The Aaron Diamond Foundation:
AIDS Research in New York City

INTRODUCTION

It was almost noon on Friday, October 2, 1987 and the morning chill in lower Manhattan had been replaced by a mild breeze, the last breath of summer. Exiting the New York City Public Health Building, three companions passed through the grand entrance and descended a short flight of steps between massive stone and bronze urns. To the casual observer, they would seem an unlikely trio—a multi-millionaire widow heiress, a renowned physician and biomedical researcher, and a leader in the anti-war movement turned foundation executive.

Scanning oncoming Center Street while waiting for Mrs. Diamond’s car, Vincent McGee, executive director of The Aaron Diamond Foundation, shaded his eyes against the sun high in the southern sky. Behind him, Dr. Lewis Thomas, a member of the foundation’s board of directors and advisor on medical research, was the first to speak. “Well, what do you think, Irene?”

“I liked Steve Joseph, but wouldn’t we be getting involved with real bureaucracy!” replied Irene Diamond, whose late husband Aaron Diamond left a real estate fortune of nearly $400 million, divided evenly between Mrs. Diamond and the foundation. Minutes earlier, New York’s public health commissioner had asked the trio to convene and coordinate a consortium of philanthropic foundations to finance a centralized research effort concentrated on the basic science of the AIDS virus. Commissioner Joseph said that it was time to bring New York closer to its level of responsibility as the epicenter of the emerging AIDS epidemic in the United States. He had turned to the fledgling Aaron Diamond Foundation to lead the effort to secure the necessary funding from a broad spectrum of donors.

The soft-spoken doctor turned to McGee. “Well, what do you think, Vinny?” Before McGee could respond, Mrs. Diamond insisted, “Besides, isn’t bringing together a bunch of other foundations going to delay things too long? Just think . . . we’ll be stuck in meeting after meeting!”

As Vincent McGee reflected upon the morning’s events, he wondered whether this young foundation that had just emerged from two years of internal power struggles could take on such a monumental challenge. Was this a good fit for The Aaron Diamond Foundation? Certainly the establishment of a cutting-edge AIDS research laboratory in New York was critical to the ongoing battle against the tragic disease. However, since the philanthropic community had not yet recognized the need to fund basic research on AIDS, McGee wondered how many other foundations would be willing to come along. Moreover, he wondered whether Mrs. Diamond and
the still-evolving board of directors would have the patience to build a coalition of foundations and to partner with the city government on such an effort. Uncharacteristic of most foundations, The Aaron Diamond Foundation had only nine years left to spend down its assets. Would not this collaborative effort take many years to plan and launch? Was there another way to ensure the successful launch of this endeavor so vital to the fight against AIDS?

IRENE DIAMOND: A REAL SCRapper

The legendary writer and broadcaster Louis “Studs” Terkel once grinned at Irene Diamond and declared, “Wait a minute lady, before I shake your hand, I just need to say that you are a scrapper! I like that!” At the age of 77, Irene Diamond was as feisty and determined as ever. Barely five feet tall and always impeccably dressed, she had bright blue eyes and curly snow white hair, which the millionairess cut at home in order to save time and expense. An animated conversationalist, Mrs. Diamond was impatient with too many details and was quick to express her opinions with great conviction. As she liked to point out, forty years in the “picture business” in Hollywood and New York had trained her to cut to the chase.

Born to Russian immigrant parents in Pittsburgh in May of 1910, Irene Levine grew bored with public school and piano lessons, and she dreamed of one day becoming an actress. Changing her name to “Irene Lee” in the early 1920s, she moved to New York with a scholarship to study the theater. In 1933, she traveled across the country for her first Hollywood screen test. Without acting work, Irene became a story editor for the legendary Samuel Goldwyn at MGM, first in Hollywood and then back in New York. In 1941, Irene agreed to run the New York office of Hal Wallis, who had left the helm of Warner Brothers to start an independent company.

Mrs. Diamond would later assert that the competitive business of being a story editor and talent scout during Hollywood’s golden years prepared her for her work as a philanthropist reviewing funding proposals. In a sometimes rocky professional alliance with Wallis that would last until 1970, Irene reviewed hundreds of scripts and story ideas—it was up to her to find good property and see that it was made into movies. Purchasing more than 30 scripts over the years, she wielded considerable power and furthered the careers of Bette Davis, Burt Lancaster, Kirk Douglass and Robert Redford. Her most famous discovery was a script entitled “Everybody Comes to Rick’s,” an unproduced play that had already been rejected by several studios. Confident that the tough but idealistic title character was the perfect romantic hero for the turbulent world of the day, Irene fought for the script with characteristic tenacity. Despite his predictions of disaster, the skeptical Wallis finally agreed to purchase the script for $20,000. Wallis produced the film and released it in November 1942 under the new title Casablanca. Although the movie was a box-office hit and won three Academy Awards, including Best Picture, Irene never received a bonus or any public credit from Wallis for her part in the deal.

Marriage to Aaron Diamond

Around the time that Irene finished her work on Casablanca, an old friend from her years of studying theater introduced Irene to a somewhat shy, good-natured gentleman by the name of Aaron Diamond.

Born in 1910 in Tennessee, Aaron Diamond was one of nine children. After graduating from the University of Chattanooga, he received a scholarship to study at Harvard Business School. Graduating with his MBA at the height of the Depression, Aaron was fortunate to be

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1 Interview with Vincent McGee, June 30, 2005.
hired by Abraham and Straus department store in New York earning twenty-five dollars week. When the country went to war, Diamond joined the Navy. Two days after enlisting, he was introduced to Irene (Levine) Lee. On their first date, the smitten Diamond knew that he had met the love of his life and he boldly asked Irene to marry him. Seven dates later, Irene finally agreed and they were married in 1942.

While stationed on Staten Island, Aaron Diamond bought two small hotels in Baltimore and Brooklyn Heights. One week after daughter Jean was born in 1944, Diamond was deployed to the Philippines for nearly two years. By the time he was discharged from the Navy, his hotels had provided a modest nest egg for the young family.

Upon his return to New York, Diamond rejected opportunities to work as a salesmen and instead went into the real estate business with a friend. The partners first built homes in suburban New York and then apartments and office buildings in the city. Eventually, Diamond went into business for himself and built high rise office buildings in midtown Manhattan and redeveloped Roosevelt Island, gaining a reputation as a thoughtful, creative businessman and a man of integrity. Feeling deeply about the need to help African Americans migrating from the South in search of work, Aaron Diamond was one of the first to build a racially integrated and minority managed apartment house in New Rochelle.

Despite the Diamonds’ growing wealth, the couple lived simply and Irene continued in her career as a story editor. “My husband was extremely supportive. We had a particularly wonderful marriage. We were very, very close, and we both had interests… We changed each other a lot. He gave me a much better education about reality in the world, and I got him interested in classical music and the ballet. And we both enjoyed what the other had to give very, very much. . . . He was interested in the world. We traveled enormously. . . . He was always very interested. He was very generous—extremely sensitive to other people.”

**The Aaron Diamond Foundation**

In 1955, the couple established the Aaron Diamond Foundation, intending for the foundation to receive the bulk of Mr. Diamond’s considerable fortune upon his eventual death. In December of that year, the Foundation was officially incorporated and the board of directors held its first meeting to ratify its articles of incorporation and purpose statement (see Exhibit 1), approve its bylaws and corporate seal, fix its office, and authorize the establishment of a bank account. As president and treasurer, Mr. Diamond made his first gift of stock to the Foundation, which was sold for $15,582. For the next three decades, the Foundation remained largely inactive, except for occasional donations of stock by Mr. Diamond and the minimum activity required of the board of directors, which usually numbered between four and six members. During these years, the Foundation also served as the vehicle for the modest personal giving of the Diamonds.

In the winter and spring of 1984, satisfied that their fortune had grown sufficiently large, the Diamonds began making plans to activate the Foundation. “My husband was quite an extraordinary man. . . . He loved New York, and he felt it had treated him very well, and he wasn’t really interested in accumulating more and more money.”

