



Zeroing In Ending the HIV Epidemic

2021 Funding Opportunity Announcement by Gilead Sciences, Inc.

BACKGROUND

Gilead Sciences, Inc., is a leading biopharmaceutical company that discovers, develops and commercializes innovative medicines in areas of unmet medical need. We strive to transform the promise of science and technology into therapies that have the power to cure diseases or revolutionize the standard of care – but we also understand that scientific discovery is only one aspect of improving public health. Through Gilead’s Corporate Giving, we support advocates, healthcare professionals and non-profit groups who work tirelessly in local communities to improve people’s daily lives.

In 2020, Gilead provided more than \$250 million in funding to organizations advancing efforts to end the HIV epidemic around the world focused on communities that are disproportionately impacted by HIV. Over the last few years, in partnership with community organizations, we’ve developed major initiatives like: (i) COMPASS®, a more than \$100 million, 10 year commitment that seeks to address HIV/AIDS epidemic in the Southern U.S.; (ii) HIV Age Positively®, which focuses on people 50 or older living with HIV whom have lost their safety net; (iii) TRANScend® Community Impact Fund, which supports trans-led organizations working to improve safety, health and wellness of the transgender community; and (iv) RADIANT®, which seeks to address the rising rates of HIV in Eastern Europe and Central Asia. However, long-standing health inequities and pervasive HIV stigma, coupled with the COVID-19 pandemic, continue to prevent the most marginalized communities from accessing the HIV care and services they need.

We believe that people should have access to the same quality healthcare, regardless of their background and circumstances. Through this Funding Opportunity Announcement, we aim to build on previous programs to support organizations working to increase the overall health and wellness of communities most impacted by HIV and the COVID-19 pandemics.

PROGRAM AND PURPOSE

Through this new funding opportunity, Gilead seeks to provide support to organizations whose programs align with established international and country specific ‘Ending the HIV Epidemic’ (“EHE”) goals. This includes local community programming, multi-organization community driven projects, and coalition led proposals from organizations collaborating to end the HIV epidemic in their respective city, state, country or regions.

Projects must prioritize key populations per local EHE plans, and align to one or more of the following three focus areas:

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1. **Comprehensive HIV Innovation Programs:** COVID-19 lockdowns caused a significant disruption to existing HIV programs and services. By providing funding for innovative HIV services, we can make an impact on the epidemic, preventing new infections and ensuring people living with HIV are connected to care. Potential programs could include but are not limited to:
 - Innovative non-clinical testing programs
 - Innovative supportive service programs
 - Comprehensive HIV prevention programs inclusive of biomedical prevention options

2. **Digital Health Innovations:** Too many communities have been left behind by the digital revolution – and even for those that are actively online, significant unmet health needs remain. Investment in digital health infrastructure is vital to improving health outcomes and building sustainable health services. Applicants submitting proposals for this category should emphasize innovative ideas for how to create or improve their technology infrastructure and digital outreach strategies for reaching key populations. **Note: Gilead will not consider applications for funding of online marketing, the development of new proprietary software. Digital Health Innovation technologies must be open-source.** Potential programs could include but are not limited to:
 - Developing programs that address the health literacy divide in accessing digital health services
 - Supporting digital access in rural areas for better outcomes for People Living With HIV (“PLWH”)
 - Supporting digital health education (communications) for those with language barriers, aging populations, indigenous and migrant as well as stigmatized populations

3. **Community Outreach and Education:** Innovative community outreach projects have the potential to reach populations that need greater health support through engagement, education and empowerment. Community-driven partnerships working to reach underserved populations, provide educational programs that improve the health and well-being of marginalized communities. Using data, we can better understand the unique challenges faced by specific communities across diverse geographies, create innovative new community outreach solutions and scale-up existing programs. Potential programs could include but are not limited to:
 - Robust outreach and education materials with resources for community outreach workers and volunteers working in HIV
 - Programs that address the lack of culturally appropriate service options and breakdown barriers between communities and service providers
 - Programs that provide greater social support to combat isolation
 - Innovative stigma reduction campaigns
 - Strategies to increase organizations’ capacity to collect and analyze data for decision making
 - In-person community education events (in accordance to local government’s COVID-19 and social distancing recommendations)
 - Advocacy training for people living with HIV
 - Engagement with local policymakers to better understand the HIV epidemic

ELIGIBILITY CRITERIA

Organization(s) must be classified as a not-for-profit and have an interest in public health, including but not limited to providing social services, education or advocacy for underserved populations. They must be headquartered in one of the countries listed in Appendix B to this FOA. Collaborative submissions are encouraged.

Eligible organizations must demonstrate:

- A proven track record of sound financial stewardship and ability to deliver impactful programming;
- That they have proven excellence in program development and implementation, when and where applicable;
- That they have been established for at least two calendar years;
- Institutional infrastructure, including administrative capacities;
- Core content expertise and strong grounding in existing data and methodologies to EHE;
- Knowledge of social change approaches;
- A Strong network and partnership capacity and ability to collaborate effectively;

Gilead seeks an equitable balance between large and small organizations receiving funding, so organizations of a range of sizes/income levels are welcome to apply. Additionally, applications for programs and initiatives that have multiple sources of funding are encouraged. Should applicants have additional questions, please reach out directly to the local Gilead grants manager or email grants@gilead.com using the subject heading “Zeroing In”.

SELECTION CRITERIA

Gilead welcomes proposals which target specific activities aimed at improving health outcomes aligned with at least one of the key focus areas noted above. Projects should intend to support key populations who face health inequities as designated by local EHE plans.

Successful proposals will:

- Make a unique and important contribution to help end the HIV epidemic that is articulated in the proposal
- Offer clear program objectives and implementation plan
- Align with the local EHE strategy
- Include staff expertise and experience in line with the proposed project scope
- Assume appropriate and practical resourcing and budgets, with the potential for scalability
- Include a dissemination plan to share learnings and best practices from grant-funded activities
- Demonstrate original, innovative ideas that are suitable for the existing local infrastructure, capacity, environment and context
- Consider any necessary government resources (infrastructure, human resources or funding) that are required and, if applicable, those that have been identified and are available
- Have strong mechanisms to ensure financial, performance and public accountability
- Provide a clear transition plan for long-term sustainability
- Emphasize collaboration between partners and a shared vision for success

- Any letters of support will be considered when selecting applications. Community-led efforts are encouraged.

EVALUATION AND REPORTING

Projects must provide specific, measurable, achievable, realistic and time-sensitive objectives and action steps required to meet project goals. All applications must include information regarding the applicant's capacity to implement the project and clear details on how data will be collected and analyzed, and by whom.

Through the reporting process and related data collection, Gilead hopes to create opportunities to learn from both the successes and challenges faced by our partners, and to assess ways to increase the impact of future programs. Applicants may allocate up to 10% of the grant award outside of indirect cost to cover the costs of evaluation of the project against its stated objectives.

GRANT AWARDS

Gilead will consider grant requests up to \$250,000 from individual organizations and up to \$500,000 for collaborative requests that include two or more organizations with a timeline for completion of up to, but no more than 18-months starting January 1, 2022. Grant proposals should clearly articulate how the project will be sustained at the end of the project. Projects of a shorter length will also be considered on a case-by-case basis. Grant requests should be proportional to the scope, complexity and reach/impact of the program and country, while reflecting reasonable, good faith estimates of the true costs related to the proposed project. Giving will be distributed in accordance with local regulations which can vary by country.

FUNDING RESTRICTIONS

Gilead funding cannot support:

- Medications or purchasing of medications
- Direct medical expenses, including labs
- Existing deficits
- Basic biomedical research, Gilead-sponsored clinical research or clinical trials
- Projects that directly influence or advance Gilead's business, including purchase, utilization, prescribing, formulary position, pricing, reimbursement, referral, recommendation or payment for products
- Individuals (including, without limitation individual health care providers, patient organization representatives and/or government officials) or physician group practices
- Events or programs that have already occurred
- Government lobbying activities
- Organizations that discriminate on the basis of race, color, gender, religion, disability, sexual orientation, or gender identity or expression

HOW TO APPLY

Organizations are required to submit their requests in English- using the online application form, which can be accessed by clicking <https://www.gilead.com/purpose/giving/funding-requests/>.

Please review the FOA and appendices before applying. Please ensure that the Grant Type “**Community/Patient**” and the Program Tag “**Zeroing In to End the HIV Epidemic (EHE)**” are selected when submitting the application.

Applications should be submitted in the local currency of the applicant program.

KEY DATES & DEADLINES

Grant request will be accepted on a rolling basis until 11:59pm EST on November 15th, 2021.

FOA INQUIRIES

Questions related to this Funding Opportunity Announcement should be directed to grants@gilead.com using the subject heading “Zeroing In”.

DISCLAIMER STATEMENT

- Submission of an application does not guarantee any award of funding.
- Gilead reserves the right to approve or deny any submitted application for any reason, in its sole discretion.
- The number of funding requests awarded will depend on the number of applications received.
- Applicants must provide a detailed budget as part of the application, which will undergo a fair market value assessment.
- Recipients receiving support will be required to complete post program budget reconciliation, submit any data required for state/federal/country reporting purposes such as Open Payments (Sunshine Act), and provide program outcomes.
- Award of a grant in any one cycle does not imply that any subsequent grant for the same project or a similar project will be awarded without further application and approval.
- Previous funding from Gilead does not imply any future funding will be given.

APPENDIX A - Indirect Cost Guidelines

Indirect costs are overhead expenses incurred by the applicant organization as a result of the project but that are not easily identified with the specific project. Generally, indirect costs are defined as administrative or other expenses that are not directly allocable to a particular activity or project; rather they are related to overall general infrastructure operations. Indirect costs are sometimes referred to as “overhead costs” and more recently by the U.S. government as “facilities and administrative costs.” Examples include executive oversight, accounting, grants management, legal expenses, utilities, technology support, and facility maintenance.

Gilead prefers, whenever possible, that specific allocable costs of an applicant organization’s project should be requested and justified in the proposal as direct costs, including those for dedicated ongoing project management, facilities and support (further definitions are provided below).

As a company we seek to fund the actual cost of the proposed project, and to support the efficiency and effectiveness needed for improving the care of patients living with life-threatening diseases around the world. Gilead will consider supporting a consolidated indirect cost fee on a case-by-case basis (where allowed under local laws and regulations), provided that it constitutes 10% or less of the total proposed project cost.

For the purpose of funding the grants, Gilead has established basic definitions and guidance to be used by our applicants and prospective applicants (see below).

Through our philanthropy and grants programs, Gilead does not match the indirect-cost rates that the US federal government may pay to its applicants and contractors. We recognize that this means that our applicants may need to engage in cost-sharing between projects, tap into unrestricted funds, or conduct other fundraising activities to cover unbudgeted operation costs.

Indirect Cost Definitions

Indirect Costs
⇒ Facilities not acquired specifically and exclusively for the project (e.g. Foundation, Institute, or University headquarters)
⇒ Utilities for facilities not acquired for and not directly attributable to the project
⇒ Information technology equipment and support not directly attributable to the project
⇒ General administrative support not directly attributable to the project. Examples are as follows:
○ Executive administrators
○ General ledger accounting
○ Grants accounting
○ General financial management
○ Internal audit function
○ IT support personnel
○ Facilities support personnel
○ Scientific support functions (not attributable to the project)
○ Environment health and safety personnel
○ Human resources
○ Library & information support
○ Shared procurement resources
○ General logistics support
○ Material management
○ Executive management
○ Other shared resources not directly attributable to the project
○ Institutional legal support
○ Research management costs
⇒ Depreciation on equipment
⇒ Insurance not directly attributable to a given project

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APPENDIX B - Countries and Territories Eligible for Award by Continent

Africa

Algeria	Ethiopia	Republic of the Congo
Angola	Gabon	Rwanda
Benin	Ghana	The Gambia
Botswana	Guinea	Tunisia
Burkina Faso	Guinea Bissau	Sao Tome and Principe
Burundi	Kenya	Senegal
Cameroon	Liberia	Seychelles
Cape Verde	Libya	Sierra Leone
Central African Republic	Madagascar	Somalia
Chad	Malawi	South Africa
Comoros	Mali	South Sudan
Cote D' Ivoire	Mauritania	Sudan
Djibouti	Mauritius	Tanzania
DR Congo	Morocco	Togo
Egypt	Mozambique	Uganda
Equatorial Guinea	Namibia	Zambia
Eritrea	Niger	Zimbabwe
Eswatini	Nigeria	

Asia

Armenia	Kazakhstan	Philippines
Australia	Kiribati	Qatar
Azerbaijan	Kuwait	Samoa
Bahrain	Kyrgyzstan	Saudi Arabia
Bangladesh	Lao DR (Laos)	Singapore
Bhutan	Lebanon	Solomon Islands
Brunei	Malaysia	South Korea
Cambodia	Maldives	Sri Lanka
Cook Islands	Marshall Islands	Taiwan
China	Micronesia	Tajikistan
Georgia	Moldova	Thailand
Fiji	Mongolia	Timor-Leste
Hong Kong	Myanmar	Tonga
India	Nauru	Turkey
Indonesia	Nepal	Turkmenistan
Iran	New Zealand	Tuvalu
Iraq	Oman	U.A.E
Israel	Palau	Uzbekistan
Japan	Pakistan	Vanuatu
Jordan	Papua New Guinea	Vietnam

Europe

Albania	Belgium	Croatia
Austria	Bulgaria	Czech Republic
Belarus	Bosnia and Herzegovina	Denmark

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Finland
France
Germany
Greece
Hungary
Iceland
Ireland
Italy
Kosovo

Luxembourg
Malta
Moldova
Montenegro
Netherlands
North Macedonia
Norway
Romania
Russia

Poland
Portugal
Serbia
Slovenia
Spain
Sweden
Switzerland
Ukraine
United Kingdom

North America

Anguilla
Aruba
Bahamas
Barbados
Belize
Bermuda
British Virgin Islands
Canada
Cayman Islands
Costa Rica
Curacao
Dominica
Dominican Republic

Ecuador
El Salvador
Grenada
Guatemala
Haiti
Honduras
Jamaica
Mexico
Montserrat
Nicaragua
Panama
Saint Maarten
St. Kitts & Nevis

St. Lucia
St. Vincent & Grenadines
Trinidad and Tobago
Turks and Caicos
United States

South America

Argentina
Bolivia
Brazil
Chile
Colombia
Ecuador
Guyana
Paraguay
Peru
Suriname
Uruguay
Venezuela