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Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public

Information about Form 990 and its instructions is at [www.irs.gov/form990](#)

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury

Internal Revenue Service

A For the 2017 calendar year, or tax year beginning 07-01-2017 , and ending 06-30-2018

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

AmeriCares Foundation Inc

% RICHARD K TROWBRIDGE

Doing business as

Number and street (or P O box if mail is not delivered to street address)

88 HAMILTON AVENUE

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

STAMFORD, CT 069023111

F Name and address of principal officer

Michael J nyenhuis

88 HAMILTON AVENUE

STAMFORD, CT 06902

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

D Employer identification number

06-1008595

E Telephone number

(203) 658-9500

G Gross receipts \$

1,054,351,497

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) ( ) ◀(insert no ) ☐ 4947(a)(1) or ☐ 527

J Website: ▶

WWW.AMERICARES.ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation

1979

M State of legal domicile

CT

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

AMERICARES IS A health-focused relief & development organization that responds to people affected by poverty or disaster with life-changing health programs, medicine & supplies

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, line 34

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d )

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3 )

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶11,214,559

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Prior Year

2,379,130,027

789,734

604,794

-90,757

2,380,433,798

Current Year

1,042,283,235

952,079

1,781,210

-306,862

1,044,709,662

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

\*\*\*\*\*

Signature of officer

RICHARD K TROWBRIDGE JR cfo & senior vp

Type or print name and title

2019-02-22

Date

Paid Preparer Use Only

Print/Type preparer's name

Scott Thompsonett

Preparer's signature

Scott Thompsonett

Date

Check ☐ if self-employed

PTIN

P00741490

Firm's name

▶ GRANT THORNTON LLP

Firm's EIN ▶

Firm's address ▶ 757 THIRD AVENUE 3RD FLOOR

NEW YORK, NY 100172013

Phone no (212) 599-0100

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2017)

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

As the number-one nonprofit provider of donated medicines and supplies, AmeriCares reached 97 countries in FY18 with medicine, medical supplies, support and technical assistance valued at nearly \$1.3 billion through our Access to Medicine, Emergency, Clinical Services and Community Health Programs. AmeriCares reaches an unrivaled network of over 4,000 local, national and international health care institutions and facilities that include hospitals, clinics, local health centers, ministries of health and nonprofit health care networks and providers. Working through this network, AmeriCares is focused on the following program areas - Increasing access to critical medicine and medical supplies, - Helping communities prepare for, respond to and recover from disasters, and - Improving and expanding clinical services and promoting good health and disease prevention in vulnerable communities. In each program area, we work to address five key health themes: women's and children's health, infecti

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

<b>4a</b>	(Code )	(Expenses \$ 1,211,251,193	including grants of \$ 1,172,349,577	(Revenue \$ 0 )
See Additional Data				

<b>4b</b>	(Code )	(Expenses \$ 91,257,622	including grants of \$ 82,915,083	(Revenue \$ 58,000 )
See Additional Data				






















<b>4c</b>	(Code )	(Expenses \$ 6,604,573	including grants of \$ 1,113,645	(Revenue \$ 894,079 )
See Additional Data				

**4d** Other program services (Describe in Schedule O )

(Expenses \$	including grants of \$	(Revenue \$
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<b>4e</b>	<b>Total program service expenses</b>	<b>1,309,113,388</b>
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**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	<b>1</b> Yes	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	<b>2</b> Yes	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	<b>3</b>	No
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	<b>4</b>	No
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	<b>5</b>	No
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	<b>6</b>	No
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	<b>7</b>	No
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	<b>8</b>	No
<b>9</b> Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	<b>9</b>	No
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	<b>10</b> Yes	
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	<b>11a</b> Yes	
<b>b</b> Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	<b>11b</b>	No
<b>c</b> Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	<b>11c</b>	No
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	<b>11d</b>	No
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	<b>11e</b> Yes	
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	<b>11f</b> Yes	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	<b>12a</b>	No
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	<b>12b</b> Yes	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<b>13</b>	No
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b> Yes	
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 	<b>14b</b> Yes	
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 	<b>15</b> Yes	
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 	<b>16</b> Yes	
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	<b>17</b> Yes	
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	<b>18</b> Yes	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	<b>19</b>	No

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> . . . . .		No
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	Yes	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	Yes	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	Yes	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .		No
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .		No
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .		No
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> . . . . .		No
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . .		No
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) <b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	Yes	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .		No
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .		No
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .		No
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .		No
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	Yes	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .		No
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .		No
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .		No
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	Yes	



**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	69	
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	170	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	Yes	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	
<b>b</b>	If "Yes," enter the name of the foreign country: ES, HA, IN, LI, SL, NP, RP, TZ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
<b>c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	Yes	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
<b>9a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter		
<b>a</b>	Gross income from members or shareholders.	11a	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	13a	
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
<b>c</b>	Enter the amount of reserves on hand.	13c	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI ☒

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year	22	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent	21	
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
<b>6</b>	Did the organization have members or stockholders?		No
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	Yes	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	Yes	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		No
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
<b>13</b>	Did the organization have a written whistleblower policy?	Yes	
<b>14</b>	Did the organization have a written document retention and destruction policy?	Yes	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	Yes	
<b>b</b>	Other officers or key employees of the organization	Yes	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

**17** List the States with which a copy of this Form 990 is required to be filed: AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, IN, KS, KY, LA, ME, MD, MA, MI, MN, MS, MT, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

**18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

**19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, address, and telephone number of the person who possesses the organization's books and records.  
 ▶ RICHARD K TROWBRIDGE 88 HAMILTON AVENUE STAMFORD, CT 06902 (203) 658-9500

Check if Schedule O contains a response or note to any line in this Part VII ☐

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

Form **990** (2017)

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
<b>1b Sub-Total</b> . . . . .										
<b>c Total from continuation sheets to Part VII, Section A</b> . . . . .										
<b>d Total (add lines 1b and 1c)</b> . . . . .								3,057,937	0	457,570

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 30

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	3 Yes	
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	4 Yes	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	5	No

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
THE HARRINGTON AGENCY LLC, 329 DICKINSON AVE SWARTHMORE, PA 19081	Fundraising Counsel	1,200,795
RWT PRODUCTION LLC, 8932 ORANGE HUNT LANE ANNANDALE, VA 22003	PRINTING AND MAILING	604,867
RAFANELLI EVENTS, 5 west 19th street NEW YORK, NY 10011	EVENT PLANNING	548,770
Mail America Communications Inc, 1174 Elkton Farm Road PO Box 870 FOREST, VA 24551	Printing and Mailing	248,790
MAL WARWICK ASSOCIATES INC, 2550 NINTH STREET STE 103 BERKELEY, CA 94710	FUNDRAISING COUNSEL	246,332

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 8

Part VIII

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a	138,648			
	b	Membership dues . . .	1b				
	c	Fundraising events . . .	1c	3,046,320			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	139,495			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,038,958,772			
	g	Noncash contributions included in lines 1a-1f \$		977,699,912			
	h	Total. Add lines 1a-1f . . . . .		1,042,283,235			
Program Service Revenue				Business Code			
	2a	PATIENT SERVICE REVENUE		621400	952,079	952,079	
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f . . . . .		952,079			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) . . . . .			1,015,736			1,015,736
	4 Income from investment of tax-exempt bond proceeds			0			
	5 Royalties . . . . .			0			
	6a Gross rents						
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss) . . . . .			-9,929			-9,929
	7a Gross amount from sales of assets other than inventory						
	b Less cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss) . . . . .			765,474			765,474
	8a Gross income from fundraising events (not including \$ 3,046,320 of contributions reported on line 1c) See Part IV, line 18 . . . . .						
	b Less direct expenses . . . . .						
	c Net income or (loss) from fundraising events . . . . .			-591,731			-591,731
	9a Gross income from gaming activities See Part IV, line 19 . . . . .						
	b Less direct expenses . . . . .						
	c Net income or (loss) from gaming activities . . . . .			0			
	10a Gross sales of inventory, less returns and allowances . . . . .						
b Less cost of goods sold . . . . .							
c Net income or (loss) from sales of inventory . . . . .			84,192			84,192	
Miscellaneous Revenue			Business Code				
11a EL SALVADOR CAFETERIA INCOME			900099	186,549		186,549	
b EL SALVADOR MISCELLANEOUS INCOME			900099	24,057		24,057	
c							
d All other revenue . . . . .							
e Total. Add lines 11a-11d . . . . .				210,606			
12 Total revenue. See Instructions . . . . .				1,044,709,662	952,079	1,474,348	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	223,734,789	223,734,789		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22.	273,894,610	273,894,610		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	758,748,906	758,748,906		
<b>4</b> Benefits paid to or for members	0			
<b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .	1,717,603	576,807	691,730	449,066
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	550,426	392,405		158,021
<b>7</b> Other salaries and wages	12,181,392	7,134,030	2,110,487	2,936,875
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . . . .	549,295	308,080	107,033	134,182
<b>9</b> Other employee benefits . . . . .	2,552,221	1,455,205	502,631	594,385
<b>10</b> Payroll taxes . . . . .	1,034,873	557,604	209,654	267,615
<b>11</b> Fees for services (non-employees)				
<b>a</b> Management . . . . .	1,313,523	1,146,154	58,430	108,939
<b>b</b> Legal . . . . .	72,022	12,487	47,714	11,821
<b>c</b> Accounting . . . . .	201,203	21,942	179,261	
<b>d</b> Lobbying . . . . .	0			
<b>e</b> Professional fundraising services. See Part IV, line 17.	1,969,321			1,969,321
<b>f</b> Investment management fees . . . . .	91,572		91,572	
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,229,718	425,724	176,122	627,872
<b>12</b> Advertising and promotion . . . . .	1,121,279	99,858	1,255	1,020,166
<b>13</b> Office expenses . . . . .	232,705	217,807	6,336	8,562
<b>14</b> Information technology . . . . .	1,226,051	260,015	249,656	716,380
<b>15</b> Royalties . . . . .	0			
<b>16</b> Occupancy . . . . .	2,126,765	1,601,129	224,702	300,934
<b>17</b> Travel . . . . .	1,919,484	1,649,885	49,503	220,096
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0			
<b>19</b> Conferences, conventions, and meetings . . . . .	150,990	143,921	2,300	4,769
<b>20</b> Interest . . . . .	1,775	1,775		
<b>21</b> Payments to affiliates . . . . .	0			
<b>22</b> Depreciation, depletion, and amortization . . . . .	728,521	519,234	91,554	117,733
<b>23</b> Insurance . . . . .	386,839	292,788	-7,749	101,800
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> INVENTORY WRITE-OFF	28,955,655	28,955,655		
<b>b</b> POSTAGE AND FREIGHT	6,952,316	6,070,947	15,673	865,696
<b>c</b> MISCELLANEOUS	1,839,440	891,631	347,483	600,326
<b>d</b>				
<b>e</b> All other expenses				
<b>25</b> Total functional expenses. Add lines 1 through 24e	1,325,483,294	1,309,113,388	5,155,347	11,214,559
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .		14,343	<b>1</b>	42,172
	<b>2</b>	Savings and temporary cash investments . . . . .		3,313,505	<b>2</b>	24,488,234
	<b>3</b>	Pledges and grants receivable, net . . . . .		10,436,151	<b>3</b>	4,058,315
	<b>4</b>	Accounts receivable, net . . . . .		274,316	<b>4</b>	559,908
	<b>5</b>	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		0	<b>5</b>	0
	<b>6</b>	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . .		0	<b>6</b>	0
	<b>7</b>	Notes and loans receivable, net . . . . .		0	<b>7</b>	0
	<b>8</b>	Inventories for sale or use . . . . .		565,779,308	<b>8</b>	262,923,133
	<b>9</b>	Prepaid expenses and deferred charges . . . . .		605,600	<b>9</b>	828,200
	<b>10a</b>	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	<b>10a</b> 7,397,957			
	<b>b</b>	Less: accumulated depreciation	<b>10b</b> 5,058,136	2,951,873	<b>10c</b>	2,339,821
	<b>11</b>	Investments—publicly traded securities . . . . .		20,504,365	<b>11</b>	28,186,503
	<b>12</b>	Investments—other securities. See Part IV, line 11 . . . . .		5,124	<b>12</b>	0
	<b>13</b>	Investments—program-related. See Part IV, line 11 . . . . .		0	<b>13</b>	0
	<b>14</b>	Intangible assets . . . . .		0	<b>14</b>	0
	<b>15</b>	Other assets. See Part IV, line 11 . . . . .		4,015,811	<b>15</b>	3,847,317
<b>16</b>	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .		607,900,396	<b>16</b>	327,273,603	
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .		4,618,183	<b>17</b>	4,989,531
	<b>18</b>	Grants payable . . . . .		758,401	<b>18</b>	1,716,654
	<b>19</b>	Deferred revenue . . . . .		1,056,256	<b>19</b>	384,083
	<b>20</b>	Tax-exempt bond liabilities . . . . .		0	<b>20</b>	0
	<b>21</b>	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		0	<b>21</b>	0
	<b>22</b>	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		0	<b>22</b>	0
	<b>23</b>	Secured mortgages and notes payable to unrelated third parties . . . . .		0	<b>23</b>	0
	<b>24</b>	Unsecured notes and loans payable to unrelated third parties . . . . .		0	<b>24</b>	0
	<b>25</b>	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . . .		2,628,402	<b>25</b>	2,273,436
	<b>26</b>	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .		9,061,242	<b>26</b>	9,363,704
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>					
	<b>27</b>	Unrestricted net assets . . . . .		56,573,188	<b>27</b>	96,572,203
	<b>28</b>	Temporarily restricted net assets . . . . .		537,520,994	<b>28</b>	216,368,191
	<b>29</b>	Permanently restricted net assets . . . . .		4,744,972	<b>29</b>	4,969,505
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>					
	<b>30</b>	Capital stock or trust principal, or current funds . . . . .			<b>30</b>	
	<b>31</b>	Paid-in or capital surplus, or land, building or equipment fund . . . . .			<b>31</b>	
	<b>32</b>	Retained earnings, endowment, accumulated income, or other funds . . . . .			<b>32</b>	
	<b>33</b>	<b>Total net assets or fund balances</b> . . . . .		598,839,154	<b>33</b>	317,909,899
<b>34</b>	<b>Total liabilities and net assets/fund balances</b> . . . . .		607,900,396	<b>34</b>	327,273,603	

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	1,044,709,662
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	1,325,483,294
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	-280,773,632
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	598,839,154
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-196,217
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	40,594
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	317,909,899

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
<b>b</b> Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
<b>c</b> If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		



# Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 06-1008595  
**Name:** AmeriCares Foundation Inc

Form 990 (2017)

**Form 990, Part III, Line 4a:**

Access to Medicine Americares is working to improve health outcomes for patients and communities by increasing access to quality medicines and supplies for local health providers and the people and communities they serve. A strong and expanding network of over 200 pharmaceutical and medical supply corporations donate these medicines, medical supplies, personal care products, medical equipment and technology. We distribute these donations to our global partner network through two initiatives - The Global Access to Medicine Program, which distributes high-quality medicines directly to a network of 32 partners in 27 countries. Partners are selected for their capacity to securely and effectively process and utilize Americares medical and supply donations. Americares also supports volunteer medical teams as they provide primary care, perform surgeries, respond to health emergencies and strengthen local health care capacity in communities where basic medical care is often non-existent or inaccessible. Last year, these volunteer teams made 1,073 short-term medical outreach trips to 79 countries for which Americares provided \$64 million in donated medicines and supplies as well as medical training tools and resources. - The U.S. Program supports a network of 1,009 safety net health care providers across all 50 states and Puerto Rico. Again, partners are selected for their capacity to securely and effectively process and utilize Americares medical and supply donations. Americares is the leading nonprofit provider of medical aid to the U.S. health care safety net. In total, during the 2017-2018 program year, Americares received \$981 million and distributed nearly \$1.3 billion worth of medical donations (enough medicine to fill 12.6 million prescriptions, to treat an estimated 3.2 million people).

## Form 990, Part III, Line 4b:

Emergency Programs From July 2017 to June 2018, Americares responded to 35 natural disasters and humanitarian crises in 24 countries, including six U S states and two U S territories, with shipments of medicines and emergency supplies as well as preparedness, response and recovery projects. This FY18 emergency work included simultaneous responses to Hurricanes Harvey, Irma and Maria in 2017, for which Americares deployed more than 75 relief workers from Americares core staff and our global roster to rapidly respond to storm-affected communities. In the initial months, Americares relief workers spent more than 2,500 days in the field, while core staff continued to respond to new disasters such as the Mexico earthquake and maintain ongoing work. For the three hurricanes in FY18, Americares delivered nearly \$75 million in total aid, including 360 shipments of medicines and relief supplies and dozens of grants and direct programming, and collaborated with 164 partner organizations to meet the health needs of survivors.

FY18 Responses - Democratic Republic of Congo Ebola outbreak - Djibouti complex emergency - Dominica Hurricane Maria - El Salvador Zika virus outbreak - Guatemala Fuego volcano - India Cyclone Ockhi - India Assam floods - India Gujarat and Rajasthan floods - Iraq earthquake - Jordan Syrian refugee crisis - Kenya drought and cholera outbreak - Liberia Lassa fever - Mexico earthquake - Nepal Jhapa Floods - Nepal Saptari Floods - Papua New Guinea earthquake - Peru extreme cold weather - Philippines Mayon volcano - Philippines Tropical Storm Kai-Tak - Philippines Typhoon Maring (Doksuri) - Philippines Leyte earthquake - Philippines Tropical Storm Tembin - Sint Maarten Hurricane Irma - Sierra Leone landslide - Somalia cholera outbreak and hunger crisis - Sri Lanka flooding - Syria Syrian refugee crisis - Uganda health and hunger crisis - U S Arizona border crisis - U S Florida Hurricane Irma - U S Louisiana Gulf coast floods - U S North Carolina Greensboro tornado - U S Puerto Rico Hurricane Maria - U S Texas Hurricane Harvey - U S Virgin Islands Hurricanes Irma and Maria - U S Southern California wildfires - U S Northern California wildfires - Venezuela political crisis - Yemen complex emergency

Americares emergency programs rely on the close partnerships we share with our broad network of health care providers. By investing in local capacity, Americares is ensuring that communities can respond effectively to emergencies, engage in long-term recoveries and integrate disaster preparedness into their ongoing operations.

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## **Form 990, Part III, Line 4c:**

Clinical Services and Community Health AmeriCares supports the capacity of local health delivery partners and promotes health and disease prevention in low-income communities across the U S and worldwide In 2017-2018, AmeriCares clinic in El Salvador, Clinica Integral de Atencion Familiar, provided 39,069 people with 63,126 clinical consultations In addition, our partners, AmeriCares India and AmeriCares Free Clinics in Connecticut, provided an additional 88,217 patients with 179,195 clinical consultations AmeriCares also engages deeply with its global network of partners to develop effective models of service that include improved access, quality and impact Working together, we create, examine and refine safety-net clinical models AmeriCares-supported initiatives included a breast cancer screening and education program for women in Cambodia, a midwife training and outreach program in Liberia to promote womens and childrens health, an obstetric fistula surgical and recovery program for women in Tanzania, and a study measuring the impact of a diabetes prevention program among low-income, vulnerable U S patients AmeriCares also provides resources and training so health workers can better serve their communities and improve the health of low-income patients In FY18, AmeriCares increased the capacity of 6,128 health workers to meet the health needs of their communities as well as protect their own health and wellbeing In our community health work, we address the root causes of illness and disease, employing an integrated approach that links treatment services to disease prevention efforts and health education All programs promote evidence-based best practices and are designed to the highest standards of project planning, implementation and monitoring and evaluation In FY18, AmeriCares community health programs spanned a range of health themes including noncommunicable disease, womens and childrens health and psychosocial health Examples include - An El Salvador hypertension and diabetes management project with demonstrable health improvements including decrease in Body Mass Index (30 35 percent of 1,341 patients), normalized arterial pressure readings (71 82 percent of 983 patients with hypertension or hypertension and diabetes), as well as decreases in uncontrolled high blood glucose - In Liberia, launch of a holistic fistula program, which includes an emphasis on respectful and compassionate care for women suffering injury during childbirth After learning from AmeriCares project participants in Tanzania, AmeriCares Liberia staff trained 71 community health workers in fistula prevention and identification and hosted four fistula social mobilization events in Grand Bassa County, attended by a total of 358 people, as a result, 18 women were referred for treatment by the Liberia National Fistula Project - The launch of a program to provide mental health and psychosocial support service training for 9,000 health workers in Texas and Puerto Rico, as part of AmeriCares Emergency Program following Hurricanes Harvey and Maria

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Elizabeth P Allen ..... Director	1 0 ..... 0 0	X						0	0	0
Carol B Bauer ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
Robert M Baylis ..... Director	1 0 ..... 0 0	X						0	0	0
Jeffrey T Becker ..... Director	1 0 ..... 0 0	X						0	0	0
Katherine Close ..... Director	1 0 ..... 0 0	X						0	0	0
Roberta Conroy ..... Director	1 0 ..... 0 0	X						0	0	0
Elizabeth F Frank ..... Director	1 0 ..... 0 0	X						0	0	0
Stephen Gallucci ..... Director	1 0 ..... 0 0	X						0	0	0
Bryan C Hanson ..... Director	1 0 ..... 0 0	X						0	0	0
C Robert Henrikson ..... Director	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Samhita Jayanti ..... Vice Chairman	1 0 ..... 0 0	X		X				0	0	0
Paul J Kuehner ..... Director	1 0 ..... 0 0	X						0	0	0
Jerry P Leamon ..... Chairman	1 0 ..... 0 0	X		X				0	0	0
Alma Jane Macauley ..... Permanent Board Vice Chairman	1 0 ..... 0 0	X		X				0	0	0
C Dean Maglaris ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
Mehdi Mahmud ..... Director (as of 1/2018)	1 0 ..... 0 0	X						0	0	0
Keith McAllister ..... Director	1 0 ..... 0 0	X						0	0	0
Michael J Nyenhuis ..... President & CEO	40 0 ..... 0 0	X		X				397,994	0	63,613
Joseph J Rucci Jr ..... Director and Secretary	1 0 ..... 0 0	X		X				0	0	0
Alan Rwambuya ..... Director	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Stephen Sadove ..... Director	1 0 ..... 0 0	X						0	0	0
Sarah Saint-Amand ..... Director	1 0 ..... 0 0	X						0	0	0
Kevin Gilrain ..... Senior V P , Human resources	40 0 ..... 0 0			X				208,062	0	35,379
Anne Peterson MD MPH ..... Senior V P , Global Programs	40 0 ..... 0 0			X				235,887	0	26,812
Christine Squires ..... CHIEF DEV OFFICER & SVP	40 0 ..... 0 0			X				229,583	0	37,308
Richard K Trowbridge Jr ..... CFO & Senior V P , Operations	40 0 ..... 0 0			X				252,396	0	44,782
Megin Wolfman ..... VP and Chief of Staff	40 0 ..... 0 0			X				105,871	0	8,023
Rachel Granger ..... V P Int'l Partnrshps&Programs	40 0 ..... 0 0					X		167,564	0	19,272
Gary Leeds ..... V p , finance (thru 12/2017)	40 0 ..... 0 0					X		176,051	0	34,779
Taufiqur Rahman ..... VP, Tech Unit (thru 11/2017)	40 0 ..... 0 0					X		166,994	0	31,172

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
dennis rice thru 62018 ..... CIO & SVP, innovation	40 0 ..... 0 0					X		192,539	0	41,550
Jed Selkowitz ..... CMO & SVP, COMMUNICATIONS	40 0 ..... 0 0					X		245,882	0	35,538
Garrett Ingoglia ..... V P , Emerg Res (thru 12/17)	40 0 ..... 0 0						X	142,262	0	17,370
Martha kennard ..... V P , operations	40 0 ..... 0 0						X	137,632	0	8,859
Geoff Kneisel ..... V P , Corporate Relations	40 0 ..... 0 0						X	128,018	0	38,835
lee wiener thru 22017 ..... former v p , direct res	40 0 ..... 0 0						X	121,168	0	4,855
Melissa Woolford ..... V P , Leadership Gifts	40 0 ..... 0 0						X	150,034	0	9,423

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

AmeriCares Foundation Inc

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number

06-1008595

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box )

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ) )
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university \_\_\_\_\_
- 10

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 11

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
- a

☐

**Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

**Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

**Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

**Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations \_\_\_\_\_
- g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						



Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
	Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	558,924,455	738,792,543	914,486,587	2,379,130,027	1,042,283,235	5,633,616,847
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	<b>Total.</b> Add lines 1 through 3	558,924,455	738,792,543	914,486,587	2,379,130,027	1,042,283,235	5,633,616,847
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2,702,896,462
6	<b>Public support.</b> Subtract line 5 from line 4						2,930,720,385

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a)2013	(b)2014	(c)2015	(d)2016	(e)2017	(f)Total
7	Amounts from line 4	558,924,455	738,792,543	914,486,587	2,379,130,027	1,042,283,235	5,633,616,847
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	848,586	1,073,316	960,491	837,326	1,189,036	4,908,755
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,070,273	1,156,012	1,141,371	1,199,482	1,468,057	6,035,195
11	<b>Total support.</b> Add lines 7 through 10						5,644,560,797
12	Gross receipts from related activities, etc. (see instructions)					12	3,929,619
13	<b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . .						<input type="checkbox"/>

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14 51.921%
15	Public support percentage for 2016 Schedule A, Part II, line 14	15 50.537%
16a	<b>33 1/3% support test—2017.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. ► <input checked="" type="checkbox"/>	
b	<b>33 1/3% support test—2016.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
17a	<b>10%-facts-and-circumstances test—2017.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
b	<b>10%-facts-and-circumstances test—2016.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
18	<b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ► <input type="checkbox"/>	

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	
<b>16</b> Public support percentage from 2016 Schedule A, Part III, line 15	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2017</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	
<b>18</b> Investment income percentage from <b>2016</b> Schedule A, Part III, line 17	<b>18</b>	

**19a 33 1/3% support tests—2017.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

**b 33 1/3% support tests—2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>	<b>1</b>	
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	<b>2</b>	
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	<b>3a</b>	
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.</i>	<b>3b</b>	
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.</i>	<b>3c</b>	
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	<b>4a</b>	
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>	<b>4b</b>	
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>	<b>4c</b>	
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b>, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>	<b>5a</b>	
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	<b>5b</b>	
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	<b>5c</b>	
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>6</b>	
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	<b>7</b>	
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	<b>8</b>	
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>9a</b>	
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>9b</b>	
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>9c</b>	
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	<b>10a</b>	
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	<b>10b</b>	

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		
	<b>11a</b>	
	<b>11b</b>	
	<b>11c</b>	

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
	<b>1</b>	
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		
	<b>2</b>	

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
	<b>1</b>	

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
	<b>1</b>	
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
	<b>2</b>	
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
	<b>3</b>	

**Section E. Type III Functionally-Integrated Supporting Organizations**

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (**see instructions**)
- a** ☐ The organization satisfied the Activities Test. Complete **line 2** below.
- b** ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.
- c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

**2 Activities Test. Answer (a) and (b) below.**

	Yes	No
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
	<b>2a</b>	
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
	<b>2b</b>	
<b>3</b> Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
	<b>3a</b>	
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
	<b>3b</b>	

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b>		
<b>2</b> Recoveries of prior-year distributions	<b>2</b>		
<b>3</b> Other gross income (see instructions)	<b>3</b>		
<b>4</b> Add lines 1 through 3	<b>4</b>		
<b>5</b> Depreciation and depletion	<b>5</b>		
<b>6</b> Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	<b>6</b>		
<b>7</b> Other expenses (see instructions)	<b>7</b>		
<b>8 Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>		
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	<b>1</b>		
<b>a</b> Average monthly value of securities	<b>1a</b>		
<b>b</b> Average monthly cash balances	<b>1b</b>		
<b>c</b> Fair market value of other non-exempt-use assets	<b>1c</b>		
<b>d Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>		
<b>e Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
<b>2</b> Acquisition indebtedness applicable to non-exempt use assets	<b>2</b>		
<b>3</b> Subtract line 2 from line 1d	<b>3</b>		
<b>4</b> Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	<b>4</b>		
<b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>		
<b>6</b> Multiply line 5 by .035	<b>6</b>		
<b>7</b> Recoveries of prior-year distributions	<b>7</b>		
<b>8 Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>		
<b>Section C - Distributable Amount</b>			Current Year
<b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>		
<b>2</b> Enter 85% of line 1	<b>2</b>		
<b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>		
<b>4</b> Enter greater of line 2 or line 3	<b>4</b>		
<b>5</b> Income tax imposed in prior year	<b>5</b>		
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>		
<b>7</b> <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)			

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013. . . . .			
c From 2014. . . . .			
d From 2015. . . . .			
e From 2016. . . . .			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013. . . . .			
b Excess from 2014. . . . .			
c Excess from 2015. . . . .			
d Excess from 2016. . . . .			
e Excess from 2017. . . . .			

Additional Data

Software ID:  
Software Version:  
EIN: 06-1008595  
Name: AmeriCares Foundation Inc

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493054005019	
<div>SCHEDULE D (Form 990)</div> <div>Department of the Treasury Internal Revenue Service</div>		<div>Supplemental Financial Statements</div> <div>► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.</div> <div>Information about Schedule D (Form 990) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>.</div>			<div>OMB No 1545-0047</div> <div>2017</div> <div>Open to Public Inspection</div>
Name of the organization AmeriCares Foundation Inc				Employer identification number 06-1008595	
Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.					
		(a) Donor advised funds		(b) Funds and other accounts	
1		Total number at end of year			
2		Aggregate value of contributions to (during year)			
3		Aggregate value of grants from (during year)			
4		Aggregate value at end of year			
5		Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>			
6		Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>			
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.					
1 Purpose(s) of conservation easements held by the organization (check all that apply) <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or education) <input type="checkbox"/> Preservation of an historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space</div>					
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year					
				Held at the End of the Year	
a Total number of conservation easements				2a	
b Total acreage restricted by conservation easements				2b	
c Number of conservation easements on a certified historic structure included in (a)				2c	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register				2d	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►					
4 Number of states where property subject to conservation easement is located ►					
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►					
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$					
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements					
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.					
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items					
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items					
(i) Revenue included on Form 990, Part VIII, line 1 ► \$					
(ii) Assets included in Form 990, Part X ► \$					
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items					
a Revenue included on Form 990, Part VIII, line 1 ► \$					
b Assets included in Form 990, Part X ► \$					
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					
Cat No 52283D		Schedule D (Form 990) 2017			



**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

**3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a** ☐ Public exhibition
- b** ☐ Scholarly research
- c** ☐ Preservation for future generations
- d** ☐ Loan or exchange programs
- e** ☐ Other

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

**5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

**b** If "Yes," explain the arrangement in Part XIII and complete the following table

**c** Beginning balance

**d** Additions during the year

**e** Distributions during the year

**f** Ending balance

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

**2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .	1,566,608	1,420,481	1,751,764	1,701,949	1,463,525
<b>b</b> Contributions . . . . .	225,000	45,000			
<b>c</b> Net investment earnings, gains, and losses	133,053	206,768	-31,283	49,815	238,424
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .	170,000	100,000	300,000		
<b>f</b> Administrative expenses . . . . .	5,848	5,641			
<b>g</b> End of year balance . . . . .	1,748,813	1,566,608	1,420,481	1,751,764	1,701,949

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

**a** Board designated or quasi-endowment ▶

**b** Permanent endowment ▶ 85 000 %

**c** Temporarily restricted endowment ▶ 15 000 %  
The percentages on lines 2a, 2b, and 2c should equal 100%

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by

**(i)** unrelated organizations . . . . .

**(ii)** related organizations . . . . .

**b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

	Yes	No
<b>3a(i)</b>	Yes	
<b>3a(ii)</b>		No
<b>3b</b>		

**4** Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .		175,000		175,000
<b>b</b> Buildings . . . . .		934,215	529,329	404,886
<b>c</b> Leasehold improvements		2,589,750	1,571,523	1,018,227
<b>d</b> Equipment . . . . .		3,698,992	2,957,284	741,708
<b>e</b> Other . . . . .				
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				2,339,821

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.  
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 ) ▶		

Part VIII

Investments—Program Related.  
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 ) ▶		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 ) . . . . . ▶	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.  
See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
1. Federal income taxes	0
SPLIT INTEREST AGREEMENTS	2,221,477
CAPITALIZED LEASE	51,959
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶	2,273,436

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☒

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	1,047,200,821
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	-196,217
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	698,562
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	40,595
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	542,940
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	1,046,657,881
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	-1,948,219
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	-1,948,219
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	1,044,709,662

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	1,328,130,075
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	698,562
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	1,948,219
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	2,646,781
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	1,325,483,294
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	1,325,483,294

**Part XIII Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

**Part XIII** Supplemental Information *(continued)*

Return Reference	Explanation

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 06-1008595  
**Name:** AmeriCares Foundation Inc

**Supplemental Information**

Return Reference	Explanation
ENDOWMENT FUNDS	FORM 990, SCHEDULE D, PART V, LINE 4 The Americares Foundation endowment is intended to support the general charitable mission of the organization The Foundation intends that the principal should remain untouched, while the earnings on the endowment's investments shall be used to support various charitable programs During tax year ending 2015, the foundation appropriated \$400,000 (of which \$300,000 and \$100,000 were withdrawn in 2015 and 2016 respectively) from its endowment for expenditures to support the reconfiguration of its distribution center in stamford, CT DURING TAX YEAR ENDING 2017, \$170,000 WAS WITHDRAWN FROM ITS ENDOWMENT TO SUPPORT THE IMPLEMENTATION OF A NEW ENTERPRISE RESOURCE PLANNING ("ERP") SYSTEM

**Supplemental Information**

Return Reference	Explanation
INCOME TAXES	<p>FORM 990, SCHEDULE D, PART X Americares follows guidance that clarifies the accounting for uncertainty in tax positions taken or expected to be taken in a tax return, including issues relating to financial statement recognition and measurement. This guidance provides that the tax effects from an uncertain tax position can only be recognized in the financial statements if the position is more-likely-than-not to be sustained if the position were to be challenged by a taxing authority. The assessment of the tax position is based solely on the technical merits of the position, without regard to the likelihood that the tax position may be challenged. Americares is exempt from federal income tax under IRC section 501(c)(3), though they are subject to tax on income unrelated to its exempt purpose, unless that income is otherwise excluded by the Code. Americares has processes presently in place to ensure the maintenance of its tax-exempt status, to identify and report unrelated income, to determine its filing and tax obligations in jurisdictions for which it has nexus, and to identify and evaluate other matters that may be considered tax positions. Americares has determined that there are no material uncertain tax positions that require recognition or disclosure in the financial statements.</p>

**Supplemental Information**

Return Reference	Explanation
RECONCILIATION	<p>The Americares Foundation, Inc ("Foundation") files a consolidated audited financial statement with its subsidiary, Americares Free Clinics, Inc ("Clinics") The reconciliation in Parts XI &amp; XII of Schedule D reconciles back to the Foundation's financial information as presented in the audited financial statements and not to the consolidated numbers (inclusive of clinics) REVENUE ON BOOKS NOT ON RETURN FORM 990, SCHEDULE D, PART XI, LINE 2d Changes in split-interest agreements \$53,595 adjusted value of donated property (13,000) ----- Total adjustments for line 2d \$40,595 FORM 990, SCHEDULE D, PART XI, LINE 4b Rental Expenses Reclassed to Offset (\$183,229) Revenue (as reported in Part VIII) Special Events Reclassed to Offset (\$743,731) Revenue (as reported in Part VIII) Cost of Goods Sold Reclassed to Offset (\$1,021,260) Revenue (as reported in Part VIII) adjustment due to rounding \$1 ----- Total Revenue Adjustments for line 4b (\$1,948,219)</p>

# Supplemental Information

Return Reference	Explanation
EXPENSES ON BOOKS NOT ON RETURN	FORM 990, SCHEDULE D, PART XI, LINE 2d Rental Expenses Reclassed to Offset \$183,229 Revenue (as reported in Part VIII) Special Events Reclassed to Offset \$743,731 Revenue (as reported in Part VIII) Cost of Goods Sold Reclassed to Offset \$1,021,260 Revenue (as reported in Part VIII) adjustment due to rounding (\$1) ----- ----- Total expense Adjustments for line 2d \$1,948,219



**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
AmeriCares Foundation Inc

**Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

► Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2017**

**Open to Public  
Inspection**

**Employer identification number**

06-1008595

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ **Yes** ☐ **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

**3** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
( 1 ) See Add'l Data					
( 2 )					
( 3 )					
( 4 )					
( 5 )					
<b>3a</b> Sub-total	4	132			688,202,043
<b>b</b> Total from continuation sheets to Part I					78,375,432
<b>c Totals</b> (add lines 3a and 3b)	6	142			766,577,475

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1</b>	<b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
<b>( 1 )</b>	See Add'l Data								
<b>( 2 )</b>									
<b>( 3 )</b>									
<b>( 4 )</b>									
<b>( 5 )</b>								<b>Schedule F (Form 990) 2017</b>	
<b>( 6 )</b>									
<b>( 7 )</b>									
<b>( 8 )</b>									
<b>( 9 )</b>									
<b>( 10 )</b>									
<b>( 11 )</b>									
<b>( 12 )</b>									
<b>( 13 )</b>									
<b>( 14 )</b>									
<b>( 15 )</b>									
<b>( 16 )</b>									

**2** Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶

673

**3** Enter total number of other organizations or entities . . . . . ▶

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
( 1 )							
( 2 )							
( 3 )							
( 4 )							
( 5 )							
( 6 )							
( 7 )							
( 8 )							
( 9 )							
( 10 )							
( 11 )							
( 12 )							
( 13 )							
( 14 )							
( 15 )							
( 16 )							
( 17 )							
( 18 )							

**Part IV Foreign Forms**

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)* ☐ Yes ☒ No

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
Form 990, Schedule F, Part I, Line 2	To ensure that donated goods and funds are used to fulfill our mission, AmeriCares tracks every donation as it enters and leaves our warehouses and requires reporting of each receiving partner organization, which include detailed confirmation of receipt and quarterly updates on distribution. Individual licensed health care providers receiving donations through our medical outreach program must provide a report detailing how the donation was used, number of patients treated and other information. Health partners that receive funding from AmeriCares are required to complete a grant application and a grant report, including data on how funds were used and, if applicable, the health outcome of the funded project or activity. AmeriCares staff also perform site visits to monitor partners' use of product donations and funding. Targeted health initiatives such as those described in the "ongoing" section above, may include baseline and final project assessments.

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 06-1008595  
**Name:** AmeriCares Foundation Inc

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean			Program Services	Disaster Relief/dvlpmt	5,027,481
East Asia and the Pacific			Program Services	Disaster Relief/dvlpmt	567,682

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Program Services	Disaster Relief/dvlpmt	172,868
Middle East and North Africa			Program Services	Disaster Relief/dvlpmt	212,368

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Russia and the Newly Independent States			Program Services	Disaster Relief/dvlpmt	97,887
South America			Program Services	Disaster Relief/dvlpmt	127,405



Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America			Program Services	Disaster Relief/dvlpmt	17,700
South Asia			Program Services	Disaster Relief/dvlpmt	381,421

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Sub-Saharan Africa			Program Services	Disaster Relief/dvlpmt	1,223,759
Central America and the Caribbean	2	106	Grantmaking		179,635,462

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific	1	6	Grantmaking		348,279,027
Europe (Including Iceland and Greenland)			Grantmaking		10,560,955

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa			Grantmaking		26,717,430
North America			Grantmaking		614,197

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Russia and the Newly Independent States			Grantmaking		82,440,878
South America		6	Grantmaking		20,887,590

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South Asia	1	14	Grantmaking		11,237,933
Sub-Saharan Africa	2	10	Grantmaking		78,375,432

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	Partner Support	50,000	WIRE	0		
		Central America and the Caribbean	Food Commodity	53,868	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	Partner Support	50,000	WIRE	0		
		Central America and the Caribbean	Hurricane relief	7,500	WIRE	0		



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	Breast Cancer	75,000	WIRE	0		
		East Asia and the Pacific	Pediatric Nutrition	135,000	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	Rehabilitation of Structures	149,183	WIRE	0		
		East Asia and the Pacific	Psychosocial Capacity Building	44,607	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	Mental Health and Psychosocial Services	56,572	WIRE	0		
		Middle East and North Africa	Earthquake relief	156,000	WIRE	0		

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Russia and the Newly Independent States	Shoe Distribution	10,458	WIRE	0		
		Russia and the Newly Independent States	Shoe Distribution	10,572	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Russia and the Newly Independent States	Shoe Distribution	10,503	WIRE	0		
		South America	Earthquake relief	42,571	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	Annual Program Support	532,828	WIRE	0		
		South Asia	Mobile Medical Clinics	37,847	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	Flooding Relief	183,644	WIRE	0		
		South Asia	Program Evalulation	52,655	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	Humanities	20,000	WIRE	0		
		Central America and the Caribbean	EMERGENCY	0		2,775,538	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	EMERGENCY	0		1,792,752	Med Suppl	FMV
		Central America and the Caribbean	EMERGENCY	0		44,241	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		9,823,097	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		17,863,703	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		1,379,359	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		3,585,465	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		4,663,506	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		64,989	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		74,290,541	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		9,232,305	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		9,909,001	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		9,665,114	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		4,005,696	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		5,028	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		5,031	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		5,182	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		5,208	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		5,246	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		5,264	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		5,270	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		5,319	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		5,419	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		5,436	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		5,713	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		5,718	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		5,830	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		5,974	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		6,077	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		6,149	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		6,209	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		6,238	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		6,287	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		6,476	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		6,506	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		6,595	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		6,657	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		6,699	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		6,716	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		6,772	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		6,855	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		6,888	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		6,948	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		7,089	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		7,177	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		7,278	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		7,306	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		7,318	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		7,586	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		7,633	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		7,637	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		7,653	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		7,824	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		7,900	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		8,095	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		8,160	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		8,241	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		8,477	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		8,601	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		8,719	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		8,966	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		9,023	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		9,214	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		9,598	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		9,803	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		9,804	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		9,838	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		9,944	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		10,226	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		10,445	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		10,535	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		10,745	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		10,770	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		10,791	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		10,949	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		11,170	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		11,204	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		11,304	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		11,527	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		11,565	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		11,570	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		11,885	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		12,184	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		12,359	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		12,494	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		12,780	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		13,193	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		13,244	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		13,261	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		13,295	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		13,583	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		14,806	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		15,059	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		15,202	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		15,308	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		15,636	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		15,646	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		15,694	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		15,718	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		16,242	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		16,457	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		17,087	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		17,265	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		17,295	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		17,489	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		17,961	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		18,408	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		18,549	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		18,731	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		19,380	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		19,399	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		19,454	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		20,082	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		20,707	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		21,217	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		21,218	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		21,222	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		21,229	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		22,152	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		22,240	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		22,335	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		22,538	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		22,552	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		22,616	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		22,645	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		23,079	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		23,152	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		23,291	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		23,382	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		23,496	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		23,649	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		24,293	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		25,271	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		25,425	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		25,615	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		26,936	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		27,093	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		27,197	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		28,912	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		28,914	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		29,119	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		29,181	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		30,866	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		31,456	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		31,754	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		31,799	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		31,983	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		33,376	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		33,609	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		34,023	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		34,246	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		34,465	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		36,165	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		36,646	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		39,311	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		39,324	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		40,112	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		41,001	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		41,215	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		42,608	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		42,808	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		44,062	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		44,098	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		44,982	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		44,985	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		45,508	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		45,795	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		46,180	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		46,551	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		46,574	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		46,741	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		48,998	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		50,013	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		50,247	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		50,429	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		52,833	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		52,894	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		53,092	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		53,478	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		53,955	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		54,000	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		54,374	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		55,478	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		55,706	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		56,113	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		57,106	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		57,792	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		58,105	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		59,704	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		60,051	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		60,625	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		60,644	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		60,649	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		61,123	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		61,204	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		61,971	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		62,598	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		63,233	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		64,395	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		65,750	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		66,448	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		68,503	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		69,570	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		70,623	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		72,717	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		75,432	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		75,725	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		75,841	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		79,846	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		79,913	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		80,547	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		83,824	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		84,008	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		84,228	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		84,229	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		86,920	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		88,588	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		91,256	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		94,956	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		95,682	Med Suppl	FMV
		Central America and the Caribbean	EMERGENCY	0		95,865	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		97,307	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		97,451	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		97,828	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		98,262	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		98,559	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		102,770	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		103,831	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		103,947	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		103,974	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		104,114	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		104,376	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		104,744	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		107,351	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		108,304	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		110,184	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		110,841	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		113,523	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		115,412	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		115,424	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		115,482	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		117,252	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		117,684	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		117,782	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		117,891	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		120,370	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		123,380	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		124,965	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		126,232	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		126,300	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		127,716	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		128,950	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		133,438	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		135,784	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		136,938	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		139,384	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		139,435	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		141,707	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		144,609	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		145,323	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		152,402	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		152,575	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		153,065	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		153,455	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		154,736	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		155,074	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		155,930	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		167,991	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		172,106	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		173,596	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		173,798	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		179,640	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		184,388	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		184,981	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		186,522	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		187,054	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		194,920	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		197,146	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		199,765	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		203,872	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		213,559	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		215,334	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		216,095	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		218,672	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		219,966	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		220,419	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		222,325	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		225,876	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		231,043	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		237,152	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		238,403	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		241,689	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		267,324	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		271,000	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		272,152	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		281,174	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		284,830	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		302,778	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		316,555	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		323,509	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		327,999	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		333,626	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		336,023	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		342,585	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		344,042	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		348,521	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		355,412	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		363,547	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		386,475	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		431,916	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		432,207	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		436,112	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		444,951	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		458,402	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		486,349	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		524,577	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		553,518	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		561,500	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		606,243	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		666,159	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		752,176	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	ON-GOING	0		772,081	Med Suppl	FMV
		Central America and the Caribbean	ON-GOING	0		815,349	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	EMERGENCY	0		24,623	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		13,311,567	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		221,130,000	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		107,940,000	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		182,952	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		6,478	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		6,494	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		7,904	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		8,419	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		8,882	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		9,791	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		10,522	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		11,302	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		11,877	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		12,071	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		13,381	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		16,898	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		16,930	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		18,139	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		22,048	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		23,826	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		25,779	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		26,641	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		28,676	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		28,975	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		30,672	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		31,743	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		33,036	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		34,276	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		39,282	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		41,087	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		43,047	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		48,505	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		50,634	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		59,404	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		64,940	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		71,832	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		72,419	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		75,746	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		79,213	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		83,274	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		87,142	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		91,090	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		91,179	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		96,548	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		119,655	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		128,375	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		134,239	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		152,073	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		156,678	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		171,540	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		172,332	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		185,278	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		207,808	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		208,570	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		210,151	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		211,103	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		244,370	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		250,670	Med Suppl	FMV
		East Asia and the Pacific	ON-GOING	0		430,225	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	ON-GOING	0		688,676	Med Suppl	FMV
		Europe (Including Iceland and Greenland)	EMERGENCY	0		91,945	Med Suppl	FMV



**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	EMERGENCY	0		2,422,637	Med Suppl	FMV
		Europe (Including Iceland and Greenland)	ON-GOING	0		5,265,834	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	ON-GOING	0		2,166,041	Med Suppl	FMV
		Europe (Including Iceland and Greenland)	EMERGENCY	0		144,290	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	ON-GOING	0		186,363	Med Suppl	FMV
		Europe (Including Iceland and Greenland)	ON-GOING	0		254,325	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	ON-GOING	0		6,213	Med Suppl	FMV
		Middle East and North Africa	EMERGENCY	0		86,362	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	EMERGENCY	0		120,778	Med Suppl	FMV
		Middle East and North Africa	EMERGENCY	0		203,179	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	ON-GOING	0		3,102,074	Med Suppl	FMV
		Middle East and North Africa	ON-GOING	0		11,979,021	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	ON-GOING	0		10,467,212	Med Suppl	FMV
		Middle East and North Africa	ON-GOING	0		9,734	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	EMERGENCY	0		70,768	Med Suppl	FMV
		Middle East and North Africa	EMERGENCY	0		99,945	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	EMERGENCY	0		174,523	Med Suppl	FMV
		Middle East and North Africa	EMERGENCY	0		258,754	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America	ON-GOING	0		5,191	Med Suppl	FMV
		North America	ON-GOING	0		7,394	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America	ON-GOING	0		7,597	Med Suppl	FMV
		North America	ON-GOING	0		9,448	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America	ON-GOING	0		15,513	Med Suppl	FMV
		North America	ON-GOING	0		24,955	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America	ON-GOING	0		31,913	Med Suppl	FMV
		North America	ON-GOING	0		38,384	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America	ON-GOING	0		42,804	Med Suppl	FMV
		North America	ON-GOING	0		115,954	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America	ON-GOING	0		247,925	Med Suppl	FMV
		Russia and the Newly Independent States	ON-GOING	0		14,081,202	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Russia and the Newly Independent States	ON-GOING	0		13,911,456	Med Suppl	FMV
		Russia and the Newly Independent States	ON-GOING	0		54,403,680	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Russia and the Newly Independent States	ON-GOING	0		11,807	Med Suppl	FMV
		South America	EMERGENCY	0		32,040	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	EMERGENCY	0		2,523,336	Med Suppl	FMV
		South America	ON-GOING	0		505,308	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		13,404,323	Med Suppl	FMV
		South America	ON-GOING	0		5,846	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		6,005	Med Suppl	FMV
		South America	ON-GOING	0		6,411	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		6,539	Med Suppl	FMV
		South America	ON-GOING	0		7,200	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		7,397	Med Suppl	FMV
		South America	ON-GOING	0		8,261	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		8,355	Med Suppl	FMV
		South America	ON-GOING	0		8,658	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		9,042	Med Suppl	FMV
		South America	ON-GOING	0		9,306	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		9,666	Med Suppl	FMV
		South America	ON-GOING	0		9,886	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		10,182	Med Suppl	FMV
		South America	ON-GOING	0		10,579	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		11,179	Med Suppl	FMV
		South America	ON-GOING	0		14,077	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		15,811	Med Suppl	FMV
		South America	ON-GOING	0		17,054	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		17,736	Med Suppl	FMV
		South America	ON-GOING	0		18,654	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		22,052	Med Suppl	FMV
		South America	ON-GOING	0		22,153	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		22,499	Med Suppl	FMV
		South America	ON-GOING	0		22,666	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		23,052	Med Suppl	FMV
		South America	ON-GOING	0		24,638	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		30,294	Med Suppl	FMV
		South America	ON-GOING	0		34,669	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		37,646	Med Suppl	FMV
		South America	ON-GOING	0		39,963	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		57,952	Med Suppl	FMV
		South America	ON-GOING	0		64,448	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		67,676	Med Suppl	FMV
		South America	ON-GOING	0		70,577	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		76,594	Med Suppl	FMV
		South America	ON-GOING	0		82,034	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		83,786	Med Suppl	FMV
		South America	ON-GOING	0		90,403	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		100,587	Med Suppl	FMV
		South America	ON-GOING	0		104,686	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		107,273	Med Suppl	FMV
		South America	ON-GOING	0		141,469	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		147,004	Med Suppl	FMV
		South America	ON-GOING	0		180,821	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		350,192	Med Suppl	FMV
		South America	ON-GOING	0		430,977	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		478,089	Med Suppl	FMV
		South America	ON-GOING	0		578,770	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	ON-GOING	0		618,997	Med Suppl	FMV
		South Asia	ON-GOING	0		8,978,229	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	ON-GOING	0		5,709	Med Suppl	FMV
		South Asia	ON-GOING	0		6,493	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	ON-GOING	0		15,130	Med Suppl	FMV
		South Asia	EMERGENCY	0		22,128	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	ON-GOING	0		24,676	Med Suppl	FMV
		South Asia	ON-GOING	0		25,956	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	ON-GOING	0		27,677	Med Suppl	FMV
		South Asia	ON-GOING	0		37,033	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	ON-GOING	0		45,957	Med Suppl	FMV
		South Asia	ON-GOING	0		47,075	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	ON-GOING	0		53,747	Med Suppl	FMV
		South Asia	EMERGENCY	0		54,516	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	ON-GOING	0		73,614	Med Suppl	FMV
		South Asia	ON-GOING	0		91,681	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	ON-GOING	0		121,691	Med Suppl	FMV
		South Asia	ON-GOING	0		140,307	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	ON-GOING	0		164,369	Med Suppl	FMV
		South Asia	ON-GOING	0		166,184	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	ON-GOING	0		174,031	Med Suppl	FMV
		Sub-Saharan Africa	EMERGENCY	0		15,422	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	EMERGENCY	0		16,373	Med Suppl	FMV
		Sub-Saharan Africa	EMERGENCY	0		175,719	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	EMERGENCY	0		330,047	Med Suppl	FMV
		Sub-Saharan Africa	EMERGENCY	0		7,675	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	EMERGENCY	0		79,464	Med Suppl	FMV
		Sub-Saharan Africa	EMERGENCY	0		99,252	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	EMERGENCY	0		1,077,586	Med Suppl	FMV
		Sub-Saharan Africa	EMERGENCY	0		192,858	Med Suppl	FMV

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	EMERGENCY	0		113,144	Med Suppl	FMV
		Sub-Saharan Africa	EMERGENCY	0		83,078	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		40,320,000	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		1,773,262	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		12,032,469	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		297,346	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		435,631	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		5,900,395	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		5,117	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		5,310	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		5,332	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		5,748	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		5,850	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		5,959	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		6,205	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		6,353	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		6,425	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		6,632	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		6,664	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		6,839	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		7,114	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		7,383	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		7,856	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		9,751	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		9,785	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		10,086	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		10,201	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		11,074	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		12,113	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		12,936	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		13,737	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		13,794	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		15,672	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		15,873	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		16,285	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		17,592	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		17,639	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		18,924	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		19,715	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		22,827	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		23,061	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		24,482	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		24,919	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		26,071	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		26,378	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		26,577	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		26,772	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		27,268	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		28,610	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		29,389	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		31,965	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		32,868	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		33,098	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		33,673	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		35,442	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		37,663	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		38,144	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		38,929	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		40,962	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		41,703	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		42,387	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		42,429	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		43,184	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		43,973	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		45,424	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		48,849	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		49,497	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		49,695	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		51,956	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		53,048	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		53,980	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		60,650	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		61,420	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		62,156	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		62,861	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		63,013	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		64,802	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		64,908	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		67,001	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		67,782	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		69,097	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		71,052	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		73,159	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		73,691	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		75,101	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		75,438	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		76,491	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		76,816	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		80,554	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		80,893	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		80,895	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		80,971	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		82,267	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		83,854	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		84,238	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		84,867	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		88,206	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		91,071	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		93,853	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		94,248	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		94,674	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		95,958	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		98,694	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		103,621	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		103,944	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		110,030	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		111,133	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		118,365	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		124,625	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		126,559	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		126,621	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		128,271	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		134,575	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		141,063	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		143,466	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		144,167	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		144,920	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		145,753	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		147,047	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		147,049	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		149,804	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		152,857	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		161,358	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		162,817	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		164,293	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		164,485	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		164,770	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		165,890	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		173,431	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		182,716	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		183,195	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		183,420	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		193,636	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		194,027	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		195,588	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		215,307	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		232,289	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		238,653	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		251,541	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		256,114	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		256,879	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		269,636	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		288,827	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		290,453	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		315,456	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		324,799	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		368,147	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		386,041	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		398,725	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		441,822	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		454,621	Med Suppl	FMV
		Sub-Saharan Africa	ON-GOING	0		621,663	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	ON-GOING	0		811,678	Med Suppl	FMV

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493054005019			
SCHEDULE G (Form 990 or 990-EZ)		Supplemental Information Regarding Fundraising or Gaming Activities			OMB No 1545-0047		
Department of the Treasury Internal Revenue Service		Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .			2017		
Name of the organization AmeriCares Foundation Inc				Employer identification number 06-1008595			
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.							
1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.							
a <input checked="" type="checkbox"/> Mail solicitations		e <input checked="" type="checkbox"/> Solicitation of non-government grants					
b <input checked="" type="checkbox"/> Internet and email solicitations		f <input checked="" type="checkbox"/> Solicitation of government grants					
c <input checked="" type="checkbox"/> Phone solicitations		g <input checked="" type="checkbox"/> Special fundraising events					
d <input checked="" type="checkbox"/> In-person solicitations							
2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.							
(i) Name and address of individual or entity (fundraiser)		(ii) Activity		(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
				Yes No			
1 the harrington agency 329 dickinson ave  swarthmore, PA 19081		FUNDRAISING COUNSEL		No	22,588,250	1,960,999	20,627,251
2 telefund inc 186 lincoln street ste 100  boston, MA 02111		prof'l solicitor		No	9,683	8,322	1,361
3							
4							
5							
6							
7							
8							
9							
10							
Total ▶					22,597,933	1,969,321	20,628,612
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.							
AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY							
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2017							



**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d)
		<u>airlift benefit</u> (event type)	<u>(event type)</u>	<u>0</u> (total number)	Total events (add col (a) through col (c))
Revenue	<b>1</b> Gross receipts . . . . .	3,198,320			3,198,320
	<b>2</b> Less Contributions . . . . .	3,046,320			3,046,320
	<b>3</b> Gross income (line 1 minus line 2) . . . . .	152,000			152,000
Direct Expenses	<b>4</b> Cash prizes . . . . .				
	<b>5</b> Noncash prizes . . . . .				
	<b>6</b> Rent/facility costs . . . . .	154,870			154,870
	<b>7</b> Food and beverages . . . . .	144,071			144,071
	<b>8</b> Entertainment . . . . .	237,144			237,144
	<b>9</b> Other direct expenses . . . . .	207,646			207,646
	<b>10</b> Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶				743,731
	<b>11</b> Net income summary Subtract line 10 from line 3, column (d) . . . . . ▶				-591,731

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Direct Expenses	<b>1</b> Gross revenue . . . . .				
	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Noncash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
	<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	<b>7</b> Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶				
	<b>8</b> Net gaming income summary Subtract line 7 from line 1, column (d) . . . . . ▶				

**9** Enter the state(s) in which the organization conducts gaming activities \_\_\_\_\_

**a** Is the organization licensed to conduct gaming activities in each of these states?

☐ Yes ☐ No

**b** If "No," explain \_\_\_\_\_

**10a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

☐ Yes ☐ No

**b** If "Yes," explain \_\_\_\_\_

**11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

**12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

**13** Indicate the percentage of gaming activity conducted in

<b>a</b> The organization's facility	<b>13a</b>	%
<b>b</b> An outside facility	<b>13b</b>	%

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

**b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_

**c** If "Yes," enter name and address of the third party

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

**16** Gaming manager information

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

☐ Director/officer ☐ Employee ☐ Independent contractor

**17** Mandatory distributions

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

**b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Return Reference	Explanation
Schedule G, Part I - Fundraising Consultants	The amounts paid by AmeriCares to the fundraising consultants listed in Schedule G are reported (as required by the Form 990) on a fiscal year basis. These consultants may be represented in Part VII, Section B as top highly paid independent contractors. The amounts reported in Part VII are reported on a calendar-year basis, therefore they may differ from amounts reported on schedule G. per all contracts, expenses are budgeted and approved separately from consulting fees. In fiscal year 2018, in addition to the consulting fees listed in Schedule G, Part I, AmeriCares paid other non-consulting fundraising expenses to Telefund, Inc. of \$1,422.

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
AmeriCares Foundation Inc

Grants and Other Assistance to Organizations,  
Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.  
▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number  
06-1008595

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . 

☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . 733

3 Enter total number of other organizations listed in the line 1 table . . . . . 11

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22  
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) FREE MEDICINE TO PATIENTS	171808	268,912,043	0	FMV	PRESCRIPTION
(2) MEDICAL OUTREACH IN THE US	57	4,982,567	0	FMV	MEDICAL SUPPLIES
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
form 990, schedule i, part I	GRANTS AND ASSISTANCE LINE 2 - Americares Monitors Activities TO ENSURE THAT DONATED GOODS AND FUNDS ARE USED TO FULFILL OUR MISSION AMERICARES TRACKS EVERY DONATION AS IT ENTERS AND LEAVES OUR WAREHOUSES AND REQUIRES REPORTING OF EACH RECEIVING PARTNER ORGANIZATION, WHICH INCLUDE DETAILED CONFIRMATION OF RECEIPT AND QUARTERLY UPDATES ON DISTRIBUTION INDIVIDUAL LICENSED HEALTH CARE PROVIDERS RECEIVING DONATIONS THROUGH OUR MEDICAL OUTREACH PROGRAM MUST PROVIDE A REPORT DETAILING HOW THE DONATION WAS USED, NUMBER OF PATIENTS TREATED AND OTHER INFORMATION HEALTH PARTNERS THAT RECEIVE FUNDING FROM AMERICARES ARE REQUIRED TO COMPLETE A GRANT APPLICATION AND A GRANT REPORT, which INCLUDES DATA ON HOW FUNDS WERE USED AND, IF APPLICABLE, THE HEALTH OUTCOME OF THE FUNDED PROJECT OR ACTIVITY AMERICARES STAFF ALSO PERFORM SITE VISITS TO MONITOR PARTNERS' USE OF PRODUCT DONATIONS AND FUNDING TARGETED HEALTH INITIATIVES SUCH AS THOSE DESCRIBED IN THE "ONGOING" SECTION ABOVE, MAY INCLUDE BASELINE AND FINAL PROJECT ASSESSMENTS

Additional Data

Software ID:  
Software Version:  
EIN: 06-1008595  
Name: AmeriCares Foundation Inc

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A COMMUNITY CLINIC INC 344 MARKET St SUNBURY, PA 17801	20-4051982	501(c)(3)	0	30,879	FMV	MEDICAL SUPPLIES	ON-GOING
A PROMISE TO HELP 1332 WINOLA Ln BIRMINGHAM, AL 35235	26-4401185	501(c)(3)	0	33,086	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABILENE-TAYLOR COUNTY PUBLIC HEALTH DISTRICT 850 N 6TH St ABILENE, TX 79601	75-6000440	115	0	392,044	FMV	MEDICAL SUPPLIES	ON-GOING
ACCESS HEALTH INC PO BOX 47 BAR MILLS, ME 04004	01-0757566	501(c)(3)	0	86,112	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ADVANTAGE BEHAVIORAL HEALTH SYSTEMS 240 MITCHELL BRIDGE RD ATHENS, GA 30606	58-2112427	Other	0	620,075	FMV	MEDICAL SUPPLIES	ON-GOING
AGAPE CLINIC 4104 JUNIUS St DALLAS, TX 75246	14-1847977	501(c)(3)	0	4,340,897	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALABAMA FREE CLINIC 212 COURTHOUSE Sq BAY MINETTE, AL 36507	63-1247879	501(c)(3)	0	522,202	FMV	MEDICAL SUPPLIES	ON-GOING
AMERICAN ACADEMY OF PEDIATRICS Cesar Gonzalez 151 San Juan, PR 00918	66-0556540	501(c)(3)	0	79,046	FMV	MEDICAL SUPPLIES	EMERGENCY



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICARES FREE CLINIC OF BRIDGEPORT 115 HIGHLAND Ave BRIDGEPORT, CT 06604	06-1422741	501(c)(3)	0	494,102	FMV	MEDICAL SUPPLIES	ON-GOING
AMERICARES FREE CLINIC OF DANBURY 76 WEST St DANBURY, CT 06810	06-1422741	501(c)(3)	0	1,051,516	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICARES FREE CLINIC OF NORWALK 98 S MAIN St NORWALK, CT 06854	06-1422741	501(c)(3)	0	448,731	FMV	MEDICAL SUPPLIES	ON-GOING
AMERICARES FREE CLINIC OF STAMFORD 88 HAMILTON Ave STAMFORD, CT 06902	06-1422741	501(c)(3)	0	445,082	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMISTAD COMMUNITY HEALTH CENTER 1533 S BROWNLEE CORPUS CHRISTI, TX 78404	20-3008507	501(c)(3)	0	141,029	FMV	MEDICAL SUPPLIES	ON-GOING
AMISTAD COMMUNITY HEALTH CENTER 1533 S BROWNLEE CORPUS CHRISTI, TX 78404	20-3008507	501(c)(3)	0	26,323	FMV	MEDICAL SUPPLIES	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ANCHOR MENTAL HEALTH INC 1001 LAWRENCE St NE WASHINGTON, DC 20017	52-0824835	501(c)(3)	0	206,252	FMV	MEDICAL SUPPLIES	ON-GOING
ANDERSON FREE CLINIC 414 N FANT ST ANDERSON, SC 29621	57-0787584	501(c)(3)	0	57,440	FMV	MEDICAL SUPPLIES	ON-GOING

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ANDREWS CENTER 2323 WEST FRONT St TYLER, TX 75702	75-1281410	501(c)(3)	0	506,263	FMV	MEDICAL SUPPLIES	ON-GOING
ANGELS COMMUNITY CLINIC 1005 POPLAR St MURRAY, KY 42071	62-1777249	501(c)(3)	0	43,993	FMV	MEDICAL SUPPLIES	ON-GOING

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ARCHWAYS INC 919 NE 13TH St FORT LAUDERDALE, FL 33304	59-2341993	501(c)(3)	0	7,928	FMV	MEDICAL SUPPLIES	EMERGENCY
ARIZONA BLEEDING DISORDERS HEALTH AND WELLNESS CEN 821 N 5TH Ave PHOENIX, AZ 85003	46-5198550	other	0	8,410	FMV	MEDICAL SUPPLIES	ON-GOING

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ARLINGTON FREE CLINIC 2921 S 11TH St ARLINGTON, VA 22204	54-1671883	501(c)(3)	0	99,093	FMV	MEDICAL SUPPLIES	ON-GOING
ARTHUR NAGEL COMMUNITY CLINIC 1116 12TH ST BANDERA, TX 78003	77-0697361	501(c)(3)	0	102,705	FMV	MEDICAL SUPPLIES	ON-GOING

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ARUBAH COMMUNITY CLINIC 1021 W MAIN ST COLLINSVILLE, OK 74021	27-3865132	501(c)(3)	0	14,587	FMV	MEDICAL SUPPLIES	ON-GOING
ASIAN & PACIFIC ISLANDER WELLNESS CENTER 726 POLK St SAN FRANCISCO, CA 94109	94-3096109	501(c)(3)	0	380,927	FMV	MEDICAL SUPPLIES	ON-GOING



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ASOCIACIOn DE SALUD PRIMARIA DE PUERTO RICO INC 400 Ave Americo Mir San Juan, PR 00927	66-0419912	501(c)(3)		9,374,290	FMV	MEDICAL SUPPLIES	EMERGENCY
ATHENS NURSES CLINIC PO BOX 1732 ATHENS, GA 30601	58-2490925	501(c)(3)	0	169,736	FMV	MEDICAL SUPPLIES	ON-GOING

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ATLANTIC MEDICAL CENTER Hwy 2 Km 578 Barceloneta, PR 00617	66-0426667	501(c)(3)	0	21,403	FMV	MEDICAL SUPPLIES	EMERGENCY
AUGUSTA REGIONAL FREE CLINIC 342 MULE ACADEMY Rd FISHERSVILLE, VA 22939	54-1651896	501(c)(3)	0	22,799	FMV	MEDICAL SUPPLIES	ON-GOING

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AUNT MARTHAS COMMUNITY HEALTH CARE 19990 GOV Hwy OLYMPIA FIELDS, IL 60491	23-7188150	501(c)(3)	0	6,603	FMV	MEDICAL SUPPLIES	ON-GOING
AUSTIN TRAVIS COUNTY INTEGRAL CARE INTEGRAL CARE P 1631 EAST 2ND St AUSTIN, TX 78702	74-1547909	501(c)(3)	0	37,327	FMV	MEDICAL SUPPLIES	ON-GOING

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AUSTIN TRAVIS COUNTY INTEGRAL CAREINTEGRAL CARE P 1631 EAST 2ND St AUSTIN, TX 78702	74-1547909	501(c)(3)	0	34,382	FMV	MEDICAL SUPPLIES	EMERGENCY
AVENAL COMMUNITY HEALTH CENTER 405 WEST D ST LEMOORE, CA 93245	77-0425496	501(c)(3)	0	21,568	FMV	MEDICAL SUPPLIES	ON-GOING

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AVICENNA COMMUNITY HEALTH CENTER PO BOX 218 URBANA, IL 61803	27-0267757	501(c)(3)	0	21,127	FMV	MEDICAL SUPPLIES	ON-GOING
AVITA COMMUNITY PARTNERS 4331 THURMON TAN FLOWERY BRANCH, GA 30542	58-2109706	115	0	222,211	FMV	MEDICAL SUPPLIES	ON-GOING

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AZ PACH 2902 W CLARENDON AVE PHOENIX, AZ 85017	46-0650798	501(c)(3)	0	862,271	FMV	MEDICAL SUPPLIES	ON-GOING
AZZARELLI OUTREACH CLINIC 341 N ST JOSEPH AVE KANKAKEE, IL 60901	36-2312493	501(c)(3)	0	197,971	FMV	MEDICAL SUPPLIES	ON-GOING

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BAPTIST HEALTH FOLLOW UP CARE 151 NW 11TH St 202B HOMESTEAD, FL 33030	20-5155995	501(c)(3)	0	461,789	FMV	MEDICAL SUPPLIES	ON-GOING
BAPTIST HOSPITAL OF SOUTHEAST TEXAS 810 HOSPITAL Dr BEAUMONT, TX 77701	74-1303730	501(c)(3)	0	193,045	FMV	MEDICAL SUPPLIES	EMERGENCY

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BAPTIST MISSION CENTER 2125 EXCHANGE AVE OKLAHOMA CITY, OK 73108	73-0644143	501(c)(3)	0	127,727	FMV	MEDICAL SUPPLIES	ON-GOING
BARTZ-ALTADONNA COMMUNITY HEALTH CENTER 43322 GINGHAM AVE LANCASTER, CA 93535	27-3261289	501(c)(3)	0	335,937	FMV	MEDICAL SUPPLIES	ON-GOING



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BATON ROUGE PRIMARY CARE COLLABORATIVE INC 2013 CENTRAL Rd BATON ROUGE, LA 70807	41-2114148	501(c)(3)	0	15,367	FMV	MEDICAL SUPPLIES	ON-GOING
BAYLOR S&W COMMUNITY CARE CLINIC - GARLAND 601 CLARA BARTON BLVD GARLAND, TX 75042	75-2536818	501(c)(3)	0	459,183	FMV	MEDICAL SUPPLIES	ON-GOING

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BAYOUCLINIC INC 13833 TAPIA BAYOU LA BATRE, AL 365092515	63-1270951	501(c)(3)	0	91,000	FMV	MEDICAL SUPPLIES	ON-GOING
BEACON CLINIC FOR HEALTH AND HOPE 248 SENECA St REAR HARRISBURG, PA 17110	46-3507570	501(c)(3)	0	20,254	FMV	MEDICAL SUPPLIES	ON-GOING

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BEERSHEBA SPRINGS MEDICAL CLINIC PO BOX 112 BEERSHEBA SPRINGS, TN 37305	26-4579813	501(c)(3)	0	444,184	FMV	MEDICAL SUPPLIES	ON-GOING
BEHAVIORAL HEALTH SERVICES OF S GEORGIA 3120 B N OAK ST VALDOSTA, GA 31602	58-2107483	Other	0	352,194	FMV	MEDICAL SUPPLIES	ON-GOING

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BETHESDA COMMUNITY CLINIC INC 111 MOUNTAIN BROOK DR CANTON, GA 30115	27-4923001	501(c)(3)	0	230,586	FMV	MEDICAL SUPPLIES	ON-GOING
BETHESDA HEALTH CLINIC 409 WEST FERGUSON TYLER, TX 75702	26-0036674	501(c)(3)	0	730,729	FMV	MEDICAL SUPPLIES	ON-GOING

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BLACK HAWK GRUNDY MENTAL HEALTH CENTER 3251 WEST 9TH St WATERLOO, IA 50702	42-0733463	501(c)(3)	0	113,627	FMV	MEDICAL SUPPLIES	ON-GOING
BLUEBONNET TRAILS COMMUNITY SERVICES 1009 N GEORGETOWN ST ROUND ROCK, TX 78664	74-2795332	501(c)(3)	0	220,126	FMV	MEDICAL SUPPLIES	ON-GOING

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BOLINGBROOK CHRISTIAN HEALTH CENTER 151 E BRIARCLIFF RD BOLINGBROOK, IL 60440	36-4401468	501(c)(3)	0	694,947	FMV	MEDICAL SUPPLIES	ON-GOING
BREAD OF HEALING CLINIC 1821 N 16TH ST MILWAUKEE, WI 53205	81-0669867	501(c)(3)	0	708,142	FMV	MEDICAL SUPPLIES	ON-GOING

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BRIDGES TO HEALTH 1251 W KEM Rd MARION, IN 46952	20-5405181	501(c)(3)	0	53,514	FMV	MEDICAL SUPPLIES	ON-GOING
BRd St CLINIC 534 N 35TH St MOREHEAD CITY, NC 28557	56-1853604	501(c)(3)	0	16,868	FMV	MEDICAL SUPPLIES	ON-GOING

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BROCK HUGHES FREE CLINIC INC 450 W MONROE ST WYTHEVILLE, VA 24382	20-2353144	501(c)(3)	0	148,667	FMV	MEDICAL SUPPLIES	ON-GOING
BROWARD COMMUNITY & FAMILY HEALTH CENTERS 6015 WASHINGTON ST HOLLYWOOD, FL 33023	59-3489664	501(c)(3)	0	671,639	FMV	MEDICAL SUPPLIES	EMERGENCY



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BROWARD COMMUNITY & FAMILY HEALTH CENTERS 6015 WASHINGTON ST HOLLYWOOD, FL 33023	59-3489664	501(c)(3)	0	37,685	FMV	MEDICAL SUPPLIES	ON-GOING
BROWARD HEALTH N HOSPITAL RETAIL PHARMACY 201 E SAMPLE Rd DEERFIELD BEACH, FL 33064	59-6012065	501(c)(3)	0	75,279	FMV	MEDICAL SUPPLIES	ON-GOING

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BROWNSVILLE COMMUNITY HEALTH CENTER 191 EAST PRICE Rd BROWNSVILLE, TX 78521	74-2176836	501(c)(3)	0	71,555	FMV	MEDICAL SUPPLIES	ON-GOING
BROWNSVILLE COMMUNITY HEALTH CENTER 191 EAST PRICE Rd BROWNSVILLE, TX 78521	74-2176836	501(c)(3)	0	5,729	FMV	MEDICAL SUPPLIES	EMERGENCY

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BUDDHIST TZU CHI MEDICAL CENTER 1000 S GARFIELD ALHAMBRA, CA 91801	95-4457939	501(c)(3)	0	455,987	FMV	MEDICAL SUPPLIES	ON-GOING
BUTLER COUNTY HEALTH DEPARTMENT 1619 N MAIN St POPLAR BLUFF, MO 63901	43-1070380	115	0	45,847	FMV	MEDICAL SUPPLIES	ON-GOING

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CHANGE 37 KNOLLWOOD Dr SHREWSBURY, MA 01545	22-2905321	501(c)(3)	0	821,148	FMV	MEDICAL SUPPLIES	ON-GOING
CABRINI CLINIC 1234 PORTER St DETROIT, MI 48226	38-3129349	501(c)(3)	0	172,185	FMV	MEDICAL SUPPLIES	ON-GOING

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CACHE VALLEY COMMUNITY HEALTH CENTER 1515 N 400 E SUITE 104 NLOGAN, UT 84341	81-0587644	501(c)(3)	0	733,774	FMV	MEDICAL SUPPLIES	ON-GOING
CACHE VALLEY COMMUNITY HEALTH CENTER - LOGAN 944 S STATE HWY 91 LOGAN, UT 84321	81-0587644	501(c)(3)	0	276,902	FMV	MEDICAL SUPPLIES	ON-GOING

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CACHE VALLEY COMMUNITY HEALTH CENTER- S 26 WEST MAIN STE 3A HYRUM, UT 84319	81-0587644	501(c)(3)	0	757,339	FMV	MEDICAL SUPPLIES	ON-GOING
CALVARY COMMUNITY CLINIC 3401 E LOUISIANA Ave TAMPA, FL 33610	47-1252154	501(c)(3)	0	17,948	FMV	MEDICAL SUPPLIES	ON-GOING

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CAMILLUS HEALTH CONCERN 336 NW 5TH ST MIAMI, FL 33128	65-0063921	501(c)(3)	0	1,849,491	FMV	MEDICAL SUPPLIES	EMERGENCY
CAMILLUS HEALTH CONCERN 336 NW 5TH ST MIAMI, FL 33128	65-0063921	501(c)(3)	0	376,255	FMV	MEDICAL SUPPLIES	ON-GOING

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CAMINO COMMUNITY DEVELOPMENT CORPORATION INC 133 STETSON DR CHARLOTTE, NC 28262	56-2015959	501(c)(3)	0	75,582	FMV	MEDICAL SUPPLIES	ON-GOING
CAMP FROZEN CHOSEN - ALASKA HEMOPHILIA ASSOCIATION 3851 Piper St ANCHORAGE, AK 99508	94-3143226	501(c)(3)	0	47,882	FMV	MEDICAL SUPPLIES	ON-GOING



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CAMP HONOR 826 N 5th Ave Phoenix, AZ 85003	86-0209257	501(c)(3)	0	127,036	FMV	MEDICAL SUPPLIES	ON-GOING
CAMP INDEPENDENT FIREFLY 3121S MD PKWY STE 206 LAS VEGAS, NV 89109	26-0286469	501(c)(3)	0	55,528	FMV	MEDICAL SUPPLIES	ON-GOING

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CAMP TAPAWINGO 707 SW Gaines St Rm 1133 Portland, OR 97239	93-0551733	501(c)(3)	0	143,045	FMV	MEDICAL SUPPLIES	ON-GOING
CANYON COUNTY COMMUNITY CLINIC 524 CLEVELAND BLVD CALDWELL, ID 83605	26-4195171	501(c)(3)	0	339,673	FMV	MEDICAL SUPPLIES	ON-GOING

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CAPE VOLUNTEERS IN MEDICINE INC 423 N Rte 9 CAPE MAY COURT HOUSE, NJ 08210	52-2257585	501(c)(3)	0	127,096	FMV	MEDICAL SUPPLIES	ON-GOING
CAPITAL AREA HEALTHNETWORK NSIDE MEDICAL Ctr RICHMOND, VA 23222	54-1884190	501(c)(3)	0	138,168	FMV	MEDICAL SUPPLIES	ON-GOING

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CAPITAL CITY RESCUE MISSION FREE CLINIC 259 S PEARL ST ALBANY, NY 12202	56-2663290	501(c)(3)	0	498,066	FMV	MEDICAL SUPPLIES	ON-GOING
CARE ALLIANCE HEALTH CENTER 1530 ST CLAIR AVE CLEVELAND, OH 44114	34-1748776	501(c)(3)	0	8,623	FMV	MEDICAL SUPPLIES	ON-GOING

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CARIDAD CENTER 8645 BOYNTON BEACH BOYNTON BEACH, FL 33472	65-0149423	501(c)(3)	0	22,456	FMV	MEDICAL SUPPLIES	ON-GOING
CARING HEARTS FREE CLINIC 835 WOODLAND Dr STUART, VA 24171	14-1909014	501(c)(3)	0	355,896	FMV	MEDICAL SUPPLIES	ON-GOING

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARING PLACE CLINIC 901 W BRd ST MANSFIELD, TX 76063	27-0537258	501(c)(3)	0	66,811	FMV	MEDICAL SUPPLIES	ON-GOING
CARROLL COUNTY HEALTH DEPARTMENT 101 WEST MAIN ST DELPHI, IN 46923	35-6000130	501(c)(3)	0	165,524	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CASA EL BUEN SAMARITANO PO BOX 20487 HOUSTON, TX 77225	37-1546805	501(c)(3)	0	32,267	FMV	MEDICAL SUPPLIES	EMERGENCY
CASS COUNTY MENTAL HEALTH ASSOCIATION 121 EAST 2ND St BEARDSTOWN, IL 62618	23-7244801	501(c)(3)	0	36,606	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CATHERINE MCAULEY CLINIC 5530 HOHMAN Ave HAMMOND, IN 46320	35-1835133	501(c)(3)	0	39,686	FMV	MEDICAL SUPPLIES	ON-GOING
CATHOLIC CHARITIES - CROSSRdS ALLIANCE 3010 NE 24TH St OCALA, FL 34470	53-0196620	501(c)(3)	0	18,164	FMV	MEDICAL SUPPLIES	EMERGENCY



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CENTER FOR FAMILY HEALTH AND EDUCATION 8727 VAN NUYS BLVD PANORAMA CITY, CA 91402	27-0224623	501(c)(3)	0	108,638	FMV	MEDICAL SUPPLIES	ON-GOING
CENTER FOR HEALTHY HEARTS 1200 WEST CARY St RICHMOND, VA 23220	52-1303481	501(c)(3)	0	6,439	FMV	MEDICAL SUPPLIES	ON-GOING

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CENTER FOR PHARMACY CARE 1000 FIFTH Ave PITTSBURGH, PA 15282	25-1035663	501(c)(3)	0	6,487	FMV	MEDICAL SUPPLIES	ON-GOING
CENTRE VOLUNTEERS IN MEDICINE 2520 GREEN TECH DR STATE COLLEGE, PA 16803	25-1897969	501(c)(3)	0	140,972	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CENTRO DE SALUD FAMILIAR DR JULIO PALMIERI Calle Morse Ezquina Val Arroyo, PR 00714	66-0496484	501(c)(3)	0	40,512	FMV	MEDICAL SUPPLIES	EMERGENCY
CENTRO DE SERVICIOS PRIMARIOS DE SALUD DE PATILLAS CALLE RIEFKHOL 99 PATILLAS, PR 00723	66-0428922	501(c)(3)	0	69,395	FMV	MEDICAL SUPPLIES	EMERGENCY

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CENTRO SAN VICENTE 8061 ALAMEDA AVE EL PASO, TX 79915	74-2505561	501(c)(3)	0	24,720	FMV	MEDICAL SUPPLIES	ON-GOING
CHARITABLE PHARMACY OF CENTRAL OHIO 200 E LIVINGSTON AVE COLUMBUS, OH 43215	27-0147099	501(c)(3)	0	132,464	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CHARLOTTE COMMUNITY HEALTH CLINIC 8401 MEDICAL PLAZA DR CHARLOTTE, NC 28262	56-2274174	501(c)(3)	0	35,527	FMV	MEDICAL SUPPLIES	ON-GOING
CHAUTAUQUA HEALTHCARE SERVICES 3686 US HWY 331 DEFUNIAK SPRINGS, FL 32435	59-1469145	501(c)(3)	0	54,811	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CHCGDEAST DAYTON HEALTH CENTER 2132 E THIRD ST DAYTON, OH 45403	26-1253235	501(c)(3)	0	103,080	FMV	MEDICAL SUPPLIES	ON-GOING
CHILDREN AND COMMUNITY HEALTH CENTER 120 S CENTRAL EXP MCKINNEY, TX 75072	20-0637782	501(c)(3)	0	85,759	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CHIPPEWA VALLEY FREE CLINIC 816 PORTER AVE EAU CLAIRE, WI 54701	39-1840231	501(c)(3)	0	228,658	FMV	MEDICAL SUPPLIES	ON-GOING
CHI-ST VINCENT INTERFAITH CLINIC 830 N CREEK CONWAY, AR 72032	71-0830696	501(c)(3)	0	979,539	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CHRIST CLINIC 25722 KINGSLAND BLVD KATY, TX 77494	90-0789318	501(c)(3)	0	451,230	FMV	MEDICAL SUPPLIES	ON-GOING
CHRIST CLINIC 25722 KINGSLAND BLVD KATY, TX 77494	90-0789318	501(c)(3)	0	351,047	FMV	MEDICAL SUPPLIES	EMERGENCY



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CHRISTIAN HEALTH CENTER 1115 FAIRVIEW CAMDEN, AR 71701	71-0804142	501(c)(3)	0	119,382	FMV	MEDICAL SUPPLIES	ON-GOING
CHRISTUS SPOHN HEALTH SYSTEM 600 Elizabeth St CORPUS CHRISTI, TX 78404	74-1109836	501(c)(3)	0	97,825	FMV	MEDICAL SUPPLIES	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CHURCH HEALTH SERVICES 115 N CENTER St BEAVER DAM, WI 53916	39-1759669	501(c)(3)	0	265,335	FMV	MEDICAL SUPPLIES	ON-GOING
CHURCH HILL FREE CLINIC PO BOX 166 CHURCH HILL, TN 37642	62-1391365	501(c)(3)	0	192,134	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CIRCLE HEALTH SERVICES 12201 EUCLID AVE CLEVELAND, OH 44106	23-7078501	501(c)(3)	0	519,153	FMV	MEDICAL SUPPLIES	ON-GOING
CITRUS HEALTH NETWORK INC 4175 W 20 Ave HIALEAH, FL 33012	59-1865751	501(c)(3)	0	6,912	FMV	MEDICAL SUPPLIES	ON-GOING

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CITY ON A HILL MINISTRIES HEALTH CLINIC 100 S PINE ST Ste 140 ZEELAND, MI 49464	20-3901260	501(c)(3)	0	9,339	FMV	MEDICAL SUPPLIES	ON-GOING
CITY Sq 2835 AL LIPSCOMB WAY DALLAS, TX 75215	79-2332948	501(c)(3)	0	64,639	FMV	MEDICAL SUPPLIES	ON-GOING

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CL BRUMBACK PRIMARY CARE CLINICS 2601 10th Ave N Palm Springs, FL 33461	45-5591655	501(c)(3)	0	14,306	FMV	MEDICAL SUPPLIES	EMERGENCY
CLAY BEHAVIORAL HEALTH CENTER 1726 KINGSLEY Ave ORANGE PARK, FL 32073	59-2219317	501(c)(3)	0	1,183,991	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CLEARWATER FREE CLINIC 707 HARRISON AVE CLEARWATER, FL 33755	59-1852871	501(c)(3)	0	228,576	FMV	MEDICAL SUPPLIES	ON-GOING
CLEVELAND COUNTY HEALTH DEPARTMENT 200 S POST RD SHELBY, NC 28152	56-6000288	115	0	676,660	FMV	MEDICAL SUPPLIES	ON-GOING

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CLINIC BY THE BAY 4877 MISSION St SAN FRANCISCO, CA 94112	26-2593712	501(c)(3)	0	5,142	FMV	MEDICAL SUPPLIES	ON-GOING
CMAP EXPRESS 1101 4TH St ALEXANDRIA, LA 71301	02-0751416	501(c)(3)	0	10,293	FMV	MEDICAL SUPPLIES	ON-GOING

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COASTAL BEND WELLNESS FOUNDATION 5633 S Staples St Corpus Christi, TX 78411	74-2429518	501(c)(3)	0	1,074,557	FMV	MEDICAL SUPPLIES	EMERGENCY
COMCARE OF SEDGWICK COUNTY 934 N WATER WICHITA, KS 67203	48-6000798	115	0	343,302	FMV	MEDICAL SUPPLIES	ON-GOING



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COMMUNITY CARE CENTER FOR FORSYTH CO INC 2135 NEW WALKERTOWN WINSTON SALEM, NC 27101	58-1403699	501(c)(3)	0	850,493	FMV	MEDICAL SUPPLIES	ON-GOING
COMMUNITY CARE CLINIC 608 E GARFIELD AVE GETTYSBURG, SD 57442	46-0396683	501(c)(3)	0	18,271	FMV	MEDICAL SUPPLIES	ON-GOING

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COMMUNITY CARE CLINIC OF DARE PO BOX 1329 NAGS HEAD, NC 27959	20-2230717	501(c)(3)	0	17,450	FMV	MEDICAL SUPPLIES	ON-GOING
COMMUNITY CARE CLINIC OF HIGHLANDS-CASHIERS INC 52 AUNT DORA Dr HIGHLANDS, NC 28741	65-1251915	501(c)(3)	0	164,268	FMV	MEDICAL SUPPLIES	ON-GOING

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COMMUNITY CONNECTIONS FREE CLINIC 101 E FOUNTAIN St DODGEVILLE, WI 53533	72-1619112	501(c)(3)	0	61,884	FMV	MEDICAL SUPPLIES	ON-GOING
COMMUNITY FREE CLINIC INC 249 MILL St HAGERSTOWN, MD 21740	52-1772594	501(c)(3)	0	915,114	FMV	MEDICAL SUPPLIES	ON-GOING

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COMMUNITY HEALTH AND SOCIAL SERVICES CENTER 5635 W FORT ST DETROIT, MI 482093154	38-3094394	501(c)(3)	0	7,859	FMV	MEDICAL SUPPLIES	ON-GOING
COMMUNITY HEALTH CARE CLINIC 900 N FRANKLIN NORMAL, IL 61761	37-1316328	501(c)(3)	0	258,541	FMV	MEDICAL SUPPLIES	ON-GOING

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COMMUNITY HEALTH CENTER OF SOUTHEAST KANSAS 3011 MICHIGAN ST PITTSBURG, KS 66762	75-3003364	501(c)(3)	0	9,165	FMV	MEDICAL SUPPLIES	ON-GOING
COMMUNITY HEALTH CENTERS INC 12716 NE 36TH St SPENCER, OK 73084	73-0930123	501(c)(3)	0	194,341	FMV	MEDICAL SUPPLIES	ON-GOING

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COMMUNITY HEALTH CLINIC OF HARDIN & LARUE COUNTIES 1113 WOODLAND Dr ELIZABETHTOWN, KY 42701	30-0042070	501(c)(3)	0	288,423	FMV	MEDICAL SUPPLIES	ON-GOING
COMMUNITY HEALTH CLINIC OF JOPLIN 701 S JOPLIN AVE JOPLIN, MO 64801	43-1643962	501(c)(3)	0	23,050	FMV	MEDICAL SUPPLIES	ON-GOING

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COMMUNITY HEALTH IMPROVEMENT CENTER 320 E CENTRAL AVE DECATUR, IL 62521	37-0961830	501(c)(3)	0	591,227	FMV	MEDICAL SUPPLIES	ON-GOING
COMMUNITY HEALTH OF S FLORIDA INC 10300 SW 216TH St MIAMI, FL 33190	53-1372690	501(c)(3)	0	38,053	FMV	MEDICAL SUPPLIES	EMERGENCY

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COMMUNITY HEALTH SERVICE INC 1113 W 11TH ST GRAFTON, ND 58237	41-1000060	501(c)(3)	0	565,182	FMV	MEDICAL SUPPLIES	ON-GOING
COMMUNITY HEALTH SERVICES OF UNION COUNTY INC 1338-C EAST SUNSET Dr MONROE, NC 28112	46-0495947	501(c)(3)	0	116,564	FMV	MEDICAL SUPPLIES	ON-GOING



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COMMUNITY HEALTH SERVICES INC COMM Hlth Svcs INC MORRHEAD, MN 56560	41-1000060	501(c)(3)	0	125,843	FMV	MEDICAL SUPPLIES	ON-GOING
COMMUNITY HEALTH-IN-PARTNERSHIP SERVICES (CHIPS) CHIPS HlthWELL CTR SAINT LOUIS, MO 63106	43-1589851	501(c)(3)	0	440,135	FMV	MEDICAL SUPPLIES	ON-GOING

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COMMUNITY HEALTHWORX 1543 MCGINNIS St ALEXANDRIA, LA 71301	72-1444312	501(c)(3)	0	5,135	FMV	MEDICAL SUPPLIES	ON-GOING
COMMUNITY HELPING HANDS HEALTH CLINIC 34-C COURTHOUSE Sq CLEVELAND, GA 30528	64-0950194	501(c)(3)	0	366,724	FMV	MEDICAL SUPPLIES	ON-GOING

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COMMUNITY HELPING PLACE FREE MEDICAL CLINC 56 CAMP GLISSON Rd DAHLONEGA, GA 30533	37-1554432	501(c)(3)	0	135,627	FMV	MEDICAL SUPPLIES	ON-GOING
COMMUNITY MEDICAL CLINIC OF KERSHAW COUNTY 110 C EAST DEKALB St CAMDEN, SC 29021	57-1074191	501(c)(3)	0	19,071	FMV	MEDICAL SUPPLIES	ON-GOING

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COMMUNITY MEDICAL WELLNESS CENTERS 1360 E ANAHEIM St LONG BEACH, CA 90813	45-2424322	501(c)(3)	0	67,808	FMV	MEDICAL SUPPLIES	ON-GOING
COMMUNITY MEDICINE FOUNDATION 1131 SALUDA St ROCK HILL, SC 297305776	57-0891008	501(c)(3)	0	274,077	FMV	MEDICAL SUPPLIES	ON-GOING

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COMMUNITY MENTAL HEALTH AFFILIATES INC CMHA NEW BRITAIN, CT 06051	06-0934544	501(c)(3)	0	9,549	FMV	MEDICAL SUPPLIES	ON-GOING
COMMUNITY VOLUNTEERS IN MEDICINE 300B LAWRENCE Dr WEST CHESTER, PA 19380	23-2944553	501(c)(3)	0	288,358	FMV	MEDICAL SUPPLIES	ON-GOING

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COMMUNITYCARE HC - CENTRAL TX CHC DBA 2901 Montopolis Dr Austin, TX 78741	55-0853118	501(c)(3)	0	5,729	FMV	MEDICAL SUPPLIES	EMERGENCY
COMMUNITYHEALTH 2611 W CHICAGO AVE CHICAGO, IL 60622	36-3931793	501(c)(3)	0	22,169	FMV	MEDICAL SUPPLIES	ON-GOING

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COMPASSION CONNECT INC 18040 SW ALEXANDER ST BEAVERTON, OR 97003	26-2304524	501(c)(3)	0	11,090	FMV	MEDICAL SUPPLIES	ON-GOING
COMPASSIONATE CARE OF SHELBY COUNTY INC 124 N OHIO AVE SIDNEY, OH 45365	20-8479583	501(c)(3)	0	396,771	FMV	MEDICAL SUPPLIES	ON-GOING

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CONCILIO DE SALUD INTEGRAL DE LOIZA Carr 187 Interseccion 188 Loiza, PR 00772	23-7259899	501(c)(3)	0	27,163	FMV	MEDICAL SUPPLIES	EMERGENCY
COOPERATIVE CHRISTIAN MINISTRIES AND CLINIC 133 ARBOR St HOT SPRINGS, AR 71901	62-1671396	501(c)(3)	0	149,063	FMV	MEDICAL SUPPLIES	ON-GOING



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COOS COUNTY FAMILY HEALTH SERVICES CCFHS BERLIN, NH 03570	02-0350051	501(c)(3)	0	115,945	FMV	MEDICAL SUPPLIES	ON-GOING
CORNERSTONE FAMILY HEALTHCARE 2570 ROUTE 9W CORNWALL, NY 12518	06-1036715	501(c)(3)	0	19,899	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CORNERSTONE MONTGOMERY INC 2 TAFT COURT ROCKVILLE, MD 20851	52-0937199	501(c)(3)	0	473,561	FMV	MEDICAL SUPPLIES	ON-GOING
CORPORACION DE SERVICIOS MEDICOS PRIMARIOS Y PREVE PO BOX 907 HATILLO, PR 00659	66-0427194	501(c)(3)	0	90,493	FMV	MEDICAL SUPPLIES	EMERGENCY

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CORPORACION DE SERVICIOS MEDICOS PRIMARIOS Y PREVE PO BOX 907 HATILLO, PR 00659	66-0427194	501(c)(3)	0	48,337	FMV	MEDICAL SUPPLIES	ON-GOING
CORPORACION SANOS 6-24 Calle El Troche Caguas, PR 00725	66-0671427	501(c)(3)	0	27,956	FMV	MEDICAL SUPPLIES	EMERGENCY

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CORPUS CHRISTI METRO MINISTRIES 1919 LEOPARD ST CORPUS CHRISTI, TX 78408	74-2247261	501(c)(3)	0	417,927	FMV	MEDICAL SUPPLIES	EMERGENCY
CORPUS CHRISTI METRO MINISTRIES 1919 LEOPARD ST CORPUS CHRISTI, TX 78408	74-2247261	501(c)(3)	0	68,547	FMV	MEDICAL SUPPLIES	ON-GOING

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COSSMA INC Ave El Jibaro Carr 172 Cidra, PR 00739	66-0434923	501(c)(3)	0	176,708	FMV	MEDICAL SUPPLIES	EMERGENCY
COSTA SALUD COMMUNITY HEALTH CENTER INC Muoz Rivera 28 Rincon, PR 00677	66-0428488	501(c)(3)	0	152,231	FMV	MEDICAL SUPPLIES	EMERGENCY

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COVE HOUSE FREE CLINIC 806 E AVE D COPPERAS COVE, TX 76522	74-2764062	501(c)(3)	0	983,125	FMV	MEDICAL SUPPLIES	ON-GOING
COVENANT COMMUNITY CARE 559 W GRAND BLVD DETROIT, MI 48216	38-3533998	501(c)(3)	0	49,384	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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COVENANT COMMUNITY CARE 559 W GRAND BLVD DETROIT, MI 48216	38-3533998	501(c)(3)	0	20,947	FMV	MEDICAL SUPPLIES	ON-GOING
COVENANT HOUSE TEXAS 1111 LOVETT BLVD HOUSTON, TX 77006	76-0050882	501(c)(3)	0	13,051	FMV	MEDICAL SUPPLIES	EMERGENCY

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COVENANT WITH CHRIST INDIGENT HEALTHCARE 117 S WILLIAM BARNETT CLEVELAND, TX 77328	77-0719656	501(c)(3)	0	202,687	FMV	MEDICAL SUPPLIES	EMERGENCY
COVENANT WITH CHRIST INDIGENT HEALTHCARE 117 S WILLIAM BARNETT CLEVELAND, TX 77328	77-0719656	501(c)(3)	0	6,818	FMV	MEDICAL SUPPLIES	ON-GOING



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CPC BEHAVIORAL HEALTHCARE 10 INDUSTRIAL WAY EAST EATONTOWN, NJ 07724	21-0719369	501(c)(3)	0	99,571	FMV	MEDICAL SUPPLIES	ON-GOING
CREEKS BEHAVIORAL HEALTH SERVICES 4636 S HARVARD TULSA, OK 74137	73-1108774	501(c)(3)	0	333,837	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CRESCENT COMMUNITY CLINIC 5244 COMMERCIAL WAY SPRING HILL, FL 34606	30-0475982	501(c)(3)	0	606,689	FMV	MEDICAL SUPPLIES	ON-GOING
CROSS AND CROWN CLINIC 1008 MCKINLEY St OKLAHOMA CITY, OK 73106	73-1608071	501(c)(3)	0	277,178	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CROSSINGS COMMUNITY CLINIC 10255 N PENN AVE OKLAHOMA CITY, OK 73120	86-1115863	501(c)(3)	0	297,661	FMV	MEDICAL SUPPLIES	ON-GOING
CROSSOVER MINISTRY 108 COWARDIN AVE RICHMOND, VA 23224	54-1371067	501(c)(3)	0	90,560	FMV	MEDICAL SUPPLIES	ON-GOING

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CROSSROADS CLINIC VOLUNTEERS IN MEDICINE 10714 VETERANS MEM LAKE ST LOUIS, MO 63367	27-3109107	501(c)(3)	0	12,333	FMV	MEDICAL SUPPLIES	ON-GOING
DAVID LAWRENCE CENTER 6075 BATHEY Ln Bldg B-3 NAPLES, FL 34116	59-2206025	501(c)(3)	0	56,388	FMV	MEDICAL SUPPLIES	ON-GOING

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DAVIDSON MEDICAL MINISTRIES 420 N SALISBURY ST LEXINGTON, NC 27292	56-1746266	501(c)(3)	0	808,536	FMV	MEDICAL SUPPLIES	ON-GOING
DAVIS St COMMUNITY CENTER INCORPORATED 3081 TEAGARDEN St SAN LEANDRO, CA 94577	94-3121699	501(c)(3)	0	67,078	FMV	MEDICAL SUPPLIES	ON-GOING

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DELTA HEALTH ALLIANCE LELAND MEDICAL CLINIC PO BOX 277 LELAND, MS 38776	64-0892954	501(c)(3)	0	21,729	FMV	MEDICAL SUPPLIES	ON-GOING
DENTON COUNTY MHMR 2519 SCRIPTURE ST DENTON, TX 76201	75-1368151	501(c)(3)	0	466,672	FMV	MEDICAL SUPPLIES	ON-GOING

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DEO CLINIC P O BOX 814 DALTON, GA 30722	46-0789000	501(c)(3)	0	394,725	FMV	MEDICAL SUPPLIES	ON-GOING
DEPARTAMENTO DE SALUD Centro Medico San Juan, PR 00921		115	0	7,253,083	FMV	MEDICAL SUPPLIES	EMERGENCY

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DILLON COUNTY FREE MEDICAL CLINIC 310 E WASHINGTON ST DILLON, SC 29536	36-4669012	501(c)(3)	0	111,288	FMV	MEDICAL SUPPLIES	ON-GOING
DIVINE GRACE MEDICAL MISSIONARIES 10600 FONDREN RD HOUSTON, TX 77096	27-4000666	501(c)(3)	0	26,148	FMV	MEDICAL SUPPLIES	EMERGENCY



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DOUGLASS COMMUNITY CLINIC 801 E PLANO Pkwy STE 140 PLANO, TX 75074	75-2536818	501(c)(3)	0	74,873	FMV	MEDICAL SUPPLIES	EMERGENCY
DOUGLASS COMMUNITY CLINIC 801 E PLANO Pkwy STE 140 PLANO, TX 75074	75-2536818	501(c)(3)	0	52,704	FMV	MEDICAL SUPPLIES	ON-GOING

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DOWNTOWN CLINIC 611 S SECOND St LARAMIE, WY 82070	83-0326354	501(c)(3)	0	19,317	FMV	MEDICAL SUPPLIES	ON-GOING
DR GARY BURNSTEIN COMMUNITY HEALTH CLINIC 45580 WOODWARD AVE PONTIAC, MI 48341	32-0015321	501(c)(3)	0	97,994	FMV	MEDICAL SUPPLIES	ON-GOING

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DREAM CENTERS WOMENS CLINIC 4360 MONTEBELLO COLORADO SPRINGS, CO 80918	27-4876080	501(c)(3)	0	49,072	FMV	MEDICAL SUPPLIES	ON-GOING
DREAM CENTERS WOMEN'S CLINIC 4360 MONTEBELLO COLORADO SPRINGS, CO 80918	27-4876080	501(c)(3)	0	209,817	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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DUFFY HEALTH CENTER INC 94 MAIN ST ORLEANS, MA 02653	04-3373741	501(c)(3)	0	142,048	FMV	MEDICAL SUPPLIES	ON-GOING
DUPLIN MEDICAL ASSOCIATION 600 S SYCAMORE St ROSE HILL, NC 28398	56-1414420	501(c)(3)	0	1,467,209	FMV	MEDICAL SUPPLIES	ON-GOING

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EDISTO INDIAN FREE CLINIC 1125 RIDGE RD RIDGEVILLE, SC 29472	82-1691197	501(c)(3)	0	1,408,176	FMV	MEDICAL SUPPLIES	ON-GOING
EDWARD R LEAHY JR CENTER CLINIC FOR THE UNINSURE 800 LINDEN St SCRANTON, PA 18510	24-0795495	501(c)(3)	0	19,084	FMV	MEDICAL SUPPLIES	ON-GOING

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ELLENTON HEALTH CLINIC PUBLIC HEALTH DISTRICT 8-2 185 N BAKER St ELLENTON, GA 31747	23-7379607	501(c)(3)	0	89,209	FMV	MEDICAL SUPPLIES	ON-GOING
EUNICE COMMUNITY HEALTH CENTER 450 MOOSA BLVD STE E EUNICE, LA 70535	27-0213992	501(c)(3)	0	1,255,320	FMV	MEDICAL SUPPLIES	ON-GOING

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EXCELTH INC FQHC 4422 GENERAL MEYER NEW ORLEANS, LA 70131	72-1193464	501(c)(3)	0	376,959	FMV	MEDICAL SUPPLIES	ON-GOING
FAIR HAVEN COMMUNITY HEALTH CLINIC INC 374 GRAND Ave NEW HAVEN, CT 06513	06-0883545	501(c)(3)	0	7,063	FMV	MEDICAL SUPPLIES	ON-GOING

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FAITH COMMUNITY PHARMACY (ST VINCENT DE PAUL) 7033 BURLINGTON PIKE FLORENCE, KY 41042	61-1378914	501(c)(3)	0	2,522,360	FMV	MEDICAL SUPPLIES	ON-GOING
FAMILY CARE HEALTH CENTERS 401 HOLLY HILLS AVE SAINT LOUIS, MO 63111	23-7076112	501(c)(3)	0	23,730	FMV	MEDICAL SUPPLIES	ON-GOING



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FAMILY CENTERS HEALTH CARE 111 WILBUR PECK COURT GREENWICH, CT 06830	06-0646656	501(c)(3)	0	124,368	FMV	MEDICAL SUPPLIES	ON-GOING
FAMILY HEALTH PARTNERSHIP CLINIC 401 CONGRESS Pkwy CRYSTAL LAKE, IL 60014	36-4277029	501(c)(3)	0	7,966	FMV	MEDICAL SUPPLIES	ON-GOING

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FAMILY HEALTH SERVICES 794 EASTLAND TWIN FALLS, ID 83301	82-0371093	501(c)(3)	0	10,012	FMV	MEDICAL SUPPLIES	ON-GOING
FEED MY SHEEP 116 W Ave G TEMPLE, TX 76504	74-2724033	501(c)(3)	0	37,795	FMV	MEDICAL SUPPLIES	ON-GOING

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FEEDING AMERICA 35 East Wacker Dr Chicago, IL 60601	36-3673599	501(c)(3)	0	56,887	FMV	MEDICAL SUPPLIES	EMERGENCY
FEEDING AMERICA SOUTHWEST VIRGINIA 1025 Electric Rd Salem, VA 24153	54-1939556	501(c)(3)	0	114,929	FMV	MEDICAL SUPPLIES	ON-GOING

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FERN CARE FREE CLINIC INC 751 E NINE MILE RD FERNDALE, MI 48220	32-0246843	501(c)(3)	0	10,725	FMV	MEDICAL SUPPLIES	ON-GOING
FIRST BAPTIST CHURCH MEDICAL DENTAL CLINIC 1607 CHERRY St VICKSBURG, MS 39180	64-0356253	501(c)(3)	0	172,664	FMV	MEDICAL SUPPLIES	ON-GOING

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FIRST REFUGE MINISTRIES MEDICAL CLINIC 1701 BRdWAY St DENTON, TX 76201	45-5606427	501(c)(3)	0	155,424	FMV	MEDICAL SUPPLIES	ON-GOING
FISH RIVER RURAL HEALTH 10 CARTER St EAGLE LAKE, ME 04739	01-0452749	501(c)(3)	0	8,976	FMV	MEDICAL SUPPLIES	ON-GOING

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FIU COLLEGE OF MEDICINE MOBILE HEALTH CENTER 11200 SW 8TH St MIAMI, FL 33199	23-7047106	501(c)(3)	0	862,759	FMV	MEDICAL SUPPLIES	EMERGENCY
FIU COLLEGE OF MEDICINE MOBILE HEALTH CENTER 11200 SW 8TH St MIAMI, FL 33199	23-7047106	501(c)(3)	0	304,241	FMV	MEDICAL SUPPLIES	ON-GOING

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FLAGLER COUNTY FREE CLINIC 703 EAST MOODY BLVD BUNNELL, FL 32110	20-5036975	501(c)(3)	0	449,087	FMV	MEDICAL SUPPLIES	EMERGENCY
FLAGLER COUNTY FREE CLINIC 703 EAST MOODY BLVD BUNNELL, FL 32110	20-5036975	501(c)(3)	0	266,817	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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FLORIDA HOSPITAL WATERMAN COMMUNITY HEALTH CLINIC 2300 KURT St EUSTIS, FL 32726	59-3140669	501(c)(3)	0	58,536	FMV	MEDICAL SUPPLIES	ON-GOING
FOREST BAPTIST CHURCH MEDICAL MISSION CLINIC PO BOX 338 FOREST, MS 39074	64-0368681	501(c)(3)	0	7,106	FMV	MEDICAL SUPPLIES	ON-GOING



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FOUNDATION FOR HIV AND KIDNEY DIALYSIS INC 14 ZIRKEL Ave PISCATAWAY, NJ 08854	43-2024266	501(c)(3)	0	8,413	FMV	MEDICAL SUPPLIES	ON-GOING
FRAMINGHAM BOARD OF HEALTH 150 CONCORD St FRAMINGHAM, MA 01702	04-6001151	501(c)(3)	0	130,566	FMV	MEDICAL SUPPLIES	ON-GOING

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FREE CLINIC OF CULPEPER 610 LAUREL St CULPEPER, VA 22701	52-1366700	501(c)(3)	0	24,438	FMV	MEDICAL SUPPLIES	ON-GOING
FREE CLINIC SUSSEX COUNTY 67 HIGH St NEWTON, NJ 07860	45-4224214	501(c)(3)	0	25,836	FMV	MEDICAL SUPPLIES	ON-GOING

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREE MEDICAL CLINIC 47 W LONG Ave DUBOIS, PA 15801	25-1804763	501(c)(3)	0	529,667	FMV	MEDICAL SUPPLIES	ON-GOING
FREE MEDICAL CLINIC OF DARLINGTON COUNTY 203 GROVE St DARLINGTON, SC 29532	58-2445265	501(c)(3)	0	6,076	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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FREE MEDICAL CLINIC OF NSV INC 301 N CAMERON ST WINCHESTER, VA 22601	54-1373296	501(c)(3)	0	47,700	FMV	MEDICAL SUPPLIES	ON-GOING
FREE MEDICAL CLINIC OF OAK RIDGE 116 E DIVISION RD OAK RIDGE, TN 37830	90-0715369	501(c)(3)	0	542,028	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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FRIENDS OF HICKORY COUNTY HEALTH DEPARTMENT 24885 STATE hwy 254 HERMITAGE, MO 65668	47-1206725	501(c)(3)	0	20,554	FMV	MEDICAL SUPPLIES	ON-GOING
FUNDACION MANOS JUNTAS 1330 CLASSEN BLVD OKLAHOMA CITY, OK 73106	73-1523135	501(c)(3)	0	245,300	FMV	MEDICAL SUPPLIES	ON-GOING

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GAIN INC (GREATER ASSISTANCE TO THOSE IN NEED) 712 W 3RD St LITTLE ROCK, AR 72201	71-0763418	501(c)(3)	0	375,193	FMV	MEDICAL SUPPLIES	ON-GOING
GALVESTON COUNTY HEALTH DISTRICT 9850 A Emmett F Lowry Texas City, TX 77591		115	0	104,626	FMV	MEDICAL SUPPLIES	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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GATEWAY COMMUNITY SERVICES INC GATEWAY COMM svcs JACKSONVILLE, FL 32204	59-1881828	501(c)(3)	0	31,576	FMV	MEDICAL SUPPLIES	ON-GOING
GATEWAY FOUNDATION - CARBONDALE 55 E JACKSON CHICAGO, IL 60604	36-2670036	501(c)(3)	0	234,479	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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GATEWAY FOUNDATION - CASEYVILLE 600 W LINCOLN Ave CASEYVILLE, IL 62232	36-2670036	501(c)(3)	0	139,170	FMV	MEDICAL SUPPLIES	ON-GOING
GATEWAY FOUNDATION - CHICAGO WEST 55 E JACKSON CHICAGO, IL 60604	36-2670036	501(c)(3)	0	28,564	FMV	MEDICAL SUPPLIES	ON-GOING



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GATEWAY FOUNDATION - DELAWARE 55 E JACKSON CHICAGO, IL 60604	36-2670036	501(c)(3)	0	7,654	FMV	MEDICAL SUPPLIES	ON-GOING
GATEWAY FOUNDATION - SPRINGFIELD AND PEKIN 55 E JACKSON CHICAGO, IL 60604	37-1394445	501(c)(3)	0	50,250	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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GATEWAY FOUNDATION LAKE VILLA 55 E JACKSON CHICAGO, IL 60604	36-2670036	501(c)(3)	0	28,003	FMV	MEDICAL SUPPLIES	ON-GOING
GENESEO PARISH OUTREACH CENTER INC 4520 GENESEE ST RT63 GENESEO, NY 14454	14-1916822	501(c)(3)	0	24,737	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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GET HEALTHY MEGA CLINIC 801 E NOLANA AVE MCALLEN, TX 78504	27-2389624	501(c)(3)	0	144,817	FMV	MEDICAL SUPPLIES	ON-GOING
GET UP PROJECT 8101 CAMERON RD AUSTIN, TX 78754	45-4931906	501(c)(3)	0	80,687	FMV	MEDICAL SUPPLIES	ON-GOING

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GLOUCESTER MATHEWS CARE CLINIC 6031 INDUSTRIAL DR GLOUCESTER, VA 23061	54-1875619	501(c)(3)	0	5,002	FMV	MEDICAL SUPPLIES	ON-GOING
GOOD HEALTH CLINIC INC 91555 OVERSEAS HWY TAVERNIER, FL 33070	04-3745805	501(c)(3)	0	297,693	FMV	MEDICAL SUPPLIES	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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GOOD HEALTH CLINIC INC 91555 OVERSEAS HWY TAVERNIER, FL 33070	04-3745805	501(c)(3)	0	26,870	FMV	MEDICAL SUPPLIES	ON-GOING
GOOD NEWS CARE CENTER 101 S Redland Rd Homestead, FL 33034	59-1923401	501(c)(3)	0	1,255,878	FMV	MEDICAL SUPPLIES	EMERGENCY

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GOOD NEWS CLINICS 810 PINE St GAINESVILLE, GA 30501	58-2058853	501(c)(3)	0	172,236	FMV	MEDICAL SUPPLIES	ON-GOING
GOOD NEWS MINISTRIES GOOD NEWS HEALTH CLINIC 2716 WASHINGTON St INDIANAPOLIS, IN 46201	35-0999233	501(c)(3)	0	104,553	FMV	MEDICAL SUPPLIES	ON-GOING

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GOOD SAMARITAN CLINIC OF WEST VOLUSIA INC 136 E PLYMOUTH Ave DELAND, FL 32724	30-0408193	501(c)(3)	0	17,080	FMV	MEDICAL SUPPLIES	ON-GOING
GOOD SAMARITAN HEALTH AND WELLNESS CENTER 209 WEST STATE LINE Rd S FULTON, TN 38257	45-3745315	501(c)(3)	0	974,750	FMV	MEDICAL SUPPLIES	ON-GOING

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GOOD SAMARITAN HEALTH CENTER 1015 DONALD LEE HOLLOWELL ATLANTA, GA 30318	58-2373395	501(c)(3)	0	147,110	FMV	MEDICAL SUPPLIES	ON-GOING
GOOD SAMARITAN HEALTH CLINIC 401 ARNOLD St NE CULLMAN, AL 35055	20-0149215	501(c)(3)	0	308,161	FMV	MEDICAL SUPPLIES	ON-GOING



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GOOD SAMARITAN HEALTH CLINIC OF PASCO INC 5334 ASPEN ST NEW PORT RICHEY, FL 34652	59-3072334	501(c)(3)	0	795,227	FMV	MEDICAL SUPPLIES	ON-GOING
GOOD SAMARITAN HOUSE FREE COMMUNITY HEALTH CENTER 213 N MAIN ST DEARING, GA 30808	58-1391481	501(c)(3)	0	668,995	FMV	MEDICAL SUPPLIES	ON-GOING

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GOOD SAMARITAN MEDICAL CLINIC 139 CHURCH ST CHESTER, SC 297062904	82-0549226	501(c)(3)	0	58,401	FMV	MEDICAL SUPPLIES	ON-GOING
GOOD SAMARITAN PHARMACY & HEALTH SERVICES INC 2502 TAMIAMI TRAIL N NOKOMIS, FL 34275	26-2295558	501(c)(3)	0	308,853	FMV	MEDICAL SUPPLIES	EMERGENCY

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GOOD SAMARITAN PHARMACY & HEALTH SERVICES INC 2502 TAMIAMI TRAIL N NOKOMIS, FL 34275	26-2295558	501(c)(3)	0	95,558	FMV	MEDICAL SUPPLIES	ON-GOING
GOOD SAMARITAN RESCUE MISSION PO BOX 65 CORPUS CHRISTI, TX 78403	74-1611894	501(c)(3)	0	217,866	FMV	MEDICAL SUPPLIES	ON-GOING

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GOOD SHEPHERD CLINIC PO BOX 6 MORROW, GA 30260	58-2578581	501(c)(3)	0	250,866	FMV	MEDICAL SUPPLIES	ON-GOING
GOOD SHEPHERD HEALTHCARE CLINIC OF MUSKOGEE OKLA GOOD SHEPHERD Clinic MUSKOGEE, OK 74401	73-1581613	501(c)(3)	0	2,430,550	FMV	MEDICAL SUPPLIES	ON-GOING

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GOOD SHEPHERD MINISTRIES OF OKLAHOMA INC 222 NW 12TH St OKLAHOMA CITY, OK 73103	20-0526892	501(c)(3)	0	165,798	FMV	MEDICAL SUPPLIES	ON-GOING
GOOD SHEPHERD PHARMACY 2166 CUBA MILLINGTON MILLINGTON, TN 38053	46-3313048	501(c)(3)	0	2,327,649	FMV	MEDICAL SUPPLIES	ON-GOING

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GOODWIN COMMUNITY HEALTH 311 ROUTE 108 SOMERSWORTH, NH 03878	02-0304203	501(c)(3)	0	542,129	FMV	MEDICAL SUPPLIES	ON-GOING
GOODWIN COMMUNITY HEALTH CENTER INC DBA CMAP 2605 PARKWOOD DR BRUNSWICK, GA 31520	01-0576945	501(c)(3)	0	464,587	FMV	MEDICAL SUPPLIES	ON-GOING

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GRACE CLINICS OF OHIO INC 40 S FRANKLIN ST DELAWARE, OH 43015	27-0415624	501(c)(3)	0	8,663	FMV	MEDICAL SUPPLIES	ON-GOING
GRACE COMMUNITY HEALTH CENTER 1019 CUMBERLAND FALLS HWY CORBIN, KY 40734	26-1779437	501(c)(3)	0	15,468	FMV	MEDICAL SUPPLIES	ON-GOING

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GRACE MEDICAL HOME 51 PENNSYLVANIA ST ORLANDO, FL 32806	26-1817966	501(c)(3)	0	399,594	FMV	MEDICAL SUPPLIES	ON-GOING
GRACE MEDICAL HOME 51 PENNSYLVANIA ST ORLANDO, FL 32806	26-1817966	501(c)(3)	0	166,084	FMV	MEDICAL SUPPLIES	EMERGENCY



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GRAND AVE FREE MEDICAL CLINIC FREE CLINICS OF IOWA 605 N GRAND Ave SPENCER, IA 51301	42-1428706	501(c)(3)	0	7,918	FMV	MEDICAL SUPPLIES	ON-GOING
GRAPEVINE RELIEF AND COMMUNITY EXCHANGE (GRACE) 837 E WALNUT St GRAPEVINE, TX 76051	75-2195702	501(c)(3)	0	192,153	FMV	MEDICAL SUPPLIES	ON-GOING

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GREATER GREENWOOD UNITED MINISTRY FREE MEDICAL CLI 1404 EDGEFIELD St GREENWOOD, SC 29646	57-1012393	501(c)(3)	0	17,136	FMV	MEDICAL SUPPLIES	ON-GOING
GREATER HICKORY COOPERATIVE CHRISTIAN MINISTRY 31 1ST AVE SE HICKORY, NC 28602	56-0934855	501(c)(3)	0	246,732	FMV	MEDICAL SUPPLIES	ON-GOING

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GREATER KILLEEN COMMUNITY CLINIC 718 N 2ND St STE A KILLEEN, TX 76541	74-2724725	501(c)(3)	0	83,764	FMV	MEDICAL SUPPLIES	ON-GOING
GREATER KILLEEN FREE CLINIC 718 N 2ND St STE A KILLEEN, TX 76541	74-2724725	501(c)(3)	0	1,272,183	FMV	MEDICAL SUPPLIES	ON-GOING

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GREATER KILLEEN FREE CLINIC 718 N 2ND St STE A KILLEEN, TX 76541	74-2724725	501(c)(3)	0	44,018	FMV	MEDICAL SUPPLIES	EMERGENCY
GREATER TEXOMA HEALTH CLINIC 900 N ARMSTRONG AVE DENISON, TX 75020	81-0584983	501(c)(3)	0	11,475	FMV	MEDICAL SUPPLIES	ON-GOING

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GREENVILLE FREE MEDICAL CLINIC PO BOX 8993 GREENVILLE, SC 29604	57-0855205	501(c)(3)	0	16,693	FMV	MEDICAL SUPPLIES	ON-GOING
GUADALUPE CLINIC 940 S SAINT FRANCIS WICHITA, KS 67211	20-1285208	501(C)(3)	0	854,016	FMV	MEDICAL SUPPLIES	ON-GOING

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GUIDANCECARE CENTER INC 3000 41ST St OCEAN MARATHON, FL 33050	59-1458324	501(c)(3)	0	393,885	FMV	MEDICAL SUPPLIES	ON-GOING
GUIDANCECARE CENTER INC 3000 41ST St OCEAN MARATHON, FL 33050	59-1458324	501(c)(3)	0	284,318	FMV	MEDICAL SUPPLIES	EMERGENCY

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GULF BEND CENTER 6502 NURSERY Dr VICTORIA, TX 77904	74-1659064	501(c)(3)	0	148,062	FMV	MEDICAL SUPPLIES	ON-GOING
GULF COAST HEALTH CENTER INC 2548 MEMORIAL BLVD PORT ARTHUR, TX 77640	76-0289927	501(c)(3)	0	435,624	FMV	MEDICAL SUPPLIES	ON-GOING

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GULF COAST HEALTH CENTER INC 2548 MEMORIAL BLVD PORT ARTHUR, TX 77640	76-0289927	501(c)(3)	0	625,262	FMV	MEDICAL SUPPLIES	EMERGENCY
GULU PROJECT INC 5400 JOHNSON Dr MISSION, KS 66205	82-1003879	501(c)(3)	0	8,366	FMV	MEDICAL SUPPLIES	ON-GOING



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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HALEY CENTER 122 WEST CENTRAL AVE WINTER HAVEN, FL 33880	59-0766974	501(c)(3)	0	335,618	FMV	MEDICAL SUPPLIES	EMERGENCY
HALEY CENTER 122 WEST CENTRAL AVE WINTER HAVEN, FL 33880	59-0766974	501(c)(3)	0	200,064	FMV	MEDICAL SUPPLIES	ON-GOING

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HANDS OF HOPE CLINIC INC 1010 HOSPITAL Dr STOCKBRIDGE, GA 30281	42-1591970	501(c)(3)	0	116,192	FMV	MEDICAL SUPPLIES	ON-GOING
HANDS TOGETHER FAMILY HEALTH INC 2549 GESSNER RD HOUSTON, TX 77494	47-3286543	501(c)(3)	0	44,281	FMV	MEDICAL SUPPLIES	ON-GOING

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HARMONY HEALTH CLINIC 201 E ROOSEVELT LITTLE ROCK, AR 72206	20-5691313	501(c)(3)	0	113,523	FMV	MEDICAL SUPPLIES	ON-GOING
HARTVILLE MIGRANT MINISTRIES PO BOX 682 HARTVILLE, OH 44632	34-0899100	501(c)(3)	0	25,599	FMV	MEDICAL SUPPLIES	ON-GOING

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HAVEN FREE CLINIC 800 HOWARD AVE 1ST FL NEW HAVEN, CT 06519	06-0646973	501(c)(3)	0	270,782	FMV	MEDICAL SUPPLIES	ON-GOING
HEAL THE CITY 609 S CAROLINA AMARILLO, TX 79106	46-5694050	501(c)(3)	0	78,036	FMV	MEDICAL SUPPLIES	ON-GOING

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HEAL INC 2600 MLK JR DR ATLANTA, GA 30311	26-3990559	501(c)(3)	0	82,005	FMV	MEDICAL SUPPLIES	ON-GOING
HEALING BRIDGE CLINIC 215 WILLOW BEND PEACHTREE CITY, GA 30269	26-3555799	501(c)(3)	0	36,557	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEALING HANDS MINISTRIES INC 8515 GREENVILLE Ave DALLAS, TX 75243	65-1259379	501(c)(3)	0	78,953	FMV	MEDICAL SUPPLIES	ON-GOING
HEALTH ACCESS INC 489 WASHINGTON Ave CLARKSBURG, WV 26301	55-0715066	501(c)(3)	0	193,975	FMV	MEDICAL SUPPLIES	ON-GOING

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HEALTH AND HOPE CLINIC INC 1718 E OLIVE RD PENSACOLA, FL 32514	26-4336638	501(c)(3)	0	177,813	FMV	MEDICAL SUPPLIES	ON-GOING
HEALTH AND HOPE MEDICAL OUTREACH 1911 COOKS HILL Rd CENTRALIA, WA 98531	27-4432389	501(c)(3)	0	8,195	FMV	MEDICAL SUPPLIES	ON-GOING

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HEALTH BRIGADE 1010 N THOMPSON St RICHMOND, VA 23230	54-0927792	501(c)(3)	0	16,519	FMV	MEDICAL SUPPLIES	ON-GOING
HEALTH FOR ALL PO BOX 5913 BRYAN, TX 77805	74-2624477	501(c)(3)	0	32,860	FMV	MEDICAL SUPPLIES	ON-GOING



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HEALTH PARTNERS FREE CLINIC 1300 N COUNTY Rd 25A TROY, OH 45373	31-1596731	501(c)(3)	0	60,764	FMV	MEDICAL SUPPLIES	ON-GOING
HEALTH PARTNERS OF WESTERN OHIO 329 N WEST ST LIMA, OH 45801	56-2330309	501(c)(3)	0	106,750	FMV	MEDICAL SUPPLIES	ON-GOING

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HEALTHCARE FOR THE HOMELESS - HOUSTON 1934 CAROLINE St HOUSTON, TX 77002	76-0647934	501(c)(3)	0	205,362	FMV	MEDICAL SUPPLIES	EMERGENCY
HEALTHNET OF ROCK COUNTY INC 23 W MILWAUKEE St JANESVILLE, WI 53548	39-1778804	501(c)(3)	0	166,769	FMV	MEDICAL SUPPLIES	ON-GOING

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HealthProMed - San Juan Avenida Borinquen San Juan, PR 00915	66-0437924	501(c)(3)	0	29,558	FMV	MEDICAL SUPPLIES	EMERGENCY
HEALTHQUEST OF UNION COUNTY 415 E FRANKLIN St MONROE, NC 28112	56-2117596	501(c)(3)	0	199,530	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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HEALTHREACH COMMUNITY CLINIC 400 STATESVILLE AVE MOORESVILLE, NC 28115	20-1020941	501(c)(3)	0	166,156	FMV	MEDICAL SUPPLIES	ON-GOING
HEART TO HEART INTERNATIONAL 13250 West 98th St Lenexa, KS 66215	48-1108359	501(c)(3)	0	50,685	FMV	MEDICAL SUPPLIES	EMERGENCY

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HEARTBRIGHT FOUNDATION INC 2923 S TRYON CHARLOTTE, NC 28203	45-0496759	501(c)(3)	0	40,885	FMV	MEDICAL SUPPLIES	ON-GOING
HEARTS AND HANDS CLINIC 127 N COLLEGE St STATESBORO, GA 30458	26-4597700	501(c)(3)	0	184,829	FMV	MEDICAL SUPPLIES	ON-GOING

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HELPING HAND CLINIC 507 N STEELE ST SANFORD, NC 27330	56-1752295	501(c)(3)	0	231,495	FMV	MEDICAL SUPPLIES	ON-GOING
HELPING HANDS CLINIC INC 810 HARPER AVE LENOIR, NC 28645	56-2076541	501(c)(3)	0	196,785	FMV	MEDICAL SUPPLIES	ON-GOING

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HELPING HANDS MINISTRY OF RICHLAND HILLS 7294 GLENVIEW Dr RICHLAND HILLS, TX 76180	47-5624322	501(c)(3)	0	404,649	FMV	MEDICAL SUPPLIES	ON-GOING
HEMOPHILIA TREATMENT CENTER OF NEVADA 3121 S MARYLAND Pkwy LAS VEGAS, NV 89109	26-0286469	501(c)(3)	0	8,855	FMV	MEDICAL SUPPLIES	ON-GOING

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HEMOSTASIS AND THROMBOSIS CENTER OF NEVADA 778 STAR APPLE LN LAS VEGAS, NV 89178	82-2793154	501(c)(3)	0	55,712	FMV	MEDICAL SUPPLIES	ON-GOING
HICKORY COUNTY HEALTH DEPARTMENT 24885 STATE hwy 254 HERMITAGE, MO 65668	47-1206725	501(C)(3)	0	102,042	FMV	MEDICAL SUPPLIES	ON-GOING



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HILL COUNTRY COMMUNITY MHMR CENTER 819 WATER St KERRVILLE, TX 78028	74-2822017	501(c)(3)	0	34,906	FMV	MEDICAL SUPPLIES	ON-GOING
HIPPOCRATES MEDICAL CLINIC INC 308 N PINE ST MOMENCE, IL 60954	81-1065602	501(c)(3)	0	25,490	FMV	MEDICAL SUPPLIES	ON-GOING

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HIS HANDS FREE MEDICAL CLINIC 400 12TH ST SE CEDAR RAPIDS, IA 52403	39-1878606	501(c)(3)	0	226,760	FMV	MEDICAL SUPPLIES	ON-GOING
HOLLAND FREE HEALTH CLINIC 99 WEST 26TH ST HOLLAND, MI 49423	30-0072620	501(c)(3)	0	25,858	FMV	MEDICAL SUPPLIES	ON-GOING

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HOPE CHRISTIAN HEALTH CENTER 4040 MARTIN L KING N LAS VEGAS, NV 89032	46-3098169	501(c)(3)	0	14,367	FMV	MEDICAL SUPPLIES	ON-GOING
HOPE CLINIC 203 N St BAYBORO, NC 28515	56-2114681	501(c)(3)	0	265,152	FMV	MEDICAL SUPPLIES	ON-GOING

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HOPE CLINIC PO BOX 4025 BARTLESVILLE, OK 74006	46-4417141	501(c)(3)	0	5,702	FMV	MEDICAL SUPPLIES	ON-GOING
HOPE CLINIC AND CARE CENTER 1814 APPLETON Rd MENASHA, WI 549521110	47-3031346	501(c)(3)	0	146,824	FMV	MEDICAL SUPPLIES	ON-GOING

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HOPE CLINIC OF GARLAND 800 S 6TH St Ste 100 GARLAND, TX 75040	75-2960314	501(c)(3)	0	16,444	FMV	MEDICAL SUPPLIES	ON-GOING
HOPE CLINIC OF MCKINNEY PO BOX 2542 MCKINNEY, TX 75070	81-3813928	501(c)(3)	0	192,764	FMV	MEDICAL SUPPLIES	ON-GOING

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HOPE HEALTH CLINIC 1025 SANIBEL WAY LAGRANGE, KY 40031	46-5509958	501(c)(3)	0	47,327	FMV	MEDICAL SUPPLIES	ON-GOING
HOPE MEDICAL CLINIC 10101 60TH St LEXINGTON, OK 73051	73-1338039	Other	0	269,199	FMV	MEDICAL SUPPLIES	ON-GOING

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HOPE MEDICAL CLINIC HOPE MEDICAL CLINIC YPSILANTI, MI 48197	38-2469007	501(c)(3)	0	67,963	FMV	MEDICAL SUPPLIES	ON-GOING
HOPE MEDICALDENTAL CLINIC 111 MEADOWVIEW Dr CLEBURNE, TX 76033	75-2953856	501(c)(3)	0	182,344	FMV	MEDICAL SUPPLIES	ON-GOING

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HOPEHEALTH MANNING FAMILY PRACTICE 12 WEST S St MANNING, SC 29102	57-0984427	501(c)(3)	0	455,564	FMV	MEDICAL SUPPLIES	ON-GOING
HOPELIGHT MEDICAL CLINIC 1351 COLLYER ST LONGMONT, CO 80501	46-4657471	501(c)(3)	0	275,607	FMV	MEDICAL SUPPLIES	ON-GOING



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HOSPITAL GENERAL CASTANER CARRETERA 135 CASTANER, PR 00631	66-0352014	501(c)(3)	0	37,393	FMV	MEDICAL SUPPLIES	EMERGENCY
HOUSTON COUNTY VOLUNTEER MEDICAL CLINIC 107 HICKORY Ln BONAIRE, GA 310054341	20-1859450	501(c)(3)	0	19,013	FMV	MEDICAL SUPPLIES	ON-GOING

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HOUSTON HEALTH DEPARTMENT George R Brown Con Ctr Houston, TX 77010		115	0	97,530	FMV	MEDICAL SUPPLIES	EMERGENCY
HPM FOUNDATION INC 2020 AVE BORINQUEN SAN JUAN, PR 00915	66-0437924	501(c)(3)	0	7,722,952	FMV	MEDICAL SUPPLIES	EMERGENCY

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IBN SINA FOUNDATION 11226 S WILCREST DR HOUSTON, TX 77099	76-0698464	501(c)(3)	0	2,082,700	FMV	MEDICAL SUPPLIES	EMERGENCY
IBN SINA FOUNDATION 11226 S WILCREST DR HOUSTON, TX 77099	76-0698464	501(c)(3)	0	695,929	FMV	MEDICAL SUPPLIES	ON-GOING

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IMPACT CHRISTIAN MINISTRIES CLINIC 115 W SOLOMON ST GRIFFIN, GA 30223	27-0344233	501(c)(3)	0	246,382	FMV	MEDICAL SUPPLIES	ON-GOING
INHEALTH COMMUNITY WELLNESS FREE CLINIC 109 1/2 E BLUFF ST BOSCOBEL, WI 53805	33-1170597	501(c)(3)	0	54,036	FMV	MEDICAL SUPPLIES	ON-GOING

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INTERFAITH CLINIC 403 W OAK Ste 200 EL DORADO, AR 71730	71-0236863	501(c)(3)	0	1,280,832	FMV	MEDICAL SUPPLIES	ON-GOING
INTERFAITH COMMUNITY CLINIC 101 PINE MANOR OAK RIDGE N, TX 77385	75-2634623	501(c)(3)	0	15,088	FMV	MEDICAL SUPPLIES	ON-GOING

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INTERFAITH COMMUNITY CLINIC 101 PINE MANOR OAK RIDGE N, TX 77385	75-2634623	501(c)(3)	0	9,933	FMV	MEDICAL SUPPLIES	EMERGENCY
IRVING COMMUNITY CLINIC 1302 Ln ST IRVING, TX 75061	75-2536818	501(c)(3)	0	45,223	FMV	MEDICAL SUPPLIES	ON-GOING

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ISLAMIC ASSOCIATION OF N TEXAS 840 ABRAMS Rd RICHARDSON, TX 75081	23-7181345	501(c)(3)	0	7,886	FMV	MEDICAL SUPPLIES	ON-GOING
ISLAND HEALTH CARE 245 EDGARTOW VINEYARD EDGARTOWN, MA 02539	47-0870772	501(c)(3)	0	16,996	FMV	MEDICAL SUPPLIES	ON-GOING

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IUSB HEALTH & WELLNESS CENTER 941 20TH St SOUTH BEND, IN 46615	35-6001673	501(c)(3)	0	130,238	FMV	MEDICAL SUPPLIES	ON-GOING
JACKSON COUNTY HEALTH DEPARTMENT 801 W SECOND ST SEYMOUR, IN 47274	35-6000159	501(c)(3)	0	78,333	FMV	MEDICAL SUPPLIES	ON-GOING



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JEFFERSON CENTER FOR MENTAL HEALTH 4851 INDEPENDENCE ST WHEAT RIDGE, CO 80033	84-0474717	501(c)(3)	0	509,223	FMV	MEDICAL SUPPLIES	ON-GOING
JFCS DBA BEN MASSELL DENTAL CLINIC 700 14TH ST NW ATLANTA, GA 30318	58-1479212	501(c)(3)	0	6,450	FMV	MEDICAL SUPPLIES	ON-GOING

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JOHN P MURRAY COMMUNITY CARE CLINIC 303 YADKIN St STE C ALBEMARLE, NC 28001	56-2098720	501(c)(3)	0	21,413	FMV	MEDICAL SUPPLIES	ON-GOING
JOHNSTOWN FREE MEDICAL CLINIC 340 MAIN St JOHNSTOWN, PA 15901	23-2922409	501(c)(3)	0	140,113	FMV	MEDICAL SUPPLIES	ON-GOING

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KANAWHA-CHARLESTON HEALTH DEPARTMENT 108 LEE St EAST CHARLESTON, WV 25301	55-6011142	115	0	8,693	FMV	MEDICAL SUPPLIES	ON-GOING
KATAHDIN VALLEY HEALTH CENTER 529 S PATTEN Rd PATTEN, ME 04747	23-7411014	501(c)(3)	0	365,950	FMV	MEDICAL SUPPLIES	ON-GOING

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KATALLASSO FAMILY HEALTH CENTER 38 S BELVIDERE Ave YORK, PA 17401	45-3170905	501(c)(3)	0	56,372	FMV	MEDICAL SUPPLIES	ON-GOING
KEVINS COMMUNITY CENTER 25 COMMERCE Rd NEWTOWN, CT 06470	61-1436909	501(c)(3)	0	391,481	FMV	MEDICAL SUPPLIES	ON-GOING

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KEY WEST HEALTH AND REHAB INC 5860 COLLEGE Rd KEY WEST, FL 33040	23-2266006	501(c)(3)	0	1,443,808	FMV	MEDICAL SUPPLIES	EMERGENCY
KIDS FIRST HEALTH CARE 4675 E 69TH Ave COMMERCE CITY, CO 80022	84-0799374	501(c)(3)	0	42,230	FMV	MEDICAL SUPPLIES	ON-GOING

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KITSAP MENTAL HEALTH SERVICES KITSAP MENTAL Hlth svcs BREMERTON, WA 98311	91-1020106	501(c)(3)	0	216,031	FMV	MEDICAL SUPPLIES	ON-GOING
KNOX COUNTY HEALTH CLINIC 22 WHITE St ROCKLAND, ME 04841	01-0528885	501(c)(3)	0	15,965	FMV	MEDICAL SUPPLIES	ON-GOING

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LA CLINICA CRISTIANA 1915 AVALON Ave MUSCLE SHOALS, AL 35661	20-1624284	501(c)(3)	0	167,456	FMV	MEDICAL SUPPLIES	ON-GOING
LA CLINICA DE LA ESPERANZA 3200 GRAND Ave DES MOINES, IA 50312	42-0680452	501(c)(3)	0	27,186	FMV	MEDICAL SUPPLIES	ON-GOING

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LA CROSSE COUNTY MENTAL HEALTH OUTPATIENT CLINIC 300 FOURTH ST N LA CROSSE, WI 54601	39-6005709	115	0	89,889	FMV	MEDICAL SUPPLIES	ON-GOING
LACKEY CLINIC 1620 OLD WILLIAMSBURG YORKTOWN, VA 23690	54-1850915	501(c)(3)	0	12,701	FMV	MEDICAL SUPPLIES	ON-GOING



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAKE COUNTY FREE CLINIC 54 S STATE ST PAINESVILLE, OH 44077	34-1081191	501(c)(3)	0	32,038	FMV	MEDICAL SUPPLIES	ON-GOING
LAKE ST LOUIS VOLUNTEERS IN MEDICINE 10714 VETERANS MEM LAKE ST LOUIS, MO 63367	27-3109107	501(c)(3)	0	53,409	FMV	MEDICAL SUPPLIES	ON-GOING

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LAKELAND VOLUNTEERS IN MEDICINE 1021 Lakeland Hills Blvd Lakeland, FL 33805	52-2351630	501(c)(3)	0	18,522	FMV	MEDICAL SUPPLIES	EMERGENCY
LAKESHORE COMMUNITY HEALTH CARE PO BOX 959 SHEBOYGAN, WI 530820959	26-4321839	501(c)(3)	0	25,402	FMV	MEDICAL SUPPLIES	ON-GOING

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LAKEVIEW CENTER INC 1221 W LAKEVIEW AVE PENSACOLA, FL 32501	59-0737872	501(c)(3)	0	426,793	FMV	MEDICAL SUPPLIES	ON-GOING
LAWTON COMMUNITY HEALTH CENTER 5404 SW LEE BLVD LAWTON, OK 73505	73-6061037	115	0	68,154	FMV	MEDICAL SUPPLIES	ON-GOING

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LEFLORE COUNTY HEALTH CENTER 706 HWY 82 WEST GREENWOOD, MS 38930	20-0069223	501(c)(3)	0	174,732	FMV	MEDICAL SUPPLIES	ON-GOING
LEGACY COMMUNITY HEALTH SERVICES 1415 CALIFORNIA St HOUSTON, TX 77006	76-0009637	501(c)(3)	0	25,073	FMV	MEDICAL SUPPLIES	EMERGENCY

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LEWIS & CLARK BEHAVIORIAL HEALTH SERVICES INC 1028 WALNUT St YANKTON, SD 57078	16-1900308	501(c)(3)	0	232,399	FMV	MEDICAL SUPPLIES	ON-GOING
LIFE CHOICES MEDICAL CLINIC 3234 NORTHWESTERN SAN ANTONIO, TX 78238	74-2809910	501(c)(3)	0	684,753	FMV	MEDICAL SUPPLIES	ON-GOING

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LIFEPATH SYSTEMS 1515 HERITAGE Dr MCKINNEY, TX 75069	75-1761911	501(c)(3)	0	993,224	FMV	MEDICAL SUPPLIES	ON-GOING
LIFESPRING HEALTH SYSTEMS 460 SPRING St JEFFERSONVILLE, IN 47130	35-1097350	501(c)(3)	0	10,872	FMV	MEDICAL SUPPLIES	ON-GOING

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LIFESTREAM BEHAVIORAL CENTER 515 MAIN St LEESBURG, FL 34748	59-1561501	501(c)(3)	0	3,177,052	FMV	MEDICAL SUPPLIES	ON-GOING
LIGHT OF THE WORLD CLINIC INC 5333 N DIXIE HWY OAKLAND PARK, FL 33334	65-0266070	501(c)(3)	0	688,251	FMV	MEDICAL SUPPLIES	EMERGENCY

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LIGHT OF THE WORLD CLINIC INC 5333 N DIXIE HWY OAKLAND PARK, FL 33334	65-0266070	501(c)(3)	0	143,697	FMV	MEDICAL SUPPLIES	ON-GOING
LLOYD F MOSS FREE CLINIC 1301 SAM PERry FREDERICKSBURG, VA 22401	54-1677934	501(c)(3)	0	82,956	FMV	MEDICAL SUPPLIES	ON-GOING



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LONE STAR FAMILY HEALTH CENTER 607 S CONROE MEDICAL Dr CONROE, TX 77304	30-0038860	501(c)(3)	0	218,429	FMV	MEDICAL SUPPLIES	EMERGENCY
LORAIN COUNTY FREE CLINIC 5040 OBERLIN Ave LORAIN, OH 44053	34-1506180	501(c)(3)	0	34,721	FMV	MEDICAL SUPPLIES	ON-GOING

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LOWER KEYS MEDICAL CENTER 5900 COLLEGE Rd KEY WEST, FL 33040	65-0905661	Other	0	61,801	FMV	MEDICAL SUPPLIES	EMERGENCY
LUKE SOCIETY PO BOX 16194 GALVESTON, TX 77552	74-2211973	501(c)(3)	0	178,123	FMV	MEDICAL SUPPLIES	ON-GOING

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LUKE SOCIETY PO BOX 16194 GALVESTON, TX 77552	74-2211973	501(c)(3)	0	48,355	FMV	MEDICAL SUPPLIES	EMERGENCY
LUTHERAN SOCIAL SERVICES OF THE VIRGIN ISLANDS 516B Hospital St Frederiksted, VI 00840	67-0250807	501(c)(3)	0	253,679	FMV	MEDICAL SUPPLIES	EMERGENCY

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MALTA HOUSE OF CARE INC 19 WOODLAND St HARTFORD, CT 06105	20-3562424	501(c)(3)	0	148,724	FMV	MEDICAL SUPPLIES	ON-GOING
MALTA HOUSE OF CARE-WATERBURY INC PO BOX 247 MIDDLEBURY, CT 06762	26-3484648	501(c)(3)	0	223,709	FMV	MEDICAL SUPPLIES	ON-GOING

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MAMOU HEALTH RESOURCES INC 300 S St MAMOU, LA 70554	72-0949444	501(c)(3)	0	48,087	FMV	MEDICAL SUPPLIES	ON-GOING
MANNA MINISTRIES INC 120 St A Ste A PICAYUNE, MS 39466	20-1788094	501(c)(3)	0	550,587	FMV	MEDICAL SUPPLIES	EMERGENCY

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MANNA MINISTRIES INC 120 St A Ste A PICAYUNE, MS 39466	20-1788094	501(c)(3)	0	5,279	FMV	MEDICAL SUPPLIES	ON-GOING
MARION COUNTY PUBLIC HEALTH 2003 N LINCOLN KNOXVILLE, IA 50138	42-6004844	115	0	22,808	FMV	MEDICAL SUPPLIES	ON-GOING

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MARTIN LUTHER KING HEALTH CENTER 865 OLIVE St SHREVEPORT, LA 71104	72-1079721	501(c)(3)	0	41,389	FMV	MEDICAL SUPPLIES	ON-GOING
MATAGORDA EPISCOPAL HEALTH OUTREACH PROGRAM MEHOP BAY CITY, TX 77414	20-0537948	501(c)(3)	0	314,346	FMV	MEDICAL SUPPLIES	EMERGENCY

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MATAGORDA EPISCOPAL HEALTH OUTREACH PROGRAM MEHOP BAY CITY, TX 77414	20-0537948	501(c)(3)	0	70,373	FMV	MEDICAL SUPPLIES	ON-GOING
MATTAWA COMMUNITY MEDICAL CLINIC 210 GOVERNMENT Rd MATTAWA, WA 99349	91-1499763	501(c)(3)	0	802,962	FMV	MEDICAL SUPPLIES	ON-GOING



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MATTHEW 25 HEALTH AND DENTAL CLINIC 413 E JEFFERSON BLVD FORT WAYNE, IN 46802	35-1484951	501(c)(3)	0	201,831	FMV	MEDICAL SUPPLIES	ON-GOING
MCINTOSH TRAIL CSB 1435 N EXPRESSWAY GRIFFIN, GA 30223	58-2098758	115	0	2,124,853	FMV	MEDICAL SUPPLIES	ON-GOING

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MCR HEALTH SERVICES 700 8th Ave West Palmetto, FL 34211	65-0852321	501(c)(3)	0	15,953	FMV	MEDICAL SUPPLIES	EMERGENCY
MED CENTRO 1034 ave hostos Ponce, PR 00716	66-0292961	501(c)(3)	0	7,202,027	FMV	MEDICAL SUPPLIES	EMERGENCY

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MEDICAL MISSIONS FOR CHRIST CLINIC PO BOX 1948 CAMDENTON, MO 65020	20-3637019	501(c)(3)	0	10,715	FMV	MEDICAL SUPPLIES	ON-GOING
MEDICAL OUTREACH MINISTRIES 1401 E S Blvd MONTGOMERY, AL 36116	63-1204645	501(c)(3)	0	137,556	FMV	MEDICAL SUPPLIES	ON-GOING

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MEDICAL SERVICE BUREAU INC 1530 S OLIVER WICHITA, KS 67218	48-0891620	501(c)(3)	0	7,441	FMV	MEDICAL SUPPLIES	ON-GOING
MEDLINK GEORGIA INC 11 CHARLIE MORRIS Rd COLBERT, GA 30628	58-1394645	501(c)(3)	0	48,139	FMV	MEDICAL SUPPLIES	ON-GOING

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MERCI CLINIC 1315 TATUM Dr NEW BERN, NC 28560	56-2034052	501(c)(3)	0	38,033	FMV	MEDICAL SUPPLIES	ON-GOING
MERCY HEALTH CENTER INC 700 OGLETHORPE AVE ATHENS, GA 30606	58-2603523	501(c)(3)	0	96,160	FMV	MEDICAL SUPPLIES	ON-GOING

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MERCY MEDICAL CLINIC 615 WASHINGTON St SHELBYVILLE, KY 40065	61-1211189	501(c)(3)	0	335,979	FMV	MEDICAL SUPPLIES	ON-GOING
MERIDIAN BEHAVIORAL HEALTHCARE INC 4300 SW 13TH St GAINESVILLE, FL 32608	59-1906214	501(c)(3)	0	256,673	FMV	MEDICAL SUPPLIES	ON-GOING

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METROCARE SERVICES 1345 RIVER BEND Dr DALLAS, TX 75247	75-1285603	501(c)(3)	0	137,829	FMV	MEDICAL SUPPLIES	ON-GOING
METROCREST COMMUNITY CLINIC ONE MEDICAL Pkwy FARMERS BRANCH, TX 75234	75-2616002	501(c)(3)	0	20,649	FMV	MEDICAL SUPPLIES	ON-GOING

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MHRC FACT TEAM 5266 GOLDEN GATE PKWY NAPLES, FL 34116	59-1905344	501(c)(3)	0	200,955	FMV	MEDICAL SUPPLIES	ON-GOING
MIAMI BEACH COMMUNITY HEALTH CENTER 11645 BISCAYNE BLVD MIAMI, FL 33181	59-1829984	501(c)(3)	0	5,391	FMV	MEDICAL SUPPLIES	ON-GOING



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MIAMI RESCUE MISSION CLINIC INC 2015 NW 1ST AVE MIAMI, FL 33127	45-1481860	501(c)(3)	0	184,350	FMV	MEDICAL SUPPLIES	ON-GOING
MIDDLE FLINT AREA COMMUNITY SERVICE BOARD 120 N DUDLEY ST AMERICUS, GA 31709	58-2111079	115	0	92,342	FMV	MEDICAL SUPPLIES	ON-GOING

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MIDDLE PENINSULA NERN NECK CSB PO BOX 2468 GLOUCESTER, VA 23061	54-0958505	501(c)(3)	0	203,311	FMV	MEDICAL SUPPLIES	ON-GOING
MIDLAND COMMUNITY CHILDRENS CLINIC 1101 E FRONT St MIDLAND, TX 79701	75-1875246	501(c)(3)	0	31,632	FMV	MEDICAL SUPPLIES	ON-GOING

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MIGRANT HEALTH CENTER Ramon Betanecs 392 Mayaguez, PR 00680	66-0427801	501(c)(3)	0	14,412	FMV	MEDICAL SUPPLIES	EMERGENCY
MILAN PUSKAR HEALTH RIGHT 341 SPRUCE St MORGANTOWN, WV 26507	31-1118673	501(c)(3)	0	110,705	FMV	MEDICAL SUPPLIES	ON-GOING

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MINISTRIES OF JESUS 1100 E I-35 FRONTAGE Rd EDMOND, OK 73034	73-1622804	501(c)(3)	0	1,104,223	FMV	MEDICAL SUPPLIES	ON-GOING
MISSION ARLINGTON MEDICAL CLINIC 210 W SOUTH ARLINGTON, TX 76010	75-2724385	501(c)(3)	0	1,150,145	FMV	MEDICAL SUPPLIES	ON-GOING

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MISSION CLINIC OF PALM SPRINGS INC 3300 10TH Ave N PALM SPRINGS, FL 33461	47-3441097	501(c)(3)	0	177,608	FMV	MEDICAL SUPPLIES	ON-GOING
MISSION HOSPITAL-MEDICATION ASSISTANCE PROGRAM 1 HOSPITAL Dr ASHEVILLE, NC 28801	58-1450888	501(c)(3)	0	345,671	FMV	MEDICAL SUPPLIES	ON-GOING

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MISSION MEDICAL CENTER 2125 LASALLE St COLORADO SPRINGS, CO 80909	68-0506812	501(c)(3)	0	48,412	FMV	MEDICAL SUPPLIES	ON-GOING
MISSION OF MERCY 719 Shoreline Blvd CORPUS CHRISTI, TX 78401	86-0704883	501(c)(3)	0	5,401	FMV	MEDICAL SUPPLIES	EMERGENCY

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MISSION OF MERCY 22 S MARKET ST FREDERICK, MD 21701	86-0704883	501(c)(3)	0	1,134,003	FMV	MEDICAL SUPPLIES	ON-GOING
MISSION OF MERCY-ARIZONA 821 W WARNER Rd CHANDLER, AZ 85225	86-0704883	501(c)(3)	0	390,947	FMV	MEDICAL SUPPLIES	ON-GOING

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MISSION TRAVIS MERCY PO BOX 11557 FORT WORTH, TX 76110	45-3841621	501(c)(3)	0	19,809	FMV	MEDICAL SUPPLIES	ON-GOING
MISSION WACO HEALTH CLINIC 1315 N 15TH ST WACO, TX 76707	74-2605621	501(c)(3)	0	100,474	FMV	MEDICAL SUPPLIES	ON-GOING



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MOAB FREE HEALTH CLINIC 380 N 400 WEST MOAB, UT 84532	26-2082745	501(c)(3)	0	40,119	FMV	MEDICAL SUPPLIES	ON-GOING
MODESTO GOSPEL MISSION 964 WOODLAND DR TURLOCK, CA 95382	94-6102833	501(c)(3)	0	12,886	FMV	MEDICAL SUPPLIES	ON-GOING

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MOORE FREE AND CHARITABLE CLINIC INC 211 TRIMBLE PLANT SOUTHERN PINES, NC 28387	01-0781234	501(c)(3)	0	68,112	FMV	MEDICAL SUPPLIES	ON-GOING
M-POWER MINISTRIES HEALTH CENTER 4022 4TH AVE S BIRMINGHAM, AL 35222	31-1639601	501(c)(3)	0	166,600	FMV	MEDICAL SUPPLIES	ON-GOING

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MUSLIM COMMUNITY CENTER FOR HUMAN SERVICES 7600 GLENVIEW Dr RICHLAND HILLS, TX 76180	75-2580088	501(c)(3)	0	277,094	FMV	MEDICAL SUPPLIES	ON-GOING
MUSTARD SEED COMMUNITY HEALTH 238 S ENGLISH St GREENSBORO, NC 27405	46-4980081	501(c)(3)	0	5,915	FMV	MEDICAL SUPPLIES	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL FOUNDATION FOR THE CENTERS FOR DISEASE CO 55 Park Place Atlanta, GA 30303	58-2106707	501(c)(3)	0	338,038	FMV	MEDICAL SUPPLIES	EMERGENCY
NEIGHBOR FOR NEIGHBOR 505 E 36TH ST N TULSA, OK 74106	73-0776404	501(c)(3)	0	353,181	FMV	MEDICAL SUPPLIES	ON-GOING

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NEIGHBORHOOD HEALTH CLINIC 121 GOODLETTE RD N NAPLES, FL 34102	59-3546884	501(c)(3)	0	219,541	FMV	MEDICAL SUPPLIES	EMERGENCY
NEIGHBORHOOD HEALTH CLINIC 121 GOODLETTE RD N NAPLES, FL 34102	59-3546884	501(c)(3)	0	22,750	FMV	MEDICAL SUPPLIES	ON-GOING

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NEIGHBORHOOD SERVICE ORGANIZATION NSO TUMAINI Cetr DETROIT, MI 48201	38-1561624	501(c)(3)	0	38,568	FMV	MEDICAL SUPPLIES	ON-GOING
NEOMED CENTER INC 941 St Rd Salida Gurabo, PR 00778	66-0485440	501(c)(3)	0	16,173	FMV	MEDICAL SUPPLIES	EMERGENCY

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NEW LIFE COMMUNITY HEALTH CENTER NEW LIFE COMM hlth ELMHURST, NY 11373	11-3204890	501(c)(3)	0	20,796	FMV	MEDICAL SUPPLIES	ON-GOING
NEW ORLEANS DREAM CENTER 1137 SAINT CHARLES NEW ORLEANS, LA 70130	46-1935367	501(c)(3)	0	80,067	FMV	MEDICAL SUPPLIES	ON-GOING

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NEWHOPE CLINIC 41 S COURT St OWINGSVILLE, KY 40360	61-1363437	501(c)(3)	0	121,403	FMV	MEDICAL SUPPLIES	ON-GOING
N BROWARD HOSPITAL DISTRICT 200 NW 7TH Ave FORT LAUDERDALE, FL 33311	59-6012065	501(c)(3)	0	784,023	FMV	MEDICAL SUPPLIES	EMERGENCY



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N BROWARD HOSPITAL DISTRICT 200 NW 7TH Ave FORT LAUDERDALE, FL 33311	59-6012065	501(c)(3)	0	86,721	FMV	MEDICAL SUPPLIES	ON-GOING
N BROWARD HOSPITAL DISTRICT DBA BROWARD HEAL 303 SE 17TH St FORT LAUDERDALE, FL 33316	59-6012065	501(c)(3)	0	59,861	FMV	MEDICAL SUPPLIES	EMERGENCY

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N BROWARD HOSPITAL DISTRICT DBA BROWARD HEAL 303 SE 17TH St FORT LAUDERDALE, FL 33316	59-6012065	501(c)(3)	0	41,252	FMV	MEDICAL SUPPLIES	ON-GOING
N DALLAS SHARED MINISTRIES 2875 MERRELL Rd DALLAS, TX 75229	75-1908563	501(c)(3)	0	10,156	FMV	MEDICAL SUPPLIES	ON-GOING

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N HUDSON COMMUNITY ACTION CORPORATION 800-31ST St UNION CITY, NJ 07087	22-1818699	501(c)(3)	0	135,751	FMV	MEDICAL SUPPLIES	ON-GOING
N JEFFERSON COUNTY CLINIC PHARMACY 1295 PEARL ST BEAUMONT, TX 77701	74-6000291	115	0	87,262	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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N JEFFERSON COUNTY CLINIC PHARMACY 1295 PEARL ST BEAUMONT, TX 77701	74-6000291	115	0	21,754	FMV	MEDICAL SUPPLIES	EMERGENCY
NORTHERN NECK FREE HEALTH CLINIC N Neck free hlth KILMARNOCK, VA 22482	54-1679279	501(c)(3)	0	93,317	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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NORTHPOINTE BEHAVIORAL HEALTHCARE SYSTEMS 715 PYLE DR KINGSFORD, MI 49802	38-3210490	501(c)(3)	0	31,820	FMV	MEDICAL SUPPLIES	ON-GOING
NORTHSHORE SCOTTSDALE PHARMACY 3564 SCOTTSDALE ST PORTAGE, IN 46368	35-2028588	501(c)(3)	0	1,437,090	FMV	MEDICAL SUPPLIES	ON-GOING

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NORTHWEST MICHIGAN HEALTH SERVICES 10767 TRAVERSE Hwy TRAVERSE CITY, MI 49684	38-1958790	501(c)(3)	0	29,340	FMV	MEDICAL SUPPLIES	ON-GOING
NOVA SCRIPTSCENTRAL 6400 ARLINGTON BLVD FALLS CHURCH, VA 22042	65-1275162	501(c)(3)	0	128,635	FMV	MEDICAL SUPPLIES	ON-GOING

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OAKLAWN 330 LAKEVIEW DR GOSHEN, IN 46528	35-1070041	501(c)(3)	0	345,462	FMV	MEDICAL SUPPLIES	ON-GOING
OASIS OF HOPE CENTER 522 LEONARD GRAND RAPIDS, MI 495044258	20-2781312	501(c)(3)	0	36,867	FMV	MEDICAL SUPPLIES	ON-GOING

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OHIO VALLEY HEALTH CENTER ONE ROSS PARK STEUBENVILLE, OH 43952	20-3924355	501(c)(3)	0	175,953	FMV	MEDICAL SUPPLIES	ON-GOING
OLDE TOWNE MEDICAL & DENTAL CENTER 5249 OLDE TOWNE Rd WILLIAMSBURG, VA 23188	54-1663905	501(c)(3)	0	11,110	FMV	MEDICAL SUPPLIES	ON-GOING



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ONE STOP CLINIC 701 17TH AVE W BRADENTON, FL 34205	59-3340921	501(c)(3)	0	460,228	FMV	MEDICAL SUPPLIES	ON-GOING
ONEWORLD COMMUNITY HEALTH CENTERS INC 4920 S 30TH St SUITE 103 OMAHA, NE 68107	47-0548990	501(c)(3)	0	192,433	FMV	MEDICAL SUPPLIES	ON-GOING

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OPEN ARMS CLINIC 109 BIG A Rd TOCCOA, GA 30577	20-3296577	501(c)(3)	0	413,029	FMV	MEDICAL SUPPLIES	ON-GOING
OPEN ARMS HEALTH CLINIC 3311 LITTLE RD ARLINGTON, TX 76016	45-0621201	501(c)(3)	0	378,539	FMV	MEDICAL SUPPLIES	ON-GOING

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OPEN DOOR CLINIC OF ALAMANCE COUNTY 319 GRAHAM-HOPEDALE RD BURLINGTON, NC 27217	56-1794210	501(c)(3)	0	41,538	FMV	MEDICAL SUPPLIES	ON-GOING
OPEN DOOR HEALTH CENTER 151 NW 11TH St HOMESTEAD, FL 33030	83-0375996	501(c)(3)	0	811,216	FMV	MEDICAL SUPPLIES	EMERGENCY

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OPEN DOOR HEALTH CENTER 151 NW 11TH St HOMESTEAD, FL 33030	83-0375996	501(c)(3)	0	534,766	FMV	MEDICAL SUPPLIES	ON-GOING
OPEN DOOR HEALTH CLINIC 709 S MATTHEWS RD ELLENSBURG, WA 98926	65-1185178	501(c)(3)	0	433,371	FMV	MEDICAL SUPPLIES	ON-GOING

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OPTIMUS HEALTH CARE 982 EAST MAIN St BRIDGEPORT, CT 06608	06-0972166	501(c)(3)	0	158,916	FMV	MEDICAL SUPPLIES	ON-GOING
ORANGEBURG-CALHOUN FREE MEDICAL CLINIC 141 CENTRE St ORANGEBURG, SC 29115	26-3762573	501(c)(3)	0	83,166	FMV	MEDICAL SUPPLIES	ON-GOING

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ORTHOPAEDIC HEMOPHILIA TREATMENT CENTER 403 W ADAMS BLVD LOS ANGELES, CA 90007	95-1644604	501(c)(3)	0	117,659	FMV	MEDICAL SUPPLIES	ON-GOING
OZARKS COMMUNITY HEALTH CENTER 18614 JACKSON ST HERMITAGE, MO 65668	20-5822485	501(c)(3)	0	154,569	FMV	MEDICAL SUPPLIES	ON-GOING

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OZARKS COMMUNITY HEALTH CENTER - URBANA PO BOX 125 HERMITAGE, MO 65668	20-5822485	501(c)(3)	0	467,860	FMV	MEDICAL SUPPLIES	ON-GOING
PALMETTO HEALTH COUNCIL INC 643 MAIN St PALMETTO, GA 30268	58-1307597	501(c)(3)	0	3,868,370	FMV	MEDICAL SUPPLIES	ON-GOING

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PARTNERS FOR HEALING INC 109 WEST BLACKWELL TULLAHOMA, TN 37388	62-1834800	501(c)(3)	0	548,765	FMV	MEDICAL SUPPLIES	ON-GOING
PASADENA HEALTH CENTER INC 908 Southmore Ave PASADENA, TX 77502	20-0462905	501(c)(3)	0	581,146	FMV	MEDICAL SUPPLIES	EMERGENCY



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PAUITE INDIAN TRIBE OF UTAH 440 N PAIUTE Dr CEDAR CITY, UT 84721	87-0365095	115	0	8,882	FMV	MEDICAL SUPPLIES	ON-GOING
PEDIPLACE 502 OLD ORCHARD Ln LEWISVILLE, TX 75067	75-2512752	501(c)(3)	0	120,505	FMV	MEDICAL SUPPLIES	ON-GOING

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PEOPLES CLINIC 3111 ELECTRIC AVE PORT HURON, MI 48060	38-3274342	Other	0	37,278	FMV	MEDICAL SUPPLIES	ON-GOING
PERSON CENTERED PARTNERSHIPS IN DBA AMARA WELLNESS 5801 EXECUTIVE Ctr dr CHARLOTTE, NC 28212	56-2271889	501(c)(3)	0	302,529	FMV	MEDICAL SUPPLIES	ON-GOING

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PERSONAL ENRICHMENT THROUGH MENTAL HEALTH 11254 58TH St PINELLAS PARK, FL 337822213	59-3453549	501(c)(3)	0	63,579	FMV	MEDICAL SUPPLIES	ON-GOING
POCATELLO FREE CLINIC 429 WASHINGTON POCATELLO, ID 83201	82-0351133	501(c)(3)	0	561,284	FMV	MEDICAL SUPPLIES	ON-GOING

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POLK COUNTY HEALTH CENTER 1317 W BRdWAY BOLIVAR, MO 65613	43-1268665	115	0	94,240	FMV	MEDICAL SUPPLIES	ON-GOING
PORT ARANSAS TEXAS EMS 710 W Ave A PORT ARANSAS, TX 78373		115	0	16,185	FMV	MEDICAL SUPPLIES	EMERGENCY

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PORT ARTHUR HEALTH DEPARTMENT 2200 JEFFERSON Dr PORT ARTHUR, TX 77647		115	0	37,242	FMV	MEDICAL SUPPLIES	EMERGENCY
PORTER STARKE SERVICES DBA MARRAM HEALTH CENTER 601 WALL St VALPARAISO, IN 46383	35-1330771	501(c)(3)	0	586,803	FMV	MEDICAL SUPPLIES	ON-GOING

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PRESBYTERIAN MEDICAL CARE MISSION 1857 PINE ST STE 100 ABILENE, TX 79601	75-1910600	501(c)(3)	0	939,860	FMV	MEDICAL SUPPLIES	ON-GOING
PRIMARY CARE & HOPE CLINIC 1453 HOPE WAY MURFREESBORO, TN 37129	62-1482091	501(c)(3)	0	76,746	FMV	MEDICAL SUPPLIES	ON-GOING

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PROJECT SOS (SUPPORT OUR SOLDIERS) 2412 DUE WEST Dr THE VILLAGES, FL 32162	27-2932657	501(c)(3)	0	9,184	FMV	MEDICAL SUPPLIES	ON-GOING
PROTEUS 1221 Ctr ST DES MOINES, IA 50309	42-1186501	501(c)(3)	0	66,937	FMV	MEDICAL SUPPLIES	ON-GOING

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PRYMED MEDICAL CARE Rd 149 FM 13 Ciales, PR 00638	66-0329532	501(c)(3)	0	16,911	FMV	MEDICAL SUPPLIES	EMERGENCY
Puerto Rico Department of Health 1111 Cesar Luis Gon San Juan, PR 00927		115	0	36,453	FMV	MEDICAL SUPPLIES	EMERGENCY



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RAPHA CLINIC OF WEST GEORGIA INC RAPHA CLIN OF W GA TEMPLE, GA 30179	27-1188932	501(c)(3)	0	16,291	FMV	MEDICAL SUPPLIES	ON-GOING
RAPHAEL COMMUNITY FREE CLINIC INC 1807 WATER St KERRVILLE, TX 78028	74-2819628	501(c)(3)	0	150,003	FMV	MEDICAL SUPPLIES	ON-GOING

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REACH OUT OF MONTGOMERY COUNTY 25 E FORAKER DAYTON, OH 45409	31-1434282	501(c)(3)	0	265,756	FMV	MEDICAL SUPPLIES	ON-GOING
REFRESH F5 INC 25 W MAIN St AUSTIN, IN 47102	81-3730871	501(C)(3)	0	100,308	FMV	MEDICAL SUPPLIES	ON-GOING

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REFUGE CLINIC 2349 RICHMOND RD LEXINGTON, KY 40502	37-1547506	501(c)(3)	0	17,815	FMV	MEDICAL SUPPLIES	ON-GOING
REMOTE AREA MEDICAL 2200 STOCK CREEK BLVD ROCKFORD, TN 37853	62-1650446	501(c)(3)	0	864,672	FMV	MEDICAL SUPPLIES	ON-GOING

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RENEWED HOPE HEALTH CLINIC 894 MARSHALL ALLEGAN, MI 49010	16-1760734	501(c)(3)	0	148,186	FMV	MEDICAL SUPPLIES	ON-GOING
RICHARD CONDORELLI MEMORIAL FOUNDATION 7 TAGGART Dr Ste F NASHUA, NH 03060	26-2917177	501(c)(3)	0	2,662,152	FMV	MEDICAL SUPPLIES	ON-GOING

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RILEY MEDICAL CLINICFIRST BAPTIST CHURCH JONESBOR 147 CHURCH St JONESBORO, GA 30236	58-0685903	501(c)(3)	0	141,416	FMV	MEDICAL SUPPLIES	ON-GOING
RIVER HILLS COMMUNITY HEALTH CENTER 100 W MAIN ST RICHLAND, IA 52585	42-1489471	501(c)(3)	0	849,320	FMV	MEDICAL SUPPLIES	ON-GOING

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RIVER HILLS COMMUNITY HEALTH CENTER 201 S MARKET St OTTUMWA, IA 52501	42-1489471	501(c)(3)	0	287,739	FMV	MEDICAL SUPPLIES	ON-GOING
RIVER VALLEY FAMILY HEALTH CENTER PO BOX 529 OLATHE, CO 81425	27-3757444	501(c)(3)	0	1,866,877	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RIVERVIEW HEALTH SERVICES 722 REYNOLDS Ave KANSAS CITY, KS 66101	48-1072716	501(c)(3)	0	14,107	FMV	MEDICAL SUPPLIES	ON-GOING
ROANOKE CHOWAN COMMUNITY HEALTH CENTER (RCCHC) 120 HEALTH CENTER Dr AHOSKIE, NC 27910	42-1638714	501(c)(3)	0	120,936	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ROCK SPRINGS CLINIC 211 ROCK SPRINGS Rd MILNER, GA 30257	26-4485460	501(c)(3)	0	575,037	FMV	MEDICAL SUPPLIES	ON-GOING
ROPHE FREE CLINIC 4374 W 52ND ST INDIANAPOLIS, IN 46254	81-2339063	501(c)(3)	0	137,660	FMV	MEDICAL SUPPLIES	ON-GOING



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ROSE GARDEN CENTER FOR HOPE AND HEALING 2020 MADISON AVE COVINGTON, KY 41014	27-2425177	501(c)(3)	0	178,158	FMV	MEDICAL SUPPLIES	ON-GOING
ROTACARE INC 875 JERUSALEM AVE UNIONDALE, NY 11530	11-3135331	501(c)(3)	0	276,485	FMV	MEDICAL SUPPLIES	ON-GOING

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RURAL HEALTH NETWORK OF MONROE COUNTY 3706 N ROOSEVELT BLVD KEY WEST, FL 33040	65-0474953	501(c)(3)	0	24,397	FMV	MEDICAL SUPPLIES	EMERGENCY
RUTHS PLACE 1411 CRAWFORD Ave GRANBURY, TX 76048	20-4594680	501(c)(3)	0	115,923	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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RUTLAND FREE CLINIC 145 STATE St RUTLAND, VT 05701	83-0427544	501(c)(3)	0	224,815	FMV	MEDICAL SUPPLIES	ON-GOING
SACRED HEART COMMUNITY CLINIC 620 ROUND ROCK WEST DR ROUND ROCK, TX 78681	27-2901548	501(c)(3)	0	75,795	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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SAFE HARBOR FREE CLINIC 7209 265TH ST STANWOOD, WA 98292	26-3825107	501(c)(3)	0	11,565	FMV	MEDICAL SUPPLIES	ON-GOING
SAFENETRX PHARMACY 11100 AURORA AVE URBANDALE, IA 50322	42-1518875	501(c)(3)	0	171,626	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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SALINA FAMILY HEALTHCARE CENTER 651 EAST PRESCOTT Rd SALINA, KS 67401	48-0858197	501(c)(3)	0	136,110	FMV	MEDICAL SUPPLIES	ON-GOING
SALT LAKE COUNTY HEALTH DEPARTMENT 2001 STATE St SALT LAKE CITY, UT 84114	87-6000316	115	0	22,472	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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SALUD INTEGRAL EN LA MONTANA (SIM) Centro de Salud Integ Naranjito, PR 00719	66-0329532	501(c)(3)	0	205,456	FMV	MEDICAL SUPPLIES	EMERGENCY
SAMARITAN HEALTH CENTER 13 ROSE St DANBURY, CT 06810	75-3258057	501(c)(3)	0	16,086	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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SAMARITAN HOUSE 114 5TH AVE REDWOOD CITY, CA 94063	23-7416272	501(c)(3)	0	5,032	FMV	MEDICAL SUPPLIES	ON-GOING
SAMARITAN REGIONAL HEALTH CLINIC 937 BRdWAY CAPE GIRARDEAU, MO 63701	27-5427837	501(c)(3)	0	1,088,012	FMV	MEDICAL SUPPLIES	ON-GOING

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SAMARITANS TOUCH CARE CENTER 3015 HERRING AVE SEBRING, FL 33870	02-0773338	501(c)(3)	0	1,990,132	FMV	MEDICAL SUPPLIES	EMERGENCY
SAMARITANS TOUCH CARE CENTER 3015 HERRING AVE SEBRING, FL 33870	02-0773338	501(c)(3)	0	124,586	FMV	MEDICAL SUPPLIES	ON-GOING



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SAMUEL DIXON FAMILY HEALTH CENTERS INC-NEWHALL 25115 Ave STANFORD VALENCIA, CA 91355	95-4278726	501(c)(3)	0	64,239	FMV	MEDICAL SUPPLIES	ON-GOING
SAMUEL DIXON FAMILY HEALTH CENTERS INC-VAL VERDE 25115 Ave STANFORD VALENCIA, CA 91355	95-4278726	501(c)(3)	0	27,092	FMV	MEDICAL SUPPLIES	ON-GOING

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SAN FRANCISCO FREE CLINIC 4900 CALIFORNIA ST SAN FRANCISCO, CA 94118	94-3186248	501(c)(3)	0	259,402	FMV	MEDICAL SUPPLIES	ON-GOING
SAN JOSE CLINIC 2615 FANNIN ST HOUSTON, TX 77002	76-0373703	501(c)(3)	0	901,784	FMV	MEDICAL SUPPLIES	EMERGENCY

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SANTA ROSA COMMUNITY HEALTH CENTERS 3569 ROUND BARN CR SANTA ROSA, CA 95403	68-0365296	501(c)(3)	0	18,190	FMV	MEDICAL SUPPLIES	EMERGENCY
SANTA ROSA COMMUNITY HEALTH CENTERS 3569 ROUND BARN CR SANTA ROSA, CA 95403	68-0365296	501(c)(3)	0	8,623	FMV	MEDICAL SUPPLIES	ON-GOING

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SCHNEIDER REGIONAL MEDICAL CENTER 9048 SUGAR ESTATE ST THOMAS, VI 00802	66-0873579	501(c)(3)	0	132,045	FMV	MEDICAL SUPPLIES	EMERGENCY
SCHUYLER COUNSELING AND HEALTH SERVICES 127 S LIBERTY RUSHVILLE, IL 62681	37-0923523	501(c)(3)	0	15,214	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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SCOTLAND COMMUNITY HEALTH CLINIC 1405-B WEST BLVD LAURINBURG, NC 28353	20-2841940	501(c)(3)	0	85,733	FMV	MEDICAL SUPPLIES	ON-GOING
SCOTT COUNTY HEALTH DEPARTMENT 1296 N GARDNER ST SCOTTSBURG, IN 47170	00-3118924	115	0	52,278	FMV	MEDICAL SUPPLIES	ON-GOING

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SEAGER MEMORIAL CLINIC PO BOX 150143 OGDEN, UT 844150143	46-0711300	501(c)(3)	0	321,728	FMV	MEDICAL SUPPLIES	ON-GOING
SECOND HARVEST FOOD BANK OF GREATER NEW ORLEANS 700 Edwards Ave New Orleans, LA 70123	72-0956468	501(c)(3)	0	33,743	FMV	MEDICAL SUPPLIES	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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SEMO HEALTH NETWORK 421 SEMO Dr NEW MADRID, MO 63869	43-1253101	501(c)(3)	0	1,201,330	FMV	MEDICAL SUPPLIES	ON-GOING
SENIOR FRIENDSHIP CENTERS INC 1900 BROTHER GEENEN WAY SARASOTA, FL 34236	59-1522614	501(c)(3)	0	331,570	FMV	MEDICAL SUPPLIES	ON-GOING

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SET FAMILY MEDICAL CLINICS 2864 CIRCLE Dr COLORADO SPRINGS, CO 80906	84-1183335	501(c)(3)	0	30,344	FMV	MEDICAL SUPPLIES	ON-GOING
SETON CENTRAL OUTPATIENT PHARMACY 1500 RED RIVER ST 14052 AUSTIN, TX 78701	74-1109643	501(c)(3)	0	61,425	FMV	MEDICAL SUPPLIES	ON-GOING



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SHELTER HEALTH SERVICES 534 SPRATT ST CHARLOTTE, NC 28206	20-3041985	501(c)(3)	0	129,727	FMV	MEDICAL SUPPLIES	ON-GOING
SHENANODAH COMMUNITY HEALTH CLINIC 124 VALLEY VISTA DR WOODSTOCK, VA 22664	54-2032008	501(c)(3)	0	6,943	FMV	MEDICAL SUPPLIES	ON-GOING

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SHEPHERDS CARE MEDICAL CLINIC 304 B PONY Rd ZEBULON, NC 27597	26-2757593	501(c)(3)	0	168,289	FMV	MEDICAL SUPPLIES	ON-GOING
SHEPHERDS CLINIC 2800 KIRK AVE BALTIMORE, MD 21218	52-1739001	501(c)(3)	0	28,176	FMV	MEDICAL SUPPLIES	ON-GOING

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SHIFA CLINIC 1092 JOHNNIE DODDS MT PLEASANT, SC 29464	04-3810161	501(c)(3)	0	493,520	FMV	MEDICAL SUPPLIES	ON-GOING
SILOAM FAMILY HEALTH CENTER 820 GALE Ln NASHVILLE, TN 37204	58-1867940	501(c)(3)	0	263,245	FMV	MEDICAL SUPPLIES	ON-GOING

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SINCLAIR HEALTH CLINIC 301 N CAMERON ST WINCHESTER, VA 22601	54-1373296	501(c)(3)	0	23,187	FMV	MEDICAL SUPPLIES	ON-GOING
SISTER MAURA BRANNICK HEALTH CENTER 326 S CHAPIN ST SOUTH BEND, IN 46601	53-0196617	501(c)(3)	0	74,574	FMV	MEDICAL SUPPLIES	ON-GOING

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SMITH MEDICAL CLINIC INC 99 BASKERVILL Dr PAWLEYS ISLAND, SC 29585	57-0786699	501(c)(3)	0	291,371	FMV	MEDICAL SUPPLIES	ON-GOING
SNAKE RIVER COMMUNITY CLINIC 215 10TH St LEWISTON, ID 83501	31-1726460	501(c)(3)	0	433,171	FMV	MEDICAL SUPPLIES	ON-GOING

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SOCIAL HEALTH AND MEDICAL SERVICE CLINIC (SHAMS) 7439 FRANKFORD AVE PHILADELPHIA, PA 19136	04-3810161	501(c)(3)	0	135,899	FMV	MEDICAL SUPPLIES	ON-GOING
SOCIAL WELFARE BOARD 904 S 10TH Ste A ST JOSEPH, MO 64503	44-6000455	115	0	57,467	FMV	MEDICAL SUPPLIES	ON-GOING

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SOCIEDAD PUERTORRIQUENO DE ENDOCRINOLOGIA Y DIABETO Bayamon Hlth Ctr Bayamon, PR 00960	66-0442165	501(c)(3)	0	477,968	FMV	MEDICAL SUPPLIES	EMERGENCY
SOCIETY OF ST VINCENT DE PAUL 2033 FISH HATCHERY MADISON, WI 537259686	39-0824876	501(c)(3)	0	403,323	FMV	MEDICAL SUPPLIES	ON-GOING

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SOCIETY OF ST VINCENT DE PAUL CHARITABLE PHARMACY 3826 GILBERT Ave DALLAS, TX 75219	26-3273175	501(c)(3)	0	71,093	FMV	MEDICAL SUPPLIES	ON-GOING
S CENTRAL MISSOURI COMMUNITY HEALTH CENTER 1081 EAST 18TH St ROLLA, MO 65401	26-2522083	501(c)(3)	0	382,796	FMV	MEDICAL SUPPLIES	ON-GOING



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S ROUTT MEDICAL CENTER HEALTH SERVICE DISTRICT PO BOX 8 OAK CREEK, CO 80467	84-6032810	501(c)(3)	0	41,228	FMV	MEDICAL SUPPLIES	ON-GOING
S SANTA ROSA INTERFAITH MINISTRIES GOOD SAMARITAN CLINC GULF BREEZE, FL 32563	59-3690750	501(c)(3)	0	547,664	FMV	MEDICAL SUPPLIES	ON-GOING

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SOUTHEAST INC 16 WEST LONG St COLUMBUS, OH 43215	31-0940189	501(c)(3)	0	29,180	FMV	MEDICAL SUPPLIES	ON-GOING
SOUTHEAST MENTAL HEALTH SERVICES 711 BARNES Ave LA JUNTA, CO 81050	84-0519607	501(c)(3)	0	299,218	FMV	MEDICAL SUPPLIES	ON-GOING

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SOUTHERN NEVADA HEALTH DISTRICT 280 S DECATUR BLVD LAS VEGAS, NV 89107	88-0151573	115	0	300,787	FMV	MEDICAL SUPPLIES	ON-GOING
SOUTHSIDE COMMUNITY HEALTH SERVICES INC 324 EAST 35TH St MINNEAPOLIS, MN 55409	23-7113799	501(c)(3)	0	16,329	FMV	MEDICAL SUPPLIES	ON-GOING

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SOUTHWEST BOULEVARD FAMILY HEALTH CLINIC 300 SW BOULEVARD KANSAS CITY, KS 66103	48-1067752	501(c)(3)	0	492,560	FMV	MEDICAL SUPPLIES	ON-GOING
SOUTHWEST COMMUNITY HEALTH CENTER 266 W MAIN ST HILLSBORO, OR 97123	74-3050497	501(c)(3)	0	199,986	FMV	MEDICAL SUPPLIES	ON-GOING

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SOUTHWEST IOWA MENTAL HEALTH CENTER 1500 EAST 10TH St ATLANTIC, IA 50022	42-0928938	501(c)(3)	0	64,530	FMV	MEDICAL SUPPLIES	ON-GOING
SOUTHWEST MISSOURI AREA COALITION 1011 W MAIN BUFFALO, MO 65622	27-3253482	501(c)(3)	0	107,232	FMV	MEDICAL SUPPLIES	ON-GOING

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SOUTHWEST UTAH COMMUNITY HEALTH CENTER 25 N 100 EAST ST GEORGE, UT 84770	35-2163112	501(c)(3)	0	904,101	FMV	MEDICAL SUPPLIES	ON-GOING
SPACE COAST VOLUNTEERS IN MEDICINE 2555 JUDGE FRAN JAMIESON VIERA, FL 32940	27-2135914	501(c)(3)	0	166,578	FMV	MEDICAL SUPPLIES	ON-GOING

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SPACE COAST VOLUNTEERS IN MEDICINE 2555 JUDGE FRAN JAMIESON VIERA, FL 32940	27-2135914	501(c)(3)	0	33,308	FMV	MEDICAL SUPPLIES	EMERGENCY
SPINDLETOP CENTER 2750 S 8TH St BEAUMONT, TX 77701	74-1684198	501(c)(3)	0	1,833,075	FMV	MEDICAL SUPPLIES	ON-GOING

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SPRING BRANCH COMMUNITY HEALTH CENTER 800 W SAM HOUSTON PKWY S HOUSTON, TX 77042	30-0198705	501(c)(3)	0	388,410	FMV	MEDICAL SUPPLIES	EMERGENCY
ST CHARLES MCAULEY CLINIC 5024 N GROVE OKLAHOMA CITY, OK 73122	73-0701035	501(c)(3)	0	27,304	FMV	MEDICAL SUPPLIES	ON-GOING



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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST LUKE COMMUNITY CLINIC 316 N ROYAL AVE FRONT ROYAL, VA 22630	54-1801220	501(c)(3)	0	30,918	FMV	MEDICAL SUPPLIES	ON-GOING
ST VINCENT DE PAUL CHARITABLE PHARMACY 1125 BANK ST CINCINNATI, OH 45214	30-0272954	501(c)(3)	0	682,056	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ST CLARE MEDICAL OUTREACH 1407 YORK Rd LUTHERVILLE, MD 21093	52-1681044	501(c)(3)	0	832,323	FMV	MEDICAL SUPPLIES	ON-GOING
ST FRANCIS COMMUNITY FREE CLINIC 1062 N KOELLER ST OSHKOSH, WI 54902	39-1334342	501(c)(3)	0	283,465	FMV	MEDICAL SUPPLIES	ON-GOING

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ST JOESPHS NEIGHBORHOOD CENTER ST JOSEPHS nbhd CTR ROCHESTER, NY 14620	46-1176792	501(c)(3)	0	344,468	FMV	MEDICAL SUPPLIES	ON-GOING
ST JOHN BOSCO CLINIC INC 3661 S MIAMI Ave MIAMI, FL 33133	65-0435764	501(c)(3)	0	135,478	FMV	MEDICAL SUPPLIES	ON-GOING

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ST JOSEPH HEALTH CENTER 510 W ADAMS ST PLYMOUTH, IN 46563	35-1142669	501(c)(3)	0	646,540	FMV	MEDICAL SUPPLIES	ON-GOING
ST JOSEPH PRIMARY CARE 4400 FALLS OF NEUSE Rd RALEIGH, NC 27609	46-5192720	501(c)(3)	0	548,548	FMV	MEDICAL SUPPLIES	ON-GOING

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ST LUKES CLINIC 132 SEYMOUR AVE JACKSON, MI 49202	32-0038675	501(c)(3)	0	59,600	FMV	MEDICAL SUPPLIES	ON-GOING
ST MARTINS HEALTHCARE INC ST MARTINS HEALTHCARE GARRETT, IN 46738	20-8609620	501(c)(3)	0	668,723	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ST MARYS HEALTH WAGON 5626 PATRIOT Dr WISE, VA 24293	04-3739083	501(c)(3)	0	5,211	FMV	MEDICAL SUPPLIES	ON-GOING
ST MARYS LEGACY CLINIC 805 S NORTSHORE DR KNOXVILLE, TN 37919	46-2331706	501(c)(3)	0	47,346	FMV	MEDICAL SUPPLIES	ON-GOING

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ST MARYS HEALTH CENTER 1302 DRAYTON ST SAVANNAH, GA 31401	58-2282758	501(c)(3)	0	8,701	FMV	MEDICAL SUPPLIES	ON-GOING
ST MICHAELS COMMUNITY SERVICES INC 1005 W 18TH St ANNISTON, AL 36201	63-0974974	501(c)(3)	0	783,659	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ST THOMAS CLINIC 600 PAUL HAND Blvd FRANKLIN, IN 46131	35-1449379	501(c)(3)	0	58,621	FMV	MEDICAL SUPPLIES	ON-GOING
ST THOMAS EAST END MEDICAL CENTER CORP 4605 Tutu Park Mall St Thomas, VI 00802	66-0585077	501(c)(3)	0	1,747,266	FMV	MEDICAL SUPPLIES	EMERGENCY



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ST VINCENT DE PAUL MEDICAL CLINIC 420 W WATKINS RD PHOENIX, AZ 85013	86-0096789	501(c)(3)	0	47,320	FMV	MEDICAL SUPPLIES	ON-GOING
ST VINCENT DEPAUL COMMUNITY PHARMACY 502 GRAMMONT ST MONROE, LA 71201	90-0014479	501(c)(3)	0	124,518	FMV	MEDICAL SUPPLIES	ON-GOING

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ST VINCENTS MOBILE HEALTH OUTREACH MINISTRY 3 SHIRCLIFF WAY JACKSONVILLE, FL 32204	53-0196617	501(c)(3)	0	38,351	FMV	MEDICAL SUPPLIES	ON-GOING
ST VINCENTS STUDENT FREE CLINIC 2817 POST OFFICE ST GALVESTON, TX 77550	74-1384864	501(c)(3)	0	169,109	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ST VINCENTS STUDENT FREE CLINIC 2817 POST OFFICE ST GALVESTON, TX 77550	74-1384864	501(c)(3)	0	41,038	FMV	MEDICAL SUPPLIES	EMERGENCY
STMARYS DINING ROOM 545 WSONORA ST STOCKTON, CA 95203	94-2687280	501(c)(3)	0	328,418	FMV	MEDICAL SUPPLIES	ON-GOING

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STAR - STAND TOGETHER AND RECOVER CENTERS INC 3003 N CENTRAL AVE PHOENIX, AZ 85012	86-0586210	501(c)(3)	0	218,994	FMV	MEDICAL SUPPLIES	ON-GOING
STEHOUWER FREE CLINIC 201 N MITCHELL CADILLAC, MI 49601	61-1401888	501(c)(3)	0	6,157	FMV	MEDICAL SUPPLIES	ON-GOING

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STEPHEN F AUSTIN COMMUNITY HEALTH CENTER 1612 Callaway Dr Alvin, TX 77511	41-2273820	501(c)(3)	0	52,198	FMV	MEDICAL SUPPLIES	EMERGENCY
STILLWATER COMMUNITY HEALTH CENTER 1321 W 7TH AVE STILLWATER, OK 74074	73-1502192	501(c)(3)	0	17,601	FMV	MEDICAL SUPPLIES	ON-GOING

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SU CLINICA 1706 Treasure Hills Harlingen, TX 78550	74-2965534	501(c)(3)	0	5,729	FMV	MEDICAL SUPPLIES	EMERGENCY
SULZBACHER HEALTH CENTER 611 EAST ADAMS St JACKSONVILLE, FL 32202	59-3229898	501(c)(3)	0	906,670	FMV	MEDICAL SUPPLIES	ON-GOING

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SULZBACHER HEALTH CENTER 611 EAST ADAMS St JACKSONVILLE, FL 32202	59-3229898	501(c)(3)	0	408,658	FMV	MEDICAL SUPPLIES	EMERGENCY
SUMPTER FREE MEDICAL CLINIC DBA SUMPTER FREE HEALT 1083 HWY 35 SAINT STEPHEN, SC 29479	27-1097304	501(c)(3)	0	226,491	FMV	MEDICAL SUPPLIES	ON-GOING

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SURRY MEDICAL MINISTRIES PO BOX 349 MOUNT AIRY, NC 27030	56-1829347	501(c)(3)	0	108,711	FMV	MEDICAL SUPPLIES	ON-GOING
SUSAN B ANTHONY CENTER INC 1633 POINCIANA Dr PEMBROKE PINES, FL 33025	65-0583089	501(c)(3)	0	194,213	FMV	MEDICAL SUPPLIES	ON-GOING



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SWAIN COUNTY CARING CORNER PO BOX 1998 BRYSON CITY, NC 28713	47-2593010	501(c)(3)	0	139,229	FMV	MEDICAL SUPPLIES	ON-GOING
SWEETWATER EPISCOPAL ACADEMY 251 E LAKE BRANTLEY DR LONGWOOD, FL 32779	59-2404885	501(c)(3)	0	10,261	FMV	MEDICAL SUPPLIES	ON-GOING

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TALBOT HOUSE MINISTRIES OF LAKE LAND INC 814 N KENTUCKY AVE LAKE LAND, FL 33801	85-8012641	501(c)(3)	0	512,632	FMV	MEDICAL SUPPLIES	ON-GOING
TARZANA TREATMENT CENTERS INC 18646 OXNARD St TARZANA, CA 91356	94-2219349	501(c)(3)	0	140,135	FMV	MEDICAL SUPPLIES	ON-GOING

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TEMPLE COMMUNITY CLINIC 1905 CURTIS B ELLIOT Dr TEMPLE, TX 76501	74-2634500	501(c)(3)	0	108,562	FMV	MEDICAL SUPPLIES	EMERGENCY
TEMPLE COMMUNITY CLINIC 1905 CURTIS B ELLIOT Dr TEMPLE, TX 76501	74-2634500	501(c)(3)	0	7,838	FMV	MEDICAL SUPPLIES	ON-GOING

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TEWKSBURY HEALTH DEPT 1009 MAIN ST TEWKSBURY, MA 01876	04-6001322	115	0	18,960	FMV	MEDICAL SUPPLIES	ON-GOING
TEXAS DEPARTMENT OF STATE HEALTH SERVICES 1100 West 49th St Austin, TX 78756		115	0	152,940	FMV	MEDICAL SUPPLIES	EMERGENCY

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THE ARK 6450 N CALIFORNIA AVE CHICAGO, IL 60645	23-7164967	501(c)(3)	0	370,723	FMV	MEDICAL SUPPLIES	ON-GOING
THE CARE CLINIC 239 ROBESON St FAYETTEVILLE, NC 28301	56-1837010	501(c)(3)	0	47,211	FMV	MEDICAL SUPPLIES	ON-GOING

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THE CENTER FOR BLACK WOMENS WELLNESS 477 WINDSOR St ATLANTA, GA 30312	58-2212203	501(c)(3)	0	17,570	FMV	MEDICAL SUPPLIES	ON-GOING
THE CLINIC 143 CHURCH ST PHOENIXVILLE, PA 19460	23-3072363	501(c)(3)	0	275,252	FMV	MEDICAL SUPPLIES	ON-GOING

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THE EL PASO BAPTIST CLINIC 8308 ECHO ST EL PASO, TX 79901	20-3046801	501(c)(3)	0	278,417	FMV	MEDICAL SUPPLIES	ON-GOING
THE FLOATING HOSPITAL 4140 27TH ST LONG ISLAND CITY, NY 11101	13-1624169	501(c)(3)	0	384,491	FMV	MEDICAL SUPPLIES	ON-GOING

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THE FREE CLINICS OF HENDERSON COUNTY 841 CASE St HENDERSONVILLE, NC 28792	56-2212024	501(c)(3)	0	5,407	FMV	MEDICAL SUPPLIES	ON-GOING
THE FREE MEDICAL CLINIC 1875 HARDEN St COLUMBIA, SC 29204	57-0779279	501(c)(3)	0	61,470	FMV	MEDICAL SUPPLIES	ON-GOING



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THE FRIENDSHIP CLINIC 704 LATAH BOISE, ID 83705	20-0184266	501(c)(3)	0	63,647	FMV	MEDICAL SUPPLIES	ON-GOING
THE GOOD SAMARITAN CENTER 140 INDUS loop FREDERICKSBURG, TX 78624	91-2129853	501(c)(3)	0	51,586	FMV	MEDICAL SUPPLIES	ON-GOING

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THE MEDINA HEALTH MINISTRY 970 E WASHINGTON St MEDINA, OH 44256	30-0092944	501(c)(3)	0	91,506	FMV	MEDICAL SUPPLIES	ON-GOING
THE NEIGHBORHOOD CHRISTIAN CLINIC 1929 W FILLMORE PHOENIX, AZ 85009	86-0839580	501(c)(3)	0	191,659	FMV	MEDICAL SUPPLIES	ON-GOING

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THE OPEN DOOR CLINIC 130 W CENTRAL CHIPPEWA FALLS, WI 54729	20-3673759	501(c)(3)	0	8,757	FMV	MEDICAL SUPPLIES	ON-GOING
THE Rd HOME PEDIATRIC ACUTE CARE CLINIC 210 RIO GRANDE ST SALT LAKE CITY, UT 84104	87-0212465	501(c)(3)	0	156,184	FMV	MEDICAL SUPPLIES	ON-GOING

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THE SALVATION ARMY 10291 MCGREGOR BLVD FT MYERS, FL 33919	58-0660607	501(c)(3)	0	552,498	FMV	MEDICAL SUPPLIES	EMERGENCY
THE SALVATION ARMY 10291 MCGREGOR BLVD FT MYERS, FL 33919	58-0660607	501(c)(3)	0	66,402	FMV	MEDICAL SUPPLIES	ON-GOING

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THE SALVATION ARMY - PUERTO RICO 440 West Nyack Rd West Nyack, NY 10994	13-5562351	501(c)(3)	0	61,979	FMV	MEDICAL SUPPLIES	EMERGENCY
THE SALVATION ARMY - TEXAS DIVISION 6500 Harry Hines Blvd Dallas, TX 75235	75-0800678	501(c)(3)	0	110,489	FMV	MEDICAL SUPPLIES	EMERGENCY

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THE TEXAS INTL INSTITUTE OF HEALTH PROFESSIONS 8121 BRdWAY St HOUSTON, TX 77061	46-1267820	501(c)(3)	0	129,927	FMV	MEDICAL SUPPLIES	ON-GOING
THE WAY FREE MEDICAL CLINIC INC 479 HOUSTON GREEN COVE SPRINGS, FL 32043	76-0828154	501(c)(3)	0	921,112	FMV	MEDICAL SUPPLIES	EMERGENCY

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THE WAY FREE MEDICAL CLINIC INC 479 HOUSTON GREEN COVE SPRINGS, FL 32043	76-0828154	501(c)(3)	0	68,203	FMV	MEDICAL SUPPLIES	ON-GOING
THE WRIGHT CENTERCOMMUNITY HEALTH HUB 640 MADISON AVE SCRANTON, PA 18510	27-3582779	501(c)(3)	0	43,503	FMV	MEDICAL SUPPLIES	ON-GOING

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THRESHOLDS INC 4101 N RAVENSWOOD CHICAGO, IL 60613	36-2518901	501(c)(3)	0	5,749	FMV	MEDICAL SUPPLIES	ON-GOING
TOMAGWA 455 SCHOOL St 30 TOMBALL, TX 77375	76-0280324	501(c)(3)	0	485,192	FMV	MEDICAL SUPPLIES	EMERGENCY



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TOMAGWA 455 SCHOOL St 30 TOMBALL, TX 77375	76-0280324	501(c)(3)	0	267,305	FMV	MEDICAL SUPPLIES	ON-GOING
TOTAL FAMILY MEDICAL LLC 22601 HWY 190 ROBERT, LA 70455	46-1385117	Other	0	322,978	FMV	MEDICAL SUPPLIES	ON-GOING

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TREASURE COAST COMMUNITY HEALTH INC TREASURE COAST COM VERO BEACH, FL 32962	59-3219191	501(c)(3)	0	58,929	FMV	MEDICAL SUPPLIES	ON-GOING
TRI CITY HEALTH PARTNERSHIP 318 WALNUT St SAINT CHARLES, IL 60174	36-4475369	501(c)(3)	0	13,058	FMV	MEDICAL SUPPLIES	ON-GOING

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TRIANGLE AREA NETWORK 3737 N 16TH St ORANGE, TX 77632	76-0226835	501(c)(3)	0	904,866	FMV	MEDICAL SUPPLIES	EMERGENCY
TRIANGLE AREA NETWORK - BEAUMONT 1495 N 7TH St BEAUMONT, TX 77702	76-0226835	501(c)(3)	0	227,978	FMV	MEDICAL SUPPLIES	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRIANGLE AREA NETWORK - ORANGE 3737 N 16TH St ORANGE, TX 77632	76-0226835	501(c)(3)	0	280,883	FMV	MEDICAL SUPPLIES	ON-GOING
TRINITY CLINIC 507 4TH St CALVIN, OK 74531	73-1325401	501(c)(3)	0	234,364	FMV	MEDICAL SUPPLIES	ON-GOING

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TROPICAL TEXAS BEHAVIORAL HEALTH 1901 S 24TH Ave EDINBURG, TX 78539	74-1565510	501(c)(3)	0	850,999	FMV	MEDICAL SUPPLIES	ON-GOING
Ubi Caritas 4442 HIGHLAND AVE BEAUMONT, TX 77705	76-0558225	501(c)(3)	0	166,120	FMV	MEDICAL SUPPLIES	EMERGENCY

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UNDERGROUND FREE CLINIC PO BOX 75157 TAMPA, FL 33675	20-4722214	501(c)(3)	0	544,904	FMV	MEDICAL SUPPLIES	ON-GOING
UNION COUNTY HEALTH DEPARTMENT 940 LONDON AVE MARYSVILLE, OH 43040	31-6400087	115	0	12,918	FMV	MEDICAL SUPPLIES	ON-GOING

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UNION GOSPEL MISSION CLINIC UNION GOSPEL DALLAS, TX 75247	75-6003612	501(c)(3)	0	36,603	FMV	MEDICAL SUPPLIES	ON-GOING
UNION GOSPEL MISSION CLINIC 1300 N 1ST St YAKIMA, WA 98901	23-7050061	501(c)(3)	0	409,467	FMV	MEDICAL SUPPLIES	ON-GOING

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UNISON BEHAVIORAL HEALTH 1007 MARY St WAYCROSS, GA 31501	58-2107877	115	0	96,722	FMV	MEDICAL SUPPLIES	ON-GOING
UNITED HEALTH PARTNERS (UHP) 3723 ROWLOCK VINE DR HOUSTON, TX 77084	61-1757254	501(c)(3)	0	503,371	FMV	MEDICAL SUPPLIES	ON-GOING



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UNIVERSITY OF MIAMI 1601 NW 12 AVE 4067 MIAMI, FL 33136	59-0624458	501(c)(3)	0	254,737	FMV	MEDICAL SUPPLIES	ON-GOING
UNIVERSITY OF MIAMI 1601 NW 12 AVE 4067 MIAMI, FL 33136	59-0624458	501(c)(3)	0	92,462	FMV	MEDICAL SUPPLIES	EMERGENCY

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UNIVERSITY OF WISCONSIN OSHKOSH LIVING HEALTHY CLI 510 DOCTORS COURT OSHKOSH, WI 54901	39-6076856	501(c)(3)	0	23,586	FMV	MEDICAL SUPPLIES	ON-GOING
UPHAMS CORNER HEALTH CENTER 500 COLUMBIA Rd DORCHESTER, MA 02125	23-7211732	501(c)(3)	0	402,841	FMV	MEDICAL SUPPLIES	ON-GOING

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URBAN HEALTH AND WELLNESS 859 METROPOLITAN Pkwy ATLANTA, GA 30310	81-3845426	501(c)(3)	0	59,997	FMV	MEDICAL SUPPLIES	ON-GOING
URBAN MINISTRIES OF WAKE COUNTY INC 1390 CAPITAL BLVD RALEIGH, NC 27603	58-1422700	501(c)(3)	0	71,242	FMV	MEDICAL SUPPLIES	ON-GOING

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URGENT & PRIMARY CARE OF CLARKSDALE P O BOX 2098 CLARKSDALE, MS 38614	82-1075385	Other	0	25,939	FMV	MEDICAL SUPPLIES	ON-GOING
US Salvation Army 1221 River Bend Dr Dallas, TX 75235	22-2406433	501(c)(3)	0	5,145	FMV	MEDICAL SUPPLIES	EMERGENCY

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USVI DEPARTMENT OF HEALTH USVI Dept of Health St Thomas, VI 00802		115	0	3,077,625	FMV	MEDICAL SUPPLIES	EMERGENCY
USVI DEPARTMENT OF HUMAN SERVICES 24 AA Kingshill St Croix, VI 00824		115	0	53,922	FMV	MEDICAL SUPPLIES	EMERGENCY

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UT HEALTH SCIENCE CENTER AT SAN ANTONIO - FOCUS THE CMHE AT UTHSCSA SAN ANTONIO, TX 78229	74-1586031	115	0	166,202	FMV	MEDICAL SUPPLIES	ON-GOING
VALLEY COMMUNITY HEALTH CENTERS 212 S 4TH St GRAND FORKS, ND 58201	27-0056777	501(c)(3)	0	56,289	FMV	MEDICAL SUPPLIES	ON-GOING

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VARIETY CARE PO BOX 250 GRANDFIELD, OK 73546	73-1088577	501(c)(3)	0	833,680	FMV	MEDICAL SUPPLIES	ON-GOING
VECINOS FARMWORKER HEALTH PROGRAM 3971 LITTLE SAVANNAH RD CULLOWHEE, NC 28723	57-1192063	501(c)(3)	0	63,681	FMV	MEDICAL SUPPLIES	ON-GOING

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VIRGINIA B ANDES VOLUNTEER COMMUNITIY CLINIC 21297 OLEAN BLVD PORT CHARLOTTE, FL 33952	65-0958642	501(c)(3)	0	216,476	FMV	MEDICAL SUPPLIES	ON-GOING
VIRGINIA B ANDES VOLUNTEER COMMUNITIY CLINIC 21297 OLEAN BLVD PORT CHARLOTTE, FL 33952	65-0958642	501(c)(3)	0	119,383	FMV	MEDICAL SUPPLIES	EMERGENCY



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VISTA COMMUNITY HEALTH CENTER 14117 HUBBARD ST STE M SYLMAR, CA 91342	45-4642549	501(c)(3)	0	15,642	FMV	MEDICAL SUPPLIES	ON-GOING
VOLUNTEER BEHAVIORAL HEALTH CARE SYSTEM 1200 S WILLOW AVE COOKEVILLE, TN 38506	62-1589440	501(c)(3)	0	201,291	FMV	MEDICAL SUPPLIES	ON-GOING

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VOLUNTEERS IN MEDICINE vol in med HILTON HEAD ISLAND, SC 29926	57-0959206	501(c)(3)	0	310,039	FMV	MEDICAL SUPPLIES	ON-GOING
VOLUNTEERS IN MEDICINE - CLINIC OF THE CASCADES 2300 NE NEFF RD BEND, OR 97701	93-1327847	501(c)(3)	0	750,921	FMV	MEDICAL SUPPLIES	ON-GOING

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VOLUNTEERS IN MEDICINE - SAN DIEGO 1457 E MADISON Ave EL CAJON, CA 92019	26-0057391	501(c)(3)	0	9,549	FMV	MEDICAL SUPPLIES	ON-GOING
VOLUNTEERS IN MEDICINE CLINIC 2260 MARCOLA Rd SPRINGFIELD, OR 97477	93-1276816	501(c)(3)	0	383,021	FMV	MEDICAL SUPPLIES	ON-GOING

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VOLUNTEERS IN MEDICINE CLINIC 417 SE BALBOA Ave STUART, FL 34994	65-1115793	501(c)(3)	0	465,110	FMV	MEDICAL SUPPLIES	ON-GOING
VOLUNTEERS IN MEDICINE CLINIC OF MONROE COUNTY 811 W SECOND St BLOOMINGTON, IN 47403	20-5383915	501(c)(3)	0	49,424	FMV	MEDICAL SUPPLIES	ON-GOING

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VOLUNTEERS IN MEDICINE OF THE OLYMPICS PO BOX 639 PORT ANGELES, WA 98362	01-0590704	501(c)(3)	0	9,998	FMV	MEDICAL SUPPLIES	ON-GOING
VOLUNTEERS IN MEDICINE WILKES BARRE 190 N PA AVE WILKES BARRE, PA 18702	20-3531527	501(c)(3)	0	103,443	FMV	MEDICAL SUPPLIES	ON-GOING

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VOLUNTEERS IN MEDICINE INC 1039 S DUCHESNE ST CHARLES, MO 63301	43-1791543	501(c)(3)	0	442,992	FMV	MEDICAL SUPPLIES	ON-GOING
VOLUSIA VOLUNTEERS IN MEDICINE 113 LOCKHART St DAYTONA BEACH, FL 32114	47-1005976	501(c)(3)	0	835,570	FMV	MEDICAL SUPPLIES	EMERGENCY

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VOLUSIA VOLUNTEERS IN MEDICINE 113 LOCKHART St DAYTONA BEACH, FL 32114	47-1005976	501(c)(3)	0	25,197	FMV	MEDICAL SUPPLIES	ON-GOING
WAHID MEDICAL CORP P O BOX 547 PATTERSON, CA 95363	45-3797437	Other	0	309,178	FMV	MEDICAL SUPPLIES	ON-GOING

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WAIMANLO HEALTH CENTER WAIMANALO Hlth Ctr WAIMANALO, HI 96795	99-0273205	501(c)(3)	0	110,558	FMV	MEDICAL SUPPLIES	ON-GOING
WALWORTH COUNTY DEPT OF HEALTH & HUMAN SERVICES W4051 COUNTY Rd NN ELKHORN, WI 53121	39-6005752	115	0	74,026	FMV	MEDICAL SUPPLIES	ON-GOING



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WASATCH HOMELESS HEALTH CARE INC 409 WEST 400 SOUTH SALT LAKE CITY, UT 84101	87-0569356	501(c)(3)	0	25,374	FMV	MEDICAL SUPPLIES	ON-GOING
WELCOME HEALTH (FORMERLY NWA FREE HEALTH CTR 1100 N WOOLSEY AVE FAYETTEVILLE, AR 72703	58-1691790	501(c)(3)	0	9,779	FMV	MEDICAL SUPPLIES	ON-GOING

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WELLNESS TREE COMMUNITY CLINIC 173 MARTIN St TWIN FALLS, ID 83301	26-1249939	501(c)(3)	0	2,386,363	FMV	MEDICAL SUPPLIES	ON-GOING
WESLEY CHURCH HEALTH CENTER INC 410 PITTSBURGH St CONNELLSVILLE, PA 15425	25-1844565	501(c)(3)	0	27,298	FMV	MEDICAL SUPPLIES	ON-GOING

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WEST CENTRAL DISTRICT HEALTH DEPARTMENT 111 N DEWEY ST NORTH PLATTE, NE 69101	47-0879835	115	0	383,844	FMV	MEDICAL SUPPLIES	ON-GOING
WEST HAWAII COMMUNITY HEALTH CENTER 75-5751 KUAKINI HWY KAILUAKONA, HI 96740	20-0495394	501(c)(3)	0	468,306	FMV	MEDICAL SUPPLIES	ON-GOING

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WEST PLAINS CHRISTIAN CLINIC 1117 ALASKA St WEST PLAINS, MO 65775	27-1307333	501(c)(3)	0	62,761	FMV	MEDICAL SUPPLIES	ON-GOING
WESTCARE GULFCOAST FLORIDA INC 8800 49TH ST N PINELLAS PARK, FL 33782	59-3714627	501(c)(3)	0	5,923	FMV	MEDICAL SUPPLIES	ON-GOING

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WESTMINSTER FREE CLINIC 5560 NAPOLEON Dr OAK PARK, CA 91377	77-0563241	501(c)(3)	0	223,499	FMV	MEDICAL SUPPLIES	ON-GOING
WHOLE FAMILY HEALTH CENTER 603 N INDIAN RIVER FORT PIERCE, FL 34950	65-0715258	501(c)(3)	0	112,480	FMV	MEDICAL SUPPLIES	ON-GOING

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WILL-GRUNDY MEDICAL CLINIC 213 EAST CASS St JOLIET, IL 60432	36-3492306	501(c)(3)	0	24,220	FMV	MEDICAL SUPPLIES	ON-GOING
WOFCC HOPE CLINIC 609 WEST Ave E ELK CITY, OK 73644	26-1284785	501(c)(3)	0	233,678	FMV	MEDICAL SUPPLIES	ON-GOING

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WOMENKIND 1511 TRUMAN Ave KEY WEST, FL 33040	65-1003208	501(c)(3)	0	521,934	FMV	MEDICAL SUPPLIES	EMERGENCY
WOVEN HEALTH ONE MEDICAL Pkwy FARMERS BRANCH, TX 75234	75-2616002	501(c)(3)	0	291,219	FMV	MEDICAL SUPPLIES	ON-GOING

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WV HEALTH RIGHT INC 1520 WASHINGTON ST CHARLESTON, WV 25311	31-1066881	501(c)(3)	0	423,258	FMV	MEDICAL SUPPLIES	ON-GOING
YOUR BEST PATHWAY TO HEALTH BENNY MOORE OOLTEWAH, TN 37363	81-3012737	501(c)(3)	0	110,597	FMV	MEDICAL SUPPLIES	ON-GOING



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ZUFALL HEALTH CENTER 18 WEST BLACKWELL St DOVER, NJ 07801	22-3125397	501(c)(3)	0	11,437	FMV	MEDICAL SUPPLIES	ON-GOING
Amistad Community Health Center 1533 Brownlee Blvd Corpus Christi, TX 78404	20-3008507	501(c)(3)	199,000	0			EMERGENCY

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Baptist Hospitals of Southeast Texas Foundation 3070 College St Beaumont, TX 77702	61-1557670	501(c)(3)	110,208	0			EMERGENCY
Castaner General Hospital PO Box 1003 Castaner, PR 006311003	66-0352014	501(c)(3)	14,000	0			EMERGENCY

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Centro De Salud Familiar Dr Julio Palmieri Ferri I Calle Morse Esquina Arroyo, PR 00714	66-0496484	501(c)(3)	12,000	0			EMERGENCY
Centros Integrados de Servicios de Salud Carr 111 KM Ave Lares, PR 00669	66-0426506	501(c)(3)	12,000	0			EMERGENCY

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Christ Clinic 25722 Kingsland Blvd Katy, TX 77494	90-0789318	501(c)(3)	170,714	0			EMERGENCY
Christus Health Southeast Texas 2830 Cakder St Beaumont, TX 77702	76-0136274	501(c)(3)	323,193	0			EMERGENCY

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Coastal Bend Wellness Foundation 5633 S Staples Corpus Christi, TX 78411	74-2429518	501(c)(3)	47,871	0			EMERGENCY
Community Health Care Clinic 902 N Franklin Ave Normal, IL 61761	37-1316328	501(c)(3)	100,000	0			ON-GOING

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Community Health NFP 2611 W Chicago Ave Chicago, IL 60622	36-3831793	501(c)(3)	100,000	0			ON-GOING
Corporacion de Servicios Medicos Primarios y Preve 116 Ave Dr Susoni Hatillo, PR 00659	66-0427194	501(c)(3)	18,000	0			EMERGENCY

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Corporacion SANOS Troche Apartado 1025 Caguas, PR 007261025	66-0671427	Other	12,000	0			EMERGENCY
Costa Salud Community Health Centers Inc Cale Munoz Rivera 28 Rincon, PR 00677	66-0428488	501(c)(3)	12,000	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Covenant House Florida 733 Breakers Ave Fort Lauderdale, FL 33304	59-2323607	501(c)(3)	100,000	0			EMERGENCY
Covenant House Texas 1111 Lovett Blvd Houston, TX 77006	76-0050882	501(c)(3)	215,000	0			EMERGENCY



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Easter Seals of Greater Houston 4888 Loop Central Dr Houston, TX 77081	74-1238418	501(c)(3)	100,000	0			EMERGENCY
Frederiksted Health Care Inc PO Box 1198 Frederiksted, VI 00840	66-0586667	501(c)(3)	21,500	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Gulf Coast Health Center Inc 2548 Memorial Blvd Port Arthur, TX 77640	76-0289927	501(c)(3)	103,451	0			EMERGENCY
Healthcare for the Homeless-Houston 1934 Caroline St Houston, TX 77002	76-0647934	501(c)(3)	92,985	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Homeland Preparedness Project 2833 Cytherea Circle Alvin, TX 77511	34-2028513	501(c)(3)	65,000	0			EMERGENCY
IBN Sina Foundation Inc 11226 S Wilcrest Dr Houston, TX 77099	76-0698464	501(c)(3)	35,000	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Lutheran Social Services of the Virgin Islands 516B Hospital St Frederiksted, VI 00840	67-0250807	501(c)(3)	104,311	0			EMERGENCY
Mansfield Caring Place 901 W BRd St Mansfield, TX 76063	27-0537258	501(C)(3)	15,000	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Migrant Health Center 491 Ramon E Betances St Mayaguez, PR 00680	66-0427801	501(c)(3)	20,000	0			EMERGENCY
Morovis Community Health Centers Inc 2 Patron St Morovis, PR 00687	66-0480948	501(C)(3)	12,000	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PQMD 326 First St Suite 32 Annapolis, MD 21403	23-3097238	501(c)(3)	7,500	0			ON-GOING
Prymed Medical Care Inc Carretera 149 KM 13 Ciales, PR 00638	66-0428120	501(C)(3)	12,000	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Refugio County Memorial Hospital District 107 Swift St Refugio, TX 78377	74-1915330	Other	250,000	0			EMERGENCY
Salud Integral de la Montana Inc Rd 164 Km 02 Sector El Naranjito, PR 00719	66-0329532	501(c)(3)	20,000	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Samaritan's Touch Care Center 3015 Herring Ave Sebring, FL 33870	02-0773338	501(c)(3)	10,000	0			EMERGENCY
San Jose Clinic 2615 Fanning St Houston, TX 77002	76-0373703	501(c)(3)	60,909	0			EMERGENCY



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Smithville Community Clinic 300 Lynch St Smithville, TX 78957	20-4515999	501(C)(3)	15,000	0			EMERGENCY
South Texas Family Planning 4455 Padre Island Corpus Christi, TX 78411	74-1728621	501(c)(3)	200,000	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Spindletop Center 655 S 8th St Beaumont, TX 77701	74-1684198	501(c)(3)	87,632	0			EMERGENCY
Stephen F Austin Community Health Center 1111 West Adoue St Alvin, TX 77511	41-2273820	501(c)(3)	425,554	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Texana Center 4910 Airport Ave Rosenberg, TX 77471	76-0253287	501(c)(3)	75,000	0			EMERGENCY
The Agape Clinic 4104 Junius St Dallas, TX 75246	14-1847977	501(c)(3)	15,000	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Good Samaritan Health Center Inc 1015 Donald Lee Hollowell Atlanta, GA 30318	58-2373395	501(c)(3)	100,000	0			ON-GOING
Tomagwa Healthcare Ministries 455 School St Ste 30 Tomball, TX 77375	76-0280324	501(c)(3)	15,000	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Triangle Area Network Inc 1495 N 7th St Beaumont, TX 77702	76-0226835	501(c)(3)	187,500	0			EMERGENCY
Ubi Caritas 4442 Highland Ave Beaumont, TX 77705	76-0558225	501(c)(3)	189,986	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Vecino Health Centers 424 Hahlo St Houston, TX 77020	76-0622208	501(c)(3)	10,000	0			EMERGENCY
VOCES Coalicion de Vacunacion de Puerto Rico Inc 35 Juan C Borbon Guaynabo, PR 00969	66-0798610	501(c)(3)	66,000	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Volunteers in Medicine Wilkes-Barre 190 N PA Ave WilkesBarre, PA 18702	20-3531527	501(c)(3)	100,000	0			ON-GOING
Volusia Volunteers in Medicine 113 Lockhart St Daytona Beach, FL 32114	47-1005976	501(c)(3)	15,000	0			EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Womankind 1511 Truman Ave Key West, FL 33040	65-1003208	501(c)(3)	10,000	0			EMERGENCY
World Surgical Foundation PO Box 1006 Camp Hill, PA 17001	23-2905618	501(c)(3)	25,000	0			ON-GOING



**Schedule J**  
(Form 990)

**Compensation Information**

OMB No 1545-0047

**2017**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**  
**▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**  
**▶ Attach to Form 990.**  
**▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

**Employer identification number**

06-1008595

Name of the organization  
AmeriCares Foundation Inc

**Part I Questions Regarding Compensation**

	Yes	No
<b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> First-class or charter travel  <input type="checkbox"/> Travel for companions  <input type="checkbox"/> Tax indemnification and gross-up payments  <input type="checkbox"/> Discretionary spending account                 </div> <div> <input type="checkbox"/> Housing allowance or residence for personal use  <input type="checkbox"/> Payments for business use of personal residence  <input type="checkbox"/> Health or social club dues or initiation fees  <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)                 </div> </div>		
<b>b</b> If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	<b>1b</b>	
<b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	<b>2</b>	
<b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Compensation committee  <input type="checkbox"/> Independent compensation consultant  <input checked="" type="checkbox"/> Form 990 of other organizations                 </div> <div> <input type="checkbox"/> Written employment contract  <input checked="" type="checkbox"/> Compensation survey or study  <input checked="" type="checkbox"/> Approval by the board or compensation committee                 </div> </div>		
<b>4</b> During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: <div style="margin-left: 20px;"> <b>a</b> Receive a severance payment or change-of-control payment?  <b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?  <b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?                 </div> If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	<b>4a</b> Yes <b>4b</b> Yes <b>4c</b> No	
<b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>		
<b>5</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <div style="margin-left: 20px;"> <b>a</b> The organization?  <b>b</b> Any related organization?                 </div> If "Yes," on line 5a or 5b, describe in Part III.	<b>5a</b> No <b>5b</b> No	
<b>6</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: <div style="margin-left: 20px;"> <b>a</b> The organization?  <b>b</b> Any related organization?                 </div> If "Yes," on line 6a or 6b, describe in Part III.	<b>6a</b> No <b>6b</b> No	
<b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	<b>7</b> Yes	
<b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	<b>8</b>	No
<b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	<b>9</b>	

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

See Additional Data Table

[illegible]

**Part III**   **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
SCHEDULE J, PART I, LINE 4a	Former Officer, Lee Weiner, received a severance payment in calendar year 2017, this severance is reported in Schedule J, Part II, column (b)(iii). SCHEDULE J, PART I, LINE 4b President & CEO, Michael J. Nyenhuis, participates in a Section 457(f) plan. The Foundation contributed \$7,000 into Mr. Nyenhuis Section 457(f) plan in calendar year 2017. SCHEDULE J, PART I, LINE 7 President & CEO, Michael Nyenhuis, received a discretionary bonus in calendar year 2017 for exceeding certain performance-based objectives established by the Compensation Committee. The determination to issue a bonus is memorialized in Compensation Committee minutes. President Nyenhuis did not participate in the decision-making process to award the bonus.

Additional Data

Software ID:  
Software Version:  
EIN: 06-1008595  
Name: AmeriCares Foundation Inc

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1Kevin Gilrain Senior V P , Human resources	(i)	208,062	0	0	12,669	22,710	243,441	0
	(ii)	0	0	0	0	0	0	0
1Rachel Granger V P Int'l Partnrshps&Programs	(i)	167,564	0	0	10,080	9,192	186,836	0
	(ii)	0	0	0	0	0	0	0
2Garrett Ingoglia V P , Emerg Res (thru 12/17)	(i)	142,262	0	0	8,561	8,809	159,632	0
	(ii)	0	0	0	0	0	0	0
3Martha kennard V P , operations	(i)	137,632	0	0	8,212	647	146,491	0
	(ii)	0	0	0	0	0	0	0
4Geoff Kneisel V P , Corporate Relations	(i)	128,018	0	0	7,957	30,878	166,853	0
	(ii)	0	0	0	0	0	0	0
5Gary Leeds V p , finance (thru 12/2017)	(i)	176,051	0	0	10,815	23,964	210,830	0
	(ii)	0	0	0	0	0	0	0
6Michael J Nyenhuis President & CEO	(i)	347,994	50,000	0	41,625	21,988	461,607	0
	(ii)	0	0	0	0	0	0	0
7Anne Peterson MD MPH Senior V P , Global Programs	(i)	235,887	0	0	14,322	12,490	262,699	0
	(ii)	0	0	0	0	0	0	0
8Taufiqur Rahman VP, Tech Unit (thru 11/2017)	(i)	166,994	0	0	7,743	23,429	198,166	0
	(ii)	0	0	0	0	0	0	0
9dennis rice thru 62018 CIO & SVP, innovation	(i)	192,539	0	0	11,729	29,821	234,089	0
	(ii)	0	0	0	0	0	0	0
10Jed Selkowitz CMO & SVP, COMMUNICATIONS	(i)	245,882	0	0	14,832	20,706	281,420	0
	(ii)	0	0	0	0	0	0	0
11Christine Squires CHIEF DEV Officer & SVP	(i)	229,583	0	0	13,905	23,403	266,891	0
	(ii)	0	0	0	0	0	0	0
12Richard K Trowbridge Jr CFO & Senior V P , Operations	(i)	252,396	0	0	15,300	29,482	297,178	0
	(ii)	0	0	0	0	0	0	0
13lee wiener thru 22017 former v p , direct res	(i)	25,464	0	95,704	0	4,855	126,023	0
	(ii)	0	0	0	0	0	0	0
14Melissa Woolford V P , Leadership Gifts	(i)	150,034	0	0	8,776	647	159,457	0
	(ii)	0	0	0	0	0	0	0

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As Filed Data -

DLN: 93493054005019

SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
AmeriCares Foundation Inc

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.  
►Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number  
06-1008595

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	121	1,708,803	fair market value
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .	X	7,680	46,368	cost/wholesale price
20 Drugs and medical supplies . . . . .	X	20,208,197	972,928,586	COST/WHOLESALE PRICE
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( HYGIENE ITEMS )	X	1,546,750	1,795,045	COST/WHOLESALE PRICE
26 Other ► ( Apparel )	X	224,339	1,221,111	COST/WHOLESALE PRICE
27 Other ► ( )				
28 Other ► ( )				

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

84

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

Yes

No

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

Yes

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

**Part II** **Supplemental Information.**

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
Form 990, Schedule M, Line 32(b)	To the extent that Americares receives non-cash contributions in the form of donated securities, americares will use its own investment broker to sell those donated securities

**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
AmeriCares Foundation Inc

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2017**

**Open to Public  
Inspection**

**Employer identification number**

06-1008595

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
990 Review Process	Form 990, Part VI, Line 11 The Form 990 was prepared by a nationally renowned accounting firm in conjunction with the organization's financial department The Form 990 is presented to the Audit Committee of the Board of Directors by Management and its external accounting firm, once reviewed and accepted by the Audit Committee, the 990 is distributed to the full Board of Directors for their review and comment Once the Board of Directors has reviewed the Form 990, it is electronically filed with the Internal Revenue Service

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Conflict of Interest Policy	<p>Form 990, Part VI, Line 12 Section 1 Policy A Director or officer shall disclose to the Board of Directors any potential conflicts of interest in connection with proposed actions of the Corporation When any such conflict of interest is relevant to a matter requiring action by the Board of Directors, or a committee thereof, such interested Director or officer shall not vote on the matter Moreover, the interested Director or officer shall retire from the room in which the Board of Directors (or the committee) is meeting and shall not participate in the final deliberation or decision regarding the matter under consideration However, the interested director or officer shall provide the Board of Directors or committee with any and all material information Section 2 Disclosure The minutes of the meeting of the Board of Directors or committee shall reflect that a conflict of interest was disclosed and that the interested Director or officer was not present during the final discussion or vote and did not vote When there is a doubt as to whether a conflict of interest exists, the matter shall be resolved by a vote of the Board of Directors, or the committee, excluding the interested Director or officer concerning whose situation the doubt has arisen Section 3 Review of Policy This policy shall be reviewed annually for the information and guidance of directors, officers and staff members, and any new directors, officers or staff members shall be advised of the policy and furnished a disclosure statement upon undertaking the duties of such office</p>



**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Process for determining compensation	<p>Form 990, Part VI, Line 15 AmeriCares pursues a rigorous process to ensure that the compensation it pays is commensurate with the not-for-profit industry in which it operates. The Foundation has a Compensation Committee in place that determines the President &amp; CEOs compensation based on compensation survey results conducted by an independent third party consultant. (The last survey was conducted in October of 2017) The Board of Directors ultimately determines the compensation of the President and CEO. The Foundations Chief Executive Officer determines the compensation of the other senior staff and may utilize available market data, salary survey results and other available tools to substantiate decisions.</p>

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Public disclosure of documents	Form 990, Part VI, Line 19 The foundation makes its Form 990 available to the public by retaining a copy at its place of business and on its website The Form 990 is likewise published on the internet at <a href="http://www.guidestar.org">www.guidestar.org</a> The organization's financial statements are available on its website and by request The governing documents and conflict of interest policy are not ordinarily made available to the public, but, if requested, will be provided at management's discretion

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part XI, Line 9	Changes in split-interest agreements \$53,595 adjusted value of donated property (13,000) a djustment due to rounding (1) ----- Total adjustments for line 9 \$40,594

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
▶ Attach to Form 990.  
▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization  
AmeriCares Foundation Inc

Employer identification number  
06-1008595

Part I Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) AmeriCares Free Clinics Inc 88 Hamilton Avenue  Stamford, CT 06902 06-1422741	Health care	CT	501(c)(3)	7	na	Yes	

**Part III Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

**Part V Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .	<b>1a</b>	No
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	<b>1b</b> Yes	
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .	<b>1c</b>	No
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .	<b>1d</b> Yes	
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .	<b>1e</b>	No
<b>f</b> Dividends from related organization(s) . . . . .	<b>1f</b>	No
<b>g</b> Sale of assets to related organization(s) . . . . .	<b>1g</b>	No
<b>h</b> Purchase of assets from related organization(s) . . . . .	<b>1h</b>	No
<b>i</b> Exchange of assets with related organization(s) . . . . .	<b>1i</b>	No
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .	<b>1j</b>	No
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .	<b>1k</b>	No
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .	<b>1l</b>	No
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .	<b>1m</b>	No
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .	<b>1n</b>	No
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	<b>1o</b>	No
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .	<b>1p</b>	No
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	<b>1q</b> Yes	
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .	<b>1r</b>	No
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .	<b>1s</b>	No

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)AMERICARES FREE CLINICS INC	B	2,439,431	fmv (goods)
(2)AMERICARES FREE CLINICS INC	Q	68,858	Cost
(3)AMERICARES FREE CLINICS INC	D	300,000	Loan Guarantee

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

**Part VII** **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)