

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form **990** (2019)

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

Americares mission is to save lives and improve health for people affected by poverty or disaster so they can reach their full potential. To accomplish this, Americares invests in local health centers: When local health centers thrive, so do people in their communities-with better health, more opportunities and increasingly productive lives. As the world's leading nonprofit provider of donated medicines and supplies, americares reached 83 countries in FY20 with medicine, medical supplies, support and technology assistance valued at nearly \$1.07 billion through our access to medicine, emergency programs and clinics to communities 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 has three core programs: - INCREASING ACCESS TO CRITICAL

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.

4a	(Code:) (Expenses \$ 1,176,267,409 including grants of \$ 995,067,719) (Revenue \$ 0)
See Additional Data	

4b	(Code:) (Expenses \$ 42,053,363 including grants of \$ 27,620,745) (Revenue \$ 5,110)
See Additional Data	

4c	(Code:) (Expenses \$ 10,487,999 including grants of \$ 2,087,837) (Revenue \$ 929,894)
See Additional Data	

4d	Other program services (Describe in Schedule O.)
(Expenses \$	including grants of \$) (Revenue \$)

4e	Total program service expenses ▶ 1,228,808,771
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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 Yes	
3 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	3	No
4 Section 501(c)(3) organizations. 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	4	No
5 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	5	No
6 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	6	No
7 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	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 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	9	No
10 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	10 Yes	
11 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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a Yes	
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	11b	No
c 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	11c	No
d 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	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e Yes	
f 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	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	No
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	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a Yes	
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	14b Yes	
15 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	15 Yes	
16 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	16 Yes	
17 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)	17 Yes	
18 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	18 Yes	
19 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	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 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? If "Yes," complete Schedule I, Parts I and II	21 Yes	

Part IV Checklist of Required Schedules (continued)

		Yes	No	
22	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>	22	Yes	
23	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>	23	Yes	
24a	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>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. 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>	25a		No
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>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>	27		No
28	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):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV.</i>	28a		No
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV.</i>	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV.</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>	31		No
32	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>	32		No
33	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>	33		No
34	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>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	36		No
37	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>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes	

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

		Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	117	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a 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	2a 208			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		No
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		3b		
4a 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)?		4a	Yes	
b If "Yes," enter the name of the foreign country: ES, HA, LI, NP, RP, TZ, CO See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a 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?		6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7 Organizations that may receive deductible contributions under section 170(c).				
a 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?		7a	Yes	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Yes	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		No
d If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		
9 Sponsoring organizations maintaining donor advised funds.				
a Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10 Section 501(c)(7) organizations. Enter:				
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 Section 501(c)(12) organizations. Enter:				
a Gross income from members or shareholders	11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		13a		
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			
c Enter the amount of reserves on hand	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 720, Schedule N.		15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		16		No

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
1a	Enter the number of voting members of the governing body at the end of the tax year	23	
	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	Enter the number of voting members included in line 1a, above, who are independent	22	
2	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?	2	No
3	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?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	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?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	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	9	No

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

	Yes	No	
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
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?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	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?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
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?	16b	

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, MO, 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-A 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 JR 88 HAMILTON AVENUE STAMFORD, CT 069023105 (203) 658-9500

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

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

[illegible]

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

[illegible]

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	3,327,234	0	540,970

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 ▶ 40

		Yes	No
3	Did the organization list any former 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	
4	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	
5	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)	(B)	(C)
Name and business address	Description of services	Compensation
RWT Production LLC, 8932 Orange Hunt Lane ANNANDALE, VA 22003	Printing and Mailing	1,816,941
The Harrington Agency LLC, 329 Dickinson Ave SWARTHMORE, PA 19081	Fundraising Counsel	1,648,378
AKA Enterprise Solutions Inc, 875 Avenue of the Americas 20th fl NEW YORK, NY 10001	IT Consultant	991,654
Rafanelli Events, 5 West 19th Street NEW YORK, NY 10011	Event Planning	599,403
Key Acquisition Partners LLC, 2525 Riva Rd Ste 145 ANNAPOLIS, MD 21401	Fundraising	294,393

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 ► 10

Form 990 (2019)		Page 9			
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	91,610	
	b	Membership dues	1b		
	c	Fundraising events	1c	2,184,711	
	d	Related organizations	1d		
	e	Government grants (contributions)	1e	4,668,930	
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,431,500,403	
	g	Noncash contributions included in lines 1a - 1f:\$	1g	1,368,252,483	
	h	Total. Add lines 1a-1f		1,438,445,654	
Program Service Revenue	2a	PATIENT SERVICE REVENUE	Business Code		
			621400	935,004	935,004
	b				
	c				
	d				
	e				
	f	All other program service revenue.			
	g	Total. Add lines 2a-2f		935,004	
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,251,213	
	4	Income from investment of tax-exempt bond proceeds		0	
	5	Royalties		0	
	6a	Gross rents	(i) Real	(ii) Personal	
	6a	184,338			
	6b	Less: rental expenses	6b	194,695	
	6c	Rental income or (loss)	6c	-10,357	0
	d	Net rental income or (loss)		-10,357	-10,357
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other	
	7a	18,721,422	179,085		
	7b	Less: cost or other basis and sales expenses	7b	18,220,079	190,000
	7c	Gain or (loss)	7c	501,343	-10,915
	d	Net gain or (loss)		490,428	490,428
	8a	Gross income from fundraising events (not including \$ 2,184,711 of contributions reported on line 1c). See Part IV, line 18	8a	134,560	
	8b	Less: direct expenses	8b	770,256	
	c	Net income or (loss) from fundraising events		-635,696	-635,696
	9a	Gross income from gaming activities. See Part IV, line 19	9a	0	
	9b	Less: direct expenses	9b	0	
	c	Net income or (loss) from gaming activities		0	
	10a	Gross sales of inventory, less returns and allowances	10a	996,403	
10b	Less: cost of goods sold	10b	932,201		
c	Net income or (loss) from sales of inventory		64,203	64,203	
Miscellaneous Revenue		Business Code			
11a	EL SALVADOR CAFETERIA INCOME	900099	196,473	196,473	
b	MISCELLANEOUS INCOME	900099	13,435	13,435	
c					
d	All other revenue				
e	Total. Add lines 11a-11d		209,908		
12	Total revenue. See instructions		1,440,750,357	935,004	

Form 990 (2019)

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
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	242,341,914	242,341,914		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	530,609,961	530,609,961		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	251,824,426	251,824,426		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	1,860,001	622,937	787,414	449,650
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	327,114	156,570		170,544
7 Other salaries and wages	17,370,399	11,533,974	2,477,735	3,358,690
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	738,972	475,408	117,411	146,153
9 Other employee benefits	3,963,944	2,930,782	422,375	610,787
10 Payroll taxes	1,208,884	665,679	241,747	301,458
11 Fees for services (non-employees):				
a Management	2,814,259	2,292,854	330,751	190,654
b Legal	220,381	119,542	85,740	15,099
c Accounting	281,361	78,844	202,517	
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	2,495,149			2,495,149
f Investment management fees	101,015		101,015	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,566,964	865,399	305,829	395,736
12 Advertising and promotion	2,097,248	247,265	7,787	1,842,196
13 Office expenses	470,073	441,903	4,639	23,531
14 Information technology	1,500,587	264,660	558,505	677,422
15 Royalties	0			
16 Occupancy	2,510,838	2,009,403	180,408	321,027
17 Travel	1,870,710	1,621,737	55,898	193,075
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	74,848	68,846	1,925	4,077
20 Interest	1,126	157	969	
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	543,530	434,249	59,463	49,818
23 Insurance	442,190	317,867	34,181	90,142
24 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.)				
a COST OF EXPIRED GOODS	170,300,968	170,300,968		
b POSTAGE AND FREIGHT	8,574,460	7,543,839	5,082	1,025,539
c MISCELLANEOUS	1,885,715	1,039,587	347,416	498,712
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	1,247,997,037	1,228,808,771	6,328,807	12,859,459
26 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 SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		30,085	1	37,954
	2	Savings and temporary cash investments		17,108,061	2	23,828,094
	3	Pledges and grants receivable, net		5,532,942	3	3,519,111
	4	Accounts receivable, net		806,587	4	558,483
	5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		0	6	0
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use		165,303,544	8	347,318,603
	9	Prepaid expenses and deferred charges		4,598,534	9	6,154,593
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	8,393,266		
	b	Less: accumulated depreciation	10b	5,889,330		
				2,135,853	10c	2,503,936
	11	Investments—publicly traded securities		26,998,121	11	34,585,072
	12	Investments—other securities. See Part IV, line 11		0	12	0
	13	Investments—program-related. See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
15	Other assets. See Part IV, line 11		3,684,638	15	3,318,313	
16	Total assets. Add lines 1 through 15 (must equal line 34)		226,198,365	16	421,824,159	
Liabilities	17	Accounts payable and accrued expenses		6,030,223	17	6,044,275
	18	Grants payable		1,000,759	18	430,910
	19	Deferred revenue		202,445	19	3,696,069
	20	Tax-exempt bond liabilities		0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	0
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		0	23	0
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	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		2,917,402	25	4,249,370
	26	Total liabilities. Add lines 17 through 25		10,150,829	26	14,420,624
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions		64,990,415	27	47,095,714
	28	Net assets with donor restrictions		151,057,121	28	360,307,821
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
32	Total net assets or fund balances		216,047,536	32	407,403,535	
33	Total liabilities and net assets/fund balances		226,198,365	33	421,824,159	

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,440,750,357
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,247,997,037
3	Revenue less expenses. Subtract line 2 from line 1	3	192,753,320
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	216,047,536
5	Net unrealized gains (losses) on investments	5	-1,037,697
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-359,624
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	407,403,535

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

	Yes	No
1 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.		
2a 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 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	
c 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	
3a 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?	Yes	
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.	Yes	

Additional Data

Software ID:
Software Version:
EIN: 06-1008595
Name: AMERICARES FOUNDATION INC

Form 990 (2019)

Form 990, Part III, Line 4a:

Access to Medicine Americares is working to improve health outcomes for patients in under-resourced 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 partners in 28 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 Americares provided these teams with \$52 million in donated medicines and supplies as well as medical training tools and resources which they used to provide care in 68 countries. The U.S. Program, which is a network of 965 safety net health care providers throughout the continental U.S. 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 all, Americares provided aid valued at over \$1 billion through our Access to Medicine program, including enough medicine to fill 9.9 million prescriptions and 17 million medical supplies. We estimate that 1.7 million people benefited from the medicine alone.

Form 990, Part III, Line 4b:

Emergency Programs From July 2019 to June 2020, Americares responded to 41 natural disasters and humanitarian crises in 29 countries, including the United States and three U.S. territories, with technical assistance, shipments of medicines and emergency supplies as well as preparedness, response and recovery projects. The COVID-19 pandemic is among these. In February 2020, Americares began responding to what was then an epidemic and, by June 30, the end of our fiscal year, Americares had reached 13 countries with \$12 million in aid to battle the declared pandemic. Shipments included more than 3.5 million supplies, including critically needed PPE and disinfectants. In the United States, by June 30, Americares support reached health centers, hospitals and frontline health workers in 36 states, the Northern Mariana Islands and Puerto Rico. Across all emergencies in FY20, Americares Emergency Programs delivered nearly \$42 million in emergency and disaster aid, including shipments of medicines and relief supplies as well as grants and direct programming estimated to reach 203,000 people. This included emergency preparedness programming in 15 U.S. states, one U.S. territory, El Salvador and the Philippines. Americares comprehensive program to provide primary care services to Venezuelan migrants and Colombian returnees in Colombia continued in FY20. Americares partnered with ten public health facilities and, from August 2019 to August 2020, conducted 145,845 patient consultations, including 21,256 prenatal consultations and 24,220 mental health consultations between fixed facilities and mobile clinics. In addition, Americares added a laboratory and ultrasound component to better support pregnant women. With the outbreak of COVID-19, Americares adapted to continue to meet the needs of patients and the community, providing PPE to staff and installing handwashing stations and providing safety information for patients. FY20 responses 1. Bahamas: COVID-19, Hurricane Dorian, Hurricane Matthew 2. Bangladesh: Rohingya refugee crisis 3. Colombia: COVID-19, Venezuela regional crisis 4. Democratic Republic of the Congo: Ebola 5. Dominica: Hurricane Maria recovery 6. Dominican Republic: COVID-19 7. El Salvador: COVID-19, Tropical Storm Amanda 8. Haiti: COVID-19 9. Honduras: COVID-19 10. India: COVID-19, Kerala floods, Assam and Bihar floods, Cyclone Amphan, Cyclone Bulbul, Maharashtra and Karnataka floods 11. Indonesia: Sulawesi earthquake and tsunami 12. Jamaica: COVID-19 13. Jordan: Syrian refugee crisis 14. Lebanon: COVID-19 15. Malawi: COVID-19, Cyclone Idai recovery 16. Marshall Islands: Dengue outbreak 17. Nepal: Early monsoon rains 18. Pakistan: earthquake 19. Peru: COVID-19, Venezuela regional crisis 20. Philippines: COVID-19, Dengue outbreak, Taal volcanic eruption, earthquake, Typhoon Kammuri 21. Samoa: Measles outbreak 22. Sierra Leone: COVID-19, landslide 23. St. Lucia: COVID-19 24. Somalia: Drought and nutrition crisis 25. Syria: Political conflict 26. Tanzania: COVID-19 27. United States and territories: Arizona: COVID-19 Arkansas: Demonstrations, Central U.S. severe weather California: COVID-19, Ridgecrest earthquake, wildfires Colorado: COVID-19 Connecticut: COVID-19 Delaware: COVID-19 Florida: COVID-19, Hurricane Dorian, Hepatitis A outbreak, Hurricane Michael recovery Georgia: COVID-19, Hurricane Dorian Idaho: COVID-19 Illinois: COVID-19 Indiana: COVID-19, water crisis Louisiana: COVID-19, Cyclone Barry Massachusetts: COVID-19 Maryland: COVID-19 Michigan: COVID-19, Midland floods Minnesota: COVID-19 Missouri: COVID-19 Mississippi: COVID-19, Southern U.S. flooding Montana: COVID-19 North Carolina: COVID-19 New Hampshire: COVID-19 New Jersey: COVID-19, Newark potable water crisis New Mexico: COVID-19 Nevada: COVID-19 New York: COVID-19 Ohio: COVID-19 Oklahoma: COVID-19, Central U.S. severe weather Oregon: COVID-19 Pennsylvania: COVID-19 Tennessee: COVID-19, tornado Texas: COVID-19, Rio Grande flooding, Tropical Depression Imelda, Hurricane Harvey recovery, Central America migration crisis Virginia: COVID-19 Washington: COVID-19 Wisconsin: COVID-19 West Virginia: COVID-19 District of Columbia: COVID-19 Northern Mariana Islands: COVID-19 Puerto Rico: COVID-19, earthquakes, Hurricane Maria recovery Virgin Island: Hurricane Irma 28. Venezuela: Crisis 29. 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.

Form 990, Part III, Line 4c:

Clinics to Communities Americas supports the capacity of local health delivery partners and promotes health and disease prevention in low-income communities across the U.S. and worldwide. This work is paramount to protecting health during the global COVID-19 pandemic. Through work in our own clinics and that of our partners, Americas provided more than \$15 million in value in our Clinics to Communities program. In 2019-2020, Americas clinic in El Salvador, Clinica Integral de Atencion Familiar, remained open, operating under the Salvadoran governments COVID-19 restrictions. The clinic provided 37,482 people with 53,283 clinical consultations. In addition, our partners, Americas India and Americas Free Clinics, in Connecticut, provided an additional 117,951 clinical consultations, many over video or phone, as COVID-19 restrictions limited in-person care. Americas also engages deeply with its global network of partners to develop effective models of quality care. Americas-supported initiatives included: support for free and charitable clinics in the U.S. so they can reach Patient Centered Medical Home certification; in Guatemala, specialized training for health workers around prenatal nutrition matched with a supply of prenatal vitamins; in the Philippines, health worker training in Northern Cebu five municipalities to provide mental health and psychosocial counseling within the clinic and throughout the community. In FY20, Americas supported nearly 28,000 surgeries performed by U.S.-based medical volunteers on 685 short-term medical outreach trips to 68 countries. These teams also provided host institutions in 23 countries with more than 750 pulse oximeters provided by Americas Through our Safe Surgery Initiative. In the Philippines, where Americas trained 1,765 health workers on the use of pulse oximeters, 97 percent of health workers showed increased knowledge of pulse oximetry after training sessions. Americas also provides resources and training so health workers can better serve their communities and improve the health of low-income patients. In FY20, Americas increased the capacity of 10,129 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 FY20, Americas community health programs included community education and handwashing stations to reduce the spread of COVID-19. In addition, Americas programs spanned a range of health themes including noncommunicable disease, womens and childrens health and psychosocial health. Examples include: - In Haiti, Americas provided 100 handwashing stations to two communities, trained community health workers on COVID-19 epidemiology, safety and risk awareness, disseminated 1,000 fliers, reached more than 36,000 people with public health messaging around COVID-19. - In the Philippines, to support communities through the COVID pandemic, Americas generated greater mental health and psychosocial awareness around anxiety and depression with radio messaging and increased hand hygiene education through banners and flyers. - In and around Mwanza, Tanzania, Americas conducted 405 radio broadcasts to raise awareness of birth injuries (fistula), funded repair surgeries for 164 women and provided psychosocial counseling for nearly 200 women. - In El Salvador, Americas hypertension, diabetes and malnutrition program included close to 100 community education sessions, nearly 1,000 consultations with patients and over 4,000 educational text messages to diagnosed patients, with 67.9 percent of hypertensive patients showing a reduction in mean arterial pressure.