While on a long vacation in Florida, the Diamonds sketched out a broad strategy for the Foundation. The couple agreed that the focus of the Foundation’s giving would be New York City, where they had spent most of their professional lives. Further, they decided that the

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5 Ibid, p. 28
The Aaron Diamond Foundation would divide its giving into three programmatic areas: medical research, minority education, and culture, with total giving weighted forty percent in each of the first two areas and twenty percent in the third. Lastly, hoping to have as big an impact as possible within a short length time, Mr. Diamond determined that the Foundation should spend down its assets within ten years of activation, during which time his business should be liquidated and divided evenly between his heirs and the Foundation. “We both had a feeling that, if we stuck with our priorities and really hit hard with the money, we would probably be able to make a difference,” Mrs. Diamond later observed. Upon their return to New York, the couple met with their attorney, who recorded these directions in a letter drawn up in parallel with Mr. Diamond’s will. A few weeks later, Aaron Diamond died suddenly of a heart attack at the age of 74. Though he enjoyed remarkable health as a young man, Diamond had suffered a heart attack seven years earlier, unable to escape the heart disease that ran in his family.

In the months following Aaron Diamond’s sudden death, the grieving Irene Diamond depended greatly upon several of her husband’s business associates and professional advisors to care for matters of his estate, which was then worth nearly $380 million. In accordance with his will, it was determined that one half of Mr. Diamond’s estate would go to the Aaron Diamond Foundation, and one half would go to a marital trust in favor of Irene Diamond for her personal use during the remainder of her life. The three executors of the estate were also to serve as the trustees of Mrs. Diamond’s trust and as members of the Foundation’s board of directors.

On June 21, 1984, the surviving members of the Foundation’s board met for the first time following Mr. Diamond’s death. At that meeting, Mrs. Diamond, as the new president of the Foundation, reaffirmed the three primary goal areas established by the couple earlier that year, and she noted a particular interest in heart disease. Over the next several months, the board realized that they would need professional help in activating the Foundation. At the October 2, 1984 board meeting, Mrs. Diamond agreed to seek qualified personnel to assist in the organization of the Foundation.

Vincent McGee Becomes Executive Director

With the exception of Mrs. Diamond herself, nobody had a greater influence on the Aaron Diamond Foundation than Vincent McGee, a social justice activist turned philanthropy professional. As a leader in the anti-war movement of the 1960s, McGee burned his draft card and spent a year in federal prison as a conscientious objector, appearing on President Richard Nixon’s infamous “Enemies List.” McGee was later pardoned by President Gerald Ford. Shortly after his release from prison, Mr. and Mrs. W.H. Ferry hired McGee as the executive director of the DJB Foundation, which funded progressive social change and political causes. McGee’s work with the Ferrys had a major influence on his career and on the style of grantmaking and operations that he eventually installed at the Aaron Diamond Foundation. “[The Ferrys] provided for me an intensive period of learning public interest progressive philanthropy. . . It was a streamlined operation. . . There was a sense of responsibility about dealing with money as a trust and to be responsible to that public trust. You didn’t take people for granted,

9 Minutes of Meeting of the Board of Directors of The Aaron Diamond Foundation, Inc., October 2, 1984.
10 Resume of Vincent McGee. See Exhibit 7 for further information on the life of Vincent McGee.
you responded in a clear way. If you had questions, you make them succinct and didn’t make people jump through hoops. And you didn’t keep them waiting.”

McGee later held various positions in the nonprofit sector, including stints with the American Civil Liberties Union, the New World Foundation, and the Field Foundation, and he served as a vice president of City College of the City University of New York (CUNY). As the first executive director of the Hunt Alternatives Fund, McGee helped to develop a grantmaking program focusing on community-based support for innovative social change projects in Dallas, Denver, and New York. He was on the boards of several human rights and peace organizations, serving as the chair of the board of Amnesty International of the U.S.A. in the early 1980s.

In the fall of 1984, after McGee had been introduced by an attorney who knew him from Amnesty International, the Aaron Diamond Foundation board met with him and, on Mrs. Diamond’s motion, offered him a six-month contract to consult on the development of program policies and guidelines for the creation of an organizational plan, and to evaluate funding proposals.

The Struggle for the “Soul” of the Foundation

McGee quickly discovered that he had stepped into a hornets’ nest. In a follow-up meeting with board members other than Mrs. Diamond, it was explained to McGee that the Diamonds “had asked that the Foundation have a focus on New York City and medical research, minority education, and culture, forty percent for the first two things, twenty percent for culture, and that the foundation have a life of ten years.” But, he was told, “of course we’re not going to pay attention to that.”

It was soon obvious to McGee that their intention was to keep Mrs. Diamond on the sidelines while the others called the shots. “They actually said to me at one point, ‘Well, Mrs. Diamond is going to participate from a distance and we’ll keep her happy, but this is going to be a very big foundation and there’s a lot of interesting things that we will do with it.’”

Dazzled by the great fortune placed seemingly at their discretion, these men whom had been entrusted by Aaron Diamond to care for his estate, widow, and Foundation “spent a lot of time figuring out what their commissions were going to be,” explained McGee. As executors, they were entitled by law to two percent of the total estate, each. They also had the right to bill up to two percent in legal and accounting fees. “So it was clear that they were trying to figure out ways to bill up to every nickel that they might get. They were also going to be entitled to trustee fees from the marital trust, and later on, it turned out that they also thought they were going to get fees from the Foundation, just for serving as directors.”

A series of struggles ensued over the next months. Mrs. Diamond, advised by Vincent McGee, sought legal assistance but resisted getting into a long legal battle. She made a settlement with the power and cash-hungry directors, trustees, and board members, forced another executor and trustee to resign, and sent a business manager of Aaron Diamond’s company to jail after discovering the embezzlement of millions of dollars.

These years of turmoil had a major impact on Irene Diamond and the Foundation. “My husband had left eight million dollars to each of these people. And they immediately started

11 Bates, pp. 42-43.
13 Bates, p. 76.
14 Bates, p. 57.
stealing. It was just incredible,” exclaimed Mrs. Diamond. “I learned a great deal. The hard way. I don’t think I slept through a night in maybe three or four years.” To rid herself of the vultures, Mrs. Diamond spent nearly $20 million of her own resources in legal fees and payoffs.

“The struggle was terrible,” observed McGee, noting the anxiety, frustration, and sense of responsibility experienced by Mrs. Diamond. “It delayed us getting a real grants structure going, and it meant that she and I spent a lot of time trying to strategize and worrying with the lawyers about what was going on.” Looking to the positive, McGee added, “It built a very strong bond between Mrs. Diamond and me, which was the basis of our marvelous and strong working relationship.”

LAUNCH OF GRANTMAKING AT THE AARON DIAMOND FOUNDATION

“Oh, it’s her vision and her husband’s vision. I think that those of us who are on the board, she believes can contribute, and indeed, I feel as if we do. But it can never be forgotten that it was essentially her idea and her husband’s idea, and we’re all in one way or another focused on trying to make that a reality. And so she’s the fulcrum.”

—Foundation Board Member

Upon reaching a settlement in May 1986, the Foundation finally began to receive its portion of the assets of Aaron Diamond’s estate. A reconstituted board of directors clarified its governance structure and decision-making procedures, delineated the rights of the board, and extended certain grantmaking authorities to the president. Further, the board decided that no director would receive compensation for his or her service on the board. In a vote of confidence for Vincent McGee, the board authorized a three year agreement retaining his services as executive director. In December, the Aaron Diamond Foundation became one of the first foundations to adopt a socially responsible investment policy, which prevented investments in South Africa under apartheid, tobacco, gaming, the defense industry, and nuclear power. Finally, the board affirmed the Diamonds’ desire to spend down the assets of the Foundation within ten years and set December 31, 1996, as the date of sunset.

Having resolved many of the structural and governance issues, the board turned its attention to articulating policies and making grants in the Foundation’s three program areas while Vincent McGee oversaw the development of a lean staff structure and no-frills operating style. McGee instilled the same sense of openness and responsiveness that he had experienced at the DJB Foundation more than a decade before. McGee preferred to handle all proposals efficiently and to notify applicants promptly of the Foundation’s decisions. He also advocated a hands-on approach to assisting grantees frame their plans, find employees and consultants when needed, connect with complementary efforts, and appeal to other potential donors.

To carry out the work of the Foundation at a modest overhead cost, McGee hired a small staff. This pleased Mrs. Diamond, who came to the office every day to oversee the work of McGee and his staff. “I didn’t want a big staff,” she explained. “I would rather see the money go to the programs than the perks of huge offices and that sort of thing.”

18 Bates, p. 67.
19 Bates, p. 122.
20 Minutes of Meeting of the Board of Directors of The Aaron Diamond Foundation, Inc., December 5, 1986.
McGee engaged several consultants on a part-time basis to advise the Foundation on its program areas, and to review and act upon proposals submitted to the Foundation. McGee supplemented this group with a full-time general program officer to assist in the review of proposals. In addition, McGee hired a handful of full- and part-time office staff, including a grants administrator, a secretary/receptionist, and an office manager/bookkeeper. At times of peak workload, McGee made limited use of temporary clerical staff.

