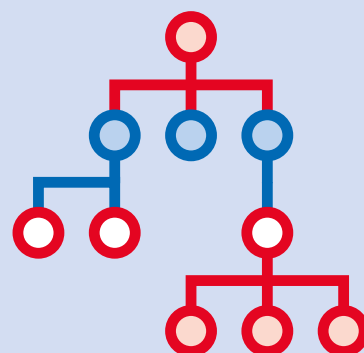
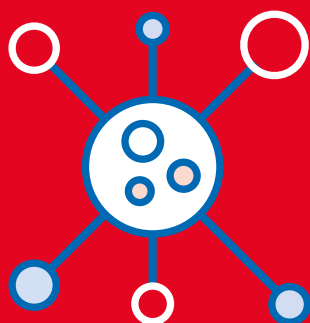
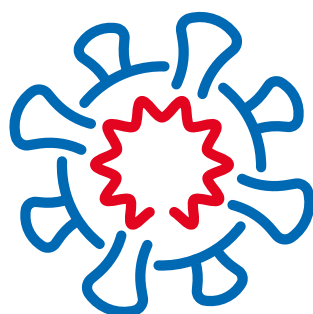
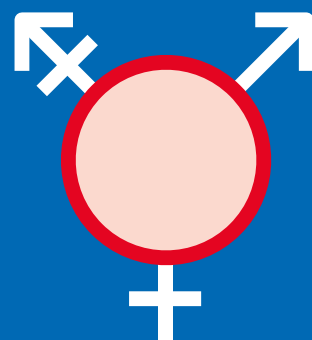
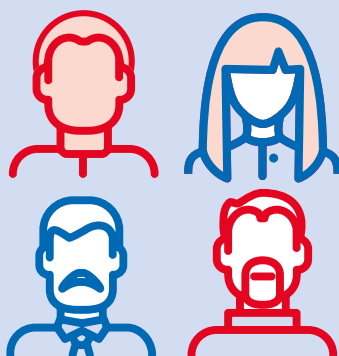


ANNUAL REPORT 2020



Introduction

2020 was the year of COVID-19. A year dominated by a new pandemic, on top of the existing HIV pandemic we have yet to get under control worldwide. A year that has made us all even more aware of the importance of good health. A year of remarkable solidarity and innovation. But also, a year where the global inequality that spurs on epidemics only grew larger. As an organisation, we have done everything we can this year to adapt to the new situation, both in the Netherlands and internationally, to continue our work, to share knowledge of HIV and STI response, and above all, to be there for the communities we are committed to.

To reduce COVID-19 in the Netherlands called for drastic measures in 2020. These measures also affect the HIV and STI response. Many colleagues in HIV and STI care are also involved in tackling COVID-19. STI and PrEP care was even scaled down for a while. With campaigns such as NUFFNIET and NUFFTESTEN, our organisation responded to the need for new education about the risks of sexual behaviour in times of COVID-19. Meanwhile, our national activities have gained good results. The movement 'Netherlands towards zero new HIV infections' really taken off this year. There are active projects in nearly all regions, from Limburg4Zero to Gelderland Towards Zero. Amsterdam is the first Dutch city to adopt policy that strives for zero new HIV infections in 2026. We cannot allow COVID-19 to disrupt us on our course to this goal. We are committed to look for opportunities in the developments regarding COVID-19. An opportunity, for example, to speed up e-health, to widen knowledge of contact tracing and gain more political focus on infectious disease control.

Internationally, this has become a double crisis year for people living with HIV. The COVID-19 pandemic over the past year has seriously hindered the supply and availability of lifesaving HIV medication in many countries, while it is of vital importance that people living with HIV take their medication daily. Prevention and test programmes have been hit even harder, because all over the world COVID-19 testing is given precedence over HIV testing. Partners of Aidsfonds in over 25 countries reported that 75% of ongoing HIV testing programmes and 58% of HIV treatment programmes have been severely disrupted. Our organisation instantly initiated a special COVID-19 Emergency Fund to provide additional crisis support to people living with HIV worldwide. With the help of our donors we managed, for example, to provide aid workers with means of transport to deliver HIV medication.

It is precisely in the current crisis that lessons learnt from the STI and HIV response prove useful. We have learnt how an effective approach can only be established while guaranteeing human rights; that such an approach will only work if you understand the internal dynamics of the epidemic; by talking to, testing, and treating the right people, at the right place, at the right time.

“It is also inspiring and encouraging to see the resilience of our partners and activists with whom we work together, both in the Netherlands and internationally.”

It is also inspiring and encouraging to see the resilience of our partners and activists with whom we work together, both in the Netherlands and internationally. Again and again, they prove how inventive and strong they are. They provide reliable and accessible information on maintaining good health. They venture out on their bicycles to deliver medication to people who can no longer visit the clinic due to COVID-19 measures. They make sure there is enough food because they know

nutrition is crucial when taking HIV medication. These are precisely the people we continue to invest in, so that together we can beat not one but two epidemics.

Mark Vermeulen
Director

Eric van der Burg
Chairperson of the Supervisory
Board

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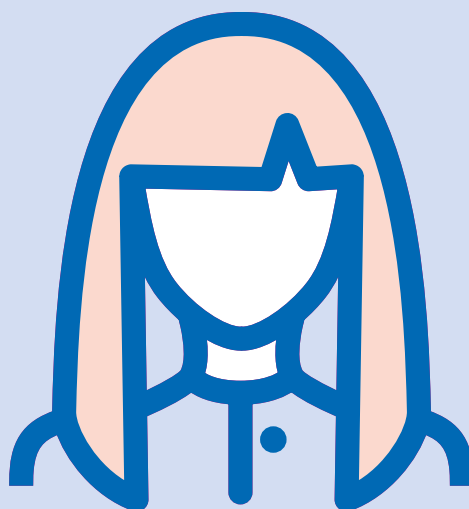
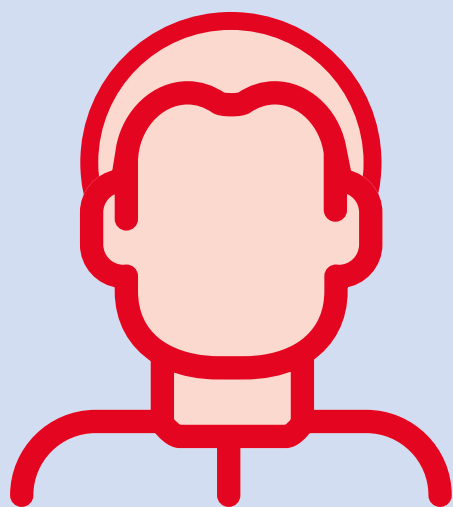
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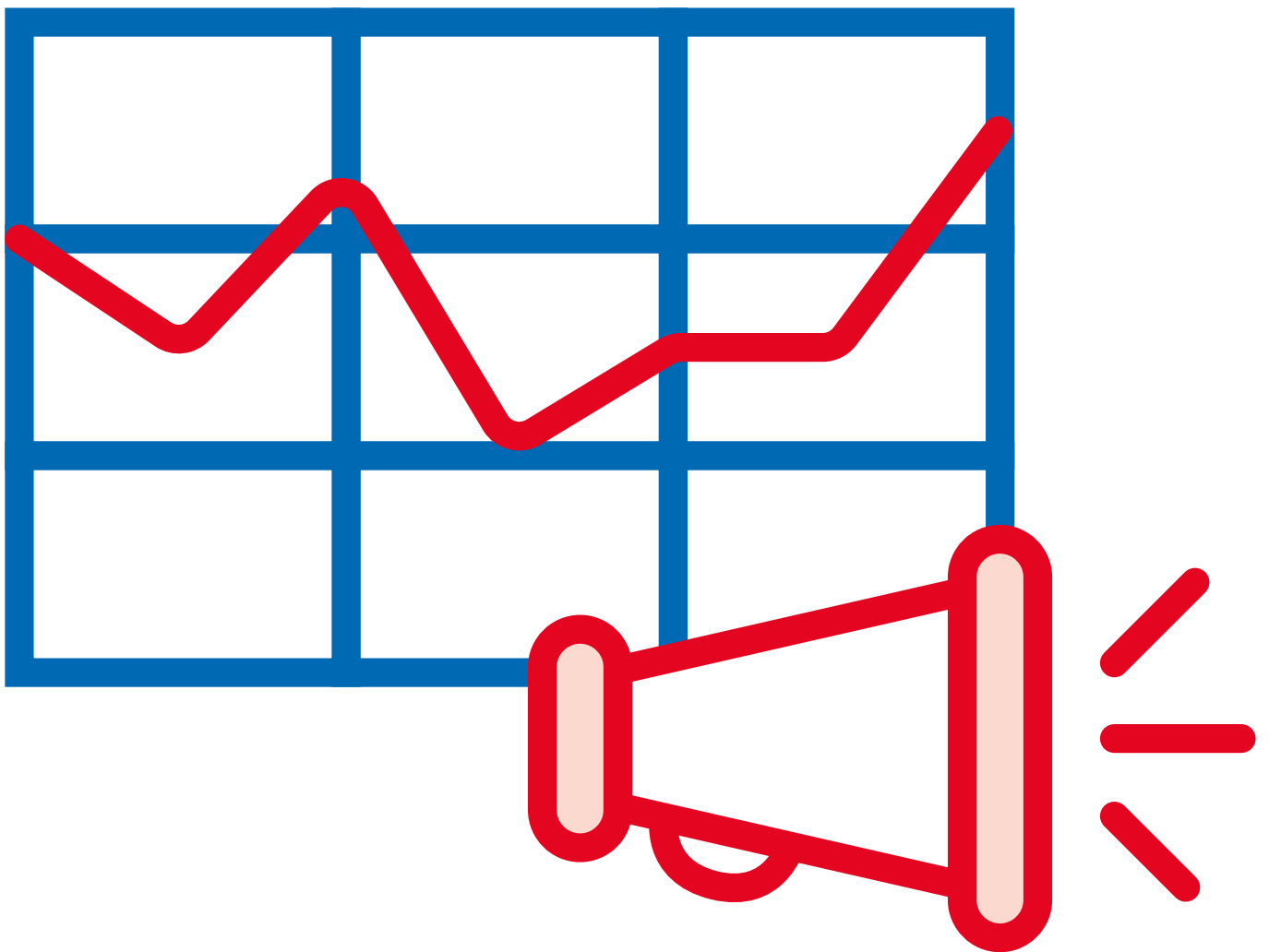
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A. MANAGEMENT REPORT





1. Progress of goals and a selection of results

Aidsfonds – Soa Aids Nederland works towards a world without AIDS and sexually transmitted infections (STIs) by 2030. In the Netherlands, our work is devoted to drastically reducing STIs and to come to zero new HIV infections. In all our work, we are aware we must now accelerate, focus and boost our efforts. In order to achieve this, we put together our long-range strategic plan for the period 2018-2021, titled ‘No time to lose: focus, accelerate and boost our efforts’. In 2020, we have reached the halfway point of the implementation of this plan and an interim evaluation (midterm review) has been carried out.

1.1. Midterm review: progress of our ambitious goals

During this midterm strategy review, we use red, orange and green to indicate the progress of the current organisational goals:

Our strategy includes five ambitious goals that we ultimately want to achieve:

1. Drastic reduction in the prevalence of the six most frequently occurring STIs, and zero new HIV infections in the Netherlands.
2. Worldwide fewer than 200,000 new HIV infections.
3. Worldwide treatment for all people living with HIV.
4. A cure for HIV.
5. Awareness, support in society and full funding of the AIDS and STI response.

GREEN means that we are successful. We have either strengthened these activities, due to our experience and expertise, or we reallocated resources, for example, because we have (nearly) achieved the goal.

ORANGE means things have, more or less, remained unchanged. The question was whether we could change this to green with some additional efforts, or whether the indicated orange is explainable and, given the changing world, is actually a success.

RED means that we are lagging behind in achieving the goal. The question was what it requires to change this status and whether we are doing the right things.

Each end goal is divided into underlying organisational goals. These organisational goals have been formulated as indicators to provide insight into our organisation's contribution to the end goals. At the beginning of 2020, we are halfway through the term of our strategy: an apt moment for stock-taking and fine-tuning to better visualise our contribution and impact, and to adjust our course accordingly.

In the annual report we use these colours to indicate the progress for each of our organisational goals. We refer to the latest available data from the related source. In most cases this source is fed by 2019 surveillance data (e.g., RIVM (National Institute for Public Health and the Environment) or UNAIDS) or 2020 data from our projects. Based on the colour

indication, appropriate follow-up actions to prioritise our work are formulated and incorporated in our work plan.

In our work we focus on countries where we can make the biggest impact with our activities. These countries include the Netherlands, but also Ethiopia, Indonesia, Kenya, Malawi, Mozambique, Nigeria, Uganda, Ukraine, Russia, Tanzania, Zambia, Zimbabwe and South Africa.

In 2020, we spent € 47.8 million on our objectives. Of this amount, € 31.8 million was disbursed to community organisations and networks. Through open calls for applications, we allocated € 1.1 million to innovative projects and scientific research.

1.1.1. Organisation roles

To end AIDS and reduce STIs in the Netherlands, Aidsfonds - Soa Aids Nederland covers three roles to make the biggest impact: involved funder, expert and kick-starter.

Involved funder

In our role as involved funder we raise funds and use these funds to support (research) projects and projects of partners. We believe that we can be most effective if we reinforce our financial contributions by non-financial support, such as convening, project management support, and advocacy. Our involvement depends on the context partners work in, their needs, and the purpose of the grant. We promote community ownership and leadership, and we foster transparency, equality and mutual respect in our relationships with all our partners and wherever we work.

Expert

In our role as expert we share our expertise on STIs and HIV/AIDS with both professionals and the public. They can consult us as experts on specific subject matters and skills. As a public knowledge organisation, we combine knowledge gathering with information services to make sure that the knowledge is made to use in practice. We play a role in all phases of knowledge dissemination: question articulation, knowledge production, exchange of knowledge and

education. We also share our expertise to contribute to the capacity development of other organisations.

Kick-starter

In our role as kick-starter we co-create solutions based on gaps that others have not been able or willing to address. As kick-starter, we experiment and speed up new methods and unusual partnerships to end AIDS and radically reduce the big six STIs in the Netherlands. Once methods are tested and proven successful, we support others (including international funders and governments) to take over the proof of concept and bring solutions to scale.

1.2. Midterm review: gender

During the midterm review of our strategy, we concluded that gender as a crucial cross-cutting theme is not explicitly enough included in our way of working. We have therefore created an organisation gender team, coordinated by a gender adviser in 2020. Gender inequality often leads to discrimination and violence and is one of the main causes of the spread of HIV. Gender inequality prevents access for all people to treatment or to the resources and knowledge required to prevent an HIV infection. For that reason, we consider the influence of gender and power relations in all our projects. Use of a gender lens in our work and further implementation of our 2020-2021 plan for gender mainstreaming are crucial elements. In 2020, we have actively contributed to the 16 days of activism against gender-based violence.

[Continue reading](#)

NATIONAL – END GOAL 1: Drastic reduction in the big six STIs and zero new HIV infections

CONTEXT OF OUR WORK IN 2020

STIs

In 2019, nearly as many people were tested for sexually transmitted infections (STIs) at a Centre for Sexual Health (CSG) as in 2018. The percentage of the people tested and diagnosed with an STI, has risen slightly. The number of STI diagnoses is increasing, while in

our strategy we are focusing on drastic reduction. At medical practices, the number of STI consultations saw an increase across all age groups. The prevention strategy for STIs, such as chlamydia, syphilis and gonorrhoea, needs revision.

HIV

The total number of new HIV diagnoses in 2019 is 580 (2018: 664). The Netherlands is on course to halve the number of new HIV diagnoses between 2015 (890) and 2022. It is estimated that the number of new HIV infections has dropped by 72% between 2010 (960) and 2019 (270). This gives the Netherlands an excellent position to reach zero new HIV infections. The figures also show that in the Netherlands we are still not detecting and treating HIV infections sufficiently fast, which calls for an extra impetus with a focus on those who stay behind.

Sex education

The sexual knowledge of young people has declined. Young people judge the information they have received at school as average and too limited in terms of content. The implementation of the recognised 'Long Live Love' programme, developed by Soa Aids Nederland and Rutgers, in secondary schools is 47%. More young people need to receive high-quality sex education. STIs and HIV are not considered a priority in national politics, nor in national and regional prevention policies. There is a lack of awareness regarding relevance and urgency among politicians, certain professionals and the general public. This is partly due to our own success, which has played a role in reducing the scale of the HIV problem. On the other hand at the same time, opportunities exist to form alliances and coalitions. As a member of the Vereniging Samenwerkende Gezondheidsfondsen (Association of Collaborating Health Foundations), we participate in the long-term Healthy Generation 2040 programme.

We are aware that tackling HIV is a huge challenge in certain communities. These groups are not 'difficult to reach', but the services are not offered where they are or do not meet their needs. Meeting the broader needs of those groups, including HIV and STI related components, represents an international standard of integrated services. This concept still needs

further development in the Netherlands. Tailor-made solutions are also essential: the list of options for HIV and STI prevention (not just condoms) is not yet obvious. This means that opportunities for prevention are being overlooked, which calls for the development of integrated services for vulnerable groups and the renewal of prevention messages.

Due to COVID-19, the ending of the ASG scheme for STI testing at GGDs (Municipal Health Services) has been postponed. This allows more time to prepare for alternatives.

Progress of organisational goals

- **Zero new infections in the Netherlands** (2019: 580; 2018: 664)
- **50% fewer syphilis infections** (2019: 1430; 2018: 1224)
- **50% fewer gonorrhoea infections** (2019: 8186; 2018: 7269)
- **Zero new acute hepatitis B and C infections** (hepatitis B – 2019: 108; 2018: 104 and hepatitis C - 2019: 43 and 2018: 62)
- **50% decrease in the number of women who become infertile due to chlamydia** (2019: 21.134 chlamydia diagnoses; 2018: 21.021 chlamydia diagnoses) *No indicator available to measure the number of women who become infertile due to chlamydia*
- **HPV vaccination for all at-risk groups** Gender-neutral HPV vaccination is policy (Source: RIVM, 2019)

The aforementioned goals are largely in accordance with the goals of the national Actieplan Soa, Hiv, seksuele gezondheid 2017-2022 (Action Plan STI, HIV, Sexual Health 2017-2022) of the RIVM (Dutch National Institute for Public Health and the Environment). It has now become clear that the internationally established indicators for the generalised syphilis and gonorrhoea epidemic are not much use for the situation in the Netherlands.

A selection of results in 2020

Zero new HIV infections

We are convinced that the Netherlands can be the first country to have zero new HIV infections. Consequently, Aidsfonds – Soa Aids Nederland has

initiated the movement 'The Netherlands towards zero' to achieve this goal as soon as possible. The movement was launched at the National Conference STI*HIV*Sex in November 2019. In September 2020, we organised a follow-up with a regional meeting with over 100 participants from all ASG regions: professionals in prevention and care, scientists, policy makers and community members. By initiating a self-managing movement of regional partnerships, with the support of funding and knowledge, we accelerated the achievement of this goal in 2020.

[Continue reading](#)

The movement was spurred on in 2020 through NUFFTESTEN, a campaign with free online HIV tests:

[Continue reading](#)

The lobby for broader access to PrEP - the HIV prevention pill - was successful, as the Dutch Ministry of Health (Ministerie van Volksgezondheid, Welzijn en Sport) announced additional funding for a national pilot programme, increasing the number of participants from 6,500 to 8,500.

E-health support

'Improved online support for young people with sexual problems' is the goal of the new e-health pilot Sense Online Coach, an e-health intervention developed and released in 2020 by a consortium of Therapieland BV, Soa Aids Nederland, Rutgers and GGDs (Municipal Health Services). [Continue reading](#)

Renewal of STI strategies

A chlamydia plan has been developed to involve professionals and communities in the transition towards a new chlamydia strategy. New scientific insights suggest a shift towards less testing on chlamydia if there are no symptoms. An expert meeting on syphilis showed many possibilities to improve practical syphilis control in collaboration with professionals and communities. [Continue reading](#)

Digital complaints portal for sex workers

Funded by the Dutch Ministry of Justice and Security (Ministerie van Justitie en Veiligheid), Soa Aids Nederland will adapt www.prostitutie.nl and develop a 'complaints portal', where complaints from

sex workers in the Netherlands will be collected and recorded. Sex workers who want to express a complaint are guided and referred to specific complaints channels at regional and national level in order to improve policies and attitudes of institutions.

Continue reading: [Continue reading](#)

STI home test kits

Due to COVID-19, most GGDs, STI clinics and GPs have fewer or no STI consultation hours. Soa Aids Nederland updated all relevant advice in case people consider taking an STI home test. Furthermore, we have started improving and extending Testlab, online test services for men who have sex with men (MSM).

Continue reading: [Continue reading](#)

COVID-19 risk and sexual behaviour

We developed harm reduction advice on the sexual risks of COVID-19 and STIs and broadcasted this through our online educational channels for the general public, young people, MSM and sex workers. These online resources were intensively consulted. We advised the government to incorporate harm reduction behavioural advice on the sexual risks of COVID-19. The government changed their approach from abstinence to advising a sex buddy (which was picked up by the international news media), but at the end of the year decided to follow our lead in harm reduction. In order to stay connected to the needs of our communities, we started behavioural research among young people, MSM and sex workers.

Gender

A quick gender scan of the 2020 activities for strategic goal 1 shows that none of the activities are gender-harmful or gender-blind. The majority of the activities are gender-sensitive, some are even gender-transformative. An example of a gender-transformative activity is the education package Lang Leve de Liefde (Long Live Love) that challenges stereotypes in sexual behaviour and relationships. Our experts acknowledge that we must improve our support of transgender persons.

Expenditure

In 2020, Aidsfonds – Soa Aids Nederland contributes €5.3 million to the objective 'Drastic reduction in the big 6 STIs and zero new HIV infections in the

Netherlands', of which € 3.6 million is received from RIVM (the National Institute for Public Health and the Environment) and € 1.7 million from donors and third parties.

Reflection

The most successful example in 2020 of a synergy between all our roles (expert, involved funder and kick-starter) is 'Netherlands towards 0!'. During the well-attended expert meeting on 23 September, we presented one consistent package: our support as an expert (online dossier, personal advice, digital learning), our support as an involved funder (start-up budget for each region, financing a new prevention message and data development) and our support as a kick-starter (call for innovative projects triggered by experience with COVID, bringing all stakeholders together). The elements in this package are mutually reinforcing and stimulated regions to take action.

We organised our activities in specific programmes: MSM, sex workers, young people and professionals. We realised that to maximize impact, we need to focus on the people most vulnerable to STIs and HIV. This often means the emphasis is on specific high at-risk groups that overlap in our existing programmes: young MSM, male sex workers and people with a migrant background. We therefore reorganised our work across two teams with a broader scope.

Finally, the COVID-19 epidemic has hampered activities and access to information and care, while online learning, self-testing, online consultations and services expanded enormously. If we can ensure this growth persists, it can be of great value in achieving our goals.

INTERNATIONAL END GOAL 2: Worldwide fewer than 200,000 new HIV infections, and END GOAL 3: Worldwide all people living with HIV on treatment

CONTEXT OF OUR WORK IN 2020

COVID-19

The year 2020 was dominated by the COVID-19 pandemic. In many of the countries where Aidsfonds

operates, our partners were directly confronted with the effects of the pandemic and the resulting measures. Access to clinics, care and medication was restricted due to lockdowns; the supply of medication came to a halt because of the international transport situation; and in some countries COVID-19 rules were used to further limit the leeway of civil society organisations. In May 2020, [UNAIDS and WHO](#) warned of the possible consequences of the COVID-19 crisis for the HIV response: a prolonged standstill of the supply of ARV due to lockdowns could lead to more than 500,000 AIDS deaths in Africa. In our current projects and programmes, activities had to be adjusted or postponed and most of the work was done online.

HIV/AIDS indicators

The HIV/AIDS sector has developed and continues to innovate a range of prevention and treatment modalities, like differentiated care, community testing and support. The [2020 Global AIDS Update van UNAIDS](#) confirms that 62% of new adult HIV infections globally are among key populations and their sexual partners, and adolescent girls and young women account for 1 in 4 infections in Sub-Saharan Africa. Prevention of mother to child transmission was a game changer, reducing mother to child transmission dramatically. However, over the last 3 years prevention of mother to child transmission is stagnating. Worldwide 1.7 million children live with HIV, 46% are not on treatment. Without treatment, 50% of children born with HIV die before the age of two.

Social determinants of health call for concerted attention. Disproportionately larger numbers of new infections are due to social marginalisation and targeted and disproportionate use of punitive laws and practices towards representatives of key populations. Young key populations face additional vulnerability, such as power imbalance in relationships, lower levels of knowledge on how to protect themselves against HIV, and less ability to mitigate risks. Access of adolescent girls and young women (aged 11-24) to prevention and care is compromised due to gender inequality and poverty, resulting in violence, food insecurity and inadequate access to sexual and reproductive health and rights.

Children and youth living with HIV are not adhering to treatment due to stigma, lack of food, mental health support and access to child- and youth-friendly services.

Funding

2020 [research](#) performed by Aidsfonds shows that while globally 62% of new adult HIV infections are among key populations and their sexual partners, only 2% of all HIV funding is invested in key populations. This illustrates that health systems must allocate HIV and AIDS resources efficiently across interventions and populations and proportionately to disease burden. Data is insufficiently available, but investment in paediatric HIV care is far behind. [In 2019](#), only 53% (950,000) of the 1.8 million children living with HIV (aged 0-14 years) globally were diagnosed and on treatment, compared to 68% of adults. Child-friendly antiviral drugs are hardly available in some countries. 40% of children receiving treatment are on adult formulations. There is too little investment in scaling the use of Point of Care Early Childhood Diagnosis (POC EID) machines, although they have been proven to improve rapid identification of [infants living with HIV](#) and ensure infants start antiviral drugs sooner and at a younger age, which prevents unnecessary deaths among children living with HIV.

A look ahead

In this context, in 2021, both UNAIDS and the Global Fund to Fight AIDS, TB and Malaria (Global Fund) will present their strategies for the period until 2030. These strategies steer the global efforts of governments and donors to achieve the existing goal – ending AIDS by 2030. In 2020, Aidsfonds actively pursued these organisations with the message that their strategies should contribute to inclusive, equal, people-centred, resilient and lasting care systems for a stronger response to both new and ongoing HIV, AIDS, TB and COVID-19 epidemics as future pandemics.

Progress of organisational goals

Based on the midterm review, the organisational indicators are as follows from 2020 onwards:

- 2.000.000 young women at high risk of HIV know their status and have access to resources and knowledge to prevent HIV infection; this will allow

us to reach 3,000,000 young people in total.

- Thanks to the work of Aidsfonds in 2020, 942,000 (total 2018-2020: 1,183,000) adolescent girls and young women know their HIV status and have access to knowledge and resources to prevent HIV infection. In total, our prevention programmes have reached 5,257,000 (total 2018-2020: 8,186,000) young people, including boys and young men. This includes 2.7 million young people reached through campaigns and social media. In addition, 1.6 million condoms have been made available.
- 2,000,000 people from key populations are aware of their status and will have access to resources and knowledge to prevent HIV infection.
- Thanks to the work of Aidsfonds in 2020, 130,000 (total 2018-2020: 866,000) people from key populations know their HIV status and have access to knowledge and resources to prevent HIV infection
- 40.000 have access to treatment
- Thanks to the work of Aidsfonds in 2020, 301,000 children and pregnant women have access to testing, of which 294,000 have been tested and now know their HIV status. In addition, 5,900 children and mothers have access to treatment.
- 50,000 young women have access to treatment, giving a total of 100,000 young people access to treatment.
- Thanks to the work of Aidsfonds in 2020, 28,000 (total 2018-2020: 73.000) adolescent girls and young women have access to treatment. In total 43,000 (total 2018-2020: 151,000) young people, including boys and young men, have access to treatment.
- 100,000 people from key populations will have access to treatment
- Thanks to the work of Aidsfonds in 2020, 17,000 (total 2018-2020: 92,000) people from key populations have access to treatment.
- Treatment costs remain affordable in the focus countries
- In 2017, following a call for proposals on intellectual property for 2018-2021, six projects were funded. The results are expected in the first quarter of 2021. As part of these projects, partners in 12 countries in Africa, Asia and Eastern Europe actively advocate to

minimise legal barriers and find flexibilities in existing policies, to ultimately increase access to medicines. Under the Make Medicines Affordable campaign, initiated and led by the International Treatment Preparedness Coalition (ITPC), partners are exchanging best practices and lessons learned in advocacy on intellectual property.

A selection of results in 2020

Regarding our international work, 2020 was a transitional stage. We completed a number of major programmes. Together with our partners, we focused on the sustainable implementation and handover of our work. We will kick off 2021 with Love Alliance, a new long-term strategic partnership with the Dutch Ministry for Foreign Trade and Development Cooperation.

COVID-19 Emergency Fund

The lockdowns and curfews have had disastrous consequences for the more than 37 million people who live with HIV, but especially for key populations – men who have sex with men, transgender people, sex workers and people who use drugs, and also for young people, in particular, young women and children. Aidsfonds' partners shared the challenges they faced about the isolation of communities and lack of access to testing, treatment and services. Our immediate response was to be as adaptable as possible in our current partnerships. We set up the Aidsfonds COVID-19 Emergency Fund to support existing grantees and partners with flexible, rapid and short-term funding for activities that mitigate the impact of COVID-19 on people living with or vulnerable to HIV. We have taken steps to make the grant making process as flexible and responsive as possible, including transferring 100% of funds at once (rather than in parts), using simple contracts and templates, increasing online accessibility and with only a seven-day turnaround time. We have supported 63 projects in a total of 33 countries and spent € 563,000. A total of 49 projects have been completed so far. With these projects, our partners have reached 17,760,000 people with COVID-19 and HIV information and prevention services. A total number of 27,000 personal protective equipment (PPE) was provided to health care staff. [Source](#)

Bridging the Gaps: towards human rights and access – partnership of Aidsfonds, AIDS Foundation East-West (AFEW), COC, Global Network of People Living with HIV (GNP+), Mainline, International Network of People who use Drugs (INPUD), International Treatment Preparedness Coalition (ITPC), MPact Global Action for Gay Men's Health and Rights (MPact), Global Network of Sex Work Projects (NSWP), regional and local partners

After nearly ten years, our unique Bridging the Gaps alliance came to a close in 2020. More than 120 organisations and networks in over 18 countries have worked relentlessly towards a world where sex workers, people who use drugs, LGBT+ people and people living with HIV can enjoy their human rights and access quality HIV prevention, treatment, care and support. The Bridging the Gaps alliance has responded to the priorities and needs of these groups most affected by HIV, and its community-led approach has been instrumental in achieving successful health and rights outcomes. It has funded innovation and grassroots work that is often overlooked by the United Nations and US funded HIV and AIDS programmes. As a result of its effective and inclusive approach, the programme made a significant contribution towards improved sexual and reproductive health and rights, fulfilment of human rights and strengthened capacity of key populations' organisations and networks in the countries where it was active. Read more on the Bridging the Gaps alliance's key results, learnings and legacy: [Continue reading](#)

PITCH: towards community advocacy – partnership of Aidsfonds, Frontline AIDS, regional and local partners

PITCH was the first large-scale HIV programme to invest solely in community advocacy. The five-year, nine-country programme was successful in contributing to strengthening and connecting significant community-led advocacy outcomes, which included furthering HIV advocacy for key populations and adolescent girls and young women, increased access to HIV services and realisation of sexual and reproductive health and rights for all and strengthening of civil societies as HIV advocates in all nine PITCH countries. Having demonstrated a commitment to responding

constructively to the advocacy carried out by PITCH partners, through a tangible change in behaviour, many of the stakeholders engaged by PITCH partners will continue to behave in a similar manner in the future, after PITCH. Important legislative changes (or the blocking of negative laws) will continue to make a difference beyond PITCH's lifetime in Mozambique, Vietnam and Nigeria. Multiple policy and strategy decisions that were achieved in other countries are shaping the behaviour and actions of governmental actors at local and national levels, and the future of the HIV movement. [Continue reading](#)

Get Up Speak Out: towards empowerment – partnership of Aidsfonds, Rutgers, Choice for Youth and Sexuality, Dance4Life, International Planned Parenthood Federation (IPPF), Simavi, regional and local partners

Get Up Speak Out is a programme for the empowerment of young people, especially girls and young women, to realise their sexual and reproductive health and rights and create positive mindsets towards young people's sexuality in the communities where they live. Aidsfonds worked specifically to ensure that the rights and needs of young people living with HIV are fully integrated in sex education, health services and sexual and reproductive health policies. Over the past five years, we have provided age appropriate sexual and reproductive health and rights and HIV education and information for 110,000 girls and young women out of school, through peer educators and community health entrepreneurs. We reached even more young people through digital interventions and with health commodities and prevention services, like condoms, HIV (self-)testing and PrEP. Our advocacy contributed to better stocked youth-friendly services, stronger representation of young women's needs for sexual and reproductive health and rights in the Kenya AIDS Strategic Framework, and meaningful youth participation in District AIDS Committees in Uganda. Initiated by Aidsfonds, Trainers Lab offers an online international marketplace for local NGOs to easily find and hire local professional trainers in the field of sexual and reproductive health and rights, to improve interventions or to strengthen organisational capacity. It is an example of a successful contribution to a power shift from northern to southern

leadership. Meaningful youth participation is a key strategy to make sure the voice of young people is heard. [Continue reading](#)

Stepped Care Model

'Having the right information and service in the right place, at the right time, delivered by the right digital solution or person to meet the specific needs of young people'. That is what Stepped Care is about. In 2020, Stepped Care – an innovative and holistic sexual and reproductive health self-care model created by Soa Aids Nederland and Aidsfonds, with over 10 years of success in the Netherlands – has expanded to South Africa and Kenya. The model connects young people to the services that directly meet their needs, depending on the complexity and level of possible self-care: comprehensive sex education websites, chat bots, chatting with and calling counsellors and face-to-face appointments. In the Netherlands, the brand is called Sense and provides youth-friendly online and offline information and education, advice and primary and secondary sexual and reproductive and HIV/AIDS care for all young people in the Netherlands aged 12-25. The Stepped Care Model not only empowers young people to practice self-care, but also facilitates integration, decreases fragmentation of (digital) health solutions and increases multi-stakeholder collaboration. In South-Africa, the Stepped Care Model is built around youth-brand B-wise. B-wise was launched on the 25th of August 2020 by the South-African Deputy Minister of Health. In Kenya, the Stepped Care Model is being built around youth-brand One2One. One2One will be launched in February 2021. [Continue reading](#)

Paediatric HIV Breakthrough Partnership: community responses to find and support children living with HIV

Mid 2020, the Paediatric HIV Breakthrough Partnership has kicked off in Mozambique, Nigeria and Uganda. Aidsfonds is excited to be a partner in this ambitious collaboration formed by ViiV Healthcare Positive Action. Aidsfonds sub-funded five of our local civil society partners and works with them to close the identified paediatric HIV gaps in the country, keyed to and complementing the work of other Breakthrough partners and government. Through this community response, we focus on

finding children living with or exposed to HIV, and their mothers, test and link them to care, and support the children and mothers so they remain on treatment and in care. Our work in the partnership builds on the existing activities of Aidsfonds and partners in these countries. The first months of the partnership focused on identifying gaps and implementation sites, aligning work plans across the partnership based on the [UNICEF Paediatric HIV Service Delivery Framework](#) and inception of the community work with training for community health care workers and stakeholder meetings in the relevant areas. Aidsfonds also participates in the global steering committee for the partnership and the implementation of the science project group and provides the partnership country coordinator for Uganda. [Continue reading](#)

Hands Off!: towards violence reduction against sex workers

Building on the success of the first phase of the Hands Off programme, [Hands Off 2](#) (2019-2025) works directly with sex worker-led groups, police and NGOs in Botswana, Mozambique, South-Africa, Zambia and Zimbabwe who are working for better human rights and health services to reduce violence against sex workers. Based on sex workers' own priorities and needs, activities implemented under the programme include rights literacy training and capacity building of sex worker movements, strengthening emergency response systems and roll out of national, regional and global lobby for law and policy reform. In 2020, the programme was awarded the Lange/van Tongeren Prize, which was announced at the AIDS2020 conference. [Continue reading](#)

Brave Battle Against AIDS - Support for key populations in Russia: towards ending the HIV epidemic in Russia

2020 marked the kick-off of a three-year project in the five regions of Russia most affected by the HIV epidemic. The goal is to bring the HIV epidemic to a halt by targeting the most affected communities and key populations. We support them with relevant information on prevention and facilitate testing and links to treatment. In consultation with the communities and all other relevant stakeholders, the best approaches to working with key populations

in Russia will be determined and steps will be taken to persistently integrate these approaches in local healthcare systems. This project is made possible by the participants of the National Postcode Loterij.

[Continue reading](#)

Highlights of Robert Carr Fund: grantees' 2020 achievements

All Robert Carr Fund's (RCF) civil society networks reinforced their organisations, either by hiring staff, improving financial management or taking other steps to guarantee effective advocacy. Over 85% of grantees increased their advocacy capacity and influence by initiating or engaging in joint advocacy campaigns or cross-sector partnerships, or by exploring other avenues to influence HIV or health policies.

Over 60% of grantees implemented an evidence-informed human rights advocacy campaign, and 28% already saw their advocacy efforts result in a human rights policy or legal change in the first year of the grant cycle. Three-quarters of networks (51) reported progress in advocacy to increase access to and quality of services for inadequately served populations, and one-third of networks reported that programmes had improved following their advocacy. Over 40% of networks undertook efforts to improve the funding environment for the access of inadequately served populations to HIV treatment and human rights. These efforts ranged from national budget monitoring to influencing donor allocation processes and supporting replenishment of The Global Fund to Fight AIDS, Tuberculosis and Malaria.

[Continue reading](#)

Gender

A quick gender scan in 2020 of the activities for strategic goals 2 and 3 shows the scope of our international work could be evaluated as 'gender-sensitive.'

Expenditure

In 2020, Aidsfonds – Soa Aids Nederland contributed € 17.7 million to the end goal 'Worldwide fewer than 200,000 new HIV infections'. In 2020, Aidsfonds – Soa Aids Nederland contributed € 16.2 million to the end goal 'Worldwide all people living with HIV on treatment'.

Reflection

The international work of Aidsfonds in 2020 was largely determined by the COVID-19 pandemic and the related measures. In some countries this meant restricted access to HIV care or medication supply, and some governments used the situation to further limit the scope of civil society organisations. For those urgent situations we were able to offer rapid support through the Emergency Fund. In our current programmes, planned activities had to be adjusted or postponed or they went virtual.

All of this has again shown the pivotal position of strong community structures to provide people living with or who are vulnerable to HIV with good (emergency) care and to defend their right to health. Our partners were flexible and versatile in adapting their programmes and became more active online, for example by developing online advocacy training. We ourselves as a donor, and also our own donors, demonstrated the greatest possible degree of flexibility to be able to accommodate our partners.

In 2020, three major programmes ended. PITCH, Bridging the Gaps and Get Up Speak Out: three strategic partnerships in collaboration with and funded by the Dutch Ministry of Foreign Affairs. The final evaluations of these partnerships provide insight into the results and impact achieved. They affirm the importance of leadership and ownership of the communities most affected by HIV, the importance of interconnectedness and the building of coalitions to achieve change, and the importance of a long-term investment for lasting change towards a fairer world with access to healthcare for all.

END GOAL 4: A cure for HIV

CONTEXT OF OUR WORK IN 2020

2020 was an exceptional year. COVID-19 overtook many aspects of our personal and professional lives. We are proud to see the significance of the HIV/AIDS movement during COVID. Many physicians and scientists working on an HIV cure dedicated their time and knowledge of infectious diseases to fight the COVID pandemic. They stepped up to do COVID

research, to treat COVID patients, to advise their institutions and public health departments, and to communicate about COVID in national media, while others continued their HIV cure research as far as COVID regulations permitted.

COVID showed the importance of virus preparedness and continuity in the dedication to the prevention, treatment and cure of infectious diseases. Aidsfonds has committed to the acceleration of a cure for HIV. In the past two years, we invested heavily in research projects, based on the national NL4Cure research agenda. In 2020, while many HIV cure professionals were fully occupied with running their research during the COVID pandemic, we decided to make the most of 2020 by speeding up an HIV cure by funding infrastructure for promising HIV cohorts. Through this funding, the Dutch medical field will be able to carry out valuable research to speed up a cure and will be prepared for clinical trials to test potential curative medicines.

Finding a cure for HIV has long been a dream but has now become an attainable goal that has gained momentum in recent years. In 2019, it was announced that a second person is 'in remission' and possibly a third person, and in 2020 they revealed their identity.

In recent years, various international initiatives have been launched to accelerate (financing of) finding a cure for HIV, including IAS Towards an HIV Cure, amfAR Countdown To A Cure and CanCureHIV (Canada). This correlates with the NL4Cure initiative that Aidsfonds started. It also means that Aidsfonds is now ready to establish international connections and position itself globally, for the purpose of increasing awareness, support and funding for the search for an HIV cure.

Progress of organisational goals

- Aidsfonds accelerates the finding of a cure for HIV by raising and mobilising € 10 million for groundbreaking scientific research. Up to and including 2020, € 9 million has been realised.

A selection of results in 2020

Finding a cure for HIV is an ideal which has been gaining momentum in recent years. A number of important milestones have already been achieved. The number of scientific projects is growing, as is funding for research into a cure for HIV. There is a significant chance that we will achieve our goal of raising € 10 million. In addition, we will examine how to further expand our role in the world in relation to a cure for HIV. Goal 4 can be subdivided into three goals: mobilising, strengthening the Dutch cure initiatives (by funding and NL4Cure) and international activities.

Mobilising

Our marketing department, including institutional fundraising, continued activities for goal 4 to mobilise funding from potential donors. The HIV Cure campaign that started up in 2019, continued in 2020 with more success. A growing number of supporters decided to make an earmarked and additional donation to the special appeal fund for HIV Cure. An application was made for a matching fund programme of ZonMw/NOW (an independent self-governing organisation for scientific research in collaboration with the Dutch Research Council), but sadly our application was declined. *For results, please see Budget.*

Strengthening the Dutch HIV cure initiative

In 2020, most activities regarding NL4Cure were put on hold. In 2021, we will resume activities, with consideration of the impact of COVID-19. We will pursue our multi-stakeholder approach where people living with HIV (PLHIV), experts, researchers, physicians and other relevant parties are included. We see the need to organise involvement of stakeholders in policy, particularly the involvement of people living with HIV.

To advance the development of an HIV cure, Aidsfonds made € 1.1 million available in 2020 to allow funding of nine Dutch projects. The selected projects fit the national NL4Cure research agenda, that highlights the priorities for an HIV cure. Four of the selected projects focus on core funding for cohort studies that look promising in the acceleration of a cure by performing research and/or gaining insights

in specific groups of people living with HIV. People living with HIV are actively involved in the selection, advice and setup of these projects. Additionally, Aidsfonds selected five projects to kick-start research and/or initiatives to accelerate the finding of a cure. These projects of € 10,000 focus on the testing of medicines to activate HIV in latent ('dormant') cells and on international initiatives to accelerate the finding of a cure. [Source](#)

Internationalisation

In 2020, we performed an analysis of possible international steps for Aidsfonds to accelerate the finding of a cure and we have started to build an international 'cure network' through participation in IAS Cure and by connecting to the HIV Cure Africa Acceleration Partnership (HCAAP). In 2021, we will continue our active participation and strengthen our (and NL4Cure's) position and visibility in the international cure initiatives.

Expenditure

In 2020, Aidsfonds – Soa Aids Nederland contributed € 1.4 million to the objective 'Cure of HIV' of which € 1.2 million was allocated directly to our partners. In 2020, 10 scientific research projects actively contributed to this goal. At the end of 2020, we have mobilised approximately € 9 million for an HIV cure during the strategic period so far. With the budget for 2021, we expect to reach the € 10 million end goal.

Gender

Everyone working in research is strongly aware of the efforts and dedication required to find an accessible, available and effective cure for all people living with HIV. Gender is one of the aspects to be considered. This awareness, although not always successfully applied, is incorporated in scientific research, participation in research, meetings, etc. A quick gender scan in 2020 of the activities for strategic goal 4 shows that it is gender-sensitive.

Reflection

We are proud that even during the COVID-19 pandemic, Aidsfonds was able to select valuable projects to accelerate a cure. In the process of selecting these projects, several stakeholders have been involved, including people living with HIV,

external reviewers and members of our advisory board. The experts and applicants are highly involved in COVID-19 and we are grateful that in these hectic times they have dedicated their time and effort to Aidsfonds, which allows us to fund new initiatives regardless of COVID.

For Aidsfonds, community involvement is key. We are continuously adapting our grant selection for the finding of an HIV cure to increase meaningful involvement of people living with HIV. They play an essential role in the proposals review and in the advice committee. While there is progress in the participation of people living with HIV, there is room for improvement for incorporating the perspectives of all stakeholders involved in the grant selection, and we strive for continuous improvement.

END GOAL 5: Awareness, support in society and full funding of the AIDS and STI response

CONTEXT OF OUR WORK

The COVID-19 pandemic had a major impact on our work this year. In the Netherlands, we saw that fewer people had (unsafe) sex during the lockdown. At the same time, STI centres were less or not available for testing. In addition, we had to postpone or adjust campaigns. We have tried to support the GGDs as much as possible with online information and by directing people to reliable online STI tests. We developed harm reduction advice on the sexual risks for COVID-19 and STIs and spread this through our online educational channels for young people, men having sex with men and sex workers. These online resources were intensively consulted.

We saw internationally that the lockdowns had a major impact on people living with HIV. Lockdowns often prevented the delivery or collection of medicines. Many families had no income and therefore little or no food. Good nutrition is important when taking HIV medicines. Another problem was that many HIV testing centres were converted into COVID-19 testing centres. UNAIDS warned of a possible 500,000 additional AIDS deaths in the coming years and that the response on

HIV/AIDS would be thrown back years. For this reason, we have this year drawn attention in many ways to the consequences of being affected by two epidemics at the same time. This campaign was very well received, resulting in a lot of additional support for the HIV/HIV response.

Progress of organisational goals

- **HIV and AIDS regarded as an urgent problem.** This year we saw an increase from 19 to 27% of people who consider HIV/AIDS to be an important problem (source: survey, December 2020).
- **20% increase in Dutch and EU contributions to the international HIV response.** This leads to a Dutch contribution of € 242 million to the international HIV response. Current contribution: \$ 213 million (source: UNAIDS/Kaiser report, 2019)
- **Increased funding for the national STI response**
The Aids Support Grant (ASG) scheme has been extended. However, this has not yielded an increase in funds for the STI response.
- **Increased local funding for the HIV response in focus countries** COVID-19 related progress decrease
- **€ 57 million available to spend on our organisational goals in 2022** € 47.5 million (source: annual budget, 2021)

A selection of results in 2020

Despite the COVID-19 crisis of last year, we have received the amazing amount of € 51.9 million in 2020 for the HIV response. That is, however, € 2,5 million less than budgeted due to lower income (and expenses) of government programmes. More than € 14.7 million in contributions we owe to our donors, donated inheritances, and the participants of Goede Doelen Loterijen (Dutch charity lotteries). We are extremely thankful for their continuing enthusiasm, trust and financial support! In 2020, we welcomed nearly 13,500 new donors. At the end of 2020, Aidsfonds had 133,000 donors: structural supporters and people who made a (single) donation in the past 27 months.

Public fundraising

The COVID-19 pandemic has proven to be both a threat to and a boost for our marketing efforts in 2020. On the one hand, live events (like Amsterdam Diner) were cancelled, we had to halt our door-to-door fundraising for three months and our

major donor fundraising received a heavy blow. On the other hand, all concrete activities and communications regarding the COVID-19 emergency response fund were appreciated by our donors.

Despite the temporary fundraising stop and the cancellation of physical events, we managed to raise an excess of € 0.8 million from our donors.

Significant fundraising partners are the national lotteries and AmsterdamDiner. In 2020, we received nearly € 3.6 million from the lotteries. Thanks to the participants of the Nationale Postcode Loterij, we will receive € 2.3 million this year. In 2020, the contribution to our project 'Dappere strijd tegen aids' ('To Russia with Love) amounted to € 200,000. The Vriendenloterij granted us € 650,000. Lotto and Krasloterij granted us the amount of € 440,000. AmsterdamDiner was cancelled due to the COVID-19 crisis and instead organised a breakfast arrangement, raising € 120,000 that was allocated to the COVID Emergency Fund.

Institutional fundraising

Aidsfonds has years of expertise in funding projects for and by people living with HIV, MSM, sex workers and people who use drugs. This makes us an attractive party for institutional funders, including governments and private donors.

In 2020 Aidsfonds achieved success in raising funds for a new strategic partnership with the Ministry of Trade and Development Cooperation. For the period 2021-2025, Aidsfonds will be granted a subsidy of € 63 million for the Love Alliance, a partnership with 6 African countries and a global partner. The Love Alliance focuses on improved access to health and human rights for key populations.

An important source of income are the subsidies from the Ministry for Foreign Trade and Development Cooperation for part of our international activities (€ 21.4 million) and from the National Institute for Health and Environment (Rijksinstituut voor Volksgezondheid en Milieu; RIVM) for the work carried out by Soa Aids Nederland in the continuation of the statutory tasks for the Centre for Infectious Disease of the RIVM (€ 3.6 million).

Aidsfonds houses the Robert Carr Fund, which pools various international money flows and consequently provides worldwide funding for community networks of HIV vulnerable groups. For this purpose, we receive funding from the British Foreign, Commonwealth and Development Office (FCDO) (formerly: Department for International Development (DFID)) (€ 2.3 million), the Norwegian Agency for Development Cooperation (NORAD) (€ 1.5 million), the American government (US President's Emergency Plan for AIDS Relief, PEPFAR) through UNAIDS (€ 2.0 million) and a contribution from the Dutch government (€ 2.4 million).

From the Elton John AIDS Foundation we received a contribution for the Emergency Support Fund for projects in Russia and Eastern Europe (€ 100.000). The Amsterdam Institute for Global Health and Development (AIGHD) donated € 500.000 for various Soa Aids Nederland projects.

Urgentie en branding - de nieuwe realiteit van covid-19

Het creëren van een gevoel van urgentie rond onze thema's en onze merken was topprioriteit, omdat dit bepaalt of het publiek, beleidsmakers en financiers ervoor kiezen om ons - op wat voor manier dan ook - te steunen. Zoals vermeld heeft de nieuwe realiteit van een wereld met covid-19 een grote invloed gehad en we weten niet hoe dit zich in de toekomst zal ontwikkelen. Vooralsnog lijkt de covid-19-crisis te leiden tot meer begrip voor de noodzaak om infectieziektes te bestrijden en daarmee ook voor het werk van Aidsfonds en Soa Aids Nederland. Er was door het jaar heen veel aandacht in de media voor de relatie tussen covid-19 en hiv- en soa-bestrijding. Zowel de situatie in Nederland als internationaal. Op Wereld Aids Dag 2020 lanceerden we de campagne 'Stop Aids. Juist Nu.'

[Source](#)

Urgency and branding - the new COVID-19 reality

It was top priority to create a sense of urgency around our themes and our brands, as this determines whether people, policy makers and funders choose to support us in whatever way. As mentioned, the new COVID-19 reality has had a big influence and we do not know how this will develop in the future. For now, the COVID-19 crisis has generated a greater receptivity to the need to combat infectious

disease and to the messages and work of Aidsfonds and Soa Aids Nederland. Throughout the year there was a lot of media attention for the connection between COVID-19 and the HIV and STI response, regarding both the situation in the Netherlands and internationally. On World Aids Day 2020, we launched the campaign 'Stop Aids. Juist Nu.' (Stop AIDS, now!)

[Source](#)

Commitment to strategic dialogue with the Dutch government and the EU

In 2020, Aidsfonds successfully managed to renew funding from the New Ventures Fund. The New Ventures Fund enables us to continue to use our brainpower and manpower to establish the substantive dialogue and discussion with the Dutch government, parliament and the public, as well as with the EU institutions and European Parliament. We do this partly in collaboration with KNCV Tuberculosis Foundation. The aim is to secure attention in the public debate for HIV, AIDS and tuberculosis.

Expenditure

In 2020, Aidsfonds – Soa Aids Nederland contributed € 7.2 million to the goal 'Awareness, support in society and full funding of the AIDS and STI response'

Reflection

Despite all the limitations imposed by COVID-19, we were able to achieve particularly good results in both awareness and fundraising.

In 2020 we were successful in fundraising from governments, trusts and institutions, also securing funds for the coming years, with the high point being the new Love Alliance partnership we entered into with the Dutch Ministry of Trade and Development Cooperation. Furthermore, (additional) funds were raised from EJAF, NVF and Viiv.

The COVID-19 pandemic also seems to reawaken awareness among the Dutch public of the importance of the fight against the AIDS pandemic. Aidsfonds is regarded as a sympathetic and expert organisation. The appreciation figures of our donors increased enormously. It is too early to say whether this is a positive trend break, but it does show that it is possible to re-enthuse people about the HIV/HIV response.

1.3. Interaction with our stakeholders

Aidsfonds – Soa Aids Nederland is the focal point in the stakeholders' network in the HIV and STI response. The stakeholders enable us to do our work and achieve our goals. On the one hand we are being funded by donors, sponsors, lotteries, governments and others who feel closely involved in our work, and on the other hand our collaboration partners, networks and other receivers of financial contributions ensure that the necessary work is carried out. In addition, we work together with a range of organisations and participate in numerous umbrellas. We interact with our stakeholders in various ways.

We give a great deal of attention to listening to and involving our supporters in the HIV response. We have a donor panel to make sure that donors can structurally participate and have a voice in our activities and communications. We invite donors to our office to contribute ideas to the creation of the HIV Cure Fund. We also conduct several studies to measure, for example, the appreciation of our new donor magazine, the effect of our campaigns and the loyalty of our supporters.

We can be contacted with wishes, questions or complaints through our website, social media, by telephone or e-mail. Furthermore, we have a complaints procedure. We are all for transparency, which we achieve through exemplary projects to create a clear overview of the spending, and by communicating our challenges, actions, results and milestones. Of course, on the website the audience can find all information about the annual work plan and spending.

1.3.1. Code of conduct

We work according to the codes of conduct of Samenwerkende Brancheorganisaties Filantropie (Cooperating Branch Organisations Philanthropy), Genootschap voor Fondsenwerkers (Society for Fundraisers), the Dutch Dialogue Marketing Association (DDMA) and trade organisation Goede Doelen Nederland (Charities Netherlands). We

are a member of the Vereniging Samenwerkende Gezondheidsfondsen (SGF; Association of Collaborating Health Foundations), Partos, and Landelijk Overleg Thema-instituten (LOT-i, National Consultation Theme Institutes). We have the golden Privacy Waarborg label (Privacy Guarantee Label) of the DDMA that guarantees that our marketing complies with all applicable privacy rules. The organisations that carry this guarantee are audited annually for compliance with the legislation and self-regulation.

1.3.2. Privacy and data security

The organisation is constantly working on privacy and data security. The key units of the organisation comply with the European privacy legislation (General Data Protection Regulation) that came into effect on 25 May 2018. The organisational departments working with privacy-sensitive data, such as donor data, e-health and online information, have been examined by an external agency and adjusted if needed. The classification of personal data in day-to-day operations is completed in 2020. The security measures consist of technical security, system design and internal processes, plus user awareness and culture. The organisation has a processing operations register.

1.3.3. Meaningful involvement of people living with HIV

Our organisation endorses the principle of total involvement of people living with HIV in policy making and implementation at all levels, the so called MIPA principle (Meaningful Involvement of People Living with HIV). Our director is openly living with HIV. There is a statutory seat on the Supervisory Board for a person who has the support from organisations and networks of people living with HIV. Staff living with HIV are actively involved in the development of programmes and activities related to living with HIV and controlling HIV and other STIs.

1.3.4. Nationaal Congres Soa * Hiv * Seks (National Conference STD * HIV * Sex)

Each year, Aidsfonds - Soa Aids Nederland organises the Nationaal Congres Soa * Hiv * Seks in close collaboration with its most important partners and professionals. Due to its interactive set-up, the conference offers a platform for knowledge and experience sharing, and also provides an excellent opportunity for the public debate between stakeholders discussing important issues of STI and HIV response and sexual health. In 2020, the conference was held online, while retaining its unique character.

1.3.5. Corporate partnerships

Our organisation attaches importance to the sponsoring of our activities. With extra resources, extra efforts can be made, but this also means that the commercial sector will be more actively involved in the HIV and STI response. Our organisation requires that sponsors cannot exert a substantive influence, and this requirement is stated as a resolute condition in the sponsor contracts. The organisation holds Corporate Partnership Guidelines that apply to all forms of corporate partnerships. The guidelines are published on our website.

1.3.6. Accountability

Each year we give account by means of an annual report in line with the Richtlijn Verslaggeving Fondsenwervende Instellingen, Richtlijn 650 (Dutch Accounting Standard for Fundraising Institutions, Guideline 650) of the Raad voor Jaarverslaggeving (Dutch Council for Annual Reporting). The organisation attaches great value to being accountable to society in a broader historical perspective. The organisation has concluded an agreement with the Nationaal Archief (National Archives) to transfer and store the archives.

1.3.7. CBF Recognition

The foundation is an acknowledged charity, registered at the Central Bureau for Fundraising (CBF). This means that we have been positively assessed by the CBF on the aspects of governance, policy, fundraising, spending and reporting. The continuous improvement of the effectiveness and efficiency of the expenditure and the optimisation of the treatment of volunteers are part of the assessment. Again, the reassessment in 2020 led to a positive evaluation, without any remarks or anomalies.

1.3.8. Complaints, appeal and objection

The foundation has a general complaints procedure. In addition, Aidsfonds has an appeal procedure with regard to the granting of financial contributions, and an objection procedure for individual assistance. Complaints, appeals and objections that lead to a structural adjustment of the working method will be evaluated in the following year.

Complaints procedure

The complaints procedure is a powerful tool in the organisation's quality system. We have deliberately chosen for an easily accessible complaints procedure so stakeholders can express any complaints effortlessly - by phone, email, letter or through the internet. This does lead to a higher number of complaints, but often of a less serious nature. In principle, the complaint is solved where it originated. In 2020, the number of complaints was 223 (in 2019: 470).

With the exception of four complaints, all other complaints of 2020 were connected to fundraising activities, and through regular consultation the experiences are used to improve our fundraising. Complaints are considered in any follow-up actions, based on the donor's wishes. The number of fundraising complaints was 165 in 2020 (470 in 2019).

Appeal

Aidsfonds has an appeals procedure regarding board decisions about financial contributions, and

an independent Appeals Committee. The Appeals Committee deals with appeals, and any appeals that are dropped, will still be submitted for review. No appeals were received in 2020. Prior to the consideration of the appeal, the submitter is given the opportunity to discuss their appeal with the Executive Board.

1.4. Future plans

The year 2021 marks 40 years of AIDS intervention. In June 1981, the first reports appeared in the US of a rare cancer seen in gay men in New York and California. Also in 2021 is the 35-year anniversary of Aidsfonds. These notable moments present an occasion to look back and take lessons from the HIV response. And now that the world has already been in the grip of another pandemic for nearly a year, those lessons are more relevant than ever.

COVID-19, HIV or other STI epidemics can affect anyone, whether you are black or white, rich or poor. But inequality means that some groups are much more affected than others. In many African countries where we operate, poverty, gender inequality and discrimination form the biggest barriers to access to care. Inequality also plays a larger role in the Netherlands than some might expect. People with lower incomes and lower education live an average of seven years shorter and spend an average of eighteen years longer in poorer health. In short, epidemics are propelled by inequality and exclusion. Only by tackling these propelling factors, that increasingly dominate our work, an epidemic can be truly stopped.

At the national level, we are at a turning point. The promise for the use of PrEP, through broader and free availability for risk groups in the GGD trials, gives the movement 'Netherlands towards 0!' a boost. In order to achieve this goal, we will provide the movement a targeted and efficient impetus. Uniform approaches are replaced by tailor-made solutions for specific groups and contexts. We focus more on young MSM instead of all MSM, on male and transgender sex workers instead of all sex workers, and on MSM and transgender refugees instead of all migrants. If it were up to us, the Netherlands will be the first

country in the world with zero new HIV infections. In relation to STIs, we have taken the latest insights about chlamydia to define the building blocks for a new strategy.

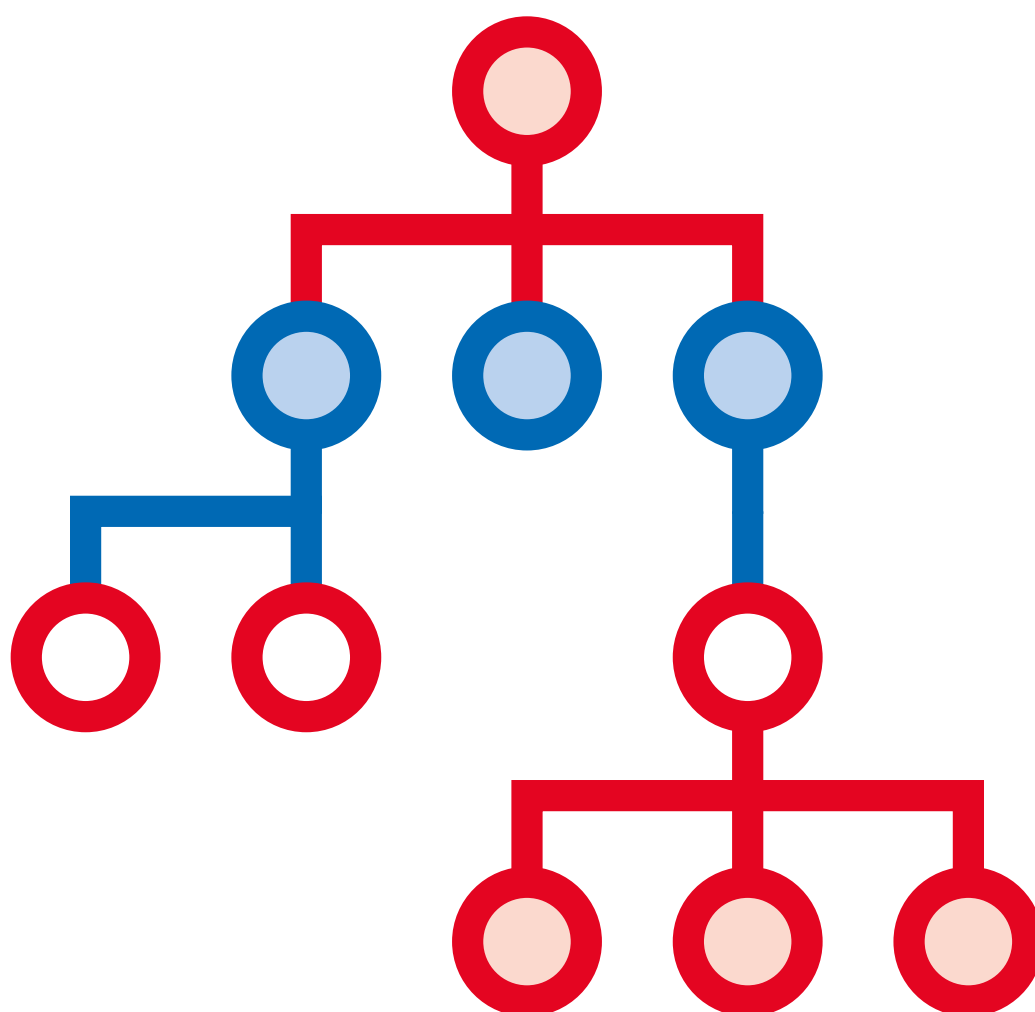
The year 2021 is an important year for the international fight against AIDS. UNAIDS will adopt the new Global AIDS Strategy, and in June a High Level Meeting will be held where all UN member states will lay down their political commitment for the HIV response. Aidsfonds contributes directly to this, especially with the Love Alliance, our new long-term strategic partnership with the Dutch Ministry for Foreign Trade and Development Cooperation. We are also critically watching further developments regarding COVID-19. We see a real risk that once the majority of the population in rich countries is vaccinated, political determination and attention will diminish. 40 years of HIV response has taught us a lot about how the current epidemic situation could develop. When HIV inhibitors became available, fortunately this meant that fairly quickly most people living with HIV in the Western world had access to them. But 40 years into the HIV epidemic, over 12 million people living with HIV in less prosperous countries still have no access to medication.

In addition to these important activities, we have identified a number of cross-cutting topics: gender, durability and impact. We believe it is important to work structurally on these topics in all that we do, because of their indispensable contribution to the implementation of our strategy.

Our internal organisation is constantly evolving to make sure that we always anticipate on what is needed and on what is required of us. At the end of 2020, we have reorganised the departments National and International to start project-based working in 2021. As an organisation we want our employees to take more ownership, so that we can deliver better quality and be more flexible in our response to new opportunities. In 2021, the Marketing & Communication and Management & Services departments will also be restructured to match project-based working.

The 2021 budget is included as Appendix for the 2020 annual accounts. Total expenditure will decrease to € 49.3 million by comparison with € 52.3 million realised in 2020.

The overall impact of the COVID-19 virus outbreak on our long-term goals is uncertain. Developments are closely monitored and mitigating measures are taken for the risks that arise. Short-term benefits are not expected to be materially lower as a result of this outbreak. Continuity is guaranteed. In the long term, it could affect the income of individual donations and available government subsidies.



2. Organisation and management

2.1. Personnel and organisation

Reorganisation

A reorganisation took place in 2020, which is based on multiple pillars and concerns the organisation's strategy and financial situation. Firstly, there is the need to start working in a different way, better attuned to the organisational goals and the wider deployment of staff. Secondly because of the declining income due to expiring programmes such as Bridging the Gaps and PITCH. And finally from the desire to make a larger part of our income directly available for the objectives. These developments have forced us to cut down on direct organisational costs and resulted in a reduction of 20 FTE in 2021 compared to the 2020 budget.

Redundancy scheme

At the beginning of 2020, a continuous redundancy scheme was developed and concluded in collaboration with the Works Council. The redundancy scheme is valid from 1st of April 2020 to 1st of January 2022 and applies to any employees who are reassigned or declared redundant as a result of reorganisations. During the 2020 reorganisation, the severance packages offered through the redundancy scheme have been used.

Leadership

We held four meetings with our managers to explore leadership. This is a further step in the development of a more common leadership style in the form of Servant Leadership. In 2021, the group of managers will continue to develop the knowledge and skills of Servant Leadership for managers and the trajectory will also include our other employees.

Travel safety

With the support of the Centre for Safety and Development a renewed Safety & Security Management Framework has been drawn up and adopted after the approval of the Works Council. During several workshops, the employees who work internationally have been informed about the content.

Because of the COVID pandemic there was little international travel in 2020. The principle stands that all employees who travel internationally must have taken the relevant training course and then keep their knowledge up to date with refresher courses. This has been continued in 2020.

HR department

HR focuses on personnel and contributes to the creation of the ideal organisation to achieve our goals and enjoy our work. In 2020, we developed the strategic HR policy 2021-2024. The core of this policy is the premise that we can only achieve our goals if all colleagues enjoy their work, achieve their targets, use their talents, and have development opportunities. We strive to achieve this by working on our ideal organisation:

Aidsfonds - Soa Aids Nederland is a diverse and inclusive organisation where we work together on the basis of engaging goals and clear roles. This involves a great deal of ownership and flexibility that allows us to change and prioritise our work. We collaborate in various projects, for which we make clear mutual agreements, and we stick to these agreements. We achieve this by communicating in a unifying way and by holding each other accountable. We can expect project leaders

and managers to listen, to be transparent in their considerations, to allow room for making mistakes and to dare take decisions. All this means that we will enjoy our work and deliver quality. Together we contribute to an AIDS-free world and drastic reduction in the number of STIs.

HR has also worked on digitalisation of HR work processes and HR administration. We have taken the first digitalisation steps towards the HR ambition '100% digital'. Employees can digitally submit alterations and requests and have access to their personal digital personnel files. Further digitalisation makes it easier for managers and employees to find and use personnel information.

Employees

In 2020 we employed an average of 161 employees (2019: 167.5). This is the full-time equivalent of on average 133.1 FTE (2019: 134.3 FTE).

Of all employees, 28 % had a full-time employment contract of 36 hours per week (in 2019: 27%) and 72% worked part-time.

On 31 December 2020, our workforce consisted of 64% women (2019: 68 %) and 36% men.

On 31 December 2020, the average years of employment was 8.6 years (2019: 9) and the average age was 46 (2019: 45). In 2020, 4 employees moved on to a different or changed position (2019: 8).

Absentee rate in 2020 was 4.7% (2019: 2.8 %). The management meetings paid attention to prevention and guidance of sickness absence and to an effective and cooperative relationship with the company medical officer.

In 2020, staff turnover was 13% (2019: 11%) of the average number of employees.

Terms of employment

For salaries we follow the national government pay scales. As of 1 July 2020, the salaries of civil servants have been increased by 0.7% and this increase has been applied. Other terms of employment are derived from the CAO Verpleeg-, Verzorgingshuizen, Thuiszorg

en Jeugdgezondheidszorg (CAO VVT; Collective Labour Agreement for Nursing, Nursing Homes, Home Care and Youth Health). In 2019, this collective labour agreement changed (duration 1 July 2019 - 31 August 2021). The changes, if applicable, have been conveyed to our terms of employment and implemented as of 1 January 2020 with the approval of the Works Council.

An education and training budget of 2% of the salary is available. The budget is spent on individual and collective education, training courses and coaching.

Volunteers

Aidsfonds is delighted with all its volunteers who invest their time and effort in our objectives. We have a volunteer policy, which clearly describes the rights and obligations of volunteers. In 2020, around a hundred volunteers in total were available for events, and we had the occasional volunteer working at the office. Last year, the deployment of volunteers was very limited due to the COVID-19 pandemic.

Quality and learning

Our organisation is ISO 9001 Partos certified and meets the international quality standard of the sector specific application of ISO 9001, developed by sector organisation Partos. The ISO standard focuses on current quality themes, such as context analysis, opportunity and risk management, application of relevant laws and regulations, and knowledge management. Since 2017, our organisation has been certified in accordance with the new standard requirements.

Our certifier Lloyds carried out a periodic interim audit in April 2020; the annual internal audit round took place in October 2020. The audit found no irregularities. An ISO 9001 recertification audit took place in November 2020 and our certificate has been successfully extended until the end of 2023. The audit found one *minor nonconformity*.

We continue to actively invest in the learning capacity of our organisation, by constantly stimulating the exchange of knowledge and experiences between employees and external parties. The lessons we learnt from the past are integrated in our daily work to ensure quality improvement and impact enhancement of our work. At the end of each year there are reflection sessions where results and 'brilliant failures'

are shared. We strive to be and remain competent. This enables us to permanently improve and innovate our work, now and in the future.

Integrity policy

Aidsfonds – Soa Aids Nederland has a code of conduct for all management and staff: *‘Integrity policy, codes of conduct and procedures for good employer- and employeeship’*. The policy contains preventative and corrective rules of conduct. To strengthen the understanding of the concepts of integrity and moral judgement among employees, the training programme ‘Moral Judgement’ is available. About 100 employees have now completed the training. Due to COVID-19, the training was not provided in 2020 but will be continued digitally next year.

We also have an external confidential adviser and a whistle blower’s scheme, so employees are free to report any misconduct amongst colleagues. No reports of misconduct were received in 2020.

Confidential adviser

In situations where an employee prefers not to discuss an issue with a colleague, manager or human resources staff member, they can consult the external confidential adviser. Any meetings with the confidential adviser will take place outside of the organisation, on neutral territory. The organisation will receive no account on what has been discussed. In 2020, the confidential adviser was consulted three times (once in 2019).

Diversity policy

In the field of HIV and STI response, we know perfectly well that racism, discrimination and violence make a real difference to access to information, prevention and care. Worldwide, including in the Netherlands, the attention to racism and discrimination has recently flared up. We believe it is important to create opportunity within our organisation to discuss these issues. The aim is to jointly make diversity and inclusiveness part of how we work together in the new organisational structure.

In the Diversity memo of April 2018, we describe our definition and ambition regarding diversity and inclusion. Recent social debate has rekindled the

debate within our own organisation and it raised the question of how inclusive we are as an organisation and what our diversity ambition looks like. On our annual strategy day (June 2020) we made a start with this process. In August, the MT had a meeting, chaired by an external adviser, about practical next steps. This has led to training sessions in the autumn about our own unconscious bias with the aim of developing a shared awareness and shared language to become more diverse and inclusive. Seven colleagues have joined the Diversity and Inclusiveness feedback group.

Based on the content of these workshops, observations, information and participation in external sessions on diversity, a three-part plan has been formulated to frame further goal setting and possible actions on diversity and inclusiveness:

1. Organisation: our own workforce composition, manners and work climate;
2. Collaboration partners: the networks, stakeholders, communities we (want to) work with;
3. Expressions, publications, (education) materials: how we express what we stand for.

For each of these aspects we have articulated a possible target, the challenges and any possible actions to achieve these targets. This will be made concrete and implemented in 2021.

Corporate social responsibility

Our organisation’s social entrepreneurship focuses on the priority areas: minimising environmental impact and energy costs of our premises, transport and organisational processes, choosing partners and suppliers who deal responsibly with people and the environment and ensuring the well-being of our employees.

The current location invites better collaboration and transparency because we now have a large, well-organised office. Due to the COVID outbreak and subsequent lockdown, the office has only been open for minimal and safe occupancy.

Because of the lockdowns, there was hardly any travel in 2020.

2.2. Management and supervision

The by-laws of the foundation clearly distinguish the duties of ‘supervision’, ‘management’ and ‘execution’. The foundation is administrated by the Executive Board. The Supervisory Board supervises the Executive Board and is a critical watchdog of the organisation and its results. The Supervisory Board determines and approves plans. The Supervisory Board is assisted by two internal committees: the audit committee, and the remuneration and nomination committee. Through its contributions, the Works Council ensures employee participation.

The relationship between the Executive Board, the Supervisory Board, the audit committee, and the remuneration and nomination committee is stipulated in the by-laws and in the ‘Reglement Raad van Toezicht – Raad van Bestuur’ (‘Regulations of the Supervisory Board - Executive Board’). These regulations also include the responsibilities and tasks. The Works Council has its own regulations.

The Supervisory Board and the Executive Board endorse the three principles of good governance for charities. These are: the separation of the duties of execution, management and supervision, continuous improvement of effectiveness and efficiency in realising the objective and optimising the relationships with stakeholders.

2.2.1. Supervisory Board

The Supervisory Board fulfils its statutory role as supervisor and is a critical follower of the foundation and its results and has to approve plans and accountabilities. It appoints the external auditor, who reports to both the Supervisory Board and the Executive Board. Once every four years, the Supervisory Board and the Executive Board evaluate the functioning of the external auditor. In its advisory role, the Supervisory Board actively shares ideas with the Executive Board with regard to important, strategic issues the organisation faces.

Profile

The Supervisory Board’s profile is the point of departure for its composition and is comprised of a minimum of five and a maximum of seven members. In view of the foundation’s objective, the following portfolios have been appointed: science, foreign aid, demonstrable support from organisations led by people living with HIV (laid down by statute), international business, finance/Chairperson audit committee, and political or public governance.

Supervision

In 2020 the Supervisory Board met six times: once in a meeting, four times in a Zoom teleconference and once for the ‘start of the year’ meeting (‘jaarstart’).

The Executive Board attends the meetings of the Supervisory Board. Regular topics on the 2020 agenda include the organisational structure, the COVID pandemic and the new partnerships with the Minister for Foreign Trade and Development Cooperation. At the meeting, the audit committee reports on its supervision of the financial matters. The Executive Board informs the Supervisory Board regularly by means of newsletters.

On 8 January 2020, the Supervisory Board met for the ‘jaarstart’ (‘start of the year’). In this meeting the Executive Board presented the main objectives for the new year. The managers, assisted by one or more of their team members, explained the outlines of the work to achieve the strategic objectives for which they are responsible. In this way, the Supervisory Board is better equipped in its advisory role to actively provide input during the year on the key strategic questions the organisation faces.

The annual report with the 2019 annual accounts was approved in the meeting of 20 April 2020. The Board also discussed the audit report with the auditors working for PwC. Much attention has been paid to the impact analysis of the COVID-19 pandemic as a subsequent event. Furthermore, both the plans for the organisational structure and the application progress for the new partnerships with the Ministry for Foreign Trade and Development Cooperation were discussed. Current partnerships will expire in 2021 and new

proposals for 2021-2025 have been submitted at the beginning of 2020.

On 18 June 2020, the Supervisory Board has decided to reappoint Anna Zakowicz for her second term. Both the Works Council and the Executive Board issued a positive advice on her reappointment. The Executive Board discussed its plans with the Supervisory Board regarding the organisational restructure so that it is well equipped for future tasks. The application for the new partnership 'Love Alliance' with the Ministry for Foreign Trade and Development Cooperation was presented by the project leader. Also, the success of the COVID-19 Emergency Fund in support of our partners and the implications for our organisation were discussed.

The extra meeting of 17 July 2020, regarding organisational structure plans, was held at the office, which had reopened for limited hours and capacity at this date. Directly after the meeting, the Supervisory Board attended the annual commemoration of the colleagues who were murdered during the attack on the MH17 in 2014. Plans for reorganisation have been developed because, as of 2021, the new partnerships with the Minister of Foreign Trade and Development Cooperation involve less funding; the departments National and International formed in 2019 need further structuring; we want our partners to take over more responsibility; and a culture change within our organisation is desired. The Supervisory Board has issued a critical but positive opinion on the plans. An important part of the meeting was devoted to inclusion and diversity, one of the priorities for our organisation. In the presence of our external advisor, this was discussed extensively and intensively, both from personal perspectives and from the organisational structure perspective.

In connection with the timely discussion of the 2021 reorganisation plan, the autumn meeting was brought forward to 30 September 2020. The Executive Board explained the reorganisation plan. A proposed decision had been taken and sent to the Works Council for consideration. The reduction of ten or more employment contracts requires the approval of the Supervisory Board. The Supervisory Board approved the intended decision to reduce the number

of employment contracts, subject to assent from the Works Council.

On 9 December 2020, the Board approved the work plan and budget for 2021. In preparation of the long-term strategy 2022-2025, which is to take shape next year, the director spoke with all members of the Executive Board. The results of these discussions formed the basis for the strategy development discussion between the Supervisory Board and the Executive Board. An important step was the discussion of the Supervisory Board with the representatives of two of our alliance partners about the shifting balance of power in international collaboration as the central idea in the new 'Love Alliance' partnership with the Ministry of Foreign Trade and Development Cooperation. Finally, the many online activities on World AIDS Day were discussed.

Interplay between the Supervisory Board and Executive Board

The Supervisory Board is generally positive about the Executive Board. There is trust in and outside the organisation. Within the organisation and in the outside world, the director is the standard bearer of Aidsfonds - Soa Aids Nederland. Following the reorganisation, the director will focus more on collaborations by connecting with other HIV organisations in the Netherlands, and internationally with organisations active in other areas, such as human rights. The meetings are well prepared; the Board Members feel they are well informed, partly thanks to the newsletter.

Audit committee

The audit committee of the Supervisory Board, chaired by the finance portfolio holder of the Supervisory Board, supervises the foundation's financial state of affairs and examines the functioning of the internal control of the administrative organisation, particularly of the payment organisation. Recurrent on the meeting's agenda are the management reports and any reporting on the corruption, fraud and mismanagement policy.

De audit committee consists of Lucas Vos (Chairperson) and Henry de Vries (Member). The Executive Board attends all meetings of the audit committee.

During the meeting of 6 April 2020, and in the presence of the external auditor, the audit committee discussed the 2019 audit report, the 2019 annual accounts, and the 2019 management report. The meeting on 18 June discussed negative interest rates and investments, the basic principles for the budget structure for 2021, the selection process for the appointment of the external auditor and the financial implications of the new partnership 'Love Alliance' for the organisation. An additional meeting of the audit committee was held on 29 September to determine the continuity reserve of the organisation. The main topics of the meeting of 23 November 2020 were the 2021 budget and the financial management report of the third quarter. The benchmark for the continuity reserve was also discussed. The management letter was not yet ready and the discussion of the 2020 interim audit report in the presence of the external auditor was set for 17 December. The chairperson of the audit committee subsequently informed the Supervisory Board about the main points.

Remuneration committee

The remuneration committee handles all personnel matters regarding the Executive Board and

Supervisory Board. The employer's role in respect of the Executive Board is an important element, including the remuneration policy, annual assessment, approval of expense accounts and credit card use. The committee consists of Eric van der Burg (Chairperson) and Yolanda Weldring (Member).

The main tasks of the remuneration committee in 2020 were the annual evaluation of the Executive Board and the reappointment of Anna Zakowicz for her second term.

Composition of the Supervisory Board

The by-laws stipulate that the Supervisory Board draws up a rotation retirement schedule. Members of the Supervisory Board are appointed for a consecutive period of four years, terminating on the next 1 July. Subsequently, a member can be reappointed once, for a period of four years. When a vacancy arises, the Supervisory Board will seek advice from the Works Council and the Executive Board. The Supervisory Board will only appoint and reappoint after the Works Council and the Executive Board have been given the opportunity to issue advice on the candidate.

Composition of the Supervisory Board as of 31 December 2020

Name	Seat	Appointed	Term	End of term
Eric van der Burg	Chairperson of the Supervisory Board Chairperson remuneration committee	05-03-2019	1	01-07-2023
Yolanda Weldring	Foreign aid. Member remuneration committee.	15-10-2013	2	01-07-2022
Lucas Vos	Business Chairperson audit committee	24-04-2019	1	01-07-2023
Henry de Vries	National STI response, scientific research, Member audit committee	01-07-2014	2	01-07-2022
Leonard Bukenya	Communication and marketing	17-09-2019	1	01-07-2024
Anna Zakowicz	Supported by (organisations of) people living with HIV.	21-10-2015	2	01-07-2024

The Supervisory Board strives for inclusiveness and diversity. There is a balanced distribution of Supervisory Board seats between men and women: 67% men and 33% women, which exceeds the minimum target of 30% women. The Board is diverse in cultural background and sexual orientation. One of its members is openly living with HIV.

Development of expertise

Based on our quality policy, we invest in the learning capacity of our organisation. Board members have the possibility to develop their expertise in regulation and supervisory. By doing so, the Board promotes independent, professional and innovative supervision. Supervision that contains these elements has a stimulating effect and contributes to good governance and a sustainable future of the organisation.

Supervisory Board members have access to 'Toolkit Toezicht Goede Doelen' ('*Toolkit Supervision Charities*'), published by the Nationaal Register Commissarissen en Toezichthouders (National Register of Commissioners and Supervisors). The toolkit is developed for supervisors working for fundraising institutions and equity funds and consists of checklists and case examples from the charity sector. Supervisory Board members can also attend supervisory workshops, offered by the Nationaal Register Commissarissen en Toezichthouders (National Register of Commissioners and Supervisors).

Remuneration policy

The members of the Supervisory Board are unpaid but are eligible for a fair remuneration for costs incurred and work achieved. In addition, members can claim non-excessive attendance fees according to CBF-Erkenning (CBF Recognition). No expenses were claimed in the 2020 financial year and no attendance fees were paid.

Main and other positions 2020

Eric van der Burg is VVD senator in the Dutch Upper Chamber. His other positions include Chairperson of Sociaal Werk Nederland (Social Work Netherlands), Chairperson of Commissie Milieueffectrapportage (Environmental Impact Assessment Committee),

Chairperson of Atletiekunie (Athletics Union), Chairperson of the Supervisory Board of Veilig Thuis Rotterdam Rijnmond (Safe at Home Rotterdam Rijnmond), Chairperson of Comité Nationale Sporthedenking (National Sports Remembrance Committee), Chairperson of the Supervisory Board of Floriade Almere 2022 BV, Board Member of the Yvonne van Gennip Talent Fonds and Board Member of the Friendship Sport Centre Amsterdam (as of September 2020).

Leonard Bukenya is partner at Aimforthemoon. He has no other positions.

Lucas Vos is Managing Director at Stolt Tanker Trading BV. He is also a Member of the Supervisory Board of the Jeroen Bosch Ziekenhuis (Jeroen Bosch Hospital).

Henry de Vries is a professor specialised in skin infections at Amsterdam University and heads the outpatient clinic for skin infections at AMC/ Dermatology. He also works at the STI clinic of GGD Amsterdam (Municipal Health Services Amsterdam). His other positions include: Committee Member of Vriendenfonds of AMC Kunstcollectie (Friends of Art Collection AMC); he represents the Netherlands at International Union against Sexually Transmitted Infections (IUSTI) Europe; he is Chairperson of the multidisciplinary national action group Lepra in Nederland, Chairperson of the International Society for STD Research (ISSTD), Chairperson of SKMS multidisciplinary medical specialist committee to develop a national STI guideline for specialist care, Member of Gastmann-Wichersstichting for leprosy control in the Netherlands, Board Member of the Bethesda Stichting, and Board Member of the Stichting Centrum voor Beeldende Kunst (CBK) Zuid-Oost (Centre for Visual Arts department south-east Amsterdam).

Yolanda Weldring is Associate Europe Director at Oxford HR Consultants Limited and also works as a management and career coach.

Anna Maria Zakowicz is Deputy Bureau Chief and Director of Programmes at AIDS Healthcare Foundation, European Bureau. Other positions:

Member of WHO Treatment Reference Group (TRG) in Europe, Board Member at Together Against HIV (Estonia) and Executive Board Member at Linda Clinic, Estonia.

2.2.2. Executive Board

The Executive Board governs the foundation and reports to the Supervisory Board. Its primary tasks are the strategic policy, the overall coordination and external representation. The Executive Board is also responsible for the substantive and financial-administrative quality control and personnel management.

The management team

The management team (MT) consists of the Executive Board and the managers. The management team is responsible for directing the organisation, in terms of both content and processes, and finance. The MT meets every three weeks to discuss these matters. Decisions are recorded in reports and a list of decisions. In 2020, the MT has started with transparent meetings. The MT agenda and related documents are published on the Intranet, and all MT meetings can be attended by an employee in their capacity as observer. Immediately after an MT meeting, the director gives a debriefing to the entire organisation and any decisions are published on the Intranet.

Composition of the MT:

Mark Vermeulen – Executive Board (Director)
Mirjam Krijnen – Manager International
Febe Deug – Manager National
Stefanie van Bruggen – Manager Marketing & Communication
Koos Boering – Manager Organisation & Services

There is a balanced distribution of MT seats between men and women: 40% men and 60% women, which exceeds the minimum target of 30% women.

Composition of the Executive Board

As of 1 December 2018, the Executive Board consists of Mark Vermeulen. He is responsible for the strategic policy and external representation.

Evaluation

Each year, the remuneration and nomination committee evaluates and assesses the current Executive Board according to the system established by the Supervisory Board in 2019. The discussion is based on self-evaluation of the state of affairs and the results of the previous period. The committee also uses an internal and external 360° evaluation method with a brief questionnaire.

Additional positions 2020

Mark Vermeulen is also a Board Member of Stichting Loterijacties Volksgezondheid (Public Health Lottery Campaign Foundation) and a Board Member of Funders Concerned About AIDS (FCAA).

Management remuneration

Advised by the remuneration committee, the Supervisory Board has established the remuneration policy, the level of management remuneration and other remuneration components. The policy is updated periodically. The last evaluation took place in May 2016.

In determining the remuneration policy and the remuneration, we follow the ‘Regeling belonging directeuren van goede doelen ten behoeve van besturen en raden van toezicht’ (‘Scheme for the remuneration of directors of charities for the benefit of management boards and supervisory boards’).

On the basis of workload criteria, the scheme sets a maximum standard for the annual income. Leeuwendaal assessed the position, using the ODRP job evaluation system, leading to a BSD-score of 465 points, with a maximum annual income of € 140.780 (1 FTE/12 months).

Prior to the assessment, the actual management income of Mark Vermeulen was € 104,786 (1 FTE/12 months). The remuneration remained within the existing annual ceiling of € 140,780. The annual income, taxed allowances/additions, employer’s pension contribution, pension compensation and other remunerations for Mark Vermeulen amounted to € 128,909 and remained well within the maximum annual ceiling of € 201,000 established in the scheme.

2.2.3 Works Council

The Works Council represents the interests of employees. The Works Council consists of Haitske van Asten (Chairperson), Dieuwke Bosmans, Sjoerd van Elsen, Bert Herberigs (Secretary), Salim Issa, Naroesha Jagessar and Jan Perdaems.

2020 was a busy and eventful year for the Works Council. The reorganisation involved a lot of work and responsibilities. Following an intensive process, the Works Council gave advice on the reorganisation and restructuring at the beginning of November. The Works Council has worked hard to ensure that the choices and solutions presented by the Executive Board were careful, complete, transparent and fair, whereby the Works Council has strived for the right balance between the interests of the organisation and those of employees and that any consequences for colleagues were cushioned as well as possible. The Works Council has been closely involved in the entire reorganisation process and has worked well and constructively with the Executive Board.

Besides the reorganisation, 2020 obviously stood out because of COVID-19. Many times, the Works Council has drawn attention to the challenging working conditions for employees. The Works Council has expressed its appreciation for how lenient the organisation has been to employees who had a hard time because of the combination of working from home and (child)care duties.

Many other topics were discussed in this COVID-19 dominated year. For example, a new travel safety policy has been composed; actions have been initiated with regard to diversity and inclusion; a new Risk Inventory and Evaluation has been drawn up; and an implementation agenda has been established for the strategic HR policy, a long-cherished wish of the Works Council.



3. Finances, risks and implementation

3.1. Effectiveness and efficiency

The foundation works with consecutive strategic long-range policy plans. These policy plans state for which goal the fundraised funds are meant, the amount of money needed per goal and how the funds are spent.

Each year, a budgeted work plan is drawn up, inclusive of the intended results per objective. The organisation records the cost percentage for target spending and fundraising and for management and administration costs. The realisation is surveyable in quarterly reports and annual reports and will eventually be published in the final annual report.

The organisation's primary goal is to be able to realise the objectives as well as we can and mobilise the necessary resources. Obviously, it is essential to build up a reserve that guarantees the organisation's continuity, in accordance with the Richtlijn Reserves Goede Doelen van Goede Doelen Nederland (Guidelines for Reserves at Charities of Charities Netherlands). The organisation manages its funds in a non-risky manner; no use is made of investments.

The organisation continuously strives for optimal use of its funds, to ensure effective and efficient realisation of the objective. The project management system guarantees systematic monitoring and evaluation. A management information system is in place with quarterly and annual reports. We have been contributing to IATI (International Aid Transparency Initiative) since 2016. This makes information even easier to access, understand and use.

The organisation has a risk analysis, where it has been established that the reserved resources for continuity

(continuity reserve and other reserves) are sufficient. The organisation is permanently alert to risks in order to be able to respond adequately. In addition, risk analyses are carried out for all subsidy relations, and an organisation-wide risk management system has been implemented. For further information on the use of financial instruments, please also refer to the annual accounts.

3.2. Finances

3.2.1. Income

Total income in 2020 amounted to € 51.9 million. This is € 0.9 million less than in 2019, and € 2.5 million less than budgeted. The decrease is mainly caused by lower spending within the programmes due to the COVID pandemic.

Income from private donations increased from € 10.1 million in 2019 to € 10.9 million in 2020, and was € 0.9 million higher than budgeted. In particular income from inheritances increased: from € 1.6 million in 2019 to € 2.3 million in 2020, and was € 1.0 million higher than budgeted. Income, donations and gifts are € 0.1 million higher than in 2019 and € 0.1 million lower than budgeted. In the long-term perspective, income from inheritances and income from donations show a slight upward trend. Income from inheritances is however unpredictable and can vary considerably from year to year.

Income from lotteries is € 0.1 million higher than in 2019 and € 0.2 million lower than budgeted.

Income from other non-profit organisations decreased from € 1.5 million in 2019 to € 1.1 million in 2020. We received donations from Elton John AIDS

Foundation, Bill and Melinda Gates Foundation, GUSO Advance and AmsterdamDiner, among others. .

3.2.2. Target spending

We spent € 47.8 million on our objectives in 2020. This is € 2.1 million less than in 2019, and € 6.0 million less than budgeted. The lower spending is related to the COVID crisis, as a result of which partners spent less.

The strategic partnerships with the Minister of Foreign Trade and Development Cooperation, PITCH, Bridging the Gaps and GUSO ended in 2020, with only some finalisation activities remaining in 2021.

Spending on objective 1 'Drastic decline of HIV and STI in the Netherlands' is € 0.4 million lower than budgeted and fell from € 5.7 million budgeted to € 5.3 million. The underspending is caused by fewer regional activities and less funding for scientific research.

We often view objectives 2 'Worldwide fewer than 200,000 new HIV infections' and 3 'Treatment for all HIV infected people worldwide' in connection with our international programmes, where spending was lower than budgeted: € 18.4 million budgeted and € 17.7 million spent (objective 2) and € 18.4 million budgeted and € 16.2 million spent (objective 3). The main reasons for this are related to shifts within the Robert Carr Fund's programmes between the years, as explained above.

For objective 4 'A cure for HIV', the budget was € 1.6 million, and the expenditure was € 1.4 million.

For objective 5 'Awareness, support in society and full funding of the AIDS and STI response', the budget was € 9.6 million, and the expenditure was € 7.2 million.

3.2.3 Other expenditure

In 2020 we were meticulous with our fundraising spending and managed to save € 0,1 million; we had budgeted € 2.8 million but spent only € 2.7 million. Where we had insufficient confidence in the expected results of certain campaigns, we decided to do

things differently or not do them at all. For the long term, we assume that income will continue to be under pressure and that fundraising methods that generated sufficient money in the past, may not do so in the future.

Costs for management and administration rose slightly compared to the budget and amounted to € 1.7 million. Due to the growth of the number of programmes and the increasing requirements in compliance, project management and financial control, the organisation became stronger on these points. Compared to 2019, the percentage of management and administration costs rose from 2.6% to 3.3%. The percentage is at the lower end of the desired range of 3 to 6%.

3.2.4. Result and reserves

The result was a negative of € 0.4 million, while a negative result of € 3.6 million was budgeted. This is due to the fact that on the proceeds side private fundraising was € 0.9 million higher than budgeted, mainly thanks to higher income from inheritances. In addition, there was lower target spending of € 6.0 million because of the COVID crisis.

Each year we create special-purpose reserves and funds for proceeds with a specific designation, that have not yet, or only partly, been spent. The use of these funds in coming years will lead to a negative result, which will then be covered by these special-purpose reserves and funds. This was also the case in 2020. After all agreed entries, disposals and transfers, a balance of € 0.1 million will be added to the other reserves; € 0.9 million will be withdrawn added to the special-purpose reserves; and € 0.5 million will be added to continuity reserve.

3.2.5. Financial indicators

91.5% of total expenses was spent directly on the objectives. The spending percentage in relation to the total income was 92.1%. The financial indicator of the cost percentage of own fundraising has expired since 2017 due to the new income classification of

fundraising costs. Instead, the fundraising financial indicator is given as a percentage of the total income. In 2020, this was 5.2%, and in 2019 this was 5.4%.

The 2020 management and administration cost percentage was 3.3%, and in 2019 this was 2.6%. The organisation applies 3 to 6 % of the total costs as standard for the costs of management and administration. Compared to our peers, this percentage is relatively low.

The solvency ratio amounts to 36.6% on 31 December 2019 (31 December 2019: 22.0%) and the liquidity ratio on 31 December 2020 was 1.8 (31 December 2019: 1.4). These ratios are sufficient to guarantee continuity in the short and long term.

3.2.6. Future

The 2021 budget is included as Appendix in the 2020 annual accounts. The total income for 2021 is budgeted at € 48.2 million, a decrease of € 3.7 million compared to 2020. Target spending will decrease to € 44.3 million by comparison with € 47.8 million realised in 2020. The decrease is due to the expiring programmes PITCH and Bridging the Gaps, as explained above. In particular the objectives 2 'Worldwide fewer than 200,000 new HIV infections' and 3 'Treatment for all HIV infected people worldwide' will therefore show a decrease in spending compared to 2020.

Furthermore, the Love Alliance partnership with the Ministry of Foreign Trade and Development Cooperation has been launched for the period 2021-2025, which will generate subsidy income commencing in 2021.

We cautiously estimate the better-than-expected income from inheritances of 2020 will also materialise in 2021, which means that the budget will fall compared to the realisation in 2020. Our awareness activities are mainly aimed at putting HIV and AIDS higher on the agenda and to persuade people of the urgency. As long as the public sees AIDS as another chronic illness that is rampant far away from their own lives, fundraising will remain difficult.

We continue our work as fund manager for the Robert Carr Fund (RCF) and will close a three-year grant period in 2021. This year, preparations are in progress to allocate a new three-year grant period for 2022-2025.

The budgeted costs for management and administration are distinctly higher than the realisation in 2020. We have changed our cost allocation system for 2021 and are attributing more general personnel and organisational costs to the various programmes and to management and administration, making our cost structure more transparent and unambiguous.

The COVID-19 outbreak and measures taken by various governments to contain the virus will lead to an increase in macroeconomic uncertainty and it is unknown what the possible long-term implications will be for our activities. The scale and duration of this pandemic remain uncertain and so is the lasting impact on our activities.

3.3. Risk management

No organisation operates without risk, but we do strive to limit the risk of not attaining our objectives as much as we can. Our risk appetite will be better defined in 2020 and a ranking has been indicated, ranging from aversion, limited, cautious, flexible to open. Employees have clear guidelines to handle risks. We have named our risks, identified preventive and corrective measures and (partly) implemented them, both at organisational level and within our projects. This enables us to take strategic risks where necessary to achieve our objectives and within that scope to take as many mitigating measures as possible to reduce risks.

A total of 15 strategic risks have been identified at organisational level, each has its owner, and all will be regularly discussed and accentuated. Arising from these risks, the following main risks have been diagnosed:

- IT environment and security. Risk appetite is limited. To mitigate this risk, a Business Information Plan was adopted in 2020, which provides insight into the risks involved and any measures taken to reduce this risk. Possible implications are temporarily unavailable systems or data.
- Integrity and fraud. Risk appetite is cautious. This is necessary given the nature of the organisation. To mitigate this risk, an integrity and fraud guideline has been adopted. This clarifies which steps must be taken from the moment suspicion arises of an integrity violation or fraud. This guideline has been extensively communicated throughout the organisation, with zero tolerance being the keynote.
- Fundraising – institutional and private. Aidsfonds - Soa Aids Nederland depends on its income from fundraising. Risk appetite is limited. A mitigating measure is that income developments are closely monitored, allowing timely corrective actions. A possible impact is that we will receive less income and may not realise our results.

In addition to these strategic risks, an analysis has been carried out of our operational risks within our organisation. It emerged that our internal control is structured in such a way that we reduce our risks as much as is possible and that therefore we have by and large already taken adequate mitigating measures.

However, some risks will always be a challenge and we have closely examined any possible further improvements. We also see ourselves as a learning organisation and a risk-based approach is not separate from but included in our work.

This year we will start with the newly structured departments where projects and project-based work take central stage. Risk management will form an integral part of this new way of working.

3.3.1. Current COVID implications for our organisation

The COVID-19 outbreak and measures taken by various governments to contain the virus have not yet had any implications for our foundation in 2020. In addition to the already known impact, the macroeconomic uncertainty leads to a disruption of economic activity, and any possible long-term implications for our activities are not yet known. The scale and duration of this pandemic remain uncertain but are expected to have a profound impact on our activities. The main risks arising from the current longer-term uncertain COVID situation:

- Lockdown in areas where our partners work, which means that the agreed activities cannot be carried out.
- Diminishing income from private donors because of worsening economic prospects.

3.3.2. Our income

We are constantly at risk of earning less income than anticipated, or of receiving it later than anticipated. This is closely monitored. We do not transfer money to our partners until we have received it ourselves. We are also constantly exploring new avenues for planning and financing our organisation and projects in different ways.

3.3.3. Our staff

In addition to funds, the employees are our organisation's capital. We aim to make a good

match between tasks and talents, so our employees can blossom. To facilitate this, we have translated this objective into a strategic HR policy plan with an 'employee journey' to optimally support the organisation and its employees from start to finish. We pay a lot of attention to internal communication and keep our employees well informed. Also, we discuss vacancies at MT level and look for the best solution, either internally or externally.

We believe that investing in training and development, with priorities that are in the interest of both the organisation and individual employees, is part of contributing to the best possible match and happiness at work for our employees. In 2021 we will also continue to develop servant leadership, both for managers and employees. In this time of COVID, we are even more aware of being and staying healthy at work, and we pay a lot of attention to this, for example by providing guidance and facilitating a proper home workspace for employees.

3.3.4. Our strategy

With our strategic plan for 2018-2021 'No time to lose: focus, accelerate and boost' we have determined how we want to achieve our objectives. Our 2021 annual plan has been drawn up fully in line with the strategic plan. We are constantly alert to new developments that require reconsideration of our strategy. We also involve scientific and evaluation research to assess whether our strategy has the desired effect.

3.3.5. Our partners

We carefully select the organisations we subsidise. We choose to support groups or group networks that are exposed to HIV and STIs. That is the most effective way of fighting HIV and STIs and guaranteeing sexual and reproductive rights. In many countries, these groups are discriminated and marginalised, which hinders their organisational development. Sometimes these organisations are not yet mature or strong, which makes it risky to work with them.

With our many years of experience in grant awarding and programme support, we have a great deal of knowledge and experience to early detect and tackle mismanagement and fraud. In close collaboration with the relevant partner, we will suggest adjustments where necessary and engage an independent accountant to determine whether it is indeed a matter of serious fraud or mismanagement.

Sometimes the accounts are correct, but the organisation's financial capacity is very weak and the financial system that is being used inadequate. We help these organisations improve their accounts. When we see that organisations are unable to keep proper financial accounts themselves, we seek other solutions in the respective country, for example by appointing a host who will take care of the administration or who will provide guidance in maintaining sound financial records and build their capacity. This allows us to work with risky partners, who are often vital for achieving our objectives.

In case of actual fraud or mismanagement at the organisation that we subsidise, we can reclaim the money and, if appropriate, we will prosecute. We maintain a zero-tolerance policy which means that we will reclaim the full grant.

3.3.6. Integrity violation

The organisation has the 'Integrity Violation Policy' which applies to our external relations. We also have codes of conduct on human trafficking and child exploitation. Employees are trained to effectively use these instruments.

In recent years we have not detected any cases nor received any reports of exploitation, people trafficking, child labour or sexual misconduct. We have received two new whistle-blower reports, both of a financial nature. In addition, there are two other ongoing fraud cases (from 2018 and 2019) at two of our partner organisations, where we are still investigating how to recover the damage. No integrity violations cases were closed in 2020.

3.3.7. Our target groups

We often work with groups who are vulnerable and at risk, including gay men in countries where homosexuality is a crime, or sex workers, which is a criminal offence in many countries. This means we need to protect the identity of our target groups and partners, but we also want to be transparent. That can be a difficult balance. Since 2016, we are publishing all our activities according to the IATA standard on the internet. To protect vulnerable people, we apply guidelines that determine which information may and may not be made public.

3.3.8. Our organisation

We are ISO 9001 2015-Partos (version 2018) certified and operate according to the internally agreed ISO procedures to guarantee the quality of our work and to overcome risks. In 2020 the certificate has been extended for a period of three years.

3.3.9. Laws and regulations

The organisation complies with the General Data Protection Regulation and has processing operations per organisational unit where personal data is used. Given the nature of our work, this sometimes involves sensitive personal data. An external party has carried out analyses and drawn up action plans for the areas that pose the biggest risks. These activities will be continued in 2021. The organisation has data processing agreements, a cookie policy and privacy statements that comply with the General Data Protection Regulation. In 2020, no data breach was reported to the Dutch Data Protection Authority.

Continuity reserve

There is no material uncertainty about the company's ability to continue its operations, even though the long-term effects of COVID-19 are real and uncertain. Management has taken steps to handle COVID-19 events and uncertainties; remote working has been found to be practicable.

Current liquidity of the company is sufficient to meet its obligations and to finance its ongoing activities.

Effective and efficient use of resources is central to our financial policy. Moreover, it is essential to maintain capital to guarantee the organisation's continuity. This concerns both the obligations to personnel and organisation and the need to continue the financial contributions to third parties.

In 2020, the amount of the reserve for the Aidsfonds brand was re-determined on the basis of a risk inventory. The inventory has been discussed with the audit committee and the system for the amount of the continuity reserve has been clearly laid down. The continuity reserve has been brought up to standard on the basis of the risk inventory. This means that in 2020 the continuity reserve has been increased compared to the beginning of 2020 and amounts to a total of € 3,393,000 at the end of 2020. For the Soa Aids Nederland brand, the continuity reserve is determined by the equalisation reserve of a maximum of 10% of the annual costs allowed by funder RIVM (National Institute for Public Health and the Environment). In 2020 there was an entry and exit of € 42,000, and the reserve amounts to € 139,000.

In accordance with the directive 'Financial Management of Charities' of Goede Doelen Nederland (Charities Netherlands), included in the Netherlands Fundraising Regulator (CBF) regulations, the continuity reserve may amount to a maximum of 1.5 times the costs of the work organisation: € 20.3 million. The current continuity reserve is well within this maximum.

The income of Aidsfonds originates from several sources. Aidsfonds has substantial income from various forms of fundraising. In addition, the brands receive funds from Dutch and foreign governments and from private funds, including lotteries. Distribution of income sources limits the risk of simultaneous loss of all income.

Subsequent events

There are no subsequent events.



4. Statutory and other information

Legal form

Stichting Aidsfonds – Soa Aids Nederland has its seat in the municipality of Amsterdam. The foundation works from one shared vision, mission and strategy, and communicates through the brands Aidsfonds and Soa Aids Nederland.

Statutory objectives

The foundation's statutory objectives are:

- Stimulating and increasing the extent and quality of the Dutch contribution to:
- the national and international fight against HIV/AIDS and other STIs, and
- the support and care for people living with HIV/AIDS or other STIs;
- The continuation and further development of the objectives of the foundations from which the foundation originated: Stichting Aids Fonds – Soa Aids Nederland, Stichting STOP AIDS NOW! and Stichting Aidsfonds – Soa Aids Nederland (previously Stichting Aids Fonds – STOP AIDS NOW! – Soa Aids Nederland);
- And everything that is directly or indirectly related to this or may be conducive to any of the aforementioned.

The foundation tries to achieve its objectives by:

- Advocacy: to further develop and encourage the implementation of the national and international AIDS and STI policy;
- Fundraising: to develop and execute fundraising activities to finance concrete activities for the national and international fight against HIV/AIDS and other STIs;
- Fund spending: to provide financial support to activities of organisations active in HIV/AIDS and/or STI related care, prevention and research;
- Information: promoting the involvement of Dutch society with people living with

- HIV/AIDS and other sexual transmitted infections and the related policy, for example through education, advice and gatherings;
- Realisation: to develop and realise programmes aimed at the public, or specific groups from the public, professionals and governments.

Registration at Chamber of Commerce

Aidsfonds – Soa Aids Nederland is registered with the Chamber of Commerce and Industry for Amsterdam under registration number 41207989.

Inheritance Tax Act 1956

The foundation Aidsfonds – Soa Aids Nederland is considered to be an Algemeen Nut Beogende Instelling (ANBI) (Public Benefit Organisation) by the Tax Inspector, as referred to in article 24, paragraph 4 of the Successiewet 1956 (Inheritance Tax Act 1956) (RSIN 008649273).

Affiliated foundations

Aidsfonds – Soa Aids Nederland is the governing legal entity of the René Klijn Stichting, registered with the Chamber of Commerce and Industry for Amsterdam under registration number 41212271 (RSIN: 802226188) and of Stichting NAMENProject, registered with the Chamber of Commerce and Industry for Amsterdam under registration number 41213531. Stichting NAMENProject Nederland is considered to be an Algemeen Nut Beogende Instelling (ANBI) (Public Benefit Organisation) by the Tax Inspector, as referred to in article 24, paragraph 4 of the Successiewet 1956 (Inheritance Tax Act 1956) (RSIN: 814423255).

Contact

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B. ANNUAL ACCOUNTS



Balance sheet as at 31 December 2020 (after appropriation of result)

(in euro's x 1,000)	Notes	31 december 2020	31 december 2019
Assets			
Fixed assets			
Intangible fixed assets	1	298	362
Tangible fixed assets	2	955	924
		1,253	1,286
Current assets			
Accounts receivable	3	6,377	12,558
Cash and cash equivalents	4	22,195	33,425
		28,572	45,983
Total assets		29,825	47,269
Liabilities			
Reserves and funds			
<i>Reserves</i>			
Continuity reserve	5	3,393	2,893
Earmarked reserves	6	3,096	4,023
Currency revaluation reserve		54	-
Other reserve	7	2,277	2,213
		8,820	9,129
<i>Funds</i>			
Earmarked funds	8	1,189	1,286
		10,009	10,416
Provisions	9	227	-
Debts			
Non-current liabilities	10	4,000	5,006
Current liabilities	11	15,589	31,847
		19,589	36,853
Total liabilities		29,825	47,269

Statement of income and expenditure for 2020

(in euro's x 1,000)		Actual 2020	Budget 2020	Actual 2019
Income:				
Income from private individuals	12	10,882	10,020	10,110
Income from companies	13	225	40	17
Income from lottery organisations	14	3,564	3,810	3,453
Subsidies from governments	15	35,936	38,461	36,019
Income from other not-for-profit organisations	16	1,155	1,705	1,490
Total income raised		51,762	54,036	51,089
Income in consideration of the supply of products and/or services	17	173	426	107
Other income	18	-	-	1,618
Total income		51,935	54,462	52,814
Expenditure:				
Spent on objectives				
Objective 1: Drastic reduction of HIV and other STIs in the Netherlands	19	5,258	5,680	6,521
Objective 2: Worldwide fewer than 200,000 new HIV infections	20	17,737	18,436	18,605
Objective 3: Worldwide all people living with HIV on treatment	21	16,201	18,436	14,529
Objective 4: A cure for HIV	22	1,417	1,649	2,089
Objective 5: Awareness, support in society and full funding of the AIDS and STI response	23	7,222	9,593	8,193
		47,835	53,794	49,938
Cost of fundraising	24	2,701	2,839	2,764
Management and administration costs	25	1,725	1,471	1,428
Total expenditure		52,261	58,105	54,129
Balance prior to financial income and expenditure		-326	-3,643	-1,316
Balance of financial income and expenditure	26	-82	15	9
Balance of income and expenditure		-408	-3,628	-1,307
Appropriation of result				
Addition to/withdrawal from:				
- continuity reserve		500	-	-
- earmarked reserves		-927	-3,628	-1,194
- other reserve		63	-	206
- currency revaluation reserve		54	-	-
- earmarked funds		-97	-	-319
		-408	-3,628	-1,307

Cash flow statement for 2020

(in euro's x 1,000)		2020	2019
Cash flow from operational activities			
Balance of income and expenditure		-408	-1,307
Adjustments for:			
- Depreciation and amortisation	1	249	269
- Movements in provisions	9	227	-
- Movements in long-term project commitments	10	-1,316	4,326
Movements in working capital:			
- Movements in receivables, prepayments and accrued income	3	6,182	-4,955
- Movements in other liabilities, accruals and deferred income	11	-16,257	1,320
Total		-11,323	-347
Cash flow from investment activities			
Adjustments for:			
Changes in tangible assets	2	-207	118
Changes in intangible assets	1	-9	-140
Total		-216	-22
Cash flow from financing activities			
		-	-
Movements in cash and cash equivalents		-11,230	-369
Position of cash and cash equivalents as at 1 January	4	33,425	33,794
Position of cash and cash equivalents as at 31 December	4	22,195	33,425
		-11,230	-369

The cash flow statement is determined using the indirect method.

The investment activities relate to the tangible and the intangible fixed assets.

The numbering refers to the notes to the balance sheet as at 31 December 2020.

Explanation of accounting principles

Translation

This is a translated version of the Dutch annual accounts. In case of inconsistencies between the Dutch and the English version the Dutch version prevails.

Registered address

Sichting Aidsfonds - Soa Aids Nederland has its registered office at Condensatorweg 54 in Amsterdam. The Foundation is listed in the commercial register under Chamber of Commerce number 41207989.

Activities

A multi-year strategic plan has been put together for the period 2018-2021: 'No time to lose - focus, accelerate and increase momentum'. Since 2018, we have been working on the following strategic objectives:

1. Drastic reduction in the 'big 5' STIs and zero new HIV infections in the Netherlands
2. Worldwide fewer than 200,000 new HIV infections
3. Worldwide all people living with HIV on treatment
4. A cure for HIV
5. Awareness, support in society and full funding of the AIDS and STI response.

The expenditure on the objectives is divided over these five strategic objectives.

General

The financial statements have been prepared in accordance with Dutch Accounting Standard for Fundraising Institutions. The principles applied for the valuation of assets and liabilities and the determination of the result are based on historic costs (acquisition or manufacturing cost). The balance sheet has been drawn up after appropriation of the result. References are included in the balance sheet, the statement of income and expenditure, and the cash flow statement. These references refer to the explanatory notes.

Comparison with previous year

The accounting principles for valuation and determination of results have remained unchanged compared to the previous year.

Use of estimates

The preparation of the financial statements requires the Executive Board to make judgments - as well as estimates and assumptions - that affect the application of accounting policies and the reported value of assets and liabilities, and income and expenditure. Actual results may differ from these estimates. The estimates and underlying assumptions are continuously assessed. Revisions to estimates are included in the period in which the estimate is revised and in the future periods affected by the revision.

Currency

The financial statements have been drawn up in euros; this is both the functional and the presentation currency of Aidsfonds - Soa Aids Nederland. Transactions in foreign currency during the reporting period have been processed in the financial statements at the exchange rate on the transaction date. The transactions of the Robert Carr Fund in USD are processed at an average annual exchange rate.

Monetary assets and liabilities in foreign currency are converted into the functional currency at the exchange rate on the balance sheet date. The exchange differences resulting from processing and translation are credited or debited to the statement of income and expenditure. There are no non-monetary assets in foreign currency.

Going concern

These financial statements have been prepared on the assumption of going concern.

Principles for the valuation of assets and liabilities

Unless otherwise stated, assets and liabilities are included at acquisition price. Fixed assets are valued at purchase value, minus linear depreciation based on the estimated economic life of the asset.

Impairment of fixed assets

The Foundation assesses at each balance sheet date whether there are indications that a fixed asset may be subject to impairment. If such indications exist, the realisable value of the asset is determined. If it is not possible to determine the realisable value of the individual asset, the realisable value of the cash-generating unit to which the asset belongs is determined.

Impairment exists where the book value of an asset exceeds the realisable value; the realisable value is the higher of the net realisable value and the value in use. Impairment is processed directly as an expense in the statement of income and expenditure, while simultaneously reducing the book value of the relevant asset.

Valuation of inheritances

Inheritance income is recognised in the financial year in which the amount can be reliably determined. Inheritances and bequests are estimates of the expected income.

Financial instruments

Aidsfonds - Soa Aids Nederland does not use complex financial instruments. Financial instruments only include receivables, cash and cash equivalents, creditors and other payables. They are recognised at fair value upon initial inclusion. After initial inclusion, financial instruments are valued in the manner described below. The fair value approximates the book value.

The interest and cash flow risks are extremely limited. The Foundation has no interest-bearing non-current liabilities. The credit risks are extremely limited as well. All cash and cash equivalents are held by 'systemic banks' in the Netherlands.

Receivables are valued at the fair value of the consideration at initial processing.

Cash and cash equivalents consist of cash and bank balances with a term of less than twelve months. Cash and cash equivalents are valued at nominal value.

Policy on continuity reserve and equalisation reserve

Effective and efficient use of the resources is central to the financial policy. In addition, it is necessary to maintain capital in order to guarantee the continuity of the organisation. This relates to both the obligations towards personnel and organisation and the need to continue the financial obligations towards third parties.

In 2020, the size of the Aidsfonds brand was once again determined on the basis of a risk assessment. In 2020, the continuity reserve was increased compared to the position as at the beginning of 2020, at the end of 2020 totalling € 3,393,000. For the Soa Aids Nederland brand, the continuity reserve consists of an equalisation reserve of a maximum of 10 per cent of the annual costs allowed by the subsidy giver, the RIVM. In 2020, there was a withdrawal and addition totalling an amount of € 42,000, bringing the reserve at € 139,000.

The continuity reserve may - in accordance with the 'Guidelines Financial Management of Charities' outlined by 'Goede Doelen Nederland' and included in the CBF regulations - amount to a maximum of 1.5 times the costs of the operating organisation: € 20,300,000. The current continuity reserve falls well within that maximum.

For the Soa Aids Nederland brand, an equalisation reserve of a maximum of 10 per cent of the annual costs is allowed by the subsidy giver, the RIVM. This is included as an earmarked fund.

The income of Aidsfonds comes from multiple sources. Aidsfonds receives substantial income from various forms of fundraising. In addition, the brands receive funds from Dutch and foreign governments and from private funds, including lottery organisations.

Due to this distribution of income sources, the risk that all income is lost at the same time is limited.

Reserves and funds

The limited possibility to use the earmarked reserves has been determined by the Executive Board and do not constitute an obligation; the Executive Board may lift this restriction itself.

Earmarked funds are the resources obtained with a specific purpose designated by third parties.

Provisions

Provisions are created for legally enforceable or constructive obligations that exist at the balance sheet date, where it is likely that an outflow of resources is necessary, and the scope can be reliably estimated. The provisions are valued at the best estimate of the amounts needed to settle the liabilities on the balance sheet date. Provisions are stated at the nominal value of the expenditure expected to be necessary to settle the liabilities, unless stated otherwise.

Debts

Non-current liabilities are stated at fair value at initial processing. Current liabilities are stated at nominal value at initial processing.

Transaction costs that can be directly allocated to the acquisition of the debts are included in the valuation at initial processing. If necessary, debts are valued after initial processing at amortised cost, i.e. the amount received taking into account premium or discount and after deduction of transaction costs. The difference between the determined book value and the final redemption value is recognised as interest expense in the statement of income and expenditure on the basis of the effective interest during the estimated term of the debts.

Principles for determining the result

General

The result is determined as the difference between the realisable value of the performances rendered and the costs and other expenses for the year. The proceeds from transactions are recognised in the year in which they were realised.

Government subsidies are always awarded for a period of several years, and in that sense can be considered structural. The fixed contributions from lottery organisations are also always awarded for a period of several years; the Foundation also occasionally receives additional contributions. Income from private individuals is partly structural, based on long-term debt collection commitments. Other income from private individuals, including income from inheritances, and from not-for-profit companies and organisations are largely non-recurrent in nature.

Subsidies received

Subsidies received are recognised as income in the statement of income and expenditure in the year in which the subsidised costs were incurred.

Subsidies granted

Aidsfonds – Soa Aids Nederland grants subsidies out of funds received from donors (fundraising proceeds) and from lottery organisations.. Subsidies granted are included as costs in the statement of income and expenditure at the time the subsidy obligation is entered into, provided that the Foundation has actually received the funds intended for this purpose from donors, lottery organisations and other financiers.

In practice, this means that subsidy obligations are only entered into if there is sufficient certainty that the necessary funds will be received from donors and lottery organisations.

In its role as fund manager of the Robert Carr Civil Society Network Fund (RCF), Aidsfonds - Soa Aids Nederland makes financial contributions to international networks. On the basis of financial commitments from the funders (donors) of RCF, the Foundation enters into provisional obligations with subsidy recipients, subject to the actual receipt of the financial resources from the funders. The obligations entered into towards the subsidy recipients are, therefore, not recognised as costs until the financial resources have been received from the RCF funders.

Financial transfers from government-funded international programmes

Aidsfonds - Soa Aids Nederland carries out a number of multi-year international programmes that are fully or largely financed by governments, including the strategic partnerships with the Ministry of Foreign Affairs. To that end, multi-year agreements regarding objectives and financing have been made between Aidsfonds - Soa Aids Nederland and the relevant governments.

For purposes of implementation of these programmes, the Foundation concludes multi-year contracts with cooperation partners, including agreements regarding financial transfers from Aidsfonds - Soa Aids Nederland to these partners. These financial transfers are included as costs in the statement of income and expenditure at such time as actual advance funding by Aidsfonds - Soa Aids Nederland to the partner organisations takes place and advance funding has been arranged by the relevant government to Aidsfonds - Soa Aids Nederland.

Cost allocation

Costs are allocated to the objective, fundraising, and management and administration costs based on the following standards:

- costs that can be directly allocated are allocated directly;
- the indirect costs of our own organisation are allocated by means of the timesheet linked to an integral hourly rate.

Indirect costs of our own organisation

Indirect costs of our own organisation include personnel costs, housing costs, office and general costs, including depreciation and amortisation. The allocation of indirect costs of our own organisation among the programmes and projects takes place on the basis of the actual hours recorded on the relevant programmes and projects.

Employee benefits

Employee benefits (wages, social security contributions, etc.) are not stated in a separate line in the statement of income and expenditure. These costs are included in other parts of the statement of income and expenditure. For a further specification, please refer to the Notes to cost allocation in the financial statements. Wages, salaries and social security contributions are processed in the statement of income and expenditure pursuant to the terms of employment to the extent payable to employees or the tax authorities.

The pension scheme of Aidsfonds - Soa Aids Nederland is administered by Pensioenfonds Zorg en Welzijn. The contributions are recognised as personnel costs as soon as they are due. Prepaid contributions are included as prepayments if this leads to a refund or a reduction in future payments. Contributions not yet paid are included in the balance sheet as a liability. There are no liabilities other than the contribution payments.

Management and administration costs

Management and administration costs are the costs incurred by the organisation for purposes of (internal) management and administration, which are not allocated to the objective of fundraising. Goede Doelen Nederland has drawn up recommendations for the allocation of these costs. Aidsfonds - Soa Aids Nederland follows these recommendations and has included the following components in the management and administration item:

- Management: indirect costs of the directors and managers, to the extent not implemented directly for purposes of the objective, in accordance with the timesheets.
- Operational management: indirect costs of the Services team (facilities management, events organisation), to the extent not implemented directly for purposes of the objective, in accordance with the timesheets.
- Finances/controlling: in accordance with the timesheets.

The organisation strives to limit the cost of management and administration to between 3% and 6% of the total costs.

The indirect costs of the Human Resources, Automation, Documentation and Quality & Learning departments are allocated to fundraising, in proportion to the staffing of each department.

Rental and/or lease contracts

There may be rental and/or lease contracts under which a large part of the advantages and disadvantages associated with ownership do not lie with the organisation. These contracts are recognised as rental or operational leasing. Rental and lease payments are processed on a linear basis, taking into account reimbursements received from the lessor, in the statement of income and expenditure over the term of the contract.

Financial income and expenditure

Interest income and expenditure

Interest income and expenditure are processed on an accrual basis, taking into account the effective interest rate of the relevant assets and liabilities.

Exchange differences

Exchange differences occurring in the settlement or translation of monetary items are processed in the statement of income and expenditure in the period that they arise. Funds are also held and administered in US dollars for the Robert Carr Fund. The assets and liabilities are valued in euros at the rate on the balance sheet date; the income and expenditure are valued at the average rate for the year. The unrealised exchange result is included in the statutory reserve for translation differences.

Costs of fundraising and costs of raising awareness

For Aidsfonds - Soa Aids Nederland, social knowledge about the AIDS issues and the realisation of social involvement are important conditions for achieving the objective. For this reason, fundraising activities pay attention to these aspects.

When formulating the 2018-2021 strategy and drawing up the 2020 budget, the Awareness objective became part of the new strategic objective of 'Awareness, support and full funding for the AIDS and STI response'. The approach to our fundraising has changed as well. When drawing up the strategy, the allocation percentage was, therefore, re-evaluated by the Executive Board, and 31% of the costs incurred in private fundraising are classified as costs under the objective. This percentage has remained unchanged in the 2020 budget and the 2020 financial statements.

Notes to the cash flow statement

The cash flow statement has been prepared using the indirect method. The funds in the cash flow statement consist of the cash and cash equivalents. Cash flows in foreign currency have been translated at an estimated average exchange rate. Interest income and expenditure are included under the cash flow from operating activities.

Notes to the balance sheet as at 31 December 2020

(in euro's x 1,000)

1 Intangible fixed assets

Movements in the intangible fixed assets are as follows:

	Value 1 jan.	Investment	Amortisation	Disinvestment	Value 31 dec.
Software					
2020	362	9	-73	-	298
2019	347	140	-125	-	362

2 Tangible fixed assets

Movements in the tangible fixed assets are as follows:

	Value 1 jan.	Investment	Amortisation	Disinvestment	Value 31 dec.
Furniture	809	187	-134	-	862
Fittings	-	5	-1	-	4
Hardware	116	14	-41	-	89
2020	925	206	-176	-	955
2019	1,187	969	-145	-1,086	925

Depreciation periods:

Buildings	Furniture and fittings	Software	Hardware
50 years	7 years	5 years	3 years

The tangible and intangible fixed assets relate only to assets intended for business operations. In 2019, Aidsfonds - Soa Aids Nederland relocated to a leased property on Condensatorweg. The renovation and furnishing of the new leased property have been capitalised as an investment. The foundation assesses at each balance sheet date whether there are indications that a fixed asset may be subject to impairment. If such indications exist, the realisable value of the asset is determined. The foundation has established that there are no impairments as at balance sheet date.

3 Accounts receivable

	31-12-2020	31-12-2019
Lottery	2,585	2,510
Inheritances and bequests	2,016	1,931
Project subsidies receivable	1,419	1,227
Interest receivable	-	1
Accounts receivable	13	121
Prepaid expenses	343	6,655
Pension contributions	-	98
Other	1	15
	6,377	12,558

The receivables have a term of less than one year. The item of prepaid expenses at the end of 2019 was higher than at the end of 2020 as a result of the fact that, in December 2019, a number of subsidies for the first six months of 2020 had been transferred for purposes of Pitch and Bridging the Gaps. These prepayments did not exist in that scope at the end of 2020. Inheritances and bequests are estimates of the expected income.

4 Cash and cash equivalents

	31-12-2020	31-12-2019
ING accounts (incl. US dollar account Robert Carr Fund)	18,065	11,708
ING savings accounts	750	1,324
ABN AMRO account	372	384
ABNAMRO savings accounts	3,000	20,000
Cash	8	9
	22,195	33,325

The management of financial resources is risk-averse. Minimising risk means that when saving and/or investing, the principal amount must be kept to a minimum and the risks must be spread. The financial resources are not invested in equities, corporate bonds, government bonds or real estate. Only bank accounts, savings accounts and deposits are used. For reasons of risk-spreading, the funds are placed with at least two banks. When choosing a bank, we weigh up the returns, risks and responsible banking. In 2020, for the first time, a negative interest on cash and cash equivalents balances was seen, both at ING and at ABN AMRO.

The balance of the Robert Carr Fund in US dollars has been translated to euro at the exchange rate as at balance sheet date.

All cash and cash equivalents are at the organisation's free disposal.

Reserves (5, 6 en 7)

	Balance as at 1 januari	Additions	Withdrawals	Balance as at 31 dec.
Continuity reserve	2,893	500	-	3,393
Earmarked reserves	4,023	1,990	-2,917	3,096
Other reserves	2,213	63	-	2,276
2020	9,129	2,553	-2,917	8,765
2019	10,117	3,455	-4,443	9,129

5 Continuity reserve

	Balance as at 1 januari	Additions	Withdrawals	Balance as at 31 dec.
2020	2,893	500	-	3,393
2019	2,893	-	-	2,893

Effective and efficient use of the resources is central to the financial policy. In addition, it is necessary to maintain capital in order to guarantee the continuity of the organisation. This relates to both the obligations towards personnel and organisation and the need to continue the financial obligations towards third parties.

Based on the developments in 2021, the size of the reserve will once again be determined for the Aidsfonds brand on the basis of a risk assessment. In 2020, € 500,000 was added to the continuity reserve in accordance with the budget, so that the continuity reserve at the end of 2020 totalled an amount of € 3,393,000. For the Soa Aids Nederland brand, an equalisation reserve of a maximum of 10 per cent of the annual costs is allowed by the subsidy giver, the RIVM. This is included as an earmarked fund, see also item 8 of these notes.

The continuity reserve may - in accordance with the 'Guidelines Financial Management of Charities' outlined by 'Goede Doelen Nederland' and included in the CBF regulations - amount to a maximum of 1.5 times the costs of the operating organisation (indirect costs + purchases and acquisitions for fundraising): € 20,300,000 times 1.5. The current continuity reserve falls well within that maximum.

6 Earmarked reserves

	Balance as at 1 januari	Additions / released	Withdrawals	Balance as at 31 dec.
Provision of financial contributions and subsidies	3,720	1,153	-2,458	2,415
Big Data project ZOOM	16	-	-16	-
Awarded projects STOP AIDS NOW! within the framework of the Investment Fund	287	838	-443	682
2020	4,023	1,990	-2,917	3,096
2019	5,217	2,256	-3,450	4,023

The above earmarked reserves are not subject to any obligation. The limited spending capacity has been designated by the executive board.

Provision of financial contributions and subsidies

The executive board has created this earmarked reserve for various spending purposes for a total amount of € 2,400,000. Of that amount, € 2,100,000 is earmarked for the five spending purposes, € 200,000 for a multi-year marketing strategy, and € 100,000 for ICT and training.

STOP AIDS NOW! Investment Fund and awarded projects

When the Aidsfonds and the STOP AIDS NOW! brands were merged into Aidsfonds, the STOP AIDS NOW! Investment Fund was converted into earmarked reserves for projects aimed at youths and young women in developing countries. A total of € 1,700,000 was allocated to the following projects: TAFU (Uganda - now TAFU2), FTT4000 (Zimbabwe - formerly TAFZ), and HE Kenya (formerly Victoria Lake project). The Linking & Learning project (a project linking all children's projects in the various countries) was added in 2019. In 2020, for Uganda and Zimbabwe, amounts of € 300,000 and € 500,000, respectively, were added to the reserves. As of 31 December 2020, the total available balance remaining for these projects is € 700,000.

7 Other reserve

	Balance as at 1 januari	Additions	Withdrawals	Balance as at 31 dec.
2020	2,213	63	-	2,276
2019	2,007	206	-	2,213

The addition to the other reserve is the balance of freely disposable resources not yet earmarked.

8 Earmarked funds

	Balance as at 1 januari	Additions	Withdrawals	Balance as at 31 dec.
VWS/RIVM equalisation reserve	139	-	-	139
HIV alert phase in Eastern Europe and Central Asia	6	-	-	6
Bill & Melinda Gates Foundation Strengthen and sustain Dutch engagement ODA for Health	70	-	-70	-
Robert Carr Fund	1,042	-	-54	988
Project to be shaped in consultation	4	10	-	14
Youths with HIV South Holland region	-	42	-	42
A Cure for HIV (HIV Genezing Fonds)/Next Generation	25	-	-25	-
2020	1,286	52	-149	1,189
2019	1,606	229	-548	1,286

The limited spending capacity of the funds has been designated by third parties.

VWS/RIVM equalisation reserve

The equalisation reserve relates to funds from the institutional subsidy for the programmes of Soa Aids Nederland not yet spent. This is intended to compensate for the differences between actual costs incurred and subsidy amounts. The equalisation reserve is a buffer that can be used to make good deficits in one year out of surpluses in another year.

HIV alert phase in Eastern Europe and Central Asia

The National Postcode Lottery has allocated € 1,000,000 to the HIV Alert Phase project in Eastern Europe and Central Asia. After spending € 146,000 in 2019, € 6,000 remains in this fund.

Bill & Melinda Gates Foundation Project

The Bill and Melinda Gates Foundation made € 167,000 available in 2019 for the Strengthen and sustain Dutch engagement ODA for Health project, of which € 160,000 was spent in 2019. This is a multi-year project that started in 2018 and was completed in 2020.

Robert Carr Fund

This earmarked fund was created to transfer the balance of the 2016-2018 phase to the next phase, 2019-2020. Expenditure will take place in the 2019-2020 phase.

Project to be shaped in consultation

This earmarked fund consists of earmarked gifts for projects in Curacao, the expenditure of which is yet to be determined in consultation with the donors.

9 Provisions

		31-12-2020	31-12-2019
Reorganisation provision		227	-
Balance as at 1 January 2020	-		
Additions	227		
	<u>227</u>		
Withdrawal	-		
Released	-		
Balance as at 31 December 2020	<u>227</u>		

As at 31 December 2020, a reorganisation provision was created for the liabilities ensuing from the charges under the redundancy package for the employees to be made redundant in the context of the reorganisation.

10 Non-current liabilities

	31-12-2020	31-12-2019
Committed financial contributions 2-5 years	2,972	3,491
Income received in advance 3-5 years	1,028	1,515
Committed financial contributions >5 years	-	-
	4,000	5,006

Non-current liabilities include liabilities for a term exceeding one year.

No commitments have been entered into for a period exceeding 5 years. There are no material contractual provisions that affect the amount, timing or degree or certainty of future cash flows.

The financial contribution commitments relate to multi-year projects, in particular (scientific) research.

11 Current liabilities

	31-12-2020	31-12-2019
Committed financial contributions and subsidies	5,751	4,951
Subsidies received in advance	7,242	23,760
Creditors	747	1,199
Personnel expenses	660	604
Taxes - Wage tax	585	582
Taxes - VAT	88	84
Pension contributions	19	-
Other liabilities, accruals and deferred income	497	667
	15,589	31,847

Current liabilities include liabilities for a term of less than one year.

The decrease in current liabilities is mainly due to fewer subsidies received in advance: the Pitch, Bridging the Gaps and Guso projects run up to and including 2020, and no prepayments were received in 2020 for the new Love Alliance programme.

Personnel expenses include all related liabilities, including social security contributions, reserves for holiday pay and holidays.

Subsidies received in advance

PITCH Project	-	4,755
BTGII Project	574	9,973
GUSO Project	-	157
Robert Carr Fund	4,648	7,362
Hands Off! Project	731	584
Brave Fight Against AIDS (Dappere strijd tegen Aids) - NPL - short-term	793	529
Other projects	497	400
	7,242	23,760

In 2020, subsidies were received in advance from the Minister of Foreign Trade and Development Cooperation for Bridging the Gaps II, Hands Off!, and Robert Carr Fund. For the latter, subsidies were also received in advance from the Department for International Development (DFID), NORAD, WHO, and the Bill & Melinda Gates Foundation. These subsidies will be spent in 2021. A financial contribution was received from the National Postcode Lottery for the Brave Fight Against AIDS (Dappere Strijd Tegen Aids) programme; of the € 2,050,000 received, € 5,000 was spent and recognised as income in 2019 and € 223,520 in 2020; the remaining € 1,820,358 is income received in advance, € 793,379 being included as a current liability and € 1,028,101 as a non-current liability.

Off-balance sheet liabilities

	Total	< 1 year	2-5 years	> 5 years
Lease of real estate (business operations)	1,494	460	1,034	-
Rental of printers/copiers	48	13	35	-
Multi-year financial liabilities	1,542	473	1,069	-
As at 31 December 2020	1,542	473	1,069	-

The foundation has been located in an office building on Condensatorweg in Amsterdam since 2019. The lease runs for a term of 5 years until 31 March 2024. After this 5-year period, the lease may be continued for successive periods of 5 years each. The rental price (including advance on service charges), after indexation, amounts to € 114,914 per calendar quarter. A bank guarantee has been issued for the lease on Condensatorweg in the amount of € 102,341.

Since 25 September 2019, the foundation has had a new rental agreement with a supplier of printers and copiers for a term of 5 years.

During the year under review, the profit and loss account included:

Lease of real estate	€ 490,631
Rental of printers/copiers	€ 16,944
Totaal	€ 507,575

Notes to the statement of income and expenditure for 2020

(in euro's x 1,000)

	Actual 2020	Budget 2020	Actual 2019
12 Income from private individuals			
Donations and gifts	8,597	8,720	8,484
Inheritances	2,285	1,300	1,626
Totaal	10,882	10,020	10,110

The income from private individuals mainly relates to donations from donors. Inheritance income is recognised in the financial year in which the amount can be reliably determined.

Earmarked income from private individuals relates to:

Objective 1 - Drastic reduction of HIV and other STIs in the Netherlands	62		12
Objective 2 - Worldwide fewer than 200,000 new HIV infections	119		146
Objective 3 - Worldwide all people living with HIV on treatment	-		-
Objective 4 - A cure for HIV	16		65
Object 5 - Awareness, support in society and funding of the AIDS and STI response	5		-
	202		223

13 Income from companies			
Earmarked income from companies for Aidsfonds project	209	-	-
Income for various Soa Aids Nederland projects	16	40	17
	225	40	17

The earmarked income from companies for Aidsfonds relates to a contribution from ViiV Healthcare UK designated for the break-through project carried out together with ViiV.

14 Income from lottery organisations			
VriendenLoterij earmarked Aidsfonds	650		792
VriendenLoterij Vriendenfonds Aidsfonds	-		2
Subtotal VriendenLoterij	650		794
National Postcode Lottery Aidsfonds	2,250		2,250
National Postcode Lottery Aidsfonds (projects)	224		15
Subtotal National Postcode Lottery	2,474		2,265
Stichting Loterijacties Volksgezondheid (SLV)	440		394
Subtotal SLV	440		394
Total from lottery organisations	3,564	3,810	3,453

The regular contribution from the National Postcode Lottery is € 2,250,000. In addition, there is a small contribution to the Brave Fight Against AIDS (Dappere strijd tegen Aids) project.

	Actual 2020	Budget 2020	Actual 2019
15 Subsidies from governments			
RIVM institutional subsidy	3,622		3,519
Minister of Foreign Affairs (BUZA)	21,632		21,933
Robert Carr civil society Networks Fund	10,575		10,338
Other government subsidies	107		229
	35,936	38,461	36,019

The Robert Carr Fund (RCF) is funded by the following governments:

Norwegian Agency for Development Cooperation (NORAD)	1,480		1,645
Department for International Development (DFID)	2,288		1,690
The Dutch Minister for Foreign Trade and Development Cooperation	2,350		1,750
WHO / UNAIDS / PEPFAR	2,043		4,126
Received in 2020	8,161		9,211
Received in advance in 2019 and carried forward to 2020	7,300		
Received in advance in 2020 and carried forward to 2021	-4,886		
Income received in 2020 and recognised in 2020:	10,575		

The amounts received by RCF in 2020 from the above governments are as follows: NORAD \$ 1,676,000, DFID \$ 2,591,000, WHO UN AIDS \$ 2,315,000, and BUZA € 2,350,000. These are receipts for multi-year programmes, part of which was recognised as income received in advance.

16 Income from other not-for-profit organisations			
Appropriated income from other not-for-profit organisations relate to			
Rutgers - GGD - SANL partners	512		241
Bill & Melinda Gates Foundation	241		167
Elton John AIDS Foundation	136		425
Amsterdam Dinner Foundation - PP Aidsfonds	120		540
Other income from various organisations	88		22
Stichting Life Science Health	-		29
New Venture Fund	58		66
Total income from organisations	1,155	1,705	1,490

17 Income in consideration of the supply of products and/or services			
Information material	45	-	34
Training, workshops, conference and miscellaneous	128	426	73
	173	426	107

The income from information material mainly relates to activities of the SANL programme. The income for training, workshops and conference mainly relate to national activities of various programmes.

18 Other income			
Sale of property			
- Sales value	-	-	2,573
- Minus: balance sheet value after depreciation up to and including Q3	-	-	-955
Net result on sale of property	-	-	1,618

The other income in the previous financial year consisted of the sale of the property on Keizersgracht. This year, there was no other income.

	Actual 2020	Budget 2020	Actual 2019
19 Objective 1: Drastic reduction of HIV and other STIs in the Netherlands			
Financial contributions to third parties	444		1,957
Direct costs	1,306		1,186
Indirect costs of our own organisation	3,508		3,378
	5,258	5,680	6,521

The costs and financial contributions incurred to achieve the objective 'Drastic reduction of HIV and STIs in the Netherlands' relate to the national programmes SANL, Policy and Subsidies National (Beleid en Subsidies Nationaal).

20 Objective 2: Worldwide fewer than 200,000 new HIV infections			
Financial contributions to third parties	14,014		14,699
Direct costs	1,533		1,805
Indirect costs of our own organisation	2,190		2,101
	17,737	18,436	18,605

The costs and financial contributions incurred to achieve this objective relate to all international programmes.

21 Objective 3: Worldwide all people living with HIV on treatment			
Financial contributions to third parties	13,675		11,834
Direct costs	697		677
Indirect costs of our own organisation	1,829		2,018
	16,201	18,436	14,529

The costs and financial contributions incurred to achieve this objective relate to all international programmes.

22 Objective 4: A cure for HIV			
Financial contributions to third parties	1,092		1,698
Direct costs	21		2
Indirect costs of our own organisation	304		389
	1,417	1,649	2,089

The costs and financial contributions incurred to achieve this objective relate to programmes aimed at finding a cure.

23 Objective 5: Awareness, support in society and full funding of the Aids and STI response			
Financial contributions to third parties	2,569		2,278
Direct costs	1,957		3,304
Indirect costs of our own organisation	2,696		2,611
	7,222	9,593	8,193

The costs and financial contributions incurred to achieve this objective relate to all international programmes.

	Actual 2020	Budget 2020	Actual 2019
24 Cost of fundraising			
Direct costs	1,798		1,994
Indirect costs of our own organisation	903		770
	2,701	2,839	2,764

This relates to marketing activities aimed at fundraising. The costs are lower than budgeted, due to tight cost control and a conscious choice in the use of certain fundraising methods.

Below is the ratio of the fundraising costs as a percentage of the total funds raised:

Total funds raised	51,762	54,036	51,089
Fundraising costs	2,701	2,839	2,764
Ratio of fundraising costs	5.2%	5.3%	5.4%

25 Management and administration costs

Indirect costs of our own organisation	1,725	1,471	1,428
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Management and administration ratio

Below is the ratio of management and administration costs as a percentage of the total expenditure:

Total expenditure	52,261	58,105	54,129
Management and administration costs	1,725	1,471	1,428
Management and administration ratio	3.3%	2.5%	2.6%

In 2020, the costs of management and administration included reorganisation costs and an addition to the reorganisation provision, totalling an amount of € 261,000. This explains the increase compared to 2019.

26 Balance of financial income and expenditure

Interest	-30	15	6
Realised exchange differences	-52	-	3
	-82	15	9

This year, for the first time, a negative rather than a positive interest was seen because banks have passed on negative interest on part of the total balance in payment and savings accounts since 1 April 2020. The exchange differences relate to the USD-EUR exchange rate; for the Robert Carr civil society Networks Fund, resources are held in a USD account to pay liabilities in USD and receive income in USD. Upon consolidation, this resulted in exchange differences.

Expenditure ratio

Below is the ratio of expenditure on the objective as a percentage of the total income:

Total income	51,935	54,462	52,814
Total spent on the objective	47,835	53,794	49,938
Expenditure ratio	92.1%	98.8%	94.6%

Below is the ratio of expenditure on the objective as a percentage of the total expenditure:

Total expenditure	52,261	58,105	54,129
Total spent on the objective	47,835	53,794	49,938
Expenditure ratio	91.5%	92.6%	92.3%

27 Subsequent events

There have not been any subsequent events with additional information on the actual situation as at balance sheet date.

Notes to cost allocation

(in euro's x 1,000)

Specification and allocation of costs by objective

	Purpose					Cost of fundraising	Management and Administration	Total 2020	Budget 2020	Total 2019
	1. Drastic reduction of HIV and other STIs in the Netherlands	2. Worldwide fewer than 200,000 new HIV infections	3. Worldwide all people living with HIV on treatment	4. A cure for HIV	5. Awareness, support in society and full funding of the AIDS and STI response					
Subsidies and contributions	444	14,014	13,675	1,092	2,569	-	-	31,794	35,101	32,467
Purchases and acquisitions	1,306	1,533	697	21	1,957	1,798	-	7,312	10,580	8,968
Personnel costs ¹⁾	3,013	1,882	1,572	261	2,315	776	1,484	11,302	10,914	11,183
Housing costs	152	95	79	13	117	39	65	560	402	397
Office and general expenses	274	171	143	24	211	71	148	1,043	848	899
Depreciation, amortisation and interest	68	42	35	6	52	17	28	250	260	215
Total	5,258	17,737	16,201	1,417	7,222	2,701	1,725	52,261	58,105	54,129
Indirect costs	3,508	2,190	1,829	304	2,695	903	1,725	13,155	12,424	12,694

The indirect costs exceed the budget by 5.9%. In addition to salary costs, the personnel costs item includes, inter alia, training costs, hiring of non-salaried staff, and costs of recruitment of new employees.

Indirect costs increased by 3.6% compared to 2019. The workforce decreased by 1.2 FTEs to 133.1 FTEs compared to 2019. In 2020, a salary increase was implemented in line with the salary developments set by the central government.

The pension scheme is a career-average scheme. Pension benefits were not indexed in 2020. The policy funding ratio for December 2020 is 92.6%. This is the status of the average current funding ratio over the past 12 months.

The total audit costs for 2020 amount to € 134,280. The full amount relates to PricewaterhouseCoopers Accountants N.V.; no other independent auditor was engaged in 2020. The audit costs are allocated to the financial year to which the audit relates.

PricewaterhouseCoopers Accountants N.V.	2020	2019
Audit of the financial statements	98,010	74,096
Other audit work	36,270	31,759
Other non-audit services	-	-
Tax advice	-	-
	134,280	105,855

	Purpose					Cost of fundraising	Management and Administration	Total 2020	Budget 2020	Total 2019
	1. Drastic reduction of HIV and other STIs in the Netherlands	2. Worldwide fewer than 200,000 new HIV infections	3. Worldwide all people living with HIV on treatment	4. A cure for HIV	5. Awareness, support in society and full funding of the AIDS and STI response					
1) Personnel costs										
Wages and salaries	2,217	1,384	1,156	192	1,703	571	925	8,147	8,043	7,941
Employee insurance	358	224	187	31	275	92	150	1,317	1,206	1,276
Pension insurance	243	152	127	21	187	63	101	893	885	864
Other personnel costs	195	122	102	17	150	50	81	717	780	1,102
Addition to reorganisation provision							227	227		-
Total personnel costs	3,013	1,882	1,572	261	2,315	776	1,484	11,301	10,914	11,183

Workforce (FTEs)

	average number of employees							
in 2020	34.7	19.9	19.9	3.0	20.8	12.8	22.0	133.1
in 2019	34.5	20.5	19.3	3.8	22.5	11.6	22.1	134.3

In 2020, two employees working outside the Netherlands were employed by Aidsfonds. In addition, three employees worked abroad through hosting agreements or other hiring.

Remuneration of the Executive Board

Name	Mark Vermeulen
Title	Executive Board

Employment

Nature of the agreement (term)	01-01-2020 31-12-2020
Hours per week	36
Part-time percentage	100%

Remuneration 2020 (euros)

Annual income	
Gross wage/salary	89,822
Holiday pay	6,931
End-of-year bonus	8,033
Variable annual income	-
Total annual income	104,786
Social security contributions (employer's part)	10,987
Taxable allowances/additions	-
Pension contributions (employer's part)	13,136
Pension compensation	-
Other long-term benefits	-
Severance payments	-
Total remuneration 2020	128,909
Total remuneration Executive Board 2019	120,761

Stichting Aidsfonds - Soa Aids Nederland has a one-man executive board; in 2020, Mark Vermeulen was the director. The annual income remains within the maximum of € 140,780 (1 FTE/12 months) in accordance with the Regulations for the remuneration of directors of charities for executive boards and supervisory boards (Regeling beloning directeuren van goede doelen ten behoeve van besturen en raden van toezicht).

The annual income, the taxed allowances/additions, the pension contributions, and the other long-term benefits combined, also remain within the maximum of € 201,000 per year as outlined in the regulations.

For an explanation of the policy and principles of the remuneration of the executive board, please refer to chapter 2.2 of the annual report.

No loans, advance payments or guarantees have been provided to the director.

The members of the supervisory board have not received any remuneration or expense allowance.

Amsterdam, 4 June 2021

Stichting Aidsfonds – Soa Aids Nederland

Original signed by M. Vermeulen

M. Vermeulen, Executive Board

Other information

Adoption and approval of financial statements.

The supervisory board of Stichting Aidsfonds - Soa Aids Nederland approved the 2020 financial statements at the meeting of 22 April 2021.

Appropriation of result

The result is divided according to the appropriation of result as included in the Statement of income and expenditure for 2020 under Appropriation of result.

C. AUDIT REPORT



Independent auditor's report

To: management and the supervisory board of Stichting Aidsfonds - Soa Aids Nederland

Report on the financial statements 2020

Our opinion

In our opinion, the financial statements of Stichting Aidsfonds - Soa Aids Nederland ('the foundation') give a true and fair view of the financial position of the foundation as at 31 December 2020, and of its result for the year then ended in accordance with the Guideline for annual reporting 650 'Charity organisations' of the Dutch Accounting Standards Board.

What we have audited

We have audited the accompanying financial statements 2020 of Stichting Aidsfonds - Soa Aids Nederland, Amsterdam.

The financial statements comprise:

- the balance sheet as at 31 December 2020;
- the statement of income and expenditure for the year then ended; and
- the notes, comprising the accounting policies and other explanatory information.

The financial reporting framework applied in the preparation of the financial statements is the Guideline for annual reporting 650 'Charity organisations' of the Dutch Accounting Standards Board.

The basis for our opinion

We conducted our audit in accordance with Dutch law, including the Dutch Standards on Auditing. We have further described our responsibilities under those standards in the section 'Our responsibilities for the audit of the financial statements' of our report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Independence

We are independent of Stichting Aidsfonds - Soa Aids Nederland in accordance with the 'Verordening inzake de onafhankelijkheid van accountants bij assuranceopdrachten' (ViO, Code of Ethics for Professional Accountants, a regulation with respect to independence) and other relevant independence regulations in the Netherlands. Furthermore, we have complied with the 'Verordening gedrags- en beroepsregels accountants' (VGBA, Dutch Code of Ethics).

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Report on the other information included in the annual report

In addition to the financial statements and our auditor's report thereon, the annual report contains other information that consists of:

- the management report;
- annex 1 Budget 2021;
- other information.

Based on the procedures performed as set out below, we conclude that the other information:

- is consistent with the financial statements and does not contain material misstatements;
- contains the information that is required by the Guideline for annual reporting 650 'Charity organisations' of the Dutch Accounting Standards Board.

We have read the other information. Based on our knowledge and understanding obtained in our audit of the financial statements or otherwise, we have considered whether the other information contains material misstatements.

By performing our procedures, we comply with the requirements of the Dutch Standard 720. The scope of such procedures was substantially less than the scope of those performed in our audit of the financial statements.

Management is responsible for the preparation of the other information, including the directors' report pursuant to the Guideline for annual reporting 650 'Charity organisations' of the Dutch Accounting Standards Board.

Responsibilities for the financial statements and the audit

Responsibilities of management and the supervisory board for the financial statements

Management is responsible for:

- the preparation and fair presentation of the financial statements in accordance with the Guideline for annual reporting 650 'Charity organisations' of the Dutch Accounting Standards Board; and for
- such internal control as management determines is necessary to enable the preparation of the financial statements that are free from material misstatement, whether due to fraud or error.

As part of the preparation of the financial statements, management is responsible for assessing the foundation's ability to continue as a going concern. Based on the financial reporting framework mentioned, management should prepare the financial statements using the going concern basis of accounting unless management either intends to liquidate the foundation or to cease operations, or has no realistic alternative but to do so. Management should disclose events and circumstances that may cast significant doubt on the foundation's ability to continue as a going concern in the financial statements.

The supervisory board is responsible for overseeing the foundation's financial reporting process.

Our responsibilities for the audit of the financial statements

Our responsibility is to plan and perform an audit engagement in a manner that allows us to obtain sufficient and appropriate audit evidence to provide a basis for our opinion. Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error and to issue an auditor's report that includes our opinion. Reasonable assurance is a high but not absolute level of assurance, which makes it possible that we may not detect all material misstatements. Misstatements may arise due to fraud or error. They are considered to be material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial statements.

Materiality affects the nature, timing and extent of our audit procedures and the evaluation of the effect of identified misstatements on our opinion.

A more detailed description of our responsibilities is set out in the appendix to our report.

Amsterdam, 4 June 2021

PricewaterhouseCoopers Accountants N.V.

Original Dutch version has been signed by M. van Dijk RA

Appendix to our auditor's report on the financial statements 2020 of Stichting Aidsfonds - Soa Aids Nederland

In addition to what is included in our auditor's report, we have further set out in this appendix our responsibilities for the audit of the financial statements and explained what an audit involves.

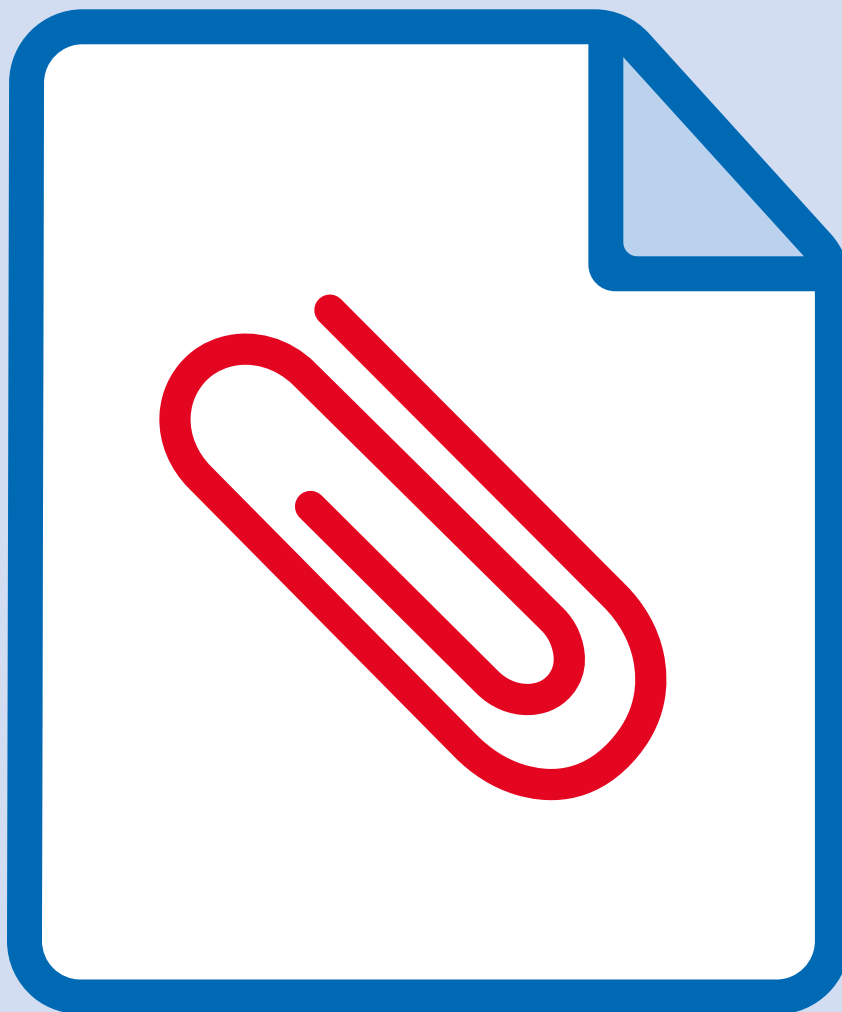
The auditor's responsibilities for the audit of the financial statements

We have exercised professional judgement and have maintained professional scepticism throughout the audit in accordance with Dutch Standards on Auditing, ethical requirements and independence requirements. Our audit consisted, among other things of the following:

- Identifying and assessing the risks of material misstatement of the financial statements, whether due to fraud or error, designing and performing audit procedures responsive to those risks, and obtaining audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the intentional override of internal control.
- Obtaining an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the foundation's internal control.
- Evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Concluding on the appropriateness of management's use of the going concern basis of accounting, and based on the audit evidence obtained, concluding whether a material uncertainty exists related to events and/or conditions that may cast significant doubt on the foundation's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report and are made in the context of our opinion on the financial statements as a whole. However, future events or conditions may cause the foundation to cease to continue as a going concern.
- Evaluating the overall presentation, structure and content of the financial statements, including the disclosures, and evaluating whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the supervisory board regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

D. APPENDIXES



Annex Budget for 2021

(in euro's x 1,000)

	Budget for 2021	Actual 2020	Actual 2019
Income:			
Income from private individuals	9,870	10,882	10,110
Income from companies	2	225	17
Income from lottery organisations	4,023	3,564	3,453
Subsidies from governments	31,714	35,936	36,019
Income from related not-for-profit organisations	2,025	1,155	1,490
Income from other not-for-profit organisations	47,634	51,762	51,089
Income in consideration of the supply of products and/or services	-	173	107
Other income	575	-	1,618
Total income	48,209	51,935	52,814
Expenditure:			
Spent on objectives			
Objectives from 2019 onwards			
1. Drastic reduction of HIV and other STIs in the Netherlands	5,143	5,258	6,521
2. Worldwide fewer than 200,000 new HIV infections	14,977	17,737	18,605
3. Worldwide all people living with HIV on treatment	14,977	16,201	14,529
4. A cure for HIV	1,721	1,417	2,089
5. Awareness, support in society and full funding of the AIDS and STI response	7,518	7,222	8,193
	44,336	47,836	49,938
Cost of fundraising	2,664	2,701	2,764
Management and administration	2,264	1,725	1,428
Total expenditure	49,264	52,261	54,129
Balance of financial income and expenditure	-1,055	-326	-1,316
Balance of financial income and expenditure	-	-82	9
Balance of income and expenditure	-1,055	-408	-1,307
Management and administration costs (of total expenditure)	4.6%	3.3%	2.6%
Spent on objective (of total income)	92.0%	92.1%	94.6%
Spent on objective (of total expenditure)	90.0%	91.5%	92.3%