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			
Michael J Nyenhuis President/CEO (Thru 03/2020)	40.0 1.0	X		X				438,323	0	61,433
Christine Squires President/CEO (as of 03/2020)	40.0 0.0	X		X				314,627	0	55,195
Richard K Trowbridge CFO, Treasurer, SVP, GIK Ops	40.0 1.0			X				265,442	0	56,665
Jed Selkowitz CMO & SVP, COMMUNICATIONS	40.0 0.0			X				265,075	0	16,784
E Anne Peterson MD SVP Global Prog (Thru 06/2020)	40.0 1.0			X				250,143	0	30,413
Kevin Gilrain Senior V.P., Human resources	40.0 0.0			X				220,581	0	42,206
Jenny Goldstein as of SVP & Chief Development Offic.	40.0 0.0			X				165,514	0	51,674
Diana Maguire V.P., Institutional Relations	40.0 0.0						X	155,950	0	51,125
Rachel Granger V.P. Int'l Partnrshps&Programs	40.0 0.0					X		177,714	0	22,416
Geoff Kneisel V.P., Corporate Relations	40.0 0.0						X	134,688	0	48,869

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			
Jeffrey T Becker Director	1.0 0.0	X						0	0	0
Katherine Close MD 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
Tony Goldwyn director	1.0 0.0	X						0	0	0
Susan Grossman director	1.0 0.0	X						0	0	0
Bryan C Hanson Director (thru 06/2020)	1.0 0.0	X						0	0	0
Samhita Jayanti Vice Chairman	1.0 0.0	X		X				0	0	0
Francine Katsoudas 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			
Paul J Kuehner Director	1.0 0.0	X						0	0	0
Jerry P Leamon Chairman	1.0	X		X				0	0	0
Mehdi Mahmud Director	1.0 0.0	X						0	0	0
Joseph J Rucci Jr Dir. & Secretary(Thru 06/2020)	1.0 1.0	X		X				0	0	0
Alan Rwambuya Director	1.0 0.0	X						0	0	0
Stephen Sadove Director	1.0 0.0	X						0	0	0
Sarah Saint-Amand Director	1.0 0.0	X						0	0	0
Michael Ullmann Director	1.0 0.0	X						0	0	0

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
AMERICARES FOUNDATION INC

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) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.
If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
	Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . .	914,486,587	2,379,130,027	1,042,283,235	973,977,098	1,438,445,654	6,748,322,601
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	Total. Add lines 1 through 3	914,486,587	2,379,130,027	1,042,283,235	973,977,098	1,438,445,654	6,748,322,601
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). .						3,229,167,156
6	Public support. Subtract line 5 from line 4.						3,519,155,445

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4. . .	914,486,587	2,379,130,027	1,042,283,235	973,977,098	1,438,445,654	6,748,322,601
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .	960,491	837,326	1,189,036	1,467,594	1,435,551	5,889,998
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.). . .	1,141,371	1,199,482	1,468,057	1,477,410	1,340,871	6,627,191
11	Total support. Add lines 7 through 10						6,760,839,790
12	Gross receipts from related activities, etc. (see instructions)					12	4,507,628
13	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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14 52.052 %
15	Public support percentage for 2018 Schedule A, Part II, line 14	15 50.523 %
16a	33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>	
b	33 1/3% support test—2018. 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 stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>	
17a	10%-facts-and-circumstances test—2019. 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 stop here. 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	10%-facts-and-circumstances test—2018. 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 stop here. 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	Private foundation. 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2 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						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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.						
c Add lines 7a and 7b. .						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .						
13 Total support. (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. ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. 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—2018. 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
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
1		
2 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 Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
2		
3a 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>		
3a		
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 Part VI when and how the organization made the determination.</i>		
3b		
c 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 Part VI what controls the organization put in place to ensure such use.</i>		
3c		
4a 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>		
4a		
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 Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
4b		
c 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 Part VI 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>		
4c		
5a 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 Part VI, 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>		
5a		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5b		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
5c		
6 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 Part VI.</i>		
6		
7 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>		
7		
8 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>		
8		
9a 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 Part VI.</i>		
9a		
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 Part VI.</i>		
9b		
c 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 Part VI.</i>		
9c		
10a 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>		
10a		
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>		
10b		

Part IV

Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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 A family member of a person described in (a) above?		
c 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>		

Section B. Type I Supporting Organizations

	Yes	No
1 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>		
2 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>		

Section C. Type II Supporting Organizations

	Yes	No
1 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>		

Section D. All Type III Supporting Organizations

	Yes	No
1 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?		
2 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>		
3 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>		

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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> 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.		
a 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 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>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a 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 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>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations			
1 <input type="checkbox"/> 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.			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	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)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<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 2019 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-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. 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 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► 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.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

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?

☐ Yes ☐ No

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?

☐ Yes ☐ No

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).

☐ Preservation of land for public use (e.g., recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

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 7/25/06, 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?

☐ Yes ☐ No

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)?

☐ Yes ☐ No

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) 2019

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

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

☐

b

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

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

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
1a	Beginning of year balance	4,521,288	1,748,813	1,566,608	1,420,481
b	Contributions	1,125,000	2,851,375	225,000	45,000
c	Net investment earnings, gains, and losses	58,848	85,278	133,053	206,768
d	Grants or scholarships				-31,283
e	Other expenditures for facilities and programs		158,000	170,000	100,000
f	Administrative expenses	18,144	6,178	5,848	5,641
g	End of year balance	5,686,992	4,521,288	1,748,813	1,566,608

2

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

a

Board designated or quasi-endowment ▶ 68.350 %

b

Permanent endowment ▶ 28.540 %

c

Temporarily restricted endowment ▶ 3.110 %

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
3a(i)	Yes	
3a(ii)		No
3b		

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
1a	Land	175,000		175,000
b	Buildings	1,148,052	636,886	511,166
c	Leasehold improvements	2,613,603	1,948,317	665,286
d	Equipment	4,456,611	3,304,127	1,152,484
e	Other			
Total.	Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶			2,503,936

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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) SPLIT INTEREST AGREEMENTS	4,179,870
(3) CAPITALIZED LEASE	69,500
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) ▶	4,249,370

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.

1	Total revenue, gains, and other support per audited financial statements	1	1,441,680,436
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-1,037,697
b	Donated services and use of facilities	2b	531,264
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-359,624
e	Add lines 2a through 2d	2e	-866,057
3	Subtract line 2e from line 1	3	1,442,546,493
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	101,015
b	Other (Describe in Part XIII.)	4b	-1,897,151
c	Add lines 4a and 4b	4c	-1,796,136
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	1,440,750,357

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.

1	Total expenses and losses per audited financial statements	1	1,250,324,437
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	531,264
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	1,897,151
e	Add lines 2a through 2d	2e	2,428,415
3	Subtract line 2e from line 1	3	1,247,896,022
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	101,015
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	101,015
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	1,247,997,037

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 in the temporarily restricted and permanent endowments 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 the tax years ending 2017 and 2018, \$170,000 and \$158,000, respectively, was withdrawn from its endowment to support the implementation of a new enterprise resource planning ("ERP") system. Management of Americares has removed planned giving gifts from its annual operating budget and has established guidelines for allocating these gifts on an annual basis between the management-directed quasi endowment, an innovation fund, and strategic initiatives or operating funds. These guidelines are reviewed at the end of each fiscal year dependent on the level of planned giving gifts and the financial results for the fiscal year. Management informs the Board of Directors of these decisions. In tax years ending 2019 and 2018, respectively, Management designated \$1.1 million and \$2.7 million of gifts without donor restrictions for long-term investment in the quasi-endowment (i.e. without donor restrictions). Management has access to such funds and may use them without a resolution from the Board of Directors.

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 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. FILES A CONSOLIDATED AUDITED FINANCIAL STATEMENT WITH ITS SUBSIDIARY, AMERICARES FREE CLINICS, INC. THE RECONCILIATION IN PARTS XI & 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 (\$359,624) ----- Total Revenue</p> <p>Adjustments for line 2d (\$359,624) FORM 990, SCHEDULE D, PART XI, LINE 4b Rental Expenses Reclassed to Offset rental income (\$194,695) Direct fundraising Expense (\$770,256) Cost of goods sold (\$932,201) ----- Total Revenue</p> <p>Adjustments for line 4b (\$1,897,152)</p>

Supplemental Information

Return Reference	Explanation
EXPENSES ON BOOKS NOT ON RETURN	RENTAL EXPENSE RECLASSIFIED TO OFFSET RENTAL INCOME \$194,695 DIRECT FUNDRAISING EXPENSE \$770, 256 COST OF GOODS SOLD \$932,201 ----- TOTAL \$1,897,152

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

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.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
AMERICARES FOUNDATION INC

Employer identification number
06-1008595

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on 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 Activites 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 the region	(d) Activities conducted in region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region
See Add'l Data					
3a Sub-total	8	276			231,780,961
b Total from continuation sheets to Part I	3	11			33,685,305
c Totals (add lines 3a and 3b)	11	287			265,466,266

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on 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.

[illegible]

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	▶	485
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" on Form 990, Part IV, line 16.
-----------------	---

Part III can be duplicated if additional space is needed.

[illegible]

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; don't 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; don't 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.

990 Schedule F, Supplemental Information

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	6,526,386
East Asia and the Pacific			Program Services	Disaster Relief/dvlpmt	1,103,496

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	116,653
Middle East and North Africa			Program Services	Disaster Relief/dvlpmt	483,648

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	98,843
South America			Program Services	Disaster Relief/dvlpmt	3,930,787

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	5,649
South Asia			Program Services	Disaster Relief/dvlpmt	187,215

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	1,189,163
Central America and the Caribbean	4	143	Grantmaking		115,057,353

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	10	Grantmaking		6,609,427
Europe (Including Iceland and Greenland)		1	Grantmaking		843,820

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		36,741,139
North America			Grantmaking		1,940,661

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		39,344,936
South America	2	115	Grantmaking		6,333,064

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	7	Grantmaking		11,268,721
Sub-Saharan Africa	3	11	Grantmaking		33,685,305

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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	9,203	WIRE	0		
		Central America and the Caribbean	Partner Support	9,326	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	Earthquake relief	11,208	WIRE	0		
		Central America and the Caribbean	Partner Support	15,000	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)
		Central America and the Caribbean	Partner Support	15,000	WIRE	0		
		Central America and the Caribbean	Partner Support	15,000	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)
		South Asia	Cyclone Relief	15,000	WIRE	0		
		Central America and the Caribbean	Partner Support	16,652	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	18,000	WIRE	0		
		Central America and the Caribbean	Partner Support	24,500	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)
		Central America and the Caribbean	Partner Support	24,500	WIRE	0		
		Central America and the Caribbean	Partner Support	24,500	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)
		South Asia	Flooding Relief	25,000	WIRE	0		
		South Asia	Partner Support	37,365	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	42,000	WIRE	0		
		Middle East and North Africa	Refugee Crisis	59,750	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)
		Middle East and North Africa	Refugee Crisis	60,000	WIRE	0		
		South Asia	Flooding Relief	70,000	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	Breast Cancer	75,000	WIRE	0		
		South Asia	Flooding Relief	102,686	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	Pediatric Nutrition	135,000	WIRE	0		
		Middle East and North Africa	Refugee Crisis	202,600	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	Covid Response	207,500	WIRE	0		
		South Asia	Covid Response	210,000	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)
		South Asia	Covid Response	400,000	WIRE	0		
		South Asia	Partner Support	23,773	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	Partner Support	126,933	WIRE	0		
		South Asia	Partner Support	42,772	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	Partner Support	34,700	WIRE	0		
		South Asia	Partner Support	33,698	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	Partner Support	29,456	WIRE	0		
		South Asia	Partner Support	38,000	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)
		South Asia	Infection Prevention	43,610	WIRE	0		
		South Asia	Partner Support	21,000	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)
		South Asia	Partner Support	30,000	WIRE	0		
		South Asia	Partner Support	62,108	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	Partner Support	59,695	WIRE	0		
		South Asia	Partner Support	7,131	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	Partner Support	7,011	WIRE	0		
		South Asia	Partner Support	11,798	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	Partner Support	49,801	WIRE	0		
		South Asia	Partner Support	16,075	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	Partner Support	41,552	WIRE	0		
		South Asia	Partner Support	52,588	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	Partner Support	12,123	WIRE	0		
		South Asia	Partner Support	13,320	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	Partner Support	20,820	WIRE	0		
		South Asia	Partner Support	49,539	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	Partner Support	14,619	WIRE	0		
		South Asia	Partner Support	30,000	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)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		20,873	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		275,185	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		2,096,754	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		174,921	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		6,428	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		53,603	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		6,696,613	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,229,348	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		144,737	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		1,126,285	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		1,119,150	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		829,095	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		51,522,237	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		819,257	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		10,684,745	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		1,784,498	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		4,895,251	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		1,688,059	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)
		EAST ASIA AND THE PACIFIC	EMERGENCY	0		88,190	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	EMERGENCY	0		139,049	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)
		EAST ASIA AND THE PACIFIC	EMERGENCY	0		55,665	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	EMERGENCY	0		8,519	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		1,987,361	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		182,952	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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	EMERGENCY	0		59,323	Med. Suppl.	FMV
		EUROPE	EMERGENCY	0		145,259	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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	EMERGENCY	0		159,534	Med. Suppl.	FMV
		EUROPE	ON-GOING	0		149,134	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		25,051	Med. Suppl.	FMV
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY	0		74,114	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)
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY	0		146,795	Med. Suppl.	FMV
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY	0		88,519	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		153,759	Med. Suppl.	FMV
		MIDDLE EAST AND NORTH AFRICA	ON-GOING	0		305,592	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)
		MIDDLE EAST AND NORTH AFRICA	ON-GOING	0		22,222,313	Med. Suppl.	FMV
		MIDDLE EAST AND NORTH AFRICA	ON-GOING	0		13,206,226	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)
		RUSSIA AND THE NEWLY INDEPENDENT STATES	ON-GOING	0		5,977,187	Med. Suppl.	FMV
		RUSSIA AND THE NEWLY INDEPENDENT STATES	ON-GOING	0		3,309,793	Med. Suppl.	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		4,162,633	Med. Suppl.	FMV
		RUSSIA AND THE NEWLY INDEPENDENT STATES	ON-GOING	0		25,891,324	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)
		SOUTH AMERICA	EMERGENCY	0		97,608	Med. Suppl.	FMV
		SOUTH AMERICA	EMERGENCY	0		6,323	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		782,815	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		2,881,811	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		8,664,818	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	EMERGENCY	0		169,448	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)
		SUB-SAHARAN AFRICA	EMERGENCY	0		120,613	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	EMERGENCY	0		181,156	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	EMERGENCY	0		26,923	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	EMERGENCY	0		121,971	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		4,625,468	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		161,603	Med. Suppl.	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		3,516,941	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		407,530	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		7,916,180	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		536,845	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		18,280	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		20,517	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		38,047	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		12,859	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		57,215	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		65,757	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		6,499	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,276	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		7,680	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		8,830	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		11,244	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		24,442	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		24,520	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		28,182	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		28,504	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		42,754	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		51,831	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		57,654	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		63,612	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		65,197	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		71,803	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		72,902	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		77,193	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		83,409	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		85,526	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		108,198	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		137,990	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		160,979	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		166,864	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		197,883	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		293,874	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		310,176	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		353,995	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		400,596	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		1,161,381	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,561	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		5,426	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,262	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		6,298	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,181	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		7,254	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		8,919	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		9,248	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,997	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		11,010	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		12,994	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		14,173	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		15,765	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		17,036	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		18,294	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		19,168	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		22,971	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		23,557	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		25,353	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		27,535	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		29,310	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		32,455	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		40,030	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		46,580	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		49,303	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		49,525	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		62,840	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		86,828	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		100,451	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		103,185	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		106,137	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		112,055	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		120,550	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		124,158	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		139,119	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		154,697	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		160,025	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		170,146	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		172,292	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		198,409	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		221,203	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		242,582	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		248,638	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		429,909	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		723,608	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		5,377	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,268	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,910	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		11,188	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		14,948	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		16,764	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		18,860	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		21,677	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		31,333	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		33,340	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		40,690	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		44,618	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		52,918	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		59,062	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		64,740	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		79,252	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		87,346	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		105,522	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		106,251	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		107,882	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		149,312	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		167,601	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		198,753	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		260,628	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		262,868	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		341,844	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		484,681	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		712,714	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		1,023,634	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		1,070,702	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		1,175,174	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		1,547,530	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		1,818,083	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		2,325,680	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,335	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,057	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		6,312	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,630	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		6,774	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,663	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,143	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,419	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		9,427	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,571	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		10,260	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		10,509	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		10,546	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		11,455	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		13,142	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		13,890	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		15,293	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		16,044	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		18,875	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		20,745	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		29,103	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		31,787	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		32,668	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		33,399	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		34,144	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		34,631	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		42,491	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		47,199	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		52,222	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		54,160	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		55,248	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		67,810	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		73,107	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		76,351	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		84,855	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		87,040	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		87,714	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		91,507	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		115,724	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		124,453	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		204,549	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		304,290	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)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		310,410	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		342,739	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		369,808	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		612,464	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		9,797	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		16,806	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		44,273	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		106,361	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		162,104	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		227,974	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		28,190	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		101,726	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		5,688	Med. Suppl.	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,471	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		10,382	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		11,951	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)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		19,001	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		64,655	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		242,102	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		16,811	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		125,744	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		9,600	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		14,162	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		34,119	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)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		40,603	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		244,834	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)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		125,816	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		1,067,711	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		5,221	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		5,428	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		6,080	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		9,342	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		9,901	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		10,192	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		12,003	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		17,941	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		20,056	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		21,709	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		30,656	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		45,615	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)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		68,141	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		69,165	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)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		71,286	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		85,225	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		110,022	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		136,773	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		153,393	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		184,893	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)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		311,199	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		333,739	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		44,459	Med. Suppl.	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		31,161	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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	ON-GOING	0		327,322	Med. Suppl.	FMV
		MIDDLE EAST AND NORTH AFRICA	ON-GOING	0		21,778	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		33,765	Med. Suppl.	FMV
		MIDDLE EAST AND NORTH AFRICA	ON-GOING	0		76,651	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		12,485	Med. Suppl.	FMV
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY	0		26,802	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		28,305	Med. Suppl.	FMV
		NORTH AMERICA	ON-GOING	0		7,908	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)
		NORTH AMERICA	ON-GOING	0		102,075	Med. Suppl.	FMV
		NORTH AMERICA	ON-GOING	0		105,409	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		113,324	Med. Suppl.	FMV
		NORTH AMERICA	ON-GOING	0		124,400	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		136,745	Med. Suppl.	FMV
		NORTH AMERICA	ON-GOING	0		161,362	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)
		NORTH AMERICA	ON-GOING	0		167,546	Med. Suppl.	FMV
		NORTH AMERICA	ON-GOING	0		190,249	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		242,070	Med. Suppl.	FMV
		NORTH AMERICA	ON-GOING	0		267,491	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		310,758	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		16,753	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)
		SOUTH AMERICA	ON-GOING	0		32,193	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		36,071	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)
		SOUTH AMERICA	ON-GOING	0		44,776	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		13,403	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		69,128	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		149,628	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		6,180	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		160,364	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		16,975	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		52,705	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		53,294	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		53,986	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		341,548	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		413,508	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		5,250	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		5,258	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		5,712	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		6,160	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		12,300	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		14,017	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		20,920	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		25,169	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		55,341	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		67,085	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		83,501	Med. Suppl.	FMV
		SOUTH AMERICA	ON-GOING	0		164,687	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		241,577	Med. Suppl.	FMV
		SOUTH ASIA	ON-GOING	0		99,522	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)
		SOUTH ASIA	ON-GOING	0		139,798	Med. Suppl.	FMV
		SOUTH ASIA	ON-GOING	0		151,016	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		164,432	Med. Suppl.	FMV
		SOUTH ASIA	ON-GOING	0		5,029	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		19,422	Med. Suppl.	FMV
		SOUTH ASIA	ON-GOING	0		109,737	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		33,665	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		168,560	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		340,601	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		5,295	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		21,979	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		65,499	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		71,334	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		160,959	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		339,054	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		6,943	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		9,177	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		14,991	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		30,704	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		84,442	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		94,365	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		129,178	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		246,357	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		5,214	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)
		SUB-SAHARAN AFRICA	ON-GOING	0		5,755	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		16,796	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		42,621	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		68,484	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		110,063	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		214,155	Med. Suppl.	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		904,399	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		22,974	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		30,557	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		37,243	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)
		SUB-SAHARAN AFRICA	ON-GOING	0		59,992	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		83,549	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		108,866	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		20,147	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		87,932	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		7,332	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)
		SUB-SAHARAN AFRICA	ON-GOING	0		9,638	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		10,364	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		10,515	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		11,898	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		12,572	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		13,495	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		15,622	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		17,193	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)
		SUB-SAHARAN AFRICA	ON-GOING	0		20,972	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		30,422	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	ON-GOING	0		36,461	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		50,903	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		53,576	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		53,677	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		55,137	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		56,250	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		58,130	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		58,572	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		59,276	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		65,992	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		66,869	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		78,736	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)
		SUB-SAHARAN AFRICA	ON-GOING	0		83,622	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		91,058	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		92,060	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		96,636	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		99,512	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		101,390	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		104,679	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		115,537	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		121,687	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		121,863	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		140,170	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		156,174	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		184,643	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		187,757	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		191,175	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		230,026	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		231,299	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		231,664	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		239,398	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		240,516	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)
		SUB-SAHARAN AFRICA	ON-GOING	0		266,611	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		267,183	Med. Suppl.	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		269,641	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		309,550	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		329,681	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		386,668	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		397,563	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		398,747	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		426,922	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		768,381	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)
		SUB-SAHARAN AFRICA	ON-GOING	0		779,652	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		1,184,606	Med. Suppl.	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		6,439	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		19,610	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		11,314	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		13,519	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		37,553	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		250,894	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)
		SUB-SAHARAN AFRICA	ON-GOING	0		361,468	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		34,554	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		34,826	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		146,610	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		290,662	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		6,804	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		8,142	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		82,718	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)
		SUB-SAHARAN AFRICA	ON-GOING	0		13,918	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		42,294	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		140,469	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		5,323	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		5,405	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		9,065	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)
		SUB-SAHARAN AFRICA	ON-GOING	0		12,555	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		23,304	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)
		SUB-SAHARAN AFRICA	ON-GOING	0		23,541	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		121,374	Med. Suppl.	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		213,047	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		260,169	Med. Suppl.	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		10,156	Med. Suppl.	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		12,666	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)
		SUB-SAHARAN AFRICA	ON-GOING	0		103,253	Med. Suppl.	FMV

