of bringing people into the program," Little remarked.

Lorraine Teel, MAP executive director, called Prism an exciting new program. "We anticipate tremendous growth in this program. As individuals with HIV continue to lead longer and healthier lives, learning how to manage your life, where to get information and how to connect with others is even more important. We are proud of Prism and look forward to its growth."

"It seems like when you have this virus, you tend to isolate yourself. But, it's important to realize that others are going through the same things I am, and Prism provides that opportunity." - Pam Benson, Prism participant

"Every Penny Counts" for People Living with HIV

In 2000, MAP was asked to take on the Every Penny Counts™ Emergency Assistance Fund, or EPCEA. MAP's existing resources and additional client services made the move of the fund, which has been in existence since the late 1980s, ideal. EPCEA provides emergency financial assistance for individuals in Minnesota living with HIV.

"Managing EPCEA has allowed MAP to streamline several emergency funds into one, making them easier to manage and less confusing for our clients," explained Ken Oltman, EPCEA administrator.

Through Every Penny Counts Emergency Assistance, funded in part by the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act, MAP provided subsidies to more than 1,000 HIV-positive Minnesotans in 2000. These subsidies were used to pay for rent and utilities, moving and housing application expenses, childcare, medical expenses and food and other basic needs.

EPCEA also serves as another entry point for HIV-positive individuals into MAP and other area AIDS service organizations. "EPCEA creates another contact for MAP with HIV-positive individuals," explained Oltman, "and we can then refer them to services such as case management, transportation, legal assistance, PrideAlive, Prism and MAP AIDSLine for questions."

"Medical bills and poor health have put me in a very precarious situation. The money I receive from Every Penny Counts each year is crucial to my survival."

-Paul Nielson, MAP client living with partial blindness, diabetes and HIV



Volunteers Play Critical Role in MAP Success

Volunteers are a vital aspect of the Minnesota AIDS Project. In 2000 alone, volunteers provided more than 15,000 hours of service - that's about \$77,250 saved, if MAP were to pay minimum wage for those same hours.

MAP volunteers help with special events such as the Minnesota AIDS Walk and Hollywood, provide one-on-one support to HIV-positive clients, assist with special office projects and serve as advocates for HIV issues.

"Volunteers bring energy, initiative, enthusiasm and unique talents to the agency," remarked Laura Salvesson, volunteer resources manager. "They inspire us, through their work, to do our work. They help us stay true to our mission."

Gene and Charlotte Frampton, long-time volunteers at MAP, have noticed changes in volunteerism since they started helping with the Minnesota AIDS Walk in 1988. 2000 was their 12th year of playing an integral role in the walk.

"We have watched MAP grow over the years and have seen many changes," the Framptons noted. "What has never changed, however, is the incredible professionalism, dedication, focus on the mission and gracious treatment accorded to clients and volunteers."

As the agency has grown, the role of volunteers has grown. Many volunteers have assumed leadership roles, such as the Framptons chairing the Park Logistics sub-committee of the AIDS Walk. "Their leadership, long-term commitment and extensive knowledge of the AIDS Walk have been a tremendous asset to the committee and to the Walk itself," said Salvesson.

When asked about their motivations for volunteering, the Framptons cited involvement with the Walk as a way to honor the memory of Gene's brother Clyde, who died of AIDS in 1985. Other volunteers' reasons include personal connections to HIV, wanting to learn more about the virus, compassion and a desire to make a difference.

"The first Walk day was very emotional for us, as it brought back the grief we felt at losing our favorite brother," the Framptons explained. "But, more importantly, it gave us a sense of purpose. It is that sense of purpose that brings us back year after year and has led us to expand our involvement with MAP."

"We can easily see how our efforts contribute to helping fight a very destructive disease and provide valuable services to the community." -Gene and Charlotte Frampton, MAP volunteers



Community Affairs: Protecting the Integrity of Sexual Health Education & Taking a Leadership Role on STDs

The year 2000 for MAP's community affairs department can be characterized by dedicated efforts to establish an understanding of the continued need for comprehensive sexual health education in Minnesota.

Partly as a result of MAP's advocacy efforts, the Minnesota Legislature allocated new funding to expand free access to STD screenings. "This was a rare accomplishment in a year when funding for new public health initiatives was very hard to come by," said Bob Tracy, MAP community affairs director. This STD legislation was one of only two new public health initiatives approved in 2000.

"Establishing an awareness of the need for STD prevention to be a priority in Minnesota has been a concerted effort for MAP for several years," explained Tracy. "We've worked to educate legislators about the link between HIV and STDs, and we set the table for the legislature to take bold action." In fact, MAP has taken a leadership role in the state for finding new resources for STDs as well as raising the importance of incorporating STD education into HIV prevention.

MAP, together with the Minnesota Organization on Adolescent Pregnancy, Prevention and Parenting (MOAPPP) and several other area organizations, formed the Sexuality Education for Life Coalition, a group advocating for comprehensive sexuality education in Minnesota. The coalition was critical to securing the aforementioned STD funding.

In addition, several individuals and one citizen group were recognized for the critical roles they played in protecting and increasing funding for STD awareness and prevention. Hanson-Henningson awards were presented to these people at Lunch Out Loud, MAP's annual commemoration of World AIDS Day where HIV-positive individuals meet with Minnesota legislators at the State Capitol. The awards, which remember the work of HIV-positive political activists Dick Hanson and Burt Henningson, went to Senator Roger Moe and 15 members of the Minnesota House who took steps to ensure the success of public policy promoting STD prevention and care. Also receiving the award were Brainerd FATE (Fighting AIDS Through Education) Peer-Educators, who traveled to St. Paul to seek increased funding for STD prevention, and their state senator, Sen. Don Samuelson.

"Not only do I leave today knowing more about HIV, I leave a better legislator and a better person." - Minnesota Representative Andy Dawkins (DFL-St. Paul) on his experience at Lunch Out Loud



PrideAlive: Innovative Prevention Efforts

2000 was a growth year for PrideAlive™, MAP's community building initiative for gay and bisexual men. PrideAlive expanded field-based HIV testing, created a discussion group for young gay men, increased outreach and prevention efforts, and enhanced its work in Greater Minnesota.

PrideAlive tested 222 people for HIV at several community locations, including bars, PrideAlive events and in Greater Minnesota in 2000.

"We're going where the people are," explained Rob Yeager, PrideAlive community organizer. "PrideAlive is setting up community norms about the importance of looking after one's own health."

Prevention remains a core concept of PrideAlive. The group held café chats and community forums at various Twin Cities locations in 2000, educating gay and bisexual men on various health and social issues. In February, PrideAlive introduced Liquid Discourse, a discussion group addressing the needs and concerns of gay and bisexual men age 18-30. Topics at these discussion groups and educational forums included dating and relationships; sexuality and sexual health; mental health and spirituality; and political activism.

"HIV prevention is always touched upon. More importantly, though, when people feel a stronger sense of community, they make healthier and more positive choices," Yeager noted.

A key focus of 2000 was developing a greater presence outside of the Twin Cities metropolitan area. A Greater Minnesota retreat was held in to discuss statewide GLBT organization and HIV prevention. PrideAlive has also been working with GLBT organizations throughout the state, helping support their community building efforts.

"I don't believe it is possible to underestimate the amount of good these workshops are doing for those who attend them." -Anonymous PrideAlive Café Chat participant





Mobilizing Minnesota Through Special Events

Key to the year-to-year success of the Minnesota AIDS Project are two annual events that raise both awareness of and funds for the fight against HIV.

The first, the Minnesota AIDS Walk, is held on the third Sunday of May each year. The AIDSWalk brings together thousands of Minnesotans from around the state to Minnehaha Park in south Minneapolis. The Target Foundation, Dayton's, Mervyn's California, Target Stores and GMAC/RFC sponsored the 2000 Walk, which raised more than \$700,000 for MAP and 12 other recipient organizations. More than 12,000 walkers and 1,200 volunteers helped to make the 2000 Walk a success.

"The Minnesota AIDS Walk brings together people from all walks of life who are directly or indirectly affected by HIV, as well as those who just want to show their support," said Jen Foss, MAP special events manager.

The second fund-raising event is Hollywood, the Twin Cities' annual Academy Awards party and a benefit for MAP and other local AIDS service organizations. Held in downtown Minneapolis at the Historic State Theatre, Hollywood is the largest Oscar Night® America party in the nation. The night features a live telecast of the Academy Awards, with celebrity encoees, local music and comedy entertainment filling the commercial breaks. Attendees also take part in a silent auction and enjoy a dessert bar.

The thirteenth annual Hollywood event, held March 26, 2000, was produced by MAP for the first time. Major sponsors were Dayton's, Sam Goody and Suncoast Motion Picture Company. Approximately 2,400 people attended the event, which raised \$92,000 for the fight against HIV in Minnesota.

"Like the AIDS Walk, Hollywood is a fund-raiser to fight HIV, but it's a fund-raiser with a flair," Foss explained. "We're raising money and awareness, but, more importantly, we're reaching out to people who want to, and who are able to, help in Minnesota's fight against HIV."





Summary of Total Costs

Year ended December 31, 2000

Client & program services:

Case management	\$ 615,588
Emergency financial assistance	231,479
Housing	545,700
Health education	895,629
Volunteer support & volunteer-supported programs	549,084
Communications	110,784
Public policy	192,386
Total client & program services	\$3,140,650

Supporting services:

Fund-raising & development	\$ 187,825
Management & general	302,400
Total supporting services	\$ 490,225

Total expenses	\$3,630,875
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Statement of Financial Position

December 31, 2000

Assets:

Current assets:

Cash & cash equivalents	\$ 560,547
Certificates of deposit	398,000
Accounts receivable:	
Grants & contracts	293,378
Contributions	168,346
Other	2,350
Prepaid expenses	20,669

Total current assets	\$1,443,290
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Contributions receivable	25,000
Other assets	10,000
Office furniture & equipment, net	128,879

Total assets	\$1,607,169
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Liabilities:

Current portion of capital lease obligations	\$ 11,527
Accounts payable	14,766
Accrued expenses	82,261
Deferred revenue	51,082
Noncurrent lease obligations	48,478

Total liabilities	\$ 208,114
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Net Assets:

Unrestricted, designated by the Board for:

Equipment replacement fund	\$ 435,942
Reserve fund	775,402
Temporarily restricted	187,711

Total net assets	\$1,399,055
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Total liabilities & net assets	\$1,607,169
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Statement of Activity & Changes in Net Assets

Year ended December 31, 2000

Changes in unrestricted net assets:

Public support & revenue:

Public support:

Grants from governmental agencies	\$ 2,388,384
Unrestricted contributions & grants	385,384
Nonfinancial volunteer services	99,184
Special events:	
Contributions	801,860
Special events fund-raising & development	(295,067)
Public support shared	(65,000)
Total public support	\$ 3,314,745

Revenue:

Program fees for goods & services	\$ 8,412
Interest	49,137
Total revenue	\$ 57,549

Net assets released from restrictions:

Satisfaction of program restrictions	\$ 375,063
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Total unrestricted public support & revenue	\$ 3,747,357
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Expenses:

Client services:

Case management	\$ 615,588
Emergency financial assistance	231,479
Housing	545,700

Program services:

Health education	895,629
Volunteer support & volunteer-supported programs	549,084
Communications	110,784
Public policy	192,386

Total client & program services	\$ 3,140,650
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Supporting services:

Fund-raising & development	\$ 187,825
Management & general	302,400

Total supporting services	\$ 490,225
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Total expenses	\$ 3,630,875
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Increase in unrestricted net assets	\$ 116,482
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Changes in temporarily restricted net assets:	
Contributions	\$ 364,112
Net assets released from restriction	(375,063)
Decrease in temporarily restricted net assets	\$ (10,951)
Increase in net assets	\$ 105,531

Changes in net assets:	
Net assets, beginning	\$1,251,415
Increase in net assets	105,531
Net assets transferred from AIDS Emergency Fund	42,109
Net assets, ending	\$1,399,055



2000 Annual Report Donor List - Individuals

\$10,000 & Up

Anonymous
Jonathan Churchill
Wheelock Whitney

\$5,000 -9,999

Peter Krembs & Robert Jeddelloh
Edward Jay & Leslye Phillips

\$1,000 -4,999

Anonymous (2)
Gerald Aldrich
Joseph Andrews
Bill Atmore
William Biermaier & David Hanson
Otte Boersma
Buuck Family Foundation on behalf of
Katherine Buuck
Dolores M. Carlson
Chadwick Foundation on behalf of Mrs.
Donald C. Dayton
Christopher Colantti & Conradine
Colantti Sanborn
Marguerite & Russell Cowles
Deikel Family Foundation
Fingerhut Family Foundation
Ronald Fingerhut Family Foundation
G. Robert Flory
Connie Foote & David Mitchell Family
Foundation of The Saint Paul Foundation
Gary & Taylor Foss
Gene & Charlotte Frampton
Rick Goldberg & Stephen Filing
Ray Gooderl & Roberto Perez de Agreda
Bart Greenwood
Rich Hamson & Jeff Sybrant
Carol Marie Hansen
Mark Hiemenz & Charlie Rounds
Dorothy Jeske
Duane Jeske
Ray & Susan Johnson
Paul Kaminski & Rich Bonin
Jean King
Mary King
Gregg Larson & Rob Carlson

Steve & Sheila Lieberman
Tom Lounsbury
The MAHADH Fund of
HRK Foundation
Ric Magnuson & Chuck Swenson
David & Donna Miller
Susan Mortensen
Bill L. Moses
Brian Neil
Chris Nichol
Dr. Michael Quinn Patton
M. Walker Pearce & Jack Weatherford
Rabbi Mark Peilen
Sally & George Pillsbury
Milo Pinkerton & Virgil Taus
James Quinn
Stephen Riendl
Christine Sevens
Ed Simpson
Betty & Lyle Starwalt
Murray Thomas & Stephen Davis
Bill Venne & Douglas Kline
Margery Waterbury
David K. Whitney
Kimball & Helen Whitney
Charles J. & Henrietta McDonald
Winton Fund

\$500 -999

Anonymous (2)
Margo Berg
Pete Bissonette
Barbara Brin & John Beal
Charles M. Brown
The Burdick Family Charitable
Foundation

Bruce & Kathleen Carlson
 Lynn Charlson
 Tim & Barbara Clarity
 Caroline Reedstrom Conley
 Thomas Davis
 David & Vanessa Dayton
 Kenneth & Judy Dayton
 Michele & Steve DuMond
 David Eaton
 Ecolab Foundation on behalf of Timothy
 Dordell
 Jill & Robert Ebelstein
 Paul Edner
 Rebecca Enos
 Bill & PollyAnn Erickson
 James & Kathy Farstad
 Randall Feldman
 Andrew & Joanne Gersten
 Gary Gustafson & Dawn Carlson
 Kristin Hase & Jeffrey Anderson
 John & Sandy Hey
 Gordon Huser
 Richard & Sandra Jacobson
 Christine Knox
 Lindsey Robert Kopp
 Shawn Ladner
 Diana & F. Bruce Lewis
 Mary Licari
 Robert Lindquist
 Mary Luong
 Robert W. MacDonald
 Kevin McAndrews & Joseph Menor
 Jill & Robert McGinnis
 Don McNeil & Emily Galusha
 Joseph Miesen
 David & Arlene Mitchell
 Amy Mulvahill
 Richard D. Nelson
 Ryan Paul North
 Deborah R. Olson
 Nick Patterson
 E. Clarke Porter & Phyllis Thomson
 Randall Propp & Randy Nelson
 Scott Schlaffman
 Nancy Schussler
 John Sheehy
 Andrew Simons
 Olive Smallwood
 Dr. Michael Spilane
 Lorraine & Patrick Teel

Colleen Tompkins
 Nina & Eric Utne
 Henry Waldenberger
 Jeff Walkowski
 Ruth & David Waterbury
 Clarice Wesley
 Mary Wiltse
 Mike & Penny Winton

\$100 - \$499

Anonymous (8)
 Amy Aanenson
 Grant Abbott & Elaine
 Tarone
 Carolyn Aberman
 Ronald & Gloria
 Abrahamson
 Sue K. Adam
 Mark Addicks
 Betty & Robert E.
 Ahlcrona
 Warren Ajax
 Moiz Akhtar
 P. J. Aletky
 Minnie Alexander
 Leeanne Allen
 Mary Ann Allen
 Susan Kay Allen
 Gracie Alspaugh
 Mary Lou Ambrose
 Chris S. Andersen
 Glenn & Audrey
 Anderson & Family
 James J. Anderson
 John H. Anderson
 Roger A. Anderson
 Roger E. Anderson
 Sarah J. Anderson
 Sharon & Roger Anderson
 Susan & Kent Anderson
 Walter F. Anderson, Jr.
 Stephane Andre
 Thomas Arlander
 Robert & Roberta
 Aronson
 Teri Bachmann & Leigh
 Evans
 Bradford Bailey
 Brenda Bailey
 Chip Baldwin
 Kirk Ballard
 Romy Ballard
 Bret Bannon
 Lori Barghini
 Ann Barkelew
 Amy Barron
 Anne Barry
 Rebecca Bartels
 Glenn Bartsch
 Patricia Bauer & J. Steven
 Snow
 Cynthia Bauerle
 Byron Baune & Richard
 Montgomery
 Darlene & Donald Bayer

Sherrie & Bradley Beal
 Colleen & Brent Bechtle
 Ray Beers II
 Mr. & Mrs. Judson Bemis
 Kenneth Bengtsson
 Kirby Bennett & Phil
 Losacker
 Margaret Benson
 Diedre Berg
 Virginia Berg
 Amelia Berger
 Cathy Bergland
 Daniel Bernard
 Andrew Berton
 Geraldine & Eugene
 Berwald
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 James Biederman
 Christine Bielke
 John Bierbaum
 Antay Bilgutay
 Antje Bilgutay
 Edna & Sherman Billey
 David Billinger
 Charles Bingham III
 Don & Carol Birkeland
 Constance Bishop
 Colleen Bjerke & John
 Oswald
 David Bjork
 Robert & Joan Blanchard
 David Elando
 Rose Block
 Geri & Milt Elumenfeld
 Barbara Blumer & Timothy
 Hoel
 Terry Bock
 Anne Bodley
 Mary Boler
 Laura & Douglas Booth
 Suzanne Born & Carol
 Cummins
 Steven Bosacker
 Susan Nelson Boeser
 Michelle Boston
 Lisa & Chad Boulton
 Carol Bouska
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 Kummer
 Tim Boyer
 Byron Bradley
 Kathleen & Brian Brady
 Florence Brammer &
 David Shlay
 Christopher Brand

Jane Brattain	Miguel Castaneda	Barbara Davis	Lynn Eberly & J.	Thomas Forcier &
Timothy Braulick &	Joseph Chadwick	Frances Davis	Andrew Scherrer	Jeff Hamm
Leslie Schultz	Michelle Lee	Stephen Davis	Thomas & Randy	Shelman Ford
Jerry Braun & Larry	Chalmers	Edward & Sherry	Ribelstein	Lisa & Steven
Widel	Soukie Chanhdara	Ann Dayton	William Bellefsen	Postick
Eric Brendtro	M. E. Chapa	Judson Dayton	Claire & Charles	Jarilyn Postick
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Abra Brisbin &	Sharon J. Chapman	Dean	Gregory Egertson	Traci Roster
Gayle Hemker	Nicole Chamey	Jill DeBoer & Duane	Sally Ehlers	Vicki Fraher
Brisbin	Mary Christenson &	Gilbertson	Tim Ehrmann	David Francis
Libby Brockhoff	Neil Hamrin	Diane Deerwood	Mary & Robert	Jennifer Franklin
Henry Bromelkamp	Scott & Lisa	Jane Delano Ridder	Eichinger	Eric J. Franson
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& Shirts Inc.
Cherry Grove
Combined Charities
Church of St. John
Neumann
College of St.
Benedict
Crate & Barrel
Crystal Shopping
Center Associates
Da Kirk International
Diasarin, Inc.
DuPont
Pharmaceuticals
Company
Edina Skin Care
Specialists

Employees of The
First National Bank
of Cass Lake
Road Respectives, Inc.
Freedom Nation
H. B. Fuller
Company
Goldwear, Inc.
Good Samaritan
United Methodist
Church
Goodtime Sunday II
Bowling League
GPS Applications, Inc.
Great River Energy
K. E. Hanson &
Associates
The HealthFund of
Minnesota
HR Advantage, Inc.
Hugonian
Hy-Dat Thai
Individuals through
the IBM Pension
Payment Service
Center
IWU Charitable
Foundation
Jerry's Fresh Cherry
Lemonade
Joyce's
K & R Concessions
Kairos Foundation
K D W B
Kilroy's, Inc.
Laird Norton
Company LLC
Member Directed
Charitable
Contribution
Program
Lake Harriet United
Methodist Church
Jim Lupient
Oldsmobile
Luster's Pro Floors
Rudy Luther's
Downtown Pontiac
- Jaguar
Lutheran
Brotherhood
Mackay Envelope
Corporation
R. J. Marco
Construction, Inc.
Marketing
Connections, LLC
Individuals through
the Marysville
Township United
Fund
Midwest Metal
Finishing, Inc.
Miller Johnson
Steichen Kinnard
Investment
Securities

Minnesota AIDS
Bike Trek
Minnesota
Gastroenerology.
P.A.
The Minnesota
Opera
Montage
Communications
Services
MFS Systems
Corporation
Mystery Cafe
New Video, Inc.
Individuals through
the Nicollet Rind
Drive
North American
Communications
Resource, Inc.
North Memorial
Community
Foundation
Old Chicago
In memory of
Raymundo Trujillo
from his friends at
Old Navy
Open Arms of
Minnesota
Optavia Corporation
Orfield Laboratories,
Inc.
Parasole Restaurant
Holdings, Inc.
PBC Group Corp.
Peconic Bay Realty
Phi Sigma Kappa -
Phi Omega Chapter
Individuals through
the Powderhorn
Park Restorative
Justice Project
Presbyterian Church
of The Apostles
Primetime Bowling
League
The Prudential
Foundation
Qwest Foundation
Resolution, Inc.
Rider, Bennett, Egan
& Arundel, LLP
Rolle, Schmidt &
Associates
Ryan Companies US,
Inc.
Ryan Electric, Inc.
Sara Lee Foundation
Security Envelope
Company
Share America!
Sierra Corporation
Sintaus
Sola Optical USA
Source One
South St. Paul Steel
Supply Co., Inc.

Southcoast Plumbing
Co.
Southern Lights
St. John's University
Special Events
Committee
St. Stephen's
Episcopal Church
Sunrise Electric, Inc.
Synet Service
Corporation
Taulelle Concessions
Temple Israel
Susan Teeter &
Associates
Tol-O-Matic
Tom Schmidt's
Urban Retreat
Totally Tan, Inc.
D. S. Trudeau
Construction
Company
U of M Technical
Employees Local
3937
United Nonprofit
Operations, Inc.
Donor Designations
through the United
Way of St. Cloud
Area
Individuals through
the United Way of
the Midlands
Unity Christ
Church
University Baptist
Church
University of
Minnesota
Volunteerism
Project
Wells Fargo
Investigations
West Group
West Photo
White Bear High
School South
Campus
Allianz Employees in
honor of Ann
Yaggie
Y'all Come Back
Saloon

Mission Statement

The Minnesota AIDS Project envisions a world free of AIDS. Our mission is to lead Minnesota's fight to stop HIV and enhance the well-being of those affected.



Guiding Principles

- 1- We believe optimal outcomes depend on client responsibility and initiative.
- 2- We are committed to all people affected by HIV and demonstrate fairness and respect for individual rights in all that we do.
- 3- We believe in the strength of diversity and respect the rights of all individuals to embrace and celebrate their culture.
- 4- We depend upon the professionalism and dedication of staff and volunteers to achieve MAP's mission.
- 5- We engage a broad range of individuals and organizations in planning, implementing and evaluating our services.
- 6- We are fiscally responsible and use our financial resources effectively.
- 7- We actively seek ways to continuously improve MAP's services.
- 8- We collaborate with others to maximize the effectiveness of limited community resources.
- 9- We value learning all we can about HIV and transferring this knowledge to affected communities.



Minnesota AIDS Project™