The program staff and board members forged a productive partnership lacking in rigid formality. Staff members reviewed proposals and prepared recommendations for Mrs. Diamond and Vincent McGee to take to the board. The program advisors were on hand during board meetings to answer questions and present policy issues. Board discussions were lively, far reaching and meaningful. Although the board usually trusted the instincts of Mrs. Diamond and the staff, Mrs. Diamond and she encouraged healthy debate. She had little patience for “yes people.”

The planned demise of the Foundation had a significant impact on the grantmaking philosophy and operations of the Foundation. McGee noted that the staff and board had “the ability to look closely at a problem and not be distracted by worries about long-term job security or budding bureaucracy.” 22 In addition, the short time horizon encouraged the Foundation to take calculated risks in hopes of achieving major impact. Never one to shrink from opportunity, Mrs. Diamond exclaimed, “This money is investment money. When Aaron would make an investment in property, he wasn’t sure if it was going to be a success. If it wasn’t a success, you attempted to bring in others or to redevelop it and change it and you moved on.” 23 Applying this analogy to the philanthropic community, McGee commented, “I think that it’s very important for private funders to take risks or make bets on people and groups in the community that want to start things up or get the first thing moving, and if you give modest support and try to find a couple of other people to join you, and then watch the growth of an organization over a year to two, you are not taking unreasonable risk.” 24

As a result of these efforts to develop a lean staff structure, streamlined processes, and entrepreneurial and responsive culture, funds started flowing out of the Foundation’s coffers and into the community at an increasing rate. The Foundation cast a broad net in each of its program areas, making short-term grants. 25 In the fiscal year ending November 30, 1986, the Aaron Diamond Foundation made 84 grants totaling $3,051,726. The largest grant was $457,326, while the smallest was $200. 26 By May 1987, the Foundation office was receiving forty to sixty telephone inquiries each day. 27 The Foundation paid out $8,907,978 in grants that year. 28 The Aaron Diamond Foundation had become the second-largest foundation focused solely on New York City and its residents, ranking behind only the New York Community Trust. 29

Initial Lack of Focus in the Medical Research Portfolio

By the end of 1987, the medical research portfolio had grown to $2,838,967, up from $1,080,826 in 1986. However, it had taken the Foundation more than two years to achieve a

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coherent, focused program in this area. Since Mr. Diamond did not survive to provide specific
guidance on his philanthropic intentions, the initial medical research grants were driven largely
by the myriad interests of Irene Diamond. A staff member explained, “[Mrs. Diamond’s] initial
interest in cardiovascular research was related to the cause of her husband’s death, cardiac
arrhythmia. So she wanted to learn more about that. She also was concerned about cancer, so we
did things on cancer. . . And so we started off with her interests.”

Another area that captured Mrs. Diamond’s attention was AIDS; she closely followed
newspaper reporting on the emerging epidemic. In one of her earliest conversations with Vincent
McGee, Mrs. Diamond suggested, “You know, I think maybe we can make a difference in that
field. Let’s investigate it.” McGee had gained some experience in AIDS programming at the
Hunt Alternatives Fund and he agreed that the area was promising. For McGee, the real question
was, what could a foundation of this size, profile, and time limit do?

Mrs. Diamond and McGee raised this question with original board members at a meeting
in July of 1985. The board members discussed the possibility of support for research in this
field and agreed to seek advice from Dr. Lewis Thomas, a respected physician, biomedical
researcher, and author who was widely recognized as the “dean of infectious diseases
clinicians.” An acquaintance of Mrs. Diamond, Dr. Thomas had served as the dean of the
medical schools of Yale University and New York University and as president of Memorial
Sloan-Kettering Cancer Center in New York City.

With the counsel of Dr. Thomas, who was eventually invited to join the board of
directors, Mrs. Diamond and Vincent McGee carefully considered the Foundation’s strategic
options in AIDS research and identified the most promising areas for involvement. According to
McGee, “There appeared to be an opportunity for a modest private foundation to jumpstart basic
and applied research in the face of lagging public support and institutional hesitancy to come to
grips with an expanding epidemic of historic proportion. In 1985 and 1986, ignorance, fear and
homophobia still blocked concentrated, clear and focused efforts to meet the [AIDS] crisis
nationally. The larger international dimensions were only beginning to be understood.”

In late 1985, the Foundation awarded one-time grants of $150,000 each to Dr. Alvin
Friedman-Kien, to support antiviral treatment study of AIDS patients of at New York University,
and to Dr. Bijan Safai, to develop an immunization program at Memorial Sloan-Kettering. Because
there were very few AIDS-related research efforts underway in New York City at that
time, the Foundation soon thereafter made a rare exception to its geographic limitation. In early
1986, Mrs. Diamond and Vincent McGee traveled to Boston to visit Dr. Max Essex and Dr. Bill
Hazeltine and then made the Foundation’s first major multiyear grants for AIDS research.

Despite these important grants, AIDS was not yet the highest medical research priority
for the Foundation. Other early grants funded research into the cause and possible treatments for
Alzheimer’s disease, hypothermia and hyperthermia among the homeless, and lead poisoning in
children. Without a sharp focus in its medical research portfolio, the Foundation risked diluting
its funding and weakening its impact.

A Chance Meeting Leads to an Important Decision

30 Mariette J. Bates, An American Phenomenon: A Qualitative Study of a Metropolitan Foundation with a Ten Year
31 “Carrying Out a Ten-Year Mission.” Interview of Vincent McGee by Susan Berresford, President, The Ford
33 Interview of Dr. Stephen C. Joseph, July 7, 2005.
While riding the Madison Avenue bus one day early in 1986, McGee bumped into a former colleague from his days at the City University of New York. A leading medical educator, Dr. Alfred Gellhorn helped to establish and served as the first dean of the medical schools at the University of Pennsylvania and at the City University of New York, introducing dimensions of social thinking into the curricula and operations at both institutions.  

On the bus, McGee described the Aaron Diamond Foundation and the board’s efforts to focus the medical research portfolio. “Alfred, we need you!” insisted McGee. When Dr. Gellhorn came to meet Mrs. Diamond shortly afterward, it was clear that the two shared similar values. “There was an immediate meeting of minds. We asked him if he would give us a day a week consulting time,” explained McGee, noting that an agreement was reached quickly. “He was very helpful because he also had a maturity and ability to nudge [Mrs. Diamond] along in areas where she was reluctant in terms of staffing and structuring the Foundation, and thinking about different possibilities and ideas.”

Sharing with Dr. Thomas the responsibility for reviewing the wide variety of medical research proposals the Foundation received, Dr. Gellhorn quickly recognized an opportunity to target the Foundation’s funding. Confident that the search for effective methods of prevention and treatment of AIDS was one of the most important research areas in which the Foundation’s modest funding could make a real difference, he explained to Mrs. Diamond that ongoing research efforts on cardiovascular disease and cancer were heavily funded by federal and philanthropic sources, while funding for research on AIDS was still scarce (see Exhibit 5). Gradually, Dr. Gellhorn was able to persuade Mrs. Diamond and the board to focus their grant making. “I told the board that [research on these other diseases] is what all of the other foundations are funding. Since this foundation is focusing on New York, shouldn’t we concern ourselves with a couple of the most important issues facing the city—AIDS and drug abuse?”

The board quickly achieved consensus. As Vincent McGee reported in the Foundation’s annual report, “AIDS and the compromise of the immune system by HIV is a pressing public health problem for all New Yorkers, poor and affluent alike. . . . The principal means of controlling the AIDS epidemic will emerge from advances in viral molecular biology and basic immunology research.”

**NEW YORK CITY: EPICENTER OF THE AIDS EPIDEMIC**

“We are at the center of an epidemic in North America. It is a long, dark tunnel and we don’t have any light at the end of it.”


In June 1981, the Center for Disease Control reported the first 41 cases of a rare cancer among homosexual men. Soon known as Acquired Immune Deficiency Syndrome (AIDS), the strange new disease raised the specter of a plague before an American public that had assumed that, in the age of modern medicine, epidemics were part of the past. AIDS remained a puzzle to public health officials until investigators from New York’s health department, working closely with CDC epidemiologists to interview infected individuals, discovered that the infection was...
generally passed through sexual contact with an infected partner or sharing of contaminated hypodermic needles between intravenous drug users. Over the next several years, researchers identified the cause of AIDS—the human immunodeficiency virus (HIV)—and developed a test to detect the virus in asymptomatic individuals, though little was known about its basic molecular biology.

Advances in the medical understanding and treatment of the disease came too slowly for New Yorkers terrified by a rate of infection and death toll that surged during the mid 1980s. By June 1987, the city health department had registered more than 10,000 diagnosed cases of AIDS in New York, nearly a third of the country’s total. Public health officials worried that the registered cases were just the tip of the iceberg. Estimates of the total number of individuals infected with HIV ran as high as 400,000. At particularly high risk were the city’s 200,000 intravenous drug users. AIDS had become the number one killer of New York men ages 25 to 44 and women ages 25 to 29, and the fourth leading killer over all age groups. The 3,190 deaths attributed to AIDS in New York in 1987 represented a 20% increase over the previous year. The health department projected that AIDS would claim 40,000 lives in New York by 1991. Services related to AIDS cost the city $400 million in 1987; a panel of experts predicted that this figure could rise to $1 billion by 1991.

Advances in public awareness and understanding came just as slowly as progress on detection and treatment of AIDS. In May and June of 1987, The Gallup Organization conducted a telephone poll of 1,015 New Yorkers over the age of 18 and found that four out of ten respondents were worried about contracting AIDS and that three out of four unmarried respondents claimed that they had changed their sexual habits in fear of the virus. Four in ten New Yorkers incorrectly believed that the AIDS virus could be contracted by donating blood.

Fearful of contracting the virus through casual public contact, seven in ten respondents favored requiring tests of restaurant food preparers and servers, and four of ten supported requiring tests of children entering public schools.

Looking back upon this troubled time, New York City Commissioner of Health Stephen C. Joseph, M.D., wrote, “Those years saw both the full explosion of the epidemic and our gradual understanding of its nature. They were years of stridency and fear, sometimes of violence and terror, as the epidemic moved from its initial concentration among gay men to minority drug users of both sexes. Clashes of policy and politics about disease reporting and contact tracing, antibody testing, education of the public, distribution of needles and syringes to

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45 Clem Richardson, “20% Rise in AIDS Deaths Makes It City’s No. 4 Killer.” Newsday, January 29, 1988, p. 3.
46 Ibid.
drug addicts, and the estimates of the extent of the epidemic itself became daily and troubling arguments.  

A Health Commissioner Engages in Trench Warfare Against AIDS

Appointed by Mayor Edward I. Koch to the position of Commissioner of Health in March 1986, the outspoken Dr. Joseph was no stranger to public health controversies. A pediatrician with interests in clinical and policy aspects of healthcare in the U.S. and abroad, Joseph had served in numerous positions in the public and private sector, gaining respect for his integrity, openness, and down-to-earth style. As the highest-ranking medical professional in the U.S. Agency for International Development, Joseph resigned his position in 1981 to protest the Reagan administration’s vote against a World Health Assembly proposal to limit inappropriate marketing of baby formula in developing counties. Calling the White House position “immoral and unprofessional,” Joseph argued that aggressive advertising endangered the health of infants by luring mothers away from breastfeeding.

In his debut news conference as commissioner, the bearded and telegenic Joseph declared that fighting AIDS would be his top priority. Battling public fears and misinformation on the AIDS crisis, the vocal health commissioner became a familiar face on the nightly news as he took an urgent message of prevention to the public. Steering clear of a “business as usual” mindset, the commissioner and his staff proposed a series of then-controversial measures, such as a needle exchange program for drug addicts, promoting AIDS education in public schools, and distributing free condoms through public clinics and hospitals. To the furor of his socially conservative critics, Joseph unveiled a major ad campaign promoting condom use in May 1987. Unfazed by a barrage of accusations and delighted by the resulting political firestorm, a smiling Commissioner Joseph explained, “The more controversy we have, the more we negotiate as a society what we want to do, and that’s useful. Also, the more attention it gets to the ads, which is exactly what we want. So I hope we have plenty more conflict about it.”

Commissioner Joseph Receives a Call from Vincent McGee

Vincent McGee closely followed media reports on Commissioner Joseph’s aggressive public health campaign and his struggle to gain widespread support. McGee decided to reach out to Joseph after the commissioner spoke at a monthly gathering of business executives and public officials. “There was a report in Newsday a day later that 25 corporate executives who had been at the breakfast were called by Newsday and not one of them would speak about AIDS for attribution. . . . I felt bad about Commissioner Joseph and I called him up and said, ‘Can we talk? Can we get to know each other?’”

Commissioner Joseph responded that he had never heard of the Aaron Diamond Foundation, but he was well aware of the renowned Dr. Thomas. McGee described the Foundation and its programmatic emphasis on medical research and explained that the only restrictions on the funds were that they had to be used on programs that would benefit New York City and that all funds had to be expended in ten years. Seeking an opportunity for collaboration, McGee offered to bring Mrs. Diamond and Dr. Thomas to meet with Joseph to discuss potential projects. Intrigued by the unsolicited offer of support, the commissioner agreed to a meeting.

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At first, Irene Diamond was reluctant to meet with the commissioner. She was averse to involving the Foundation in a partnership with the city, fearing endless red tape and bureaucratic hand-wringing. Gradually, McGee and Dr. Thomas convinced Mrs. Diamond to suspend her prejudgment and accompany them to sit down with the commissioner.

**PROPOSAL FOR A LANDMARK VENTURE**

On that Friday morning in October, McGee and Mrs. Diamond traveled together to the Health Department Building, a “boxy neo-Classic cum Art Deco cube” occupying an entire city block on the border between Chinatown and Little Italy. Ascending a short flight of steps flanked by a pair of massive stone lanterns crowned with eagles, McGee and Mrs. Diamond made their way into the marble lobby, where they found Dr. Lewis engaged in a conversation with an old colleague. After a brief exchange of pleasantries, the three took the elevator to the third-floor offices of the Commissioner of Health. Inside the commissioner’s suite, the three were welcomed and ushered directly into Commissioner Joseph’s cavernous office. Arising from behind his desk, Joseph warmly greeted the trio and asked them to join him at one end of a long conference table.

Prior to the meeting, Commissioner Joseph had given careful thought to what programs would appeal to Mrs. Diamond. He expected that Mrs. Diamond, an alumna of the motion picture industry, would have an interest in funding videotaped public service announcements (PSAs) to raise public awareness and understanding of AIDS and other public health issues. He explained to Mrs. Diamond that he was working with advertising giant Saatchi & Saatchi to develop the PSAs. “Basically, I trotted out my dog-and-pony show,” the commissioner later reflected. “My presuppositions had led me to present the program that I expected she might like.” Soon, however, Joseph sensed Mrs. Diamond’s rising boredom. Before he had a chance to ask for her thoughts, Mrs. Diamond spoke up.

“You know, Dr. Joseph, that is all lovely and interesting. But what I am really interested in is research.”

The commissioner glanced at McGee, who gave a barely perceptible nod. Looking back at Mrs. Diamond, Joseph cleared his throat, leaned back in his chair and, as he would later recount, “reached back into his hip pocket” to pull out an idea that had been germinating in his mind for some months. With no preparation, he began to pitch his concept for a landmark venture in the field of AIDS research.

“Well, Mrs. Diamond, let me share another idea. What we really need is a first-class AIDS research laboratory. We lack a highly secure, centralized research laboratory where we can greatly expand AIDS research efforts already underway in New York, both in the private and public sector,” explained Joseph, insisting, “The situation clearly needs correction.”

**Need for Basic Research into AIDS**

Joseph explained that, shortly after assuming the post of health commissioner, he identified the need for a research effort to learn more about the basic science of AIDS and the HIV virus. While New York-based researchers had done much to advance the medical understanding of how HIV is spread, the city’s research institutes had not made similar progress on exploring the basic biology of the virus. “There is a good deal of high quality research in

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57 Interview with Dr. Stephen Joseph, July 6, 2005.
58 Interview with Dr. Stephen Joseph, July 6, 2005.
59 Ibid.
medical schools, but no cohesive, focused program for looking at AIDS from the perspective of biochemical research.\textsuperscript{60}

The commissioner pointed out that one obstacle to a successful research effort was the level of competition for funding among the existing research programs. He explained that New York University Medical Center and the NYU School of Medicine had offered to lead the effort, but Joseph was afraid that this could lead to turf wars with other local research institutes. Instead, the commissioner hoped to engage a critical mass of scientists and public health professionals from the private and public sectors in a cooperative, multidisciplinary effort that would transcend institutional boundaries and personal ambitions.

Another major barrier to a centralized research effort was a shortage of basic virological and immunological facilities, explained the commissioner. Not comfortable handling HIV in their own laboratories, researchers were forced to send their specimens outside of New York City to obtain more complex virologic and immunologic assays so necessary in their work. The commissioner explained that this effort would require special high-containment laboratory facilities of the type available only at the New York Blood Center, Memorial Sloan-Kettering Institute, Albert Einstein Medical Center, the Public Health Research Institute (PHRI), and perhaps one or two other institutions.\textsuperscript{61}

Of these potential sites, Joseph held the greatest hope for establishing a new laboratory in space occupied by PHRI, a private research institute established by the city in 1942 to provide the Department of Health with direct access to the biomedical research community. Joseph was confident that PHRI could identify sufficient space in the Public Health Laboratories Building without serious disruption of existing programs, which was not the case at the major academic medical centers, whose facilities barely met the needs of ongoing research efforts. Moreover, PHRI was conveniently located close to Bellevue Hospital and the Manhattan Veterans Administration Hospital, both of which had very large populations of AIDS patients.

Answering questions from Dr. Thomas, the commissioner explained that the facility would likely require 15,000 to 20,000 square feet, including 3,000 to 4,000 square feet for the viral containment lab for safe handling and storage of the live virus. The facility would require sufficient space for microbiology, biochemistry, and other auxiliary laboratories, as well as meeting rooms and office space. With room for 40-50 researchers, including its own staff and outside investigators, this would probably be the largest private research laboratory in the world devoted solely to AIDS. Joseph hoped that a cutting-edge research facility would not only lead to real progress in the struggle to understand AIDS, but it would also attract the very best researchers in the world.

A Request for Support

The commissioner stated that the city could provide space at the Public Health Research Institute rent free for twenty years, along with $3.4 million for renovations. He estimated that the effort would require an additional $2 to $3 million, plus a little over $1 million in annual operating expenses, for a total of $5 to $6 million over the first three to four years.

Commissioner Joseph admitted that he had been looking for donors for this project for almost a year, but nobody was willing to take the lead on this. He explained that most of the foundations that he had spoken to were not interested in basic research; they were more likely to support programs in prevention and treatment. Joseph believed that if the Aaron Diamond Foundation would agree to play a lead role, other funders would be willing to step up and join the effort.

\textsuperscript{60} Ibid.

“Mrs. Diamond, would the Aaron Diamond Foundation be willing to assemble and coordinate a group of ten to fifteen foundations to partner with the city in establishing a cutting-edge AIDS research laboratory?”

Intrigued by the idea but dreading interminable negotiations, Mrs. Diamond responded, “Well, Dr. Joseph, that would be quite a challenge, indeed. Let us think about it. Vinny will get back to you.”

A DECISION FOR THE AARON DIAMOND FOUNDATION

While waiting for Mrs. Diamond’s car after the meeting with the commissioner, Vincent McGee reflected on the commissioner’s request to coordinate and fund a centralized, collaborative AIDS research effort. The Foundation’s earlier grants had focused on building AIDS research efforts in existing institutions. He applauded the commissioner’s call for a multidisciplinary, cross-sectoral approach and he believed that this would require the creation of an entirely new institution, free from the competition that characterized the existing players. McGee wondered how he could surmount Mrs. Diamond’s trepidation over partnering with the city and collaborating with other foundations, an effort that would require patience of this strong-willed dynamo so unaccustomed to dragging her heels.

“Let’s go, Vinny!” Mrs. Diamond interrupted McGee’s reflection as the car pulled to the curb. McGee held the back door for Dr. Lewis and Mrs. Diamond and then took a seat in the front, directing the driver to take them uptown to the Foundation’s offices in Rockefeller Center. As the car pulled away, the three sat quietly, taking in what had just transpired.

Was funding an AIDS research laboratory good fit for the Aaron Diamond Foundation? Should the Foundation attempt to convene a consortium of foundations or not? If so, what were the obstacles that had to be overcome? What were the opportunities and risks of the multiple-foundation collaborative approach? Were there other strategies that the Foundation should consider? What size grant should the Foundation consider?

Mrs. Diamond was the first to break the silence. She leaned toward the front seat, tapped McGee on the shoulder and declared, “If we do this, it will take forever!”

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EXHIBIT 1

Statement of Purpose of the Aaron Diamond Foundation, Inc.

The purposes for which the corporation is to be formed are as follows:

(a) To acquire by bequest, devise, grant, gift, purchase, exchange, lease, transfer, judicial order or decree, or otherwise, for any of its objects and purposes as hereinafter set forth, any property—real, personal or mixed.

(b) Annually to use, apply, dispense, and distribute such part of the principal as the directors may determine, and all of the income of any funds or property that the corporation may from time to time possess, to such corporations, trusts or community chests, funds, or foundations, created or organized in the United States or in any possession thereof, or under the law of the United States or of any State or territory or of any possession of the United States, organized and operated exclusively for religious, charitable, scientific, literary or educational purposes, or for the prevention of cruelty to children or animals, no part of the net earnings of which inures to the benefit of any private shareholder or individual, and no substantial part of the activities of which is carrying on propaganda or otherwise attempting to influence legislation.

EXHIBIT 2

Application Guidelines of the Aaron Diamond Foundation, Inc.

The Aaron Diamond Foundation's grantmaking concentrates in New York City in three program areas:

- **Medical research:** AIDS; drug abuse; immigrant health; young researchers.
- **Minority education:** The improvement of the academic performance, educational achievement and resulting life opportunities of minority and disadvantaged students primarily in New York City's public school systems.
- **Culture:** *The arts, human rights and civil liberties.*

A letter of request should be accompanied by two copies of a short proposal giving a history of the project, outlining goals to be achieved, methods, budget and schedule for implementation. (Medical research applications should be in triplicate and include a short, non-academic description of the project, copies of relevant publications, and the vita of the principal investigator.) Please also include one copy of the applicant's most recent annual financial statement, a list of board members and current grants, and a copy of the current tax determination letter from the Internal Revenue Service certifying status as a public charity or the equivalent.

The Foundation will respond to each applicant in writing and may request additional materials or a meeting. There are no deadlines for submission of requests. The Board of the Foundation meets regularly throughout the year.

The Foundation does not intend to fund building programs, endowments, or other capital expenditures, to make grants to individuals or for production costs or to make loans. Grants will be made only to public charities as defined by the United States Internal Revenue Service.

Initial contact should be addressed in writing to:

Vincent McGee, Executive Director  
The Aaron Diamond Foundation  
1270 Avenue of the Americas, Suite 26XX  
New York, New York 10020  
(212) 757-XXXX

EXHIBIT 3

Aaron Diamond Foundation Grants for Medical Research, 1986-1987

<table>
<thead>
<tr>
<th>AIDS</th>
<th>Basic Research</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dana-Farber Cancer Institute</td>
<td>Support for AIDS research on the role of glycoproteins in the course of the AIDS virus, William A. Haseltine, Ph.D., principal investigator.</td>
</tr>
<tr>
<td>Harvard School of Public Health</td>
<td>Support for an ongoing investigation into the development of a less virulent strain of the AIDS virus, for use as a potential “natural” vaccine, Myron Essex, D.V.M, Ph.D., principal investigator.</td>
</tr>
<tr>
<td>Public Health Research Institute of the City of New York</td>
<td>Support for a study on bacterial systems with regard to implications for one AIDS virus, Karl Drlica, Ph.D., Ellen Murphy, Ph.D., Abraham Pinter, Ph.D., principal investigators.</td>
</tr>
<tr>
<td>Rockefeller University</td>
<td>Support for a study on the immunobiology of AIDS, Zanvil Cohn, M.D., principal investigator.</td>
</tr>
</tbody>
</table>

Clinical Research

Albert Einstein College of Medicine of Yeshiva University
Support for a study on the transmission of the AIDS virus infection in pregnant women, newborns and
The Aaron Diamond Foundation: AIDS Research in New York City

1986 | 1987
--- | ---
$50,000 | $50,000

Montefiore Medical Center
11 East 210th Street
Bronx, NY 10467

Support for the study of infants born to AIDS-infected mothers, and intravenous drug users, both at high risk for developing the AIDS virus, to try to determine risk factors, Gerald Friedland, M.D., principal investigator. $125,000 $125,000

The AIDS clinic at Montefiore Hospital has a large population of IV drug abusers with a significant number of pregnant young women. The clinic's research is designed to learn about the transmission of the infection from the mother to her baby before or during birth. Thus far it has been found that babies born to mothers with a positive blood test for HIV also test positive, but a year later half of these babies have negative blood tests and are normal in their development. Dr. Friedland's earlier research into the epidemiology of AIDS among IV drug users helped show the importance of heterosexual transmission of the HIV infection from male addicts to their female partners.

The New York Blood Center
Kimball Research Institute
310 East 67th Street
New York, NY 10021

Support for an extensive research effort into oncogenes and other molecular markers in colon cancer, I. Bernard Weinstein, M.D., director. $248,000

The Institute for Cancer Research at the College of Physicians & Surgeons has marshalled a multidisciplinary team of investigators to concentrate on cancer of the colon, which is second only to lung cancer in frequency in the U.S. The Foundation is supporting a portion of the comprehensive research program dealing with the basic mechanisms whereby normal cells lining the colon convert to cancer cells.

Clinical Research

Cancer Basic Research

Columbia University College of Physicians & Surgeons
Comprehensive Cancer Center
710 West 168th Street
New York, NY 10032

Support for an extensive research effort into oncogenes and other molecular markers in colon cancer, I. Bernard Weinstein, M.D., director. $248,000
The Aaron Diamond Foundation: AIDS Research in New York City

1986  1987

Long Island Jewish Medical Center
Division of Hematology-Oncology
New Hyde Park, NY 11042

Support for a five-year trial of a variety of chemicals on chronic lymphocytic leukemia cells, in an effort to determine if arrested development can be overcome, Kanti Rai, M.D., principal investigator. $157,337

Chronic lymphatic leukemia is, as the name implies, the excess production of lymphocytes which appear in the blood. Normal lymphocytes are of critical importance in the production of antibodies, but in chronic lymphatic leukemia the lymphocytes fail to fulfill this function. The Long Island Jewish Medical Center research is designed to determine why the blood cells do not produce antibodies with the ultimate objective of learning how to overcome the defect.

Memorial Sloan-Kettering Cancer Center
1275 York Avenue
New York, NY 10021

Support for the development of an effective vaccine against melanoma, based on research on the immune response of persons with the disease, Lloyd J. Old, M.D., principal investigator. $327,790

Malignant melanoma of the skin can be a rapidly advancing, aggressive tumor that invades blood vessels as well as lymph channels and thereby metastasizes widely through the body. It also has long been known to elicit antibodies by the host immune system, and in rare instances, these antibodies have slowed the progress of the disease. The team at the Memorial Sloan-Kettering Cancer Center proposes to identify the specific proteins in the melanoma tumor that stimulate the production of effective antibodies and ultimately utilize this knowledge to develop an anti-melanoma vaccine.

CARDIOVASCULAR DISEASE

Basic Research

Columbia University College of Physicians & Surgeons
Department of Medicine
630 West 168th Street
New York, NY 10032

Support for an investigation into the role of the lipoprotein in metabolism, working toward the prevention and cure of atherosclerosis, Arthur Magun, M.D., principal investigator. $40,000

Dr. Magun is investigating the intimate pathways of complex molecules, including cholesterol, through the epithelium of the intestinal tract. This difficult research, if successful, will increase understanding of the dietary control of excess cholesterol absorption, which, in turn, will be important in the prevention of atherosclerosis.

State University of New York at Stony Brook
Department of Medicine
Health Science Center
Stony Brook, NY 11794-8160

Support for a training center for young researchers in the cardiovascular field, as well as support for the work of more senior scientists engaged in research on cardiovascular disease, Robert Olson, M.D., Ph.D., director. $213,500 $141,149

(The Foundation began its support with a $50,000 grant in 1985.)

SUB-TOTAL – CARDOVASCULAR DISEASE $253,500 $141,149

MISCELLANEOUS

Bellevue Hospital Center
Emergency Medical Services
First Avenue and 27th Street
New York, NY 10016

Support for research concerning the pathogenesis and management of hypothermia and hyperthermia as seen in patients in the Bellevue Hospital emergency ward, Lewis Goldfrank, M.D., principal investigator. $210,050

This project concerns the effects of extreme temperatures on the indigent and elderly population. Work to date has shown that patients with mild hypothermia comprise a separate clinical group from patients with severe hypothermia. Research calls for the development of a more accurate definition of the clinical picture for severe hypothermia, including sociologic, metabolic, and laboratory parameters. Research into hyperthermia risk factors will also be performed.
Columbia University College of Physicians & Surgeons
Neurological Institute
710 West 168th Street
New York, NY 10032

Support for the start-up phase of several projects on the basic biology of Alzheimer's disease, under the direction of Lewis Rowland, M.D. $427,326  $302,340

Drs. Joseph Herbert and Eric Schon have isolated the gene that leads to the production of the particular substance in the brain characteristic of Alzheimer's disease. A new and unexpected finding is that the gene in Alzheimer's patients leads to the production of an enzyme inhibitor of proteins, which characterize the pathological lesion of Alzheimer's.

Drs. Norman Latov and Arthur Hays have been screening patients with Alzheimer's and other neurological diseases for the presence of autoantibodies that bind to neural tissue. They have found such autoantibodies, including ones that bind to the protein elements of the major pathological lesion of Alzheimer's.

Montefiore Medical Center
Lead Poisoning Prevention Project
111 East 210th Street
Bronx, NY 10467

Ongoing support for this pioneering work on lead poisoning prevention, including community education, treatment and research, John Rosen, M.D., director. Lead poisoning, particularly of inner city children exposed to lead-laden fumes, lead-containing paint and other sources of lead, has consequences of serious proportions. (The Foundation's support for the Lead Poisoning Prevention Project began with a $25,000 grant in 1985.)

Special grant for the purchase of a mobile X-ray fluorescence unit. The multidisciplinary staff at Montefiore will assess the efficacy of medication in removing lead from the body. Since lead accumulates in bone, Dr. Rosen and colleagues have developed an X-ray fluorescence technique that assesses the deposit and the success of the drug in eliminating it. $129,500

Public Health Research Institute of the City of New York
455 First Avenue
New York, NY 10016

Support for research on the variability of genetic information in staphylococcus aureus, Richard P. Novick, M.D., principal investigator. $235,096

"Staph" infections are frequent and serious in hospital populations. When penicillin was first introduced these infections were dramatically controlled but, with time, strains resistant to penicillin and other antibiotics have become a real threat. The present research is directed to understanding the mechanism of resistance and overcoming it.

\[
\begin{array}{cc}
\text{SUB-TOTAL - MISCELLANEOUS} & $452,326  \\
\text{TOTAL MEDICAL RESEARCH} & $1,080,826 \\
\text{TOTAL MEDICAL RESEARCH} & $2,838,967 \\
\end{array}
\]

EXHIBIT 4

The Aaron Diamond Foundation, Inc. Financial Statements for 1987

Statements of Assets and Liabilities

<table>
<thead>
<tr>
<th>ASSETS</th>
<th>December 31, 1987</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents:</td>
<td></td>
</tr>
<tr>
<td>Demand deposits</td>
<td>$61,515</td>
</tr>
<tr>
<td>Interest bearing deposits</td>
<td>18,534</td>
</tr>
<tr>
<td>Money market funds:</td>
<td></td>
</tr>
<tr>
<td>DBL Government Securities Fund</td>
<td>5,896,646</td>
</tr>
<tr>
<td>Pierpont Taxable Fund</td>
<td>136,384</td>
</tr>
<tr>
<td>Total</td>
<td>6,113,079</td>
</tr>
<tr>
<td>Current receivables</td>
<td>109,567</td>
</tr>
<tr>
<td>Investments:</td>
<td></td>
</tr>
<tr>
<td>Marketable securities at fair value:</td>
<td></td>
</tr>
<tr>
<td>Commercial paper (income tax basis-$27,727,475)</td>
<td>27,768,592</td>
</tr>
<tr>
<td>U.S. Government and government agency obligations (income tax basis-$31,843,813)</td>
<td>32,253,575</td>
</tr>
<tr>
<td>Fixed income securities (income tax basis-$24,462,523)</td>
<td>24,206,904</td>
</tr>
<tr>
<td>Equity securities (income tax basis-$8,101,303)</td>
<td>7,454,750</td>
</tr>
<tr>
<td>Dreyfus Index Fund (income tax basis-$2,032,690)</td>
<td>1,636,640</td>
</tr>
<tr>
<td>12.25% mortgage receivable</td>
<td>7,500,000</td>
</tr>
<tr>
<td>Notes and claims receivable</td>
<td>2,847,244</td>
</tr>
<tr>
<td>Interests in real estate and real estate-related partnerships at adjusted Estate value</td>
<td>17,059,102</td>
</tr>
<tr>
<td>Interests in affiliated corporations at income tax basis</td>
<td>920,990</td>
</tr>
<tr>
<td>Property at 981 Third Avenue, New York City, office equipment and improvements (less accumulated depreciation) and other assets</td>
<td>325,930</td>
</tr>
<tr>
<td>TOTAL</td>
<td>$128,196,373</td>
</tr>
</tbody>
</table>

LIABILITIES AND FUND BALANCE

| Liabilities:                                |                   |
| Due to stockbrokers                         | $3,506,739        |
| Estimated amounts due in connection with sales of partnership interests | 485,774           |
| Total liabilities                           | 3,992,513         |
| Fund balance                                | 124,203,860       |
| TOTAL                                       | $128,196,373      |

### Statements of Receipts, Income, Expenditures and Changes in Fund Balance

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Receipts-distributions from the estate of Aaron Diamond</td>
<td>$5,434,037</td>
</tr>
<tr>
<td>Income:</td>
<td></td>
</tr>
<tr>
<td>Interest and dividends</td>
<td>$9,068,694</td>
</tr>
<tr>
<td>Net rental income-981 Third Avenue property</td>
<td>$6,983</td>
</tr>
<tr>
<td>Realized gains (losses) on sales of investments</td>
<td>$530,485</td>
</tr>
<tr>
<td>Distributive share of partnership (losses) <em>(Note)</em></td>
<td>$(8,788,196)</td>
</tr>
<tr>
<td>Increase (decrease) in net unrealized appreciation of securities</td>
<td>$(3,535,165)</td>
</tr>
<tr>
<td>Total</td>
<td>$2,716,838</td>
</tr>
<tr>
<td>Expenditures:</td>
<td></td>
</tr>
<tr>
<td>Grants paid</td>
<td>$8,907,978</td>
</tr>
<tr>
<td>Administration (including $893,000 of professional fees substantially</td>
<td>$1,454,600</td>
</tr>
<tr>
<td>in connection with receipt and administration of assets as a beneficiary</td>
<td></td>
</tr>
<tr>
<td>of the estate of Aaron Diamond)</td>
<td></td>
</tr>
<tr>
<td>Federal excise tax</td>
<td>$295,709</td>
</tr>
<tr>
<td>Total</td>
<td>$10,658,287</td>
</tr>
<tr>
<td>Excess of expenditures over receipts and income</td>
<td>$(7,941,449)</td>
</tr>
<tr>
<td>Fund balance—January 1</td>
<td>$132,145,309</td>
</tr>
<tr>
<td><strong>FUND BALANCE—December 31</strong></td>
<td><strong>$124,203,860</strong></td>
</tr>
</tbody>
</table>

*(NOTE) Distributive Shares of Partnership (Losses):*

The Foundation's distributive share of partnership losses included approximately $8,400,000 representing the Foundation's share of both partnership depreciation and depreciation on the additional basis attributable to the death of Aaron Diamond.

Cash distributions by the partnership to the Foundation totaled $1,641,000. Cash contributions to partnerships by the Foundation totaled $212,000.

## EXHIBIT 5

New York Area Foundations Funding Medical Research and AIDS

<table>
<thead>
<tr>
<th>Foundation</th>
<th>Assets</th>
<th>Total Grant Expenditures</th>
<th># of Grants</th>
<th>High</th>
<th>Low</th>
<th>Average</th>
<th>FYE*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joseph Alexander Foundation</td>
<td>$12,146,046</td>
<td>$538,500</td>
<td>63</td>
<td>$50,000</td>
<td>$1,000</td>
<td>n/a**</td>
<td>10/31/88</td>
</tr>
<tr>
<td>Aaron Diamond Foundation</td>
<td>$119,311,770</td>
<td>$18,625,812</td>
<td>255</td>
<td>$500,000</td>
<td>$500</td>
<td>$10,000-$100,000</td>
<td>12/31/88</td>
</tr>
<tr>
<td>The Hearst Foundation, Inc.</td>
<td>$117,832,000</td>
<td>$5,157,000</td>
<td>276</td>
<td>$100,000</td>
<td>$5,000</td>
<td>$10,000-$25,000</td>
<td>12/31/88</td>
</tr>
<tr>
<td>William Randolph Hearst Foundation</td>
<td>$259,556,000</td>
<td>$8,654,000</td>
<td>271</td>
<td>$1,000,000</td>
<td>$6,000</td>
<td>$15,000-$35,000</td>
<td>12/31/88</td>
</tr>
<tr>
<td>The Robert Wood Johnson Foundation (Princeton, NJ)</td>
<td>$2,054,534,000</td>
<td>$87,552,000</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>12/31/88</td>
</tr>
<tr>
<td>Metropolitan Life Foundation</td>
<td>$97,378,807</td>
<td>$7,169,456</td>
<td>840</td>
<td>$675,000</td>
<td>$100</td>
<td>$1,000-$25,000</td>
<td>12/31/88</td>
</tr>
<tr>
<td>The Ambrose Monell Foundation</td>
<td>$94,441,256</td>
<td>$3,688,500</td>
<td>104</td>
<td>$250,000</td>
<td>$1,000</td>
<td>$5,000-$100,000</td>
<td>12/31/86</td>
</tr>
<tr>
<td>MONY</td>
<td>$478,723</td>
<td>$380,145</td>
<td>84</td>
<td>$25,000</td>
<td>$25</td>
<td>n/a</td>
<td>12/31/87</td>
</tr>
</tbody>
</table>

* “FYE” = fiscal year ending (figures are based on one fiscal year for each foundation)

** “n/a” = not available


**NOTE:** The 11th edition of *The Foundation Directory* lists only one foundation in the greater New York area with a declared programmatic emphasis on AIDS in 1985-1986: The Robert Wood Johnson Foundation in Princeton, New Jersey. The following edition, noted above, identified only 20 foundations with an emphasis on AIDS out of a total of 1219 foundations registered in state of New York. Of the 153 foundations that declared medical research as an emphasis, only 10 had a focus on AIDS; only 7 of these were located in the New York City area, listed above.

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EXHIBIT 6

Officers, Board, and Staff of the Aaron Diamond Foundation
As of October 2, 1987

Officers
Irene Diamond, President
Samuel Maitland, Vice President
Peter Kimmelman, Treasurer
Charles L. Mandelstam, Secretary
Vincent McGee, Executive Director

Directors
Irene Diamond
Peggy Dulany
Manny Isidor
Peter Kimmelman
Samuel Maitland
Charles L. Mandelstam
Vincent McGee (ex officio)
Jean Diamond Sargent
Lewis Thomas

Staff
Vincent McGee, Executive Director
Kate Chieco, Program Officer
Ann Gael, Grant Administrator
Elena Wong, Bookkeeper
Isabella Dane, Assistant to the President and Executive Director
Zenaida Isidro, Financial Officer
Auristela Martinez, Support Staff
Laurent Weichberger, Support Staff

Advisors and Consultants
Norm Fruchter, Minority Education
Alfred Gellhorn, M.D., Medical Research
Lewis Thomas, M.D., Medical Research

EXHIBIT 7

Background Information on Vincent McGee, Executive Director

With the exception of Mrs. Diamond herself, nobody had a greater influence on the Aaron Diamond Foundation than Vincent McGee, a social justice activist turned philanthropy professional. As is often the case for foundation executives, McGee came to the world of philanthropy through a serendipitous path.

As a young man, McGee left the Roman Catholic seminary in search of a broader experience. Working in a law firm to pay for tuition and living expenses, McGee enrolled in night classes at Hunter College of the City University of New York. After two years, McGee transferred to the University of Rochester, studying at night while working a day job as a quality control inspector at Kodak. McGee arrived in Rochester, New York just after the race riots of 1964, a turbulent time. Meeting likeminded social activists and political operatives, McGee participated in the Johnson-Goldwater presidential election. He would later recount, “All of that was a kind of pressure cooker experience. The harsh reality of the workaday world at Kodak, studying fine art and ancient history and classical languages and history of religion and stuff in the day, as the Vietnam war heated up. Which led me to a decision to be a very active antiwar protestor.”

While attending the April 15, 1967 march from Central Park in New York to hear Dr. Martin Luther King Jr. speak at a rally near the United Nations, McGee publicly burned one half of his draft card and mailed the other half with a letter to President Johnson.

McGee graduated from Rochester and went to Union Theological Seminary to resume studies for the priesthood, but became more and more determined to stop the war. Soon McGee was arrested, tried, and convicted for conscientious objection to the Selective Service System and sentenced to a year in prison. During appeals up to the U.S. Supreme Court, he directed Business Executives Move for Vietnam Peace and New National Priorities, a group of 6,000 business executives opposed to the war. In this role, McGee gained valuable experience as a go-between with potential donors and projects.

Upon losing his appeal in the Supreme Court, McGee was sent to the minimum-security federal prison in Allenwood, Pennsylvania. McGee was adopted as a prisoner of conscience by Amnesty International and later appeared on President Nixon’s infamous “Enemies List.”

As the director of the education program at Allenwood, McGee and his fellow volunteers provided inmates with classes in high school equivalency, English as a second language, remedial reading, and with confidential case work. McGee would later credit this experience for preparing for work in philanthropy. “Allenwood was the equivalent of a graduate degree in learning how things work. I couldn’t take anything I’d learned in the past for granted. The experience gave me a good context for work with nonprofits. One danger of foundation work is that people get arrogant and tell the grantees what they should be doing. Foundation people need to be good listeners. You need to keep reminding yourself that you’re not the expert.”

McGee was released in June of 1972 and was pardoned by President Gerald Ford on November 1, 1975.

Shortly after his release from prison, seeking to raise money for trip to Hanoi to bring back some prisoners of war, McGee contacted the widow of a wealthy stockbroker who had been active in the association of antiwar business executives. Carol Underwood Bernstein and her husband Daniel J. Bernstein were well known for funding progressive social change, political causes and other controversial areas often ignored by other foundations such as draft resisters, military deserters, prisoners and ex-convicts. The couple purchased full-page advertisements in The New York Times to protest the war in Vietnam. Upon Mr. Bernstein’s death of leukemia in 1970, his assets passed to the DJB Foundation, which he had created in 1948 to hold the assets of his father’s estate. Mrs. Bernstein continued to operate the foundation after Mr. Bernstein passed away.

In response to McGee’s request, Mrs. Bernstein wrote a letter that summarized the challenge of effective philanthropy. “Dear Vinny: Here’s a check for $3,000. I am glad to send it. There are three things about this money business: asking, saying ‘no,’ or saying ‘yes.’ The first two are hard, but the third is easy when the purpose is good and the funds are there.”

A short time later, Mrs. Bernstein married W.H. Ferry, a peace activist and social critic who had worked for several major foundations, including the Ford Foundation. The philanthropic couple hired McGee to work half time as the director of the DJB Foundation and to assist them in their personal giving. McGee’s work with the Ferrys had a major influence on his career and on the eventual style of grantmaking and operations that he installed at the Aaron Diamond Foundation. “They provided for me an intensive period of learning public interest progressive philanthropy. They were responsive to the specific needs of people. So I learned with them a fair amount of principles of philanthropy. It was a streamlined operation. . . . If we decided, or they decided, they didn’t want to do something, or it was out of their area of interest, a reject note or letter went out within a day or two of receipt of the material. . . . If a foundation grant needed to be made quickly, we’d get [the other board members] on the telephone or send them the material, and make the grant within a week of receiving stuff. So there was a sense of responsibility about dealing with money as a trust and to be responsible to that public trust. You didn’t take people for granted, you responded in a clear way. If you had questions, you make them succinct and didn’t make people jump through hoops. And you didn’t keep them waiting.”

After helping the Ferrys spend down the assets of the DJB Foundation within four years, McGee held a variety of positions in the nonprofit sector. He worked as a fundraising for the American Civil Liberties Union, consulted to the New World Foundation, and assisted the President of CBS to organize a fundraising campaign for the Reporters’ Committee for Freedom of the Press and to organize a more effective corporate philanthropy program at CBS. In 1977, McGee became the first nonacademic to serve as Vice President for Development and Planning at City College of the City University of New York (CUNY), where he oversaw the completion of a $25 million development campaign and built relations with many foundation executives.

In 1980, McGee met Helen and Swanee Hunt, daughters of the late H.L. Hunt, Texas businessman and oil tycoon. The sisters asked McGee to work with them half time to help them learn about philanthropy and to develop and implement a thoughtful giving program. Over the next five years, McGee helped launch and manage the Hunt Alternatives Fund, a family foundation focusing on community-based support for innovative social change projects in Dallas, Denver, and New York. McGee served as the first executive director of the foundation.

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67 Ibid.
The part-time arrangement with the Hunts allowed McGee to continue to pursue his interest in human rights advocacy. McGee volunteered extensively with several human rights and peace organizations, serving in several important positions, including chair of the board of directors of Amnesty International of the U.S.A. In the fall of 1984, a fellow Amnesty board member whose law firm represented the Aaron Diamond Foundation introduced McGee to a board member of the Foundation, who then invited McGee to meet Irene Diamond.

On November 6, 1984, Vincent McGee found himself at a board meeting of the Aaron Diamond Foundation to answer questions about his experience and about how he could advise the board. At the conclusion of the interview, the board members offered McGee a six-month, part-time contract to consult to board on the development of program policies and guidelines for the creation of an organizational plan, and to evaluate funding proposals received. Ready to scale back his involvement in the Hunt Alternatives Fund, which by that time had grown to a large and stable operation, McGee agreed to take on the challenge.69

Early in 1985, Vincent McGee was appointed full-time executive director of the Aaron Diamond Foundation and served until it finished its pay out at the end of 1996.

Sources: Interviews with Vincent McGee, June 30, 2005 and February 2, 2006; Resume of Vincent McGee, 2005; other sources as noted.

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69 Minutes of Meeting of the Board of Directors of The Aaron Diamond Foundation, Inc., November 6, 1984.
EXHIBIT 8

Brief Description of Selected Board Members and Staff

**Peggy Dulany**—Elected to the board in August 1986. Education expert and founder of The Synergos Institute. Born Margaret Dulany Rockefeller, Ms. Dulany stopped using her famous surname upon graduating from Radcliffe in the 1960s, her antiwar activist stance at odds with the politics of her father, David Rockefeller.\(^{70}\) Carrying on the family’s philanthropic traditions, Dulany also served on the boards of the Rockefeller Foundation and Rockefeller Family Fund, Inc.

**Peter Kimmelman**—Elected the board in May 1986 and became a trustee of Mrs. Diamond’s marital trust. A financial advisor, Kimmelman had been a friend of Aaron Diamond, who was the very first client of Kimmelman’s asset management firm.

**Dr. Lewis Thomas**—Retained as a program advisor on medical research in November 1985 and elected to the board in c. 1986. Dr. Thomas was a renowned biomedical researcher, philosopher, and prize-winning author who combined scientific scholarship with clinical expertise.\(^{71}\) Born to a family physician father and nurse mother, Thomas entered Princeton at the age of fifteen and afterward attended Harvard Medical School. In a distinguished career of research, teaching, and administration, Dr. Thomas served as the dean of the medical schools of Yale University and New York University as well as president of Sloan-Kettering Institute. In 1982, Thomas was dubbed “the father of modern immunology and experimental pathology” at a symposium held in his honor.\(^{72}\) Dr. Thomas was best known to the public for his essays and poems published in a regular column in the *New England Journal of Medicine* from 1971 to 1980. He won a National Book Award for a collection of these essays, published in 1974 under the title *The Lives of a Cell: Notes of a Biology Watcher*.\(^{73}\)

**Dr. Alfred Gellhorn**—Retained as a program advisor on medical research in early 1986. A leading medical educator, Dr. Alfred Gellhorn helped to establish and served as the first dean of the medical schools at the University of Pennsylvania and at the City University of New York, introducing dimensions of social thinking into the curricula and operations at both institutions.\(^{74}\) Deeply committed to minority education, Dr. Gellhorn had enlisted Vincent McGee’s help at City University in early efforts to provide greater opportunities for young people interested in careers in medicine and science. Upon considering McGee’s request to assist the Aaron Diamond Foundation after a chance meeting, Gellhorn agreed, on the condition that the foundation support his continuing high school enrichment program at City University, by that time known as the

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\(^{71}\) Minutes of Meeting of the Board of Directors of the Aaron Diamond Foundation, Inc., November 29, 1985


\(^{74}\) *University of Pennsylvania Commencement Program: Honorary Degree Citations*, 1993, p. 12.
“Gateway to Higher Education” program, whose board Gellhorn chaired. Dr. Gellhorn and his wife became close friends of Irene Diamond and he was later elected to the Foundation’s board of directors.


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76 Interview with Dr. Alfred Gellhorn, July 6, 2005.