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

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 ☒ Mail solicitations

e ☒ Solicitation of non-government grants

b ☒ Internet and email solicitations

f ☒ Solicitation of government grants

c ☒ Phone solicitations

g ☒ Special fundraising events

d ☒ 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? ☒ Yes ☐ No
- b If "Yes," list the 10 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			
the harrington agency 325 Dickinson Avenue Swarthmore, PA 19081	FUNDRAISING COUNSEL		No	14,671,012	2,457,986	12,213,026
MDS Communications Corp 545 W Juanita Avenue Mesa, AZ 85210	Prof'l Solicitor		No	51,556	37,163	14,393
Total ▶				14,722,568	2,495,149	12,227,419

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.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		Airlift Benefit (event type)	(event type)	0 (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	2,319,271			2,319,271
	2 Less: Contributions	2,184,711			2,184,711
	3 Gross income (line 1 minus line 2)	134,560			134,560
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	140,187			140,187
	7 Food and beverages	138,299			138,299
	8 Entertainment	258,325			258,325
	9 Other direct expenses	233,445			233,445
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				770,256
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-635,696

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.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 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	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 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:

a	The organization's facility	13a	%
b	An outside facility	13b	%

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 2020, in addition to the consulting fees listed in Schedule G, Part I, Americares paid other non-consulting fundraising expenses to The Harrington Agency, LLC. of \$3,443.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I
(Form 990)

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.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service

Name of the organization
AMERICARES FOUNDATION INC

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 ▶ 726

3 Enter total number of other organizations listed in the line 1 table ▶ 62

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	173049		529,834,723	FMV	Prescription
(2) MEDICAL OUTREACH IN THE US	35		775,238	FMV	Med 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 ORACTIVITY. 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
12TH STREET HEALTH AND WELLNESS CENTER 4301 W MARKHAM LITTLE ROCK, AR 72205	71-6046242	501(c)(3)	0	255,479	FMV	Medical Supplies	ON-GOING
A COMMUNITY CLINIC INC 344 MARKET STREET SUNBURY, PA 17801	20-4051982	501(c)(3)	0	162,336	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
A PROMISE TO HELP 1332 WINOLA LANE BIRMINGHAM, AL 35235	26-4401185	501(c)(3)	0	593,815	FMV	Medical Supplies	ON-GOING
ABILENE-TAYLOR COUNTY PUBLIC HEALTH DIST 850 N 6TH STREET ABILENE, TX 79601	75-6000440	Other	0	729,840	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	390,337	FMV	Medical Supplies	ON-GOING
ADVENTHEALTH WATERMAN COMMUNITY CLINIC 2300 KURT STREET EUSTIS, FL 32726	59-3140669	501(c)(3)	0	308,300	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
AFRICAN SERVICES COMMITTEE 429 WEST 127TH ST NEW YORK, NY 10027	13-3749744	501(c)(3)	0	6,551	FMV	Medical Supplies	ON-GOING
AGAPE CLINIC 4104 JUNIUS STREET DALLAS, TX 75246	14-1847977	501(c)(3)	0	7,646,253	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 SQUARE BAY MINETTE, AL 36507	63-1247879	501(c)(3)	0	319,816	FMV	Medical Supplies	ON-GOING
ALAMEDA COUNTY HEALTH CARE FOR THE HOMELESS 1404 FRANKLIN STREET 200 OAKLAND, CA 94612	94-6000501	Other	0	63,190	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
ALBEMARLE HOSPITAL FOUNDATION 918 GREENLEAF ST ELIZABETH CITY, NC 27909	43-2031990	501(c)(3)	0	63,337	FMV	Medical Supplies	ON-GOING
ALL FOR HEALTH HEALTH FOR ALL 519 EAST BROADWAY GLENDALE, CA 91205	95-4773684	501(c)(3)	0	218,286	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
AMERICAN ACADEMY OF PEDIATRICS 2900 Carr 834 Guaynabo, PR 00971	66-0556540	501(c)(3)	0	7,151	FMV	Medical Supplies	EMERGENCY
AMERICARES FREE CLINIC OF BRIDGEPORT 115 HIGHLAND AVENUE BRIDGEPORT, CT 06604	06-1422741	501(c)(3)	0	464,113	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 DANBURY 76 WEST STREET DANBURY, CT 06810	06-1422741	501(c)(3)	0	501,649	FMV	Medical Supplies	ON-GOING
AMERICARES FREE CLINIC OF NORWALK 98 SOUTH MAIN STREET NORWALK, CT 06854	06-1422741	501(c)(3)	0	378,031	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 STAMFORD 88 HAMILTON AVENUE STAMFORD, CT 06902	06-1422741	501(c)(3)	0	85,640	FMV	Medical Supplies	ON-GOING
AMISTAD COMMUNITY HEALTH CENTER 1533 S BROWNLEE CORPUS CHRISTI, TX 78404	20-3008507	501(c)(3)	0	96,223	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
ANCHOR MENTAL HEALTH INC 1001 LAWRENCE STREET WASHINGTON, DC 20017	52-0824835	501(c)(3)	0	469,019	FMV	Medical Supplies	ON-GOING
ANDERSON FREE CLINIC 414 N FANT ST ANDERSON, SC 29621	57-0787584	501(c)(3)	0	26,669	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
ANDREWS CENTER 2323 WEST FRONT STREET TYLER, TX 75702	75-1281410	501(c)(3)	0	567,868	FMV	Medical Supplies	ON-GOING
ARKANSAS FOOD BANK 4301 w 65th St Little Rock, AR 72209	71-0596734	501(c)(3)	0	14,310	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
ARLINGTON FREE CLINIC 2921 SOUTH 11TH STREET ARLINGTON, VA 22204	54-1671883	501(c)(3)	0	683,069	FMV	Medical Supplies	ON-GOING
ARTHUR NAGEL COMMUNITY CLINIC 1116 12TH ST BANDERA, TX 78003	77-0697361	501(c)(3)	0	251,238	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
ARUBAH COMMUNITY CLINIC 1021 W MAIN COLLINSVILLE, OK 74021	27-3865132	501(c)(3)	0	65,764	FMV	Medical Supplies	ON-GOING
ASCENSION SETON CENTRAL OUTPATIENT PHARMACY 1500 RED RIVER ST 14052 AUSTIN, TX 78701	74-1109643	501(c)(3)	0	26,394	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
ASIAN AMER HEALTH COALITION DBA HOPE CLINIC 7001 CORPORATE DRIVE HOUSTON, TX 77036	31-1756818	501(c)(3)	0	84,567	FMV	Medical Supplies	ON-GOING
ATHENS NURSES CLINIC PO BOX 1732 ATHENS, GA 30601	58-2490925	501(c)(3)	0	190,697	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
AVICENNA COMMUNITY HEALTH CENTER PO BOX 218 URBANA, IL 61803	27-0267757	501(c)(3)	0	16,667	FMV	Medical Supplies	ON-GOING
AVICENNA FREE CLINIC 1838 FRANKFORD AVE PANAMA CITY, FL 32405	82-2554695	501(c)(3)	0	815,000	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
AVITA COMMUNITY PARTNERS 4331 THURMON TAN FLOWERY BRANCH, GA 30542	58-2109706	Other	0	102,402	FMV	Medical Supplies	ON-GOING
AZ PACH 2902 W CLARENDON AVE PHOENIX, AZ 85017	46-0650798	501(c)(3)	0	40,378	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
AZZARELLI OUTREACH CLINIC 341 N ST JOSEPH AVE KANKAKEE, IL 60901	36-2312493	501(c)(3)	0	462,198	FMV	Medical Supplies	ON-GOING
BAAL PARAZIM WELLNESS INC 3353 SOUTH MORGAN STREET CHICAGO, IL 60608	46-5746945	501(c)(3)	0	1,562,226	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
BAPTIST COMMUNITY HEALTH SERVICES 4960 ST CLAUDE NEW ORLEANS, LA 70117	45-3792193	501(c)(3)	0	33,530	FMV	Medical Supplies	ON-GOING
BAPTIST HEALTH FOLLOW UP CARE 151 NW 11TH ST HOMESTEAD, FL 33030	20-5155995	501(c)(3)	0	2,090,210	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
BAPTIST HOSPITALSSMARTHEALTH CLINIC 810 HOSPITAL DRIVE BEAUMONT, TX 77701	74-1303730	501(c)(3)	0	125,039	FMV	Medical Supplies	ON-GOING
BARTZ-ALTADONNA COMMUNITY HEALTH CENTER 43322 GINGHAM AVE LANCASTER, CA 93535	27-3261289	501(c)(3)	0	240,130	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
BEACON CHARITABLE PHARMACY INC 408 NINTH STREET SW CANTON, OH 44707	20-0797475	501(c)(3)	0	140,813	FMV	Medical Supplies	ON-GOING
BEACON CLINIC FOR HEALTH AND HOPE BEACON CLINIC HARRISBURG, PA 17110	46-3507570	501(c)(3)	0	158,719	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
BECKLEY HEALTH RIGHT INC 111 RANDOLPH STREET BECKLEY, WV 25801	55-0774466	501(c)(3)	0	8,679	FMV	Medical Supplies	ON-GOING
BEERSHEBA SPRINGS MEDICAL CLINIC PO BOX 112 BEERSHEBA SPRINGS, TN 37305	26-4579813	501(c)(3)	0	1,622,064	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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BENNINGTON FREE CLINIC 121 DEPOT STREET BENNINGTON, VT 05201	03-0369844	501(c)(3)	0	35,992	FMV	Medical Supplies	ON-GOING
BETHESDA COMMUNITY CLINIC INC 111 MOUNTAIN BROOK CANTON, GA 30115	27-4923001	501(c)(3)	0	148,421	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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BETHESDA HEALTH CLINIC 409 WEST FERGUSON TYLER, TX 75702	26-0036674	501(c)(3)	0	304,251	FMV	Medical Supplies	ON-GOING
BILLINGS URBAN INDIAN HEALTH AND WELLNESS CENTER 17 NORTH 26TH STREET BILLINGS, MT 59101	81-0512124	501(c)(3)	0	109,931	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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BLACK HAWK GRUNDY MENTAL HEALTH CENTER 3251 WEST 9TH STREET WATERLOO, IA 50702	42-0733463	501(c)(3)	0	293,798	FMV	Medical Supplies	ON-GOING
BLUEBONNET TRAILS COMMUNITY SERVICES 1009 N GEORGETOWN ST ROUND ROCK, TX 78664	74-2795332	501(c)(3)	0	165,036	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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BOLINGBROOK CHRISTIAN HEALTH CENTER 151 E BRIARCLIFF RD BOLINGBROOK, IL 60440	36-4401468	501(c)(3)	0	963,867	FMV	Medical Supplies	ON-GOING
BORLAND FREE CLINIC 3550 SW BORLAND RD TUALATIN, OR 97062	46-1070038	501(c)(3)	0	374,182	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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BOSTON MEDICAL CENTER 750 Albany St Boston, MA 02118	04-3314093	501(c)(3)	0	325,000	FMV	Medical Supplies	EMERGENCY
BRAZOS COUNTY HEALTH DISTRICT 201 NORTH TEXAS AVENUE BRYAN, TX 77803	74-6000433	Other	0	11,238	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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BREAD OF HEALING CLINIC 1821 N 16TH ST MILWAUKEE, WI 53205	81-0669867	501(c)(3)	0	560,087	FMV	Medical Supplies	ON-GOING
BRIDGES TO HEALTH 119 S WASHINGTON ST MARION, IN 46952	20-5405181	501(c)(3)	0	139,135	FMV	Medical Supplies	ON-GOING

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BROAD STREET CLINIC 534 N 35TH STREET MOREHEAD CITY, NC 28557	56-1853604	501(c)(3)	0	44,601	FMV	Medical Supplies	ON-GOING
BROTHER BILLS HELPING HAND 3906 N WESTMORELAND RD DALLAS, TX 75212	75-6027740	501(c)(3)	0	979,785	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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BROWARD HEALTH CORAL SPRINGS 1608 SE 3RD AVE SUITE 507 FORT LAUDERDALE, FL 33316	59-6012065	501(c)(3)	0	10,202	FMV	Medical Supplies	ON-GOING
BROWARD HEALTH NORTH HOSPITAL RETAIL PHARMACY 201 E SAMPLE ROAD DEERFIELD BEACH, FL 33064	59-6012065	501(c)(3)	0	305,558	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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BROWNSVILLE COMMUNITY HEALTH CENTER 191 EAST PRICE ROAD BROWNSVILLE, TX 78521	74-2176836	501(c)(3)	0	255,482	FMV	Medical Supplies	ON-GOING
BROWNSVILLE MEDICAL CENTER INC 2400 NW 54TH STREET MIAMI, FL 33142	20-3856290	501(c)(3)	0	2,522,333	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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BUDDHIST TZU CHI MEDICAL CENTER 1000 S GARFIELD ALHAMBRA, CA 91801	95-4457939	501(c)(3)	0	580,719	FMV	Medical Supplies	ON-GOING
CABRINI CLINIC 1234 PORTER STREET DETROIT, MI 48226	38-3129349	501(c)(3)	0	119,181	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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CACHE VALLEY COMMUNITY HEALTH CENTER 1515 N 400 E SUITE 104 NLOGAN, UT 84341	81-0587644	Other	0	1,705,449	FMV	Medical Supplies	ON-GOING
CACHE VALLEY COMMUNITY HEALTH CENTER - SOUTH 517 WEST 100 N PROVIDENCE, UT 84332	81-0587644	115	0	611,249	FMV	Medical Supplies	ON-GOING

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CACTUS HEALTH SERVICES 700 N MAIN ST FORT STOCKTON, TX 79735	16-1663081	501(c)(3)	0	33,704	FMV	Medical Supplies	EMERGENCY
CACTUS HEALTH SERVICES 700 N MAIN ST FORT STOCKTON, TX 79735	16-1663081	501(c)(3)	0	190,524	FMV	Medical Supplies	ON-GOING

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CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES 3650 Schriever Ave Mather, CA 95655	68-0278801	115	0	325,000	FMV	Medical Supplies	EMERGENCY
CALVARY COMMUNITY CLINIC 3401 E LOUISIANA AVENUE TAMPA, FL 33610	47-1252154	501(c)(3)	0	395,965	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	772,247	FMV	Medical Supplies	ON-GOING
CAMINO COMMUNITY DEVELOPMENT CORPORATION INC 133 STETSON DR CHARLOTTE, NC 28262	56-2015959	501(c)(3)	0	887,631	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	48,825	FMV	Medical Supplies	ON-GOING
CAMPBELL UNIVERSITY COMMUNITY CARE CLINIC CAMPBELL SCHOOL OF MED LILLINGTON, NC 27546	68-0620773	501(c)(3)	0	16,692	FMV	Medical Supplies	ON-GOING

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CANYON COUNTY COMMUNITY CLINIC 524 CLEVELAND BLVD CALDWELL, ID 83605	26-4195171	501(c)(3)	0	156,924	FMV	Medical Supplies	ON-GOING
CAPE FEAR CLINIC INC 1605 DOCTORS CIRCLE WILMINGTON, NC 28401	56-1984630	501(c)(3)	0	492,564	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	41,345	FMV	Medical Supplies	ON-GOING
CAPITAL AREA HEALTHNETWORK NORTHSIDE MEDICAL CENTER RICHMOND, VA 23222	54-1884190	501(c)(3)	0	26,005	FMV	Medical Supplies	ON-GOING

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CAPITAL CITY RESCUE MISSION FREE CLINIC 259 SOUTH PEARL ST ALBANY, NY 12202	56-2663290	501(c)(3)	0	150,654	FMV	Medical Supplies	ON-GOING
CARE BEYOND THE BOULEVARD INC 3617 N 112TH TERRACE KANSAS CITY, KS 66109	83-1122028	501(c)(3)	0	45,468	FMV	Medical Supplies	ON-GOING

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CARIDAD CENTER 8645 W BOYNTON B BOYNTON BEACH, FL 33472	65-0149423	501(c)(3)	0	181,096	FMV	Medical Supplies	ON-GOING
CARIN CLINIC 5150 ALLISON ST ARVADA, CO 80002	84-1331444	501(c)(3)	0	173,098	FMV	Medical Supplies	ON-GOING

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CARROLL COUNTY HEALTH DEPARTMENT 101 WEST MAIN ST DELPHI, IN 46923	35-6000130	501(c)(3)	0	212,101	FMV	Medical Supplies	ON-GOING
CASA JUAN DIEGO 4818 ROSE STREET HOUSTON, TX 77007	76-0003018	501(c)(3)	0	18,306	FMV	Medical Supplies	ON-GOING

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C-ASSIST 23100 CHERRY HILL ST DEARBORN, MI 48124	81-3386484	501(c)(3)	0	590,729	FMV	Medical Supplies	ON-GOING
CATHERINES HEALTH CENTER 1211 LAFAYETTE AVE GRAND RAPIDS, MI 49505	20-3572418	501(c)(3)	0	79,241	FMV	Medical Supplies	ON-GOING

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CATHOLIC CHARITIES - USA 2050 Ballenger Ave Alexandria, VA 22314	53-0196620	501(c)(3)	0	26,139	FMV	Medical Supplies	EMERGENCY
CATHOLIC CHARITIES IN THE ARCHDIOCESE OF SANTA FE 2010 BRIDGE BLVD SW ALBUQUERQUE, NM 87105	85-0110070	501(c)(3)	0	39,097	FMV	Medical Supplies	EMERGENCY

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CATHOLIC CHARITIES OF MISSISSIPPI 850 East River Place Jackson, MS 39201	64-0466850	501(c)(3)	0	7,787	FMV	Medical Supplies	EMERGENCY
CATHOLIC CHARITIES OF NEW JERSEY 590 N 7th Street Newark, NJ 07017	22-2164120	501(c)(3)	0	6,463	FMV	Medical Supplies	EMERGENCY

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CATHOLIC CHARITIES USA TN 2806 McGavock Pike Nashville, TN 37214	62-0679520	501(c)(3)	0	11,504	FMV	Medical Supplies	EMERGENCY
CENTER FOR FAMILY HEALTH AND EDUCATION 8727 VAN NUYS BLVD PANORAMA CITY, CA 91402	27-0224623	501(c)(3)	0	69,994	FMV	Medical Supplies	ON-GOING

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CENTER FOR HEALING & HOPE PO BOX 195 GOSHEN, IN 46527	02-0560511	501(c)(3)	0	2,178,860	FMV	Medical Supplies	ON-GOING
CENTER FOR HEALTHY HEARTS 1200 WEST CARY STREET RICHMOND, VA 23220	52-1303481	501(c)(3)	0	122,802	FMV	Medical Supplies	ON-GOING

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CENTER FOR PHARMACY CARE 600 FORBES AVENUE PITTSBURGH, PA 15282	25-1035663	501(c)(3)	0	21,091	FMV	Medical Supplies	ON-GOING
CENTRAL FLORIDA HEALTH CARE INC 47 5TH STREET NW WINTER HAVEN, FL 33881	59-1404594	501(c)(3)	0	184,947	FMV	Medical Supplies	ON-GOING

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CENTRE VOLUNTEERS IN MEDICINE 2520 GREEN TECH DR STATE COLLEGE, PA 16803	25-1897969	501(c)(3)	0	76,352	FMV	Medical Supplies	ON-GOING
CENTRO DE SALUD FAMILIAR DR JULIO PALMIERI Calle Morse Esquina Val Arroyo, PR 00714	66-0496484	501(c)(3)	0	98,773	FMV	Medical Supplies	EMERGENCY

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CENTRO DE SERVICIOS PRIMARIOS DE SALUD DE PATILLAS GUILLERMO RIEFKHOL 99 PATILLAS, PR 00723	66-0430826	501(c)(3)	0	53,860	FMV	Medical Supplies	ON-GOING
CENTRO DE SERVICIOS PRIMARIOS DE SALUD INC GUILLERMO RIEFKHOL 99 PATILLAS, PR 00723	66-0430826	501(c)(3)	0	16,250	FMV	Medical Supplies	EMERGENCY

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CENTRO SAN VICENTE 8061 ALAMEDA AVE EL PASO, TX 79915	74-2505561	501(c)(3)	0	47,918	FMV	Medical Supplies	ON-GOING
CHARIS HEALTH CENTER 2620 N MOUNT JULIET MOUNT JULIET, TN 37122	35-2298919	501(c)(3)	0	38,333	FMV	Medical Supplies	EMERGENCY

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CHARIS HEALTH CENTER 2620 N MOUNT JULIET MOUNT JULIET, TN 37122	35-2298919	501(c)(3)	0	811,899	FMV	Medical Supplies	ON-GOING
CHARITABLE PHARMACY OF CENTRAL OHIO 200 EAST LIVINGSTON AVE COLUMBUS, OH 43215	27-0147099	501(c)(3)	0	402,431	FMV	Medical Supplies	ON-GOING

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CHARLOTTE COMMUNITY HEALTH CLINIC 8401 MEDICAL PLAZA DR CHARLOTTE, NC 28262	56-2274174	501(c)(3)	0	373,174	FMV	Medical Supplies	ON-GOING
CHILDREN AND COMMUNITY HEALTH CENTER 120 S CEN EXPRESSWAY MCKINNEY, TX 75072	20-0637782	501(c)(3)	0	168,669	FMV	Medical Supplies	ON-GOING

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CHILDRENS HOSPITAL OF PHILADELPHIA 3401 Civic Cen Blvd Philadelphia, PA 19104	23-2237932	501(c)(3)	0	91,021	FMV	Medical Supplies	EMERGENCY
CHIPPEWA VALLEY FREE CLINIC 1030 OAK RIDGE DRIVE EAU CLAIRE, WI 54701	39-1840231	501(c)(3)	0	134,080	FMV	Medical Supplies	ON-GOING

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CHRISTIAN HEALTH CENTER 1115 FAIRVIEW CAMDEN, AR 71701	71-0804142	501(c)(3)	0	356,563	FMV	Medical Supplies	ON-GOING
CHRISTIAN MEDICAL MINISTRIES 6900 DANIELS PKWY FORT MYERS, FL 33912	47-2641606	501(c)(3)	0	88,665	FMV	Medical Supplies	ON-GOING

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CHURCH HEALTH SERVICES 115 N CENTER STREET BEAVER DAM, WI 53916	39-1759669	501(c)(3)	0	109,626	FMV	Medical Supplies	ON-GOING
CHURCH HILL FREE CLINIC PO BOX 166 CHURCH HILL, TN 37642	62-1391365	501(c)(3)	0	221,574	FMV	Medical Supplies	ON-GOING

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CITY HARVEST 6 East 32nd St New York, NY 10016	13-3170676	501(c)(3)	0	11,938	FMV	Medical Supplies	EMERGENCY
CITY OF NEW ORLEANS 1300 Perdido St New Orleans, LA 70112	99-9999999	501(c)(3)	0	172,987	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
CITY ON A HILL MINISTRIES HEALTH CLINIC 100 S PINE ST SUITE 140 ZEELAND, MI 49464	20-3901260	115	0	50,879	FMV	Medical Supplies	ON-GOING
CITY SQUARE 2835 AL LIPSCOMB WAY DALLAS, TX 75215	79-2332948	501(c)(3)	0	16,695	FMV	Medical Supplies	ON-GOING

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CLARKSTON COMMUNITY HEALTH CENTER INC 3700 MARKET STREET CLARKSTON, GA 30021	46-1402143	501(c)(3)	0	152,395	FMV	Medical Supplies	ON-GOING
CLAY BEHAVIORAL HEALTH CENTER 1726 KINGSLEY AVENUE ORANGE PARK, FL 32073	59-2219317	501(c)(3)	0	410,298	FMV	Medical Supplies	ON-GOING

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CLEARWATER FREE CLINIC 1218 COURT STREET CLEARWATER, FL 33756	59-1852871	501(c)(3)	0	2,007,880	FMV	Medical Supplies	ON-GOING
CLEVELAND COUNTY HEALTH DEPARTMENT 200 S POST RD SHELBY, NC 28152	56-6000288	501(c)(3)	0	1,529,921	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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CLINIC BY THE BAY 4877 MISSION STREET SAN FRANCISCO, CA 94112	26-2593712	Other	0	51,442	FMV	Medical Supplies	ON-GOING
CLINICA TEPATI 513 ISLA DAVIS, CA 95616	94-2324682	501(c)(3)	0	69,745	FMV	Medical Supplies	ON-GOING

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CMAP EXPRESS 1101 4TH STREET ALEXANDRIA, LA 71301	02-0751416	501(c)(3)	0	25,254	FMV	Medical Supplies	ON-GOING
COACHELLA VALLEY VOLUNTEERS IN MEDICINE PO BOX 10090 INDIO, CA 92202	26-3312826	501(c)(3)	0	6,241	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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COASTAL COMMUNITY HEALTH SERVICES 106 SHOPPERS WAY BRUNSWICK, GA 31525	46-1859206	501(c)(3)	0	481,887	FMV	Medical Supplies	ON-GOING
COLEGIO DE MEDICOS CIRUJANOS PO Box 70169 San Juan, PR 00936	66-0524457	501(c)(6)	0	793,737	FMV	Medical Supplies	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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COMCARE OF SEDGWICK COUNTY 271 W 3RD STREET WICHITA, KS 67203	48-6000798	OTHER	0	615,469	FMV	Medical Supplies	ON-GOING
COMMONWEALTH HEALTHCARE CORPORATION PO Box 500409 Saipan, MP 96950	66-0774364	Other	0	40,734	FMV	Medical Supplies	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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COMMONWEALTH HEALTHCARE CORPORATION 1 LOWER NAVY HILL SAIPAN, MP 96950	66-0774364	Other	0	137,275	FMV	Medical Supplies	ON-GOING
COMMUNITY CARE CENTER FOR FORSYTH CO INC 2135 NEW WALKERTOWN WINSTON SALEM, NC 27101	58-1403699	501(c)(3)	0	1,577,491	FMV	Medical Supplies	ON-GOING

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COMMUNITY CARE CLINIC 608 E GARFIELD AVE GETTYSBURG, SD 57442	46-0396683	501(c)(3)	0	91,811	FMV	Medical Supplies	ON-GOING
COMMUNITY CARE CLINIC OF DARE PO BOX 1329 NAGS HEAD, NC 27959	20-2230717	501(c)(3)	0	160,240	FMV	Medical Supplies	ON-GOING

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COMMUNITY CARE CLINIC OF HIGHLANDS-CASHIERS INC 52 AUNT DORA DRIVE HIGHLANDS, NC 28741	65-1251915	501(c)(3)	0	221,840	FMV	Medical Supplies	ON-GOING
COMMUNITY CARE CLINIC OF ROWAN COUNTY 315G MOCKSVILLE AVE SALISBURY, NC 28144	56-1964773	501(c)(3)	0	809,421	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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COMMUNITY CLINIC OF HIGH POINT INC 779 N MAIN ST HIGH POINT, NC 27262	56-1795022	501(c)(3)	0	76,160	FMV	Medical Supplies	ON-GOING
COMMUNITY CLINIC OF SHELBYVILLE BEDFORD CO 200 DOVER ST SHELBYVILLE, TN 37160	34-1974609	501(c)(3)	0	14,531	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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COMMUNITY CLINIC OF SOUTHWEST MISSOURI 701 S JOPLIN AVE JOPLIN, MO 64801	43-1643962	501(c)(3)	0	486,564	FMV	Medical Supplies	ON-GOING
COMMUNITY CONNECTIONS FREE CLINIC 101 E FOUNTAIN STREET DODGEVILLE, WI 53533	72-1619112	501(c)(3)	0	96,030	FMV	Medical Supplies	ON-GOING

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COMMUNITY FREE CLINIC OF DECATUR-MORGAN COUNTY 245 JACKSON ST SE DECATUR, AL 35601	72-1526129	501(c)(3)	0	260,474	FMV	Medical Supplies	ON-GOING
COMMUNITY FREE CLINIC INC 249 MILL STREET HAGERSTOWN, MD 21740	52-1772594	501(c)(3)	0	520,006	FMV	Medical Supplies	ON-GOING

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COMMUNITY HEALTH AND SOCIAL SERVICES CENTER 5635 W FORT ST DETROIT, MI 48209	38-3094394	501(c)(3)	0	7,961	FMV	Medical Supplies	ON-GOING
COMMUNITY HEALTH CARE CLINIC 900 N FRANKLIN NORMAL, IL 61761	37-1316328	501(c)(3)	0	670,541	FMV	Medical Supplies	ON-GOING

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COMMUNITY HEALTH CENTER ASSOCIATION OF CT 1484 HIGHLAND AVE Cheshire, CT 06410	22-3036666	501(c)(3)	0	8,451	FMV	Medical Supplies	EMERGENCY
COMMUNITY HEALTH CENTER OF SOUTHEAST KANSAS 3011 N MICHIGAN PITTSBURG KS, KS 66762	75-3003364	501(c)(3)	0	69,912	FMV	Medical Supplies	ON-GOING

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COMMUNITY HEALTH CENTER OF WEST PALM BEACH 2100 45TH ST WEST PALM BEACH, FL 33407	26-3611337	501(c)(3)	0	69,819	FMV	Medical Supplies	ON-GOING
COMMUNITY HEALTH CENTERS INC 12716 NE 36TH STREET SPENCER, OK 73084	73-0930123	501(c)(3)	0	26,042	FMV	Medical Supplies	EMERGENCY

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COMMUNITY HEALTH CENTERS INC 12716 NE 36TH STREET SPENCER, OK 73084	73-0930123	501(c)(3)	0	326,033	FMV	Medical Supplies	ON-GOING
COMMUNITY HEALTH CLINIC OF HARDIN & LARUE COUNTIES 1113 WOODLAND DRIVE ELIZABETHTOWN, KY 42701	30-0042070	501(c)(3)	0	968,911	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	421,311	FMV	Medical Supplies	ON-GOING
COMMUNITY HEALTH SERVICE INC 1926 COLLEGEVIEW RD SE ROCHESTER, MN 55904	41-1000060	501(c)(3)	0	157,734	FMV	Medical Supplies	ON-GOING

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COMMUNITY HEALTH SERVICE INC 1113 W 11TH ST GRAFTON, ND 58237	41-1000060	501(c)(3)	0	378,738	FMV	Medical Supplies	ON-GOING
COMMUNITY HEALTH SERVICE ORGANIZATION 4500 Wesley St Greenville, TX 75401	75-1528614	501(c)(3)	0	56,424	FMV	Medical Supplies	EMERGENCY

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COMMUNITY HEALTH SERVICES OF UNION COUNTY INC 1338-C EAST SUNSET DRIVE MONROE, NC 28112	46-0495947	501(c)(3)	0	30,686	FMV	Medical Supplies	ON-GOING
COMMUNITY HEALTH SERVICES INC 810 4TH AVE S MOORHEAD, MN 56560	41-1000060	501(c)(3)	0	281,506	FMV	Medical Supplies	ON-GOING

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COMMUNITY HEALTH-IN-PARTNERSHIP SERVICES (CHIPS) 2431 N Grand Blvd SAINT LOUIS, MO 63106	43-1589851	501(c)(3)	0	585,244	FMV	Medical Supplies	ON-GOING
COMMUNITY HELPING HANDS HEALTH CLINIC 34-C COURTHOUSE SQUARE CLEVELAND, GA 30528	64-0950194	501(c)(3)	0	528,908	FMV	Medical Supplies	ON-GOING

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COMMUNITY HELPING PLACE FREE MEDICAL CLINC 56 CAMP GLISSON ROAD DAHLONEGA, GA 30533	37-1554432	501(c)(3)	0	259,446	FMV	Medical Supplies	ON-GOING
COMMUNITY MEDICAL CLINIC OF AIKEN COUNTY 244 GREENVILLE ST NW AIKEN, SC 29801	57-1063263	501(c)(3)	0	32,999	FMV	Medical Supplies	ON-GOING

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COMMUNITY MEDICAL WELLNESS CENTERS 1360 E ANAHEIM STREET LONG BEACH, CA 90813	45-2424322	501(c)(3)	0	195,608	FMV	Medical Supplies	ON-GOING
COMMUNITY MEDICINE FOUNDATION 1131 SALUDA STREET ROCK HILL, SC 29730	57-0891008	501(c)(3)	0	46,087	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	11,864	FMV	Medical Supplies	ON-GOING
COMMUNITY VOLUNTEERS IN MEDICINE 300B LAWRENCE DRIVE WEST CHESTER, PA 19380	23-2944553	Other	0	99,685	FMV	Medical Supplies	ON-GOING

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COMMUNITYHEALTH 2611 W CHICAGO AVE CHICAGO, IL 60622	36-3931793	501(c)(3)	0	114,380	FMV	Medical Supplies	ON-GOING
COMPASSION CONNECT INC 18040 SW ALEXANDER ST BEAVERTON, OR 97003	26-2304524	501(c)(3)	0	343,946	FMV	Medical Supplies	ON-GOING

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COMPASSIONATE CARE OF SHELBY COUNTY INC 124 N OHIO AVE SIDNEY, OH 45365	20-8479583	501(c)(3)	0	685,804	FMV	Medical Supplies	ON-GOING
COMPREHENSIVE BEHAVIORAL HEALTH CENTER 505 S 8TH ST EAST ST LOUIS, IL 62201	37-0760015	501(c)(3)	0	8,114	FMV	Medical Supplies	ON-GOING

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CONCILIO DE SALUD INTEGRAL DE LOIZA CARR 188 INT 187 LOIZA, PR 00772	66-0314649	501(c)(3)	0	33,970	FMV	Medical Supplies	EMERGENCY
CONNECTICUT STATE DIVISION OF EMERGENCY MANAGEMENT 1111 Country Club Rd Middletown, CT 06457	99-9999999	501(c)(3)	0	871,258	FMV	Medical Supplies	EMERGENCY

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COOPERATIVE CHRISTIAN MINISTRIES AND CLINIC 133 ARBOR STREET HOT SPRINGS, AR 71901	62-1671396	115	0	8,412	FMV	Medical Supplies	ON-GOING
COOS COUNTY FAMILY HEALTH SERVICES CCFHS BERLIN, NH 03570	02-0350051	501(c)(3)	0	292,936	FMV	Medical Supplies	ON-GOING

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CORPORACION DE SERVICIOS DE SALUD PRIMARIA Y DESAR carretera 140 km 388 Utuado, PR 00641	66-0812599	Other	0	665,425	FMV	Medical Supplies	EMERGENCY
CORPORACION DE SERVICIOS MEDICOS PRIMARIOS Y PREVE PO BOX 907 HATILLO, PR 00659	66-0427194	501(c)(3)	0	56,277	FMV	Medical Supplies	ON-GOING

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CORPUS CHRISTI METRO MINISTRIES 1919 LEOPARD ST CORPUS CHRISTI, TX 78408	74-2247261	501(c)(3)	0	271,556	FMV	Medical Supplies	ON-GOING
COSSMA INC PO BOX 1330 CIDRA, PR 00739	66-0434923	501(c)(3)	0	45,645	FMV	Medical Supplies	ON-GOING

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COSSMA INC PO BOX 1330 CIDRA, PR 00739	66-0434923	501(c)(3)	0	16,250	FMV	Medical Supplies	EMERGENCY
COVE HOUSE FREE CLINIC 806 E AVE D COPPERAS COVE, TX 76522	74-2764062	501(c)(3)	0	13,216	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	818,947	FMV	Medical Supplies	ON-GOING
COVENANT COMMUNITY CARE 559 WEST GRAND BLVD DETROIT, MI 48216	38-3533998	501(c)(3)	0	86,176	FMV	Medical Supplies	ON-GOING

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COVENANT COMMUNITY CARE 27776 WOODWARD AVE ROYAL OAK, MI 48067	38-3533998	501(c)(3)	0	322,530	FMV	Medical Supplies	ON-GOING
COVENANT HOUSE NEW YORK 550 TENTH AVE NEW YORK, NY 10018	13-3076376	501(c)(3)	0	6,812	FMV	Medical Supplies	EMERGENCY

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CPC BEHAVIORAL HEALTHCARE 10 INDUSTRIAL WAY EAST EATONTOWN, NJ 07724	21-0719369	501(c)(3)	0	347,352	FMV	Medical Supplies	ON-GOING
CREEKS BEHAVIORAL HEALTH SERVICES 4103 SOUTH YALE SUITE B TULSA, OK 74135	73-1108774	501(c)(3)	0	161,192	FMV	Medical Supplies	ON-GOING

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CRESCENT COMMUNITY CLINIC 5244 COMMERCIAL WAY SPRING HILL, FL 34606	30-0475982	501(c)(3)	0	41,484	FMV	Medical Supplies	ON-GOING
CROSS AND CROWN CLINIC 1008 N MCKINLEY ST OKLAHOMA CITY, OK 73106	73-1608071	501(c)(3)	0	102,533	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
CROSSINGS COMMUNITY CLINIC 10255 N PENN AVE OKLAHOMA CITY, OK 73120	86-1115863	501(c)(3)	0	215,420	FMV	Medical Supplies	ON-GOING
CROSSOVER MINISTRY 8600 QUIOCCASIN ROAD RICHMOND, VA 23229	54-1371067	501(c)(3)	0	111,826	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
CROSSROADS MEDICAL MISSION INC 300 WEST VALLEY DRIVE BRISTOL, VA 24201	54-2038877	501(c)(3)	0	100,729	FMV	Medical Supplies	ON-GOING
CSUSM SON STUDENT HEALTHCARE PROJECT 1249 E OHIO AVE ESCONDIDO, CA 92027	80-0390564	501(c)(3)	0	89,493	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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DADE COUNTY HEALTH DEPARTMENT 413 W WATER STREET GREENFIELD, MO 65661	43-1266535	501(c)(3)	0	29,231	FMV	Medical Supplies	ON-GOING
DADE COUNTY STREET RESPONSE 5120 NW 24TH AVENUE MIAMI, FL 33142	84-1958579	Other	0	39,411	FMV	Medical Supplies	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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DAHLONEGA PEDIATRICS 1055 GROVE ST NORTH DAHLONEGA, GA 30533	58-0566256	501(c)(3)	0	78,078	FMV	Medical Supplies	ON-GOING
DAVIDSON MEDICAL MINISTRIES 420 N SALISBURY ST LEXINGTON, NC 27292	56-1746266	Other	0	443,622	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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DELTA HEALTH ALLIANCELELAND MEDICAL CLINIC PO BOX 277 LELAND, MS 38776	64-0892954	501(c)(3)	0	7,910	FMV	Medical Supplies	ON-GOING
DENTON COUNTY MHMR 2519 SCRIPTURE ST DENTON, TX 76201	75-1368151	501(c)(3)	0	233,876	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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DEO CLINIC PO BOX 814 DALTON, GA 30722	46-0789000	501(c)(3)	0	166,789	FMV	Medical Supplies	ON-GOING
DIVINE GRACE MEDICAL MISSIONARIES 11000 FONDREN RD HOUSTON, TX 77096	27-4000666	501(c)(3)	0	1,666,146	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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DR GARY BURNSTEIN COMMUNITY HEALTH CLINIC 45580 WOODWARD AVE PONTIAC, MI 48341	32-0015321	501(c)(3)	0	126,733	FMV	Medical Supplies	ON-GOING
DREAM CENTERS WOMENS CLINIC 4360 MONTEBELLO COLORADO SPRINGS, CO 80918	27-4876080	501(c)(3)	0	312,738	FMV	Medical Supplies	ON-GOING

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DUPLIN MEDICAL ASSOCIATION 600 S SYCAMORE ST ROSE HILL, NC 28398	56-1414420	501(c)(3)	0	1,529,986	FMV	Medical Supplies	ON-GOING
EAST ARKANSAS FAMILY HEALTH CENTER INC 900 NORTH 7TH WEST MEMPHIS, AR 72301	23-7128104	501(c)(3)	0	696,243	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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EAST HARLEM COUNCIL FOR HUMAN SERVICES INC 2253 Third Avenue New York, NY 10035	13-6213532	501(c)(3)	0	5,525	FMV	Medical Supplies	EMERGENCY
EDISTO INDIAN FREE CLINIC 1125 RIDGE RD RIDGEVILLE, SC 29472	82-1691197	501(c)(3)	0	2,047,305	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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EDWARD R LEAHY JR CENTER CLINIC FOR THE UNINSURE 800 LINDEN STREET SCRANTON, PA 18510	24-0795495	501(c)(3)	0	31,424	FMV	Medical Supplies	ON-GOING
EL CENTRO DEL BARRIO DBA CENTROMED 3750 Commerical Ave SAN ANTONIO, TX 78221	74-1787031	501(c)(3)	0	17,790	FMV	Medical Supplies	ON-GOING

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ELLENTON HEALTH CLINIC PUBLIC HEALTH DISTRICT 8-2 185 NORTH BAKER STREET ELLENTON, GA 31747	23-7379607	501(c)(3)	0	758,434	FMV	Medical Supplies	ON-GOING
ETOWAH BAPTIST CHARITY PHARMACY POBOX 571 NOBLE, OK 73068	73-1637087	501(c)(3)	0	34,856	FMV	Medical Supplies	ON-GOING

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EUNICE COMMUNITY HEALTH CENTER 450 MOOSA BLVD STE E EUNICE, LA 70535	27-0213992	501(c)(3)	0	2,358,607	FMV	Medical Supplies	ON-GOING
FAITH COMMUNITY PHARMACY INC 7033 BURLINGTON PIKE FLORENCE, KY 41042	61-1378914	501(c)(3)	0	3,480,486	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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FAITH FAMILY MEDICAL CLINIC 326 21ST AVE N NASHVILLE, TN 37203	62-1816811	501(c)(3)	0	53,056	FMV	Medical Supplies	ON-GOING
FAITH FAMILY MEDICAL CLINIC 326 21ST AVE N NASHVILLE, TN 37203	62-1816811	501(c)(3)	0	207,773	FMV	Medical Supplies	EMERGENCY

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FAMILY & CHILDRENS SERVICES 650 S PEORIA AVE TULSA, OK 74120	73-0580270	501(c)(3)	0	21,153	FMV	Medical Supplies	ON-GOING
FAMILY CARE HEALTH CENTERS 401 HOLLY HILLS AVE SAINT LOUIS, MO 63111	23-7076112	501(c)(3)	0	9,124	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	166,336	FMV	Medical Supplies	ON-GOING
FAMILY COMMUNITY CLINIC INC 1406 E WASHINGTON ST LOUISVILLE, KY 40206	27-2994215	501(c)(3)	0	56,990	FMV	Medical Supplies	ON-GOING

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FAMILY HEALTH PARTNERSHIP CLINIC 401 CONGRESS PARKWAY CRYSTAL LAKE, IL 60014	36-4277029	501(c)(3)	0	12,318	FMV	Medical Supplies	ON-GOING
FAMILY HEALTH SERVICES 794 EASTLAND TWIN FALLS, ID 83301	82-0371093	501(c)(3)	0	43,357	FMV	Medical Supplies	EMERGENCY

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FAMILY HEALTH SERVICES 794 EASTLAND TWIN FALLS, ID 83301	82-0371093	501(c)(3)	0	61,039	FMV	Medical Supplies	ON-GOING
FAMILY PLANNING PLUS 4612 WESTBRANCH HWY LEWISBURG, PA 17837	23-2032597	501(c)(3)	0	87,411	FMV	Medical Supplies	ON-GOING

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FAYETTE CARE CLINIC 1260 HWY 54 FAYETTEVILLE, GA 30214	20-0314897	501(c)(3)	0	75,656	FMV	Medical Supplies	ON-GOING
FEED MY SHEEP 116 W AVENUE G TEMPLE, TX 76504	74-2724033	501(c)(3)	0	30,585	FMV	Medical Supplies	EMERGENCY

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FEED MY SHEEP 116 W AVENUE G TEMPLE, TX 76504	74-2724033	501(c)(3)	0	183,399	FMV	Medical Supplies	ON-GOING
FEEDING AMERICA 35 East Wacker Drive Chicago, IL 60601	36-3673599	501(c)(3)	0	422,361	FMV	Medical Supplies	EMERGENCY

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FERN CARE FREE CLINIC INC 751 E NINE MILE RD FERNDAL E, MI 48220	32-0246843	501(c)(3)	0	22,458	FMV	Medical Supplies	ON-GOING
FIRST BAPTIST CHURCH MEDICAL DENTAL CLINIC 1607 CHERRY STREET VICKSBURG, MS 39180	64-0356253	501(c)(3)	0	473,315	FMV	Medical Supplies	ON-GOING

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FIRST PERSON CARE CLINIC 1200 S 4TH ST LAS VEGAS, NV 89104	46-2155118	501(c)(3)	0	319,026	FMV	Medical Supplies	ON-GOING
FIRSTMED HEALTH AND WELLNESS 400 SHADOW LANE LAS VEGAS, NV 89106	27-0759056	501(c)(3)	0	120,809	FMV	Medical Supplies	ON-GOING

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FISH RIVER RURAL HEALTH 10 CARTER STREET EAGLE LAKE, ME 04739	01-0452749	501(c)(3)	0	13,779	FMV	Medical Supplies	ON-GOING
FIU COLLEGE OF MEDICINE MOBILE HEALTH CENTER 11200 SW 8TH STREET MIAMI, FL 33199	23-7047106	501(c)(3)	0	477,880	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	800,590	FMV	Medical Supplies	ON-GOING
FOUNDATION FOR HIV AND KIDNEY DIALYSIS INC 14 ZIRKEL AVENUE PISCATAWAY, NJ 08854	43-2024266	501(c)(3)	0	56,558	FMV	Medical Supplies	ON-GOING

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FREDERIKSTED HEALTH CARE INC 516 STRAND STREET FREDERIKSTED, VI 00841	66-0586667	501(c)(3)	0	25,193	FMV	Medical Supplies	ON-GOING
FREE CLINIC OF CULPEPER 610 LAUREL STREET CULPEPER, VA 22701	52-1366700	501(c)(3)	0	12,910	FMV	Medical Supplies	ON-GOING

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FREE CLINIC SUSSEX COUNTY 67 HIGH STREET NEWTON, NJ 07860	45-4224214	501(c)(3)	0	24,490	FMV	Medical Supplies	ON-GOING
FREE MEDICAL CLINIC 47 W LONG AVENUE DUBOIS, PA 15801	25-1804763	501(c)(3)	0	177,975	FMV	Medical Supplies	ON-GOING

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FREE MEDICAL CLINIC OF DARLINGTON COUNTY 203 GROVE STREET DARLINGTON, SC 29532	58-2445265	501(c)(3)	0	471,974	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	465,883	FMV	Medical Supplies	ON-GOING

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FRIENDS OF HICKORY COUNTY HEALTH DEPARTMENT 24885 STATE HIGHWAY 254 HERMITAGE, MO 65668	47-1206725	501(c)(3)	0	43,298	FMV	Medical Supplies	ON-GOING
FUNDACION MANOS JUNTAS 1145 W INTERSTATE OKLAHOMA CITY, OK 73139	73-1523135	Other	0	474,378	FMV	Medical Supplies	ON-GOING

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GAIN INC (GREATER ASSISTANCE TO THOSE IN NEED) 712 W 3RD STREET LITTLE ROCK, AR 72201	71-0763418	501(c)(3)	0	314,921	FMV	Medical Supplies	ON-GOING
GASTON FAMILY HEALTH SERVICES INC 200 EAST SECOND AVENUE GASTONIA, NC 28052	58-1958398	501(c)(3)	0	6,998	FMV	Medical Supplies	ON-GOING

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GATEWAY COMMUNITY SERVICES INC GATEWAY COMM JACKSONVILLE, FL 32204	59-1881828	501(c)(3)	0	354,255	FMV	Medical Supplies	ON-GOING
GATEWAY FOUNDATION - CARBONDALE 55 E JACKSON CHICAGO, IL 60604	36-2670036	501(c)(3)	0	511,955	FMV	Medical Supplies	ON-GOING

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GATEWAY FOUNDATION - CASEYVILLE 600 W LINCOLN AVENUE CASEYVILLE, IL 62232	36-2670036	501(c)(3)	0	37,373	FMV	Medical Supplies	ON-GOING
GATEWAY FOUNDATION - CHICAGO WEST 55 E JACKSON CHICAGO, IL 60604	36-2670036	501(c)(3)	0	148,319	FMV	Medical Supplies	ON-GOING

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GATEWAY FOUNDATION - SPRINGFIELD AND PEKIN 55 E JACKSON CHICAGO, IL 60604	37-1394445	501(c)(3)	0	9,783	FMV	Medical Supplies	ON-GOING
GATEWAY FOUNDATION LAKE VILLA 55 E JACKSON CHICAGO, IL 60604	36-2670036	501(c)(3)	0	161,146	FMV	Medical Supplies	ON-GOING

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GENESEO PARISH OUTREACH CENTER INC 4520 GENESEE ST GENESEO, NY 14454	14-1916822	501(c)(3)	0	102,746	FMV	Medical Supplies	ON-GOING
GEORGIA DEPARTMENT OF PUBLIC HEALTH 2 Peachtree St NW Atlanta, GA 30303	90-0676388	501(c)(3)	0	325,000	FMV	Medical Supplies	EMERGENCY

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GEORGIA MOUNTAIN HEALTH 165 BLUE RIDGE Blue Ridge, GA 30513	58-1649042	115	0	7,792	FMV	Medical Supplies	EMERGENCY
GET UP PROJECT 8101 CAMERON RD AUSTIN, TX 78754	45-4931906	501(c)(3)	0	159,657	FMV	Medical Supplies	ON-GOING

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GOOCHLANDCARES 2999 RIVER ROAD WEST GOOCHLAND, VA 23063	54-1967650	501(c)(3)	0	8,931	FMV	Medical Supplies	ON-GOING
GOOD HEALTH CLINIC INC 91555 OVERSEAS HWY TAVERNIER, FL 33070	04-3745805	501(c)(3)	0	138,000	FMV	Medical Supplies	ON-GOING

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GOOD NEIGHBOR HOUSE 627 EAST FIRST ST DAYTON, OH 45402	31-1374154	501(c)(3)	0	277,232	FMV	Medical Supplies	ON-GOING
GOOD NEWS CLINICS 810 PINE STREET GAINESVILLE, GA 30501	58-2058853	501(c)(3)	0	670,088	FMV	Medical Supplies	ON-GOING

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GOOD NEWS MINISTRIES GOOD NEWS HEALTH CLINIC 2716 E WASHINGTON ST INDIANAPOLIS, IN 46201	35-0999233	501(c)(3)	0	535,694	FMV	Medical Supplies	ON-GOING
GOOD SAMARITAN CLINIC 3880 WATERMELON RD NORTHPORT, AL 35473	63-1199900	501(c)(3)	0	713,600	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
GOOD SAMARITAN HEALTH AND WELLNESS CENTER 209 W STATE LINE S FULTON, TN 38257	45-3745315	501(c)(3)	0	440,175	FMV	Medical Supplies	ON-GOING
GOOD SAMARITAN HEALTH CENTER 1015 DONALD L HOLLOWELL ATLANTA, GA 30318	58-2373395	501(c)(3)	0	281,476	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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GOOD SAMARITAN HEALTH CLINIC 401 ARNOLD STREET CULLMAN, AL 35055	20-0149215	501(c)(3)	0	464,048	FMV	Medical Supplies	ON-GOING
GOOD SAMARITAN HEALTH CLINIC OF PASCO INC 5334 ASPEN ST NEW PORT RICHEY, FL 34652	59-3072334	501(c)(3)	0	377,243	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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GOOD SAMARITAN MEDICAL CLINIC 139 CHURCH ST CHESTER, SC 297062904	82-0549226	501(c)(3)	0	142,069	FMV	Medical Supplies	ON-GOING
GOOD SAMARITAN PHARMACY & HEALTH SERVICES INC 2502 TAMIAMI TRAIL N NOKOMIS, FL 34275	26-2295558	501(c)(3)	0	10,892	FMV	Medical Supplies	ON-GOING

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GOOD SAMARITAN RESCUE MISSION PO BOX 65 CORPUS CHRISTI, TX 78403	74-1611894	501(c)(3)	0	153,556	FMV	Medical Supplies	ON-GOING
GOOD SHEPHERD CLINIC 45 MEDICAL CENTER DR DAWSONVILLE, GA 30534	27-0245804	501(c)(3)	0	14,399	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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GOOD SHEPHERD CLINIC PO BOX 6 MORROW, GA 30260	58-2578581	501(c)(3)	0	589,608	FMV	Medical Supplies	ON-GOING
GOOD SHEPHERD HEALTHCARE CLINIC OF MUSKOGEE OKLA GOOD SHEPHERD HEALTH MUSKOGEE, OK 74401	73-1581613	501(c)(3)	0	758,715	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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GOOD SHEPHERD MINISTRIES OF OKLAHOMA INC 222 NW 12TH STREET OKLAHOMA CITY, OK 73103	20-0526892	501(c)(3)	0	338,093	FMV	Medical Supplies	ON-GOING
GOOD SHEPHERD PHARMACY 2166 CUBA MILLINGTON MILLINGTON, TN 38053	46-3313048	501(c)(3)	0	554,652	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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GOODWIN COMMUNITY HEALTH 311 ROUTE 108 SOMERSWORTH, NH 03878	02-0304203	501(c)(3)	0	1,827,722	FMV	Medical Supplies	ON-GOING
GRACE COMMUNITY HEALTH CENTER 1019 CUMBERLAND FALLS HWY CORBIN, KY 40734	26-1779437	501(c)(3)	0	32,649	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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GRACE MEDICAL HOME 1417 E CONCORD ST ORLANDO, FL 32803	26-1817966	501(c)(3)	0	1,344,105	FMV	Medical Supplies	ON-GOING
GRAPEVINE RELIEF AND COMMUNITY EXCHANGE (GRACE) 837 E WALNUT STREET GRAPEVINE, TX 76051	75-2195702	501(c)(3)	0	21,178	FMV	Medical Supplies	ON-GOING

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GRASSROOTS HEALTHCARE FOUNDATION 732 PLACER CIRCLE VACAVILLE, CA 95687	32-0600776	501(c)(3)	0	276,005	FMV	Medical Supplies	ON-GOING
GREATER GREENWOOD UNITED MINISTRY FREE MEDICAL CLI 1404 EDGEFIELD STREET GREENWOOD, SC 29646	57-1012393	501(c)(3)	0	15,650	FMV	Medical Supplies	ON-GOING

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GREATER HICKORY COOPERATIVE CHRISTIAN MINISTRY 31 1ST AVE SE HICKORY, NC 28602	56-0934855	501(c)(3)	0	243,791	FMV	Medical Supplies	ON-GOING
GREATER KILLEEN FREE CLINIC GREATER KILLEEN HARKER HEIGHTS, TX 76541	74-2724725	501(c)(3)	0	1,774,642	FMV	Medical Supplies	ON-GOING

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GREATER TEXOMA HEALTH CLINIC 900 N ARMSTRONG AVE DENISON, TX 75020	81-0584983	501(c)(3)	0	515,112	FMV	Medical Supplies	ON-GOING
GREENVILLE FREE MEDICAL CLINIC PO BOX 8993 GREENVILLE, SC 29604	57-0855205	501(c)(3)	0	132,973	FMV	Medical Supplies	ON-GOING

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GUADALUPE CLINIC 940 S SAINT FRANCIS WICHITA, KS 67211	20-1285208	501(c)(3)	0	1,349,211	FMV	Medical Supplies	ON-GOING
GULF BEND CENTER 6502 NURSERY DRIVE VICTORIA, TX 77904	74-1659064	Other	0	486,888	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	188,411	FMV	Medical Supplies	ON-GOING
GULF COAST HEALTH CENTER INC 2548 MEMORIAL BLVD PORT ARTHUR, TX 77640	76-0289927	501(c)(3)	0	392,776	FMV	Medical Supplies	EMERGENCY

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GULU PROJECT INC 5400 JOHNSON DRIVE MISSION, KS 66205	82-1003879	501(c)(3)	0	6,600	FMV	Medical Supplies	ON-GOING
HACS DBA AVENUE 360 HEALTH & WELLNESS 2150 W 18TH ST HOUSTON, TX 77008	76-0549240	501(c)(3)	0	12,082	FMV	Medical Supplies	EMERGENCY

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HALEY CENTER 122 WEST CENTRAL AVE WINTER HAVEN, FL 33880	82-5306080	501(c)(3)	0	401,194	FMV	Medical Supplies	ON-GOING
HANDS OF HOPE CLINIC INC 1010 HOSPITAL DR STOCKBRIDGE, GA 30281	42-1591970	501(c)(3)	0	178,451	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	228,040	FMV	Medical Supplies	ON-GOING
HARTVILLE MIGRANT MINISTRIES PO BOX 682 HARTVILLE, OH 44632	34-0899100	501(c)(3)	0	193,852	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	801,383	FMV	Medical Supplies	ON-GOING
HEAL THE CITY 609 S CAROLINA AMARILLO, TX 79106	46-5694050	501(c)(3)	0	149,065	FMV	Medical Supplies	ON-GOING

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HEALING BRIDGE CLINIC 215 WILLOW BEND PEACHTREE CITY, GA 30269	26-3555799	501(c)(3)	0	231,234	FMV	Medical Supplies	ON-GOING
HEALING HANDS MINISTRIES INC 8515 GREENVILLE AVE DALLAS, TX 75243	65-1259379	501(c)(3)	0	10,092	FMV	Medical Supplies	ON-GOING

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HEALTH ACCESS INC 489 WASHINGTON AVENUE CLARKSBURG, WV 26301	55-0715066	501(c)(3)	0	482,094	FMV	Medical Supplies	ON-GOING
HEALTH AND HOPE CLINIC INC 1718 E OLIVE RD PENSACOLA, FL 32514	26-4336638	501(c)(3)	0	396,451	FMV	Medical Supplies	ON-GOING

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HEALTH AND HOPE MEDICAL OUTREACH 1911 COOKS HILL ROAD CENTRALIA, WA 98531	27-4432389	501(c)(3)	0	34,734	FMV	Medical Supplies	ON-GOING
HEALTH BRIGADE 1010 N THOMPSON ST RICHMOND, VA 23230	54-0927792	501(c)(3)	0	32,391	FMV	Medical Supplies	ON-GOING

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HEALTH PARTNERS FREE CLINIC 1300 NORTH COUNTY ROAD 25A TROY, OH 45373	31-1596731	501(c)(3)	0	20,787	FMV	Medical Supplies	ON-GOING
HEALTH PARTNERS OF WESTERN OHIO 329 N WEST ST LIMA, OH 45801	56-2330309	501(c)(3)	0	91,796	FMV	Medical Supplies	ON-GOING

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HEALTHCARE FOR THE HOMELESS - HOUSTON 1934 CAROLINE STREET HOUSTON, TX 77002	76-0647934	501(c)(3)	0	62,303	FMV	Medical Supplies	ON-GOING
HEALTHFINDERS COLLABORATIVE PO BOX 731 NORTHFIELD, MN 550572484	20-1805262	501(c)(3)	0	5,427	FMV	Medical Supplies	ON-GOING

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HEALTHNET OF ROCK COUNTY INC 23 W MILWAUKEE STREET JANESVILLE, WI 53548	39-1778804	501(c)(3)	0	6,608	FMV	Medical Supplies	EMERGENCY
HEALTHNET OF ROCK COUNTY INC 23 W MILWAUKEE STREET JANESVILLE, WI 53548	39-1778804	501(c)(3)	0	538,429	FMV	Medical Supplies	ON-GOING

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HEALTHQUEST OF UNION COUNTY 415 E FRANKLIN STREET MONROE, NC 28112	56-2117596	501(c)(3)	0	131,221	FMV	Medical Supplies	ON-GOING
HEALTHREACH COMMUNITY CLINIC 400 E STATESVILLE AVE MOORESVILLE, NC 28115	20-1020941	501(c)(3)	0	963,862	FMV	Medical Supplies	ON-GOING

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HEARTBRIGHT FOUNDATION INC 2923 SOUTH TRYON Ste CHARLOTTE, NC 28203	45-0496759	501(c)(3)	0	581,341	FMV	Medical Supplies	ON-GOING
HEARTS AND HANDS CLINIC 127 NORTH COLLEGE ST STATESBORO, GA 30458	26-4597700	501(c)(3)	0	380,324	FMV	Medical Supplies	ON-GOING

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HELPING HAND CLINIC 507 NORTH STEELE ST SANFORD, NC 27330	56-1752295	501(c)(3)	0	66,408	FMV	Medical Supplies	ON-GOING
HELPING HANDS CLINIC INC 810 HARPER AVE LENOIR, NC 28645	56-2076541	501(c)(3)	0	9,659	FMV	Medical Supplies	ON-GOING

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HELPING HANDS FREE MEDICAL CLINIC PO BOX 1439 MARION, SC 29571	32-0378680	501(c)(3)	0	92,154	FMV	Medical Supplies	ON-GOING
HEMOSTASIS AND THROMBOSIS CENTER OF NEVADA 8352 W WARM SPRINGS RD LAS VEGAS, NV 89113	82-2793154	501(c)(3)	0	33,757	FMV	Medical Supplies	ON-GOING

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HENDERSON BEHAVIORAL HEALTH-HILL PROGRAM 4740 N STATE Rd LAUDERDALE LAKES, FL 33319	59-0711167	Other	0	202,447	FMV	Medical Supplies	ON-GOING
HESTIA RX ASSIST 2107 THREE STARS RD EDMOND, OK 73034	84-3013421	501(c)(3)	0	2,284,012	FMV	Medical Supplies	ON-GOING

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HIGHLANDS HEALTH FREE AND CHARITABLE CLINIC 315 LOCUST 2ND FLOOR JOHNSTOWN, PA 15901	23-2922409	501(c)(3)	0	777,151	FMV	Medical Supplies	ON-GOING
HILL COUNTRY COMMUNITY MHMR CENTER 819 WATER STREET KERRVILLE, TX 78028	74-2822017	501(c)(3)	0	117,062	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	290,796	FMV	Medical Supplies	ON-GOING
HOPE CENTER 1950 Kitrick Ave Oroville, CA 95966	47-5315046	501(c)(3)	0	1,817,553	FMV	Medical Supplies	EMERGENCY

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HOPE CLINIC PO BOX 728 BAYBORO, NC 28515	56-2114681	501(c)(3)	0	13,018	FMV	Medical Supplies	EMERGENCY
HOPE CLINIC PO BOX 728 BAYBORO, NC 28515	56-2114681	501(c)(3)	0	1,223,024	FMV	Medical Supplies	ON-GOING

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HOPE CLINIC PO BOX 4025 BARTLESVILLE, OK 74006	46-4417141	501(c)(3)	0	121,091	FMV	Medical Supplies	ON-GOING
HOPE CLINIC 411 EAST JEFFERSON WAXAHACHIE, TX 75165	75-2813621	501(c)(3)	0	186,171	FMV	Medical Supplies	ON-GOING

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HOPE CLINIC AND CARE CENTER 1814 APPLETON ROAD MENASHA, WI 549521110	47-3031346	501(c)(3)	0	250,141	FMV	Medical Supplies	ON-GOING
HOPE CLINIC OF GARLAND 800 S 6TH ST SUITE 100 GARLAND, TX 75040	75-2960314	501(c)(3)	0	240,442	FMV	Medical Supplies	ON-GOING

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HOPE CLINIC OF MCKINNEY PO BOX 477 MCKINNEY, TX 75070	81-3813928	501(c)(3)	0	473,055	FMV	Medical Supplies	ON-GOING
HOPE HEALTH CLINIC 1025 SANIBEL WAY LAGRANGE, KY 40031	46-5509958	501(c)(3)	0	143,479	FMV	Medical Supplies	ON-GOING

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HOPE MEDICAL CLINIC 10101 60TH STREET LEXINGTON, OK 73051	73-1338039	501(c)(3)	0	234,510	FMV	Medical Supplies	ON-GOING
HOPE MEDICAL CLINIC 150 BEACH DRIVE DESTIN, FL 32541	26-3811078	Other	0	269,807	FMV	Medical Supplies	ON-GOING

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HOPE MEDICAL CLINIC HOPE MEDICAL CLINIC YPSILANTI, MI 48197	38-2469007	501(c)(3)	0	300,221	FMV	Medical Supplies	ON-GOING
HOPE MEDICAL DENTAL CLINIC PO BOX 969 KEENE, TX 76059	75-2953856	501(c)(3)	0	208,902	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
HOPEHEALTH MANNING FAMILY PRACTICE 12 WEST SOUTH STREET MANNING, SC 29102	57-0984427	501(c)(3)	0	1,858,190	FMV	Medical Supplies	ON-GOING
HOPELIGHT MEDICAL CLINIC 1351 COLLYER ST LONGMONT, CO 80501	46-4657471	501(c)(3)	0	206,843	FMV	Medical Supplies	ON-GOING

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HOSPITAL GENERAL CASTANER PO BOX 1003 CASTANER, PR 00631	66-0352014	501(c)(3)	0	51,092	FMV	Medical Supplies	EMERGENCY
HOSPITAL UNIVERSIDAD DE PR DR FREDERICO TRILLA Carretera 3 km 83 Ave Carolina, PR 00984	66-0561027	501(c)(3)	0	26,000	FMV	Medical Supplies	EMERGENCY

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HOUSTON COUNTY VOLUNTEER MEDICAL CLINIC 107 HICKORY LANE BONAIRE, GA 310054341	20-1859450	501(c)(3)	0	129,447	FMV	Medical Supplies	ON-GOING
HPM FOUNDATION INC 2020 AVE BORINQUEN SAN JUAN, PR 00915	66-0437924	501(c)(3)	0	14,870	FMV	Medical Supplies	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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HPM FOUNDATION INC 2020 AVE BORINQUEN SAN JUAN, PR 00915	66-0437924	501(c)(3)	0	54,089	FMV	Medical Supplies	ON-GOING
I CARE SAN ANTONIO 1 HAVEN FOR HOPE WAY SAN ANTONIO, TX 78207	74-2690192	501(c)(3)	0	9,220	FMV	Medical Supplies	ON-GOING

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IBN SINA FOUNDATION 11226 S WILCREST DR HOUSTON, TX 77099	76-0698464	501(c)(3)	0	456,798	FMV	Medical Supplies	EMERGENCY
IBN SINA FOUNDATION 11226 S WILCREST DR HOUSTON, TX 77099	76-0698464	501(c)(3)	0	2,045,458	FMV	Medical Supplies	ON-GOING

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IFM COMMUNITY MEDICINE 722 LOUGHBOROUGH AVE SAINT LOUIS, MO 63111	43-1863752	501(c)(3)	0	363,751	FMV	Medical Supplies	ON-GOING
IMPACT CHRISTIAN MINISTRIES CLINIC 115 W SOLOMON ST GRIFFIN, GA 30223	27-0344233	501(c)(3)	0	551,912	FMV	Medical Supplies	ON-GOING

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INFANT WELFARE SOCIETY OF CHICAGO 3600 W FULLERTON AVE CHICAGO, IL 60647	36-2167752	501(c)(3)	0	8,932	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	66,444	FMV	Medical Supplies	ON-GOING

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INTERFAITH CLINIC 2305 CHAMPAGNOLLE RD EL DORADO, AR 71730	71-0236863	501(c)(3)	0	717,219	FMV	Medical Supplies	ON-GOING
INTERFAITH COMMUNITY CLINIC 101 PINE MANOR DR OAK RIDGE N, TX 77385	75-2634623	501(c)(3)	0	296,235	FMV	Medical Supplies	ON-GOING

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ISLAND HEALTH & WELLNESS CENTER 5000 ESTATE ENIGHED ST JOHN, VI 00831	66-0852135	501(c)(3)	0	5,552	FMV	Medical Supplies	ON-GOING
ISLAND HEALTH CARE 245 EDGARTOW VINE EDGARTOWN, MA 02539	47-0870772	501(c)(3)	0	27,319	FMV	Medical Supplies	ON-GOING

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IUSB HEALTH & WELLNESS CENTER 941 20TH STREET SOUTH BEND, IN 46615	35-6001673	501(c)(3)	0	380,725	FMV	Medical Supplies	ON-GOING
JACKSON COUNTY HEALTH DEPARTMENT 801 W SECOND ST SEYMOUR, IN 47274	35-6000159	Other	0	58,076	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	1,077,635	FMV	Medical Supplies	ON-GOING
JFK GLOBAL P MINISTRY- DBA SHALOM MEDICAL CENTER 9494 SOUTHWEST FREEWAY HOUSTON, TX 77074	47-5269630	501(c)(3)	0	2,494,775	FMV	Medical Supplies	ON-GOING

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JOHN P MURRAY COMMUNITY CARE CLINIC 303 YADKIN ST ALBEMARLE, NC 28001	56-2098720	501(c)(3)	0	96,457	FMV	Medical Supplies	ON-GOING
JOSLIN DIABETES CENTER ADULT One Joslin Place Boston, MA 02215	04-2203836	501(c)(3)	0	160,053	FMV	Medical Supplies	EMERGENCY

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JUMPSTART FREE HEALTH CLINIC 777 SOUTH BURLESON BLVD BURLESON, TX 76028	52-1302275	501(c)(3)	0	510,081	FMV	Medical Supplies	ON-GOING
KATAHDIN VALLEY HEALTH CENTER 529 SOUTH PATTEN ROAD PATTEN, ME 04747	23-7411014	501(c)(3)	0	22,870	FMV	Medical Supplies	ON-GOING

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KATALLASSO FAMILY HEALTH CENTER 38 SOUTH BELVIDERE AVENUE YORK, PA 17401	45-3170905	Other	0	293,420	FMV	Medical Supplies	ON-GOING
KEVINS COMMUNITY CENTER 25 COMMERCE ROAD NEWTOWN, CT 06470	61-1436909	501(c)(3)	0	262,255	FMV	Medical Supplies	ON-GOING

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KIDS FIRST HEALTH CARE 4675 E 69TH AVENUE COMMERCE CITY, CO 80022	84-0799374	501(c)(3)	0	57,529	FMV	Medical Supplies	ON-GOING
KNOX COUNTY HEALTH CLINIC 22 WHITE STREET ROCKLAND, ME 04841	01-0528885	501(c)(3)	0	56,565	FMV	Medical Supplies	ON-GOING

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LA CLINICA CRISTIANA 1915 AVALON AV MUSCLE SHOALS, AL 35661	20-1624284	501(c)(3)	0	21,852	FMV	Medical Supplies	ON-GOING
LA CROSSE COUNTY MENTAL HEALTH OUTPATIENT CLINIC 300 FOURTH ST NORTH LA CROSSE, WI 54601	39-6005709	501(c)(3)	0	174,916	FMV	Medical Supplies	ON-GOING

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LAKE AREA FREE CLINIC 856B ARMOUR RD OCONOMOWOC, WI 53066	39-2006388	Other	0	110,754	FMV	Medical Supplies	ON-GOING
LAKE COUNTY FREE CLINIC 54 S STATE ST PAINESVILLE, OH 44077	34-1081191	501(c)(3)	0	252,796	FMV	Medical Supplies	ON-GOING

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LAKE HEALTH DISTRICT FUND-NE OHIO DRP 7757 AUBURN ROAD PAINESVILLE, OH 44077	34-1598598	501(c)(3)	0	301,495	FMV	Medical Supplies	ON-GOING
LAKE NORMAN COMMUNITY HEALTH CLINIC PO BOX 2398 HUNTERSVILLE, NC 28070	04-3723062	501(c)(3)	0	23,724	FMV	Medical Supplies	ON-GOING

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LAKELAND VOLUNTEERS IN MEDICINE 600 W PEACHTREE ST LAKELAND, FL 33815	52-2351630	501(c)(3)	0	301,506	FMV	Medical Supplies	ON-GOING
LAKEVIEW CENTER INC 1221 W LAKEVIEW AVE PENSACOLA, FL 32501	59-0737872	501(c)(3)	0	322,250	FMV	Medical Supplies	ON-GOING

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LEBANON VALLEY VOLUNTEERS IN MEDICINE 711 S 8TH ST LEBANON, PA 17042	26-3915958	501(c)(3)	0	14,664	FMV	Medical Supplies	ON-GOING
LEFLORE COUNTY HEALTH CENTER 706 HWY 82 WEST GREENWOOD, MS 38930	20-0069223	501(c)(3)	0	16,448	FMV	Medical Supplies	ON-GOING

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LEGACY OF CARE HEALTH CENTER INC 212 COURTHOUSE SQUARE BAY MINETTE, AL 36507	63-1247879	501(c)(3)	0	149,253	FMV	Medical Supplies	ON-GOING
LESTONNAC FREE CLINIC 1215 E CHAPMAN ORANGE, CA 92866	95-3499011	501(c)(3)	0	10,262	FMV	Medical Supplies	EMERGENCY

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LESTONNAC FREE CLINIC 1215 E CHAPMAN ORANGE, CA 92866	95-3499011	501(c)(3)	0	142,387	FMV	Medical Supplies	ON-GOING
LEWIS & CLARK BEHAVIORIAL HEALTH SERVICES 1028 WALNUT STREET YANKTON, SD 57078	16-1900308	501(c)(3)	0	422,102	FMV	Medical Supplies	ON-GOING

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LIFE CHOICES MEDICAL CLINIC 3234 NORTHWESTERN SAN ANTONIO, TX 78238	74-2809910	501(c)(3)	0	874,807	FMV	Medical Supplies	ON-GOING
LIFESPRING HEALTH SYSTEMS 460 SPRING STREET JEFFERSONVILLE, IN 47130	35-1097350	501(c)(3)	0	245,922	FMV	Medical Supplies	ON-GOING

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LIFESTREAM BEHAVIORAL CENTER 515 MAIN STREET LEESBURG, FL 34748	59-1561501	501(c)(3)	0	709,741	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	559,450	FMV	Medical Supplies	ON-GOING

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LLOYD F MOSS FREE CLINIC 1301 SAM PERRY FREDERICKSBURG, VA 22401	54-1677934	501(c)(3)	0	25,199	FMV	Medical Supplies	ON-GOING
LONGVIEW WELLNESS CENTER INC DBA WELLNESS POINTE 1107 E MARSHALL AVE LONGVIEW, TX 75601	75-2723993	501(c)(3)	0	13,018	FMV	Medical Supplies	EMERGENCY

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LONGVIEW WELLNESS CENTER INC DBA WELLNESS POINTE 1107 E MARSHALL AVE LONGVIEW, TX 75601	75-2723993	501(c)(3)	0	384,072	FMV	Medical Supplies	ON-GOING
LORAIN COUNTY FREE CLINIC 5040 OBERLIN AVENUE LORAIN, OH 44053	34-1506180	501(c)(3)	0	343,126	FMV	Medical Supplies	ON-GOING

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LOUDOUN FREE CLINIC 224B CORNWALL STREET NW LEESBURG, VA 20176	54-1921059	501(c)(3)	0	8,926	FMV	Medical Supplies	ON-GOING
LOUISIANA RURAL HEALTH ASSOCIATION PO Box 387 Napoleonville, LA 70390	72-1219312	501(c)(3)	0	64,435	FMV	Medical Supplies	EMERGENCY

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LOVE IN ACTION OF THE TRI-CITIES 326 N FERRY ST GRAND HAVEN, MI 49417	38-2856482	501(c)(6)	0	172,469	FMV	Medical Supplies	ON-GOING
LUKE SOCIETY PO BOX 16194 GALVESTON, TX 77552	74-2211973	501(c)(3)	0	91,543	FMV	Medical Supplies	ON-GOING

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MACON VOLUNTEER CLINIC 376 ROGERS AVE MACON, GA 31204	74-3055376	501(c)(3)	0	14,382	FMV	Medical Supplies	ON-GOING
MALIHEH FREE CLINIC 941 E 3300 S SALT LAKE CITY, UT 84107	20-2313461	501(c)(3)	0	85,749	FMV	Medical Supplies	ON-GOING

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MALTA HOUSE OF CARE INC 19 WOODLAND STREET HARTFORD, CT 06105	20-3562424	501(c)(3)	0	209,362	FMV	Medical Supplies	ON-GOING
MALTA HOUSE OF CARE-WATERBURY INC PO BOX 247 MIDDLEBURY, CT 06762	26-3484648	501(c)(3)	0	34,057	FMV	Medical Supplies	ON-GOING

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MANNA MINISTRIES INC 120 STREET A SUITE A PICAYUNE, MS 39466	20-1788094	501(c)(3)	0	85,020	FMV	Medical Supplies	ON-GOING
MANSFIELD MISSION CENTER 901 W BROAD ST MANSFIELD, TX 76063	36-4753862	Other	0	12,960	FMV	Medical Supplies	ON-GOING

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MARION COUNTY PUBLIC HEALTH 2003 N LINCOLN KNOXVILLE, IA 50138	42-6004844	501(c)(3)	0	25,985	FMV	Medical Supplies	ON-GOING
MARTIN LUTHER KING HEALTH CENTER 865 OLIVE STREET SHREVEPORT, LA 71104	72-1079721	Other	0	86,303	FMV	Medical Supplies	ON-GOING

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MARY ELIZA MAHONEY HEALTH CARE CENTER 394 UNIVERSITY AVE NEWARK, NJ 07102	22-6002138	501(c)(3)	0	8,794	FMV	Medical Supplies	EMERGENCY
MARY ELIZA MAHONEY HEALTH CARE CENTER 394 UNIVERSITY AVE NEWARK, NJ 07102	22-6002138	Other	0	317,764	FMV	Medical Supplies	ON-GOING

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MASSACHUSETTS LEAGUE OF COMMUNITY HEALTH CENTERS 40 Court Street Boston, MA 02108	04-2507409	Other	0	274,969	FMV	Medical Supplies	EMERGENCY
MATAGORDA EPISCOPAL HEALTH OUTREACH PROGRAM MEHOP BAY CITY, TX 77414	20-0537948	501(c)(3)	0	19,874	FMV	Medical Supplies	EMERGENCY

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MATAGORDA EPISCOPAL HEALTH OUTREACH PROGRAM MEHOP BAY CITY, TX 77414	20-0537948	501(c)(3)	0	234,149	FMV	Medical Supplies	ON-GOING
MATTAWA COMMUNITY MEDICAL CLINIC 210 GOVERNMENT ROAD MATTAWA, WA 99349	91-1499763	501(c)(3)	0	50,763	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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MATTHEW 25 HEALTH AND DENTAL CLINIC 413 E JEFFERSON BLVD FORT WAYNE, IN 46802	35-1484951	501(c)(3)	0	30,000	FMV	Medical Supplies	ON-GOING
MATTHEW WALKER COMPREHENSIVE HEALTH CENTER 1035 14TH AVENUE NORTH NASHVILLE, TN 37208	62-1035426	501(c)(3)	0	29,642	FMV	Medical Supplies	ON-GOING

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MATTHEW WALKER COMPREHENSIVE HEALTH CENTER 1035 14TH AVENUE NORTH NASHVILLE, TN 37208	62-1035426	501(c)(3)	0	346,971	FMV	Medical Supplies	EMERGENCY
MCDONALD COUNTY HEALTH DEPARTMENT 500 OLIN STREET PINEVILLE, MO 64856	44-6000554	501(c)(3)	0	425,526	FMV	Medical Supplies	ON-GOING

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MCINTOSH TRAIL CSB 1435 NORTH EXPRESSWAY GRIFFIN, GA 30223	58-2098758	Other	0	1,506,629	FMV	Medical Supplies	ON-GOING
MED CENTRO 1034 HOSTOS AVENUE PONCE, PR 00716	66-0292961	Other	0	1,152,340	FMV	Medical Supplies	EMERGENCY

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MEDICAL MINISTRIES INC PO BOX 6087 WARWICK, RI 02887	47-2062464	501(c)(3)	0	396,414	FMV	Medical Supplies	ON-GOING
MEDICAL MISSIONS FOR CHRIST CLINIC PO BOX 1948 CAMDENTON, MO 65020	20-3637019	501(c)(3)	0	31,385	FMV	Medical Supplies	ON-GOING

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MEDICAL OUTREACH MINISTRIES 5741 CARMICHAEL Pkway MONTGOMERY, AL 36117	63-1204645	501(c)(3)	0	6,608	FMV	Medical Supplies	EMERGENCY
MEDICAL OUTREACH MINISTRIES 5741 CARMICHAEL Pkway MONTGOMERY, AL 36117	63-1204645	501(c)(3)	0	433,198	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	66,827	FMV	Medical Supplies	ON-GOING
MEDLINK GEORGIA INC 11 CHARLIE MORRIS ROAD COLBERT, GA 30628	58-1394645	501(c)(3)	0	78,937	FMV	Medical Supplies	ON-GOING

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MEDSPIRE 15180 Torey Pine Rd Magalia, CA 95954	83-3483396	501(c)(3)	0	18,064	FMV	Medical Supplies	EMERGENCY
MEL LEAMAN FREE CLINIC 601 RADIO HILL RD MARION, VA 24354	54-1993876	501(c)(3)	0	11,961	FMV	Medical Supplies	ON-GOING

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MENDING KIDS 21255 BURBANK BLVD Glendale, CA 91367	95-4394305	501(c)(3)	0	5,111	FMV	Medical Supplies	EMERGENCY
MERCI CLINIC 1315 TATUM DRIVE NEW BERN, NC 28560	56-2034052	501(c)(3)	0	21,579	FMV	Medical Supplies	ON-GOING

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MERCY HEALTH CENTER INC 700 OGLETHORPE AVE ATHENS, GA 30606	58-2603523	501(c)(3)	0	499,492	FMV	Medical Supplies	ON-GOING
MERCY MEDICAL CLINIC 615 WASHINGTON ST SHELBYVILLE, KY 40065	61-1211189	501(c)(3)	0	267,349	FMV	Medical Supplies	ON-GOING

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MERCY MEDICINE FREE CLINIC 500 S COIT ST FLORENCE, SC 295010000	31-1693093	501(c)(3)	0	25,367	FMV	Medical Supplies	ON-GOING
MERCY WATCH PO BOX 1550 MUKILTEO, WA 98275	81-2889138	501(c)(3)	0	96,212	FMV	Medical Supplies	ON-GOING

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MERIDIAN BEHAVIORAL HEALTHCARE INC 4300 SW 13TH STREET GAINESVILLE, FL 32608	59-1906214	501(c)(3)	0	1,029,665	FMV	Medical Supplies	ON-GOING
METROCARE SERVICES 1345 RIVER BEND DRIVE DALLAS, TX 75247	75-1285603	501(c)(3)	0	258,207	FMV	Medical Supplies	ON-GOING

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MHRC FACT TEAM 5266 GOLDEN GATE PKWY NAPLES, FL 34116	59-1905344	Other	0	8,467	FMV	Medical Supplies	ON-GOING
MIAMI RESCUE MISSION CLINIC INC 2015 NW 1ST AVE MIAMI, FL 33127	45-1481860	501(c)(3)	0	46,307	FMV	Medical Supplies	ON-GOING

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MID-DEL COMMUNITY CLINIC 4748 S BRYANT AVE OKLAHOMA CITY, OK 73129	73-1173695	501(c)(3)	0	77,799	FMV	Medical Supplies	ON-GOING
MIDDLE FLINT AREA COMMUNITY SERVICE BOARD 120 N DUDLEY ST AMERICUS, GA 31709	58-2111079	501(c)(3)	0	1,096,544	FMV	Medical Supplies	ON-GOING

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MIDDLE PENINSULA NORTHERN NECK CSB PO BOX 2468 GLOUCESTER, VA 23061	54-0958505	Other	0	68,238	FMV	Medical Supplies	ON-GOING
MIDLAND COMMUNITY CHILDRENS CLINIC 1101 E FRONT ST MIDLAND, TX 79701	75-1875246	501(c)(3)	0	37,601	FMV	Medical Supplies	ON-GOING

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MIGRANT HEALTH CENTER CALLE RAMON E BETANCES MAYAGUEZ, PR 00680	66-0427801	501(c)(3)	0	198,853	FMV	Medical Supplies	EMERGENCY
MILAN PUSKAR HEALTH RIGHT 341 SPRUCE ST MORGANTOWN, WV 26507	31-1118673	501(c)(3)	0	61,369	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	919,731	FMV	Medical Supplies	ON-GOING
MINNESOTA DEPARTMENT OF HEALTH PO Box 64975 St Paul, MN 55164	99-99999999	501(c)(3)	0	162,500	FMV	Medical Supplies	EMERGENCY

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MISSION ARLINGTON MEDICAL CLINIC 210 W SOUTH ARLINGTON, TX 76010	75-2724385	115	0	3,490,832	FMV	Medical Supplies	ON-GOING
MISSION CLINIC OF PALM SPRINGS INC 4949 S CONGRESS AVE PALM SPRINGS, FL 33461	47-3441097	501(c)(3)	0	1,146,208	FMV	Medical Supplies	ON-GOING

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MISSION HOSPITAL-MEDICATION ASSISTANCE PROGRAM 1 HOSPITAL DRIVE ASHEVILLE, NC 28801	58-1450888	501(c)(3)	0	365,521	FMV	Medical Supplies	ON-GOING
MISSION MEDICAL CENTER 2125 E LASALLE COLORADO SPRINGS, CO 80909	68-0506812	Other	0	297,471	FMV	Medical Supplies	ON-GOING

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MISSION OF MERCY 22 SOUTH MARKET ST FREDERICK, MD 21701	86-0704883	501(c)(3)	0	1,970,010	FMV	Medical Supplies	ON-GOING
MISSION OF MERCY TEXAS CLINICS 2421 AYERS ST CORPUS CHRISTI, TX 78404	86-0704883	501(c)(3)	0	5,631	FMV	Medical Supplies	ON-GOING

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MISSION OF MERCY-ARIZONA 2034 E SOUTHERN AVE TEMPE, AZ 85282	86-0704883	501(c)(3)	0	310,035	FMV	Medical Supplies	ON-GOING
MISSION WACO HEALTH CLINIC 1315 N 15TH ST WACO, TX 76707	74-2605621	501(c)(3)	0	294,805	FMV	Medical Supplies	ON-GOING

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MLK FAMILY CLINIC DBA FOREMOST FAMILY HEALTH CENTE 3515 Shepherd Lane Balch Springs, TX 75180	75-2098992	501(c)(3)	0	19,592	FMV	Medical Supplies	EMERGENCY
MONTGOMERY COUNTY FREE CLINIC 816 MILL ST CRAWFORDSVILLE, IN 47933	27-1198512	501(c)(3)	0	156,503	FMV	Medical Supplies	ON-GOING

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MOORE FREE AND CHARITABLE CLINIC INC 211 TRIMBLE PLANT RD S PINES, NC 28387	01-0781234	501(c)(3)	0	45,665	FMV	Medical Supplies	ON-GOING
MOROVIS COMMUNITY HEALTH CENTER INC PO BOX 518 MOROVIS, PR 00687	66-0480948	501(c)(3)	0	287,501	FMV	Medical Supplies	ON-GOING

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MOROVIS COMMUNITY HEALTH CENTER INC PO BOX 518 MOROVIS, PR 00687	66-0480948	501(c)(3)	0	5,761	FMV	Medical Supplies	EMERGENCY
MORTON COMPREHENSIVE SERVICES PO BOX 481090 TULSA, OK 74148	73-1177858	501(c)(3)	0	46,906	FMV	Medical Supplies	ON-GOING

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MOUNTAIN HEALTH & COMMUNITY SERVICES INC 31115 HWY 94 CAMPO, CA 91906	33-0164420	501(c)(3)	0	30,585	FMV	Medical Supplies	EMERGENCY
M-POWER MINISTRIES HEALTH CENTER 4022 4TH AVE SOUTH BIRMINGHAM, AL 35222	31-1639601	501(c)(3)	0	114,658	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	1,090,286	FMV	Medical Supplies	ON-GOING
NAOMI BERRIE DIABETES CENTER NYP COLUMBIA UNI 1150 Saint Nicholas Ave New York, NY 10032	13-3957095	501(c)(3)	0	259,405	FMV	Medical Supplies	EMERGENCY

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NAVAJO NATION PO Box 7440 Window Rock, AZ 86515	86-0092333	501(c)(3)	0	150,718	FMV	Medical Supplies	EMERGENCY
NC MEDASSIST 4428 TAGGART CREEK Rd CHARLOTTE, NC 28208	56-2018957	115	0	13,376	FMV	Medical Supplies	EMERGENCY

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NC MEDASSIST 4428 TAGGART CREEK Rd CHARLOTTE, NC 28208	56-2018957	501(c)(3)	0	208,266	FMV	Medical Supplies	ON-GOING
NEIGHBOR FOR NEIGHBOR 505 E 36TH ST N TULSA, OK 74106	73-0776404	501(c)(3)	0	866,773	FMV	Medical Supplies	ON-GOING

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NEIGHBORHOOD CLINIC 1323 S YAKIMA AVE TACOMA, WA 98405	91-1318144	501(c)(3)	0	8,172	FMV	Medical Supplies	EMERGENCY
NEIGHBORHOOD CLINIC 1323 S YAKIMA AVE TACOMA, WA 98405	91-1318144	501(c)(3)	0	10,393	FMV	Medical Supplies	ON-GOING

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NEIGHBORHOOD FELLOWSHIP INC 4600 SUNSET AVE INDIANAPOLIS, IN 46208	35-2035206	501(c)(3)	0	394,118	FMV	Medical Supplies	ON-GOING
NEIGHBORHOOD HEALTH CLINIC 88 12TH ST N NAPLES, FL 34102	59-3546884	501(c)(3)	0	192,177	FMV	Medical Supplies	ON-GOING

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NEIGHBORHOOD HEALTH PARTNERS OF INDIANAPOLIS 7911 MICHIGAN RD INDIANAPOLIS, IN 46268	84-4269148	501(c)(3)	0	86,411	FMV	Medical Supplies	ON-GOING
NEIGHBORHOOD SERVICE ORGANIZATION NSO TUMAINI CENTER DETROIT, MI 48201	38-1561624	501(c)(3)	0	67,853	FMV	Medical Supplies	ON-GOING

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NEMOURS CHILDRENS SPECIALTY CARE 807 Childrens Way Jacksonville, FL 32207	59-0634433	501(c)(3)	0	255,429	FMV	Medical Supplies	EMERGENCY
NEVADA OBSTETRICAL CHARITY CLINIC 1950 PINTO LANE LAS VEGAS, NV 89106	26-4834603	501(c)(3)	0	1,304,491	FMV	Medical Supplies	ON-GOING

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NEW JERSEY VOLUNTARY ORGS ACTIVE 1636-44 Rt 38 Lumberton, NJ 08048	56-2336149	501(c)(3)	0	870,031	FMV	Medical Supplies	EMERGENCY
NEW LIFE COMMUNITY HEALTH CENTER 82-10 queens blvd ELMHURST, NY 11373	11-3204890	501(c)(3)	0	69,534	FMV	Medical Supplies	ON-GOING

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NEWHOPE CLINIC 41 S COURT ST OWINGSVILLE, KY 40360	61-1363437	501(c)(3)	0	235,891	FMV	Medical Supplies	ON-GOING
NORTH BROWARD HOSPITAL DISTRICT 1101 BROWARD FORT LAUDERDALE, FL 33311	59-6012065	501(c)(3)	0	109,745	FMV	Medical Supplies	ON-GOING

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NORTH BROWARD HOSPITAL DISTRICT 2011 NW 3RD AVE POMPANO BEACH, FL 33060	59-6012065	501(c)(3)	0	256,874	FMV	Medical Supplies	ON-GOING
NORTH BROWARD HOSPITAL DISTRICT 200 NW 7TH AVE FORT LAUDERDALE, FL 33311	59-6012065	501(c)(3)	0	258,127	FMV	Medical Supplies	ON-GOING

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N BROWARD HOSPITAL DISTRICT DBA BROWARD 303 SE 17TH ST FORT LAUDERDALE, FL 33316	59-6012065	501(c)(3)	0	104,024	FMV	Medical Supplies	ON-GOING
NORTH DALLAS SHARED MINISTRIES 2875 MERRELL RD DALLAS, TX 75229	75-1908563	501(c)(3)	0	150,214	FMV	Medical Supplies	ON-GOING

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NORTH HUDSON COMMUNITY ACTION CORPORATION 800-31ST STREET UNION CITY, NJ 07087	22-1818699	501(c)(3)	0	468,323	FMV	Medical Supplies	ON-GOING
NORTH JEFFERSON COUNTY CLINIC PHARMACY 1295 PEARL ST BEAUMONT, TX 77701	74-6000291	501(c)(3)	0	252,051	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
NORTH MIAMI BEACH MEDICAL CENTER 13899 BISCAYNE NORTH MIAMI BEACH, FL 33181	65-1032266	Other	0	28,218	FMV	Medical Supplies	ON-GOING
NORTHERN NECK FREE HEALTH CLINIC 51 William Grant Crt KILMARNOCK, VA 22482	54-1679279	501(c)(3)	0	34,779	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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NORTHSHORE SCOTTSDALE PHARMACY 6050 STERLING CREEK RD PORTAGE, IN 46368	35-2028588	501(c)(3)	0	244,339	FMV	Medical Supplies	ON-GOING
NORTHSIDE CHRISTIAN HEALTH CARE CENTER 816 MIDDLE STREET PITTSBURGH, PA 15212	25-1715426	501(c)(3)	0	149,451	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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NORTHWEST MICHIGAN HEALTH SERVICES 10767 TRAVERSE Hway TRAVERSE CITY, MI 49684	38-1958790	501(c)(3)	0	401,171	FMV	Medical Supplies	ON-GOING
NOVA SCRIPTSCENTRAL 6400 ARLINGTON BLVD FALLS CHURCH, VA 22042	65-1275162	501(c)(3)	0	200,213	FMV	Medical Supplies	ON-GOING

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NURSES GLOBAL OUTREACH INC 402 N TOPEKA ST WICHITA, KS 67202	83-1687039	501(c)(3)	0	157,208	FMV	Medical Supplies	ON-GOING
NUVANCE HEALTH 24 Hospital Ave Danbury, CT 06810	06-0646597	Other	0	65,000	FMV	Medical Supplies	EMERGENCY

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OAKLAWN 330 LAKEVIEW DR GOSHEN, IN 46528	35-1070041	501(c)(3)	0	52,334	FMV	Medical Supplies	ON-GOING
OASIS FREE CLINICS 66 BARIBEAU DR BRUNSWICK, ME 04011	01-0497587	501(c)(3)	0	159,359	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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OASIS OF HOPE CENTER 522 LEONARD ST GRAND RAPIDS, MI 495044258	20-2781312	501(c)(3)	0	56,602	FMV	Medical Supplies	ON-GOING
OHIO VALLEY HEALTH CENTER 423 SOUTH ST STEUBENVILLE, OH 43952	20-3924355	501(c)(3)	0	308,045	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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OKLAHOMA FOOD BANK 3355 South Purdue OKLAHOMA CITY, OK 74145	73-1100380	501(c)(3)	0	13,187	FMV	Medical Supplies	EMERGENCY
OLDE TOWNE MEDICAL & DENTAL CENTER 5249 OLDE TOWNE ROAD WILLIAMSBURG, VA 23188	54-1663905	501(c)(3)	0	524,475	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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ONE STOP CLINIC 701 17TH AVE W BRADENTON, FL 34205	59-3340921	501(c)(3)	0	910,703	FMV	Medical Supplies	ON-GOING
ONEWORLD COMMUNITY HEALTH CENTERS INC 4920 S 30TH STREET OMAHA, NE 68107	47-0548990	501(c)(3)	0	7,094	FMV	Medical Supplies	ON-GOING

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OPEN ARMS CLINIC 109 BIG A ROAD TOCCOA, GA 30577	20-3296577	501(c)(3)	0	395,932	FMV	Medical Supplies	ON-GOING
OPEN ARMS FREE CLINIC INC PO BOX 678 ELKHORN, WI 53121	45-4475625	501(c)(3)	0	32,312	FMV	Medical Supplies	ON-GOING

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OPEN ARMS HEALTH CLINIC 3311 LITTLE RD ARLINGTON, TX 76016	45-0621201	501(c)(3)	0	711,707	FMV	Medical Supplies	ON-GOING
OPEN BIBLE MEDICAL CLINIC & PHARMACY 555 COSTILLA ST COLORADO SPRINGS, CO 80903	84-1345520	501(c)(3)	0	69,246	FMV	Medical Supplies	ON-GOING

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OPEN DOOR FAMILY MEDICAL CENTER 165 MAIN ST Ossining, NY 105624702	13-2813103	501(c)(3)	0	11,307	FMV	Medical Supplies	EMERGENCY
OPEN DOOR HEALTH CENTER PO BOX 901642 HOMESTEAD, FL 33090	83-0375996	501(c)(3)	0	2,039,580	FMV	Medical Supplies	ON-GOING

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OPEN DOOR HEALTH CLINIC 100 N LINCOLN ST ELLENSBURG, WA 98926	65-1185178	501(c)(3)	0	109,308	FMV	Medical Supplies	ON-GOING
OPEN M 941 PRINCETON ST AKRON, OH 44311	34-1046107	501(c)(3)	0	135,089	FMV	Medical Supplies	ON-GOING

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ORANGEBURG-CALHOUN FREE MEDICAL CLINIC 141 CENTRE STREET ORANGEBURG, SC 29115	26-3762573	501(c)(3)	0	124,797	FMV	Medical Supplies	ON-GOING
ORCHARD HOSPITAL 240 Spruce Street Gridley, CA 95948	94-1049467	501(c)(3)	0	47,685	FMV	Medical Supplies	EMERGENCY

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ORTHOPAEDIC HEMOPHILIA TREATMENT CENTER 403 W ADAMS BLVD LOS ANGELES, CA 90007	95-1644604	501(c)(3)	0	85,048	FMV	Medical Supplies	ON-GOING
OZARKS COMMUNITY HEALTH CENTER 18614 JACKSON ST HERMITAGE, MO 65668	20-5822485	501(c)(3)	0	61,142	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	13,216	FMV	Medical Supplies	EMERGENCY
OZARKS COMMUNITY HEALTH CENTER - URBANA PO BOX 125 HERMITAGE, MO 65668	20-5822485	Other	0	558,720	FMV	Medical Supplies	ON-GOING

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PALMETTO HEALTH COUNCIL INC 643 MAIN STREET PALMETTO, GA 30268	58-1307597	Other	0	3,051,658	FMV	Medical Supplies	ON-GOING
PANCARE OF FLORIDA INC 403 E 11TH STREET PANAMA CITY, FL 32401	91-2189932	501(c)(3)	0	6,509	FMV	Medical Supplies	EMERGENCY

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PANCARE OF FLORIDA INC 403 E 11TH STREET PANAMA CITY, FL 32401	91-2189932	501(c)(3)	0	1,085,934	FMV	Medical Supplies	ON-GOING
PARADISE VALLEY INTERNATIONAL MEDICAL MISSION 1615 SWEETWATER RD NATIONAL CITY, CA 91950	20-3781653	501(c)(3)	0	6,374	FMV	Medical Supplies	EMERGENCY

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PARADISE VALLEY INTERNATIONAL MEDICAL MISSION 1615 SWEETWATER RD NATIONAL CITY, CA 91950	20-3781653	501(c)(3)	0	116,925	FMV	Medical Supplies	ON-GOING
PARKVIEW MEDICAL CLINIC 1205 DR MLK JR WAY HAINES CITY, FL 33844	01-0790991	501(c)(3)	0	817,616	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	288,660	FMV	Medical Supplies	ON-GOING
PAUITE INDIAN TRIBE OF UTAH 440 NORTH PAIUTE DRIVE CEDAR CITY, UT 84721	87-0365095	501(c)(3)	0	7,488	FMV	Medical Supplies	ON-GOING

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PEDIPLACE 502 OLD ORCHARD LANE LEWISVILLE, TX 75067	75-2512752	Other	0	150,954	FMV	Medical Supplies	ON-GOING
PEOPLES CLINIC 3111 ELECTRIC AVE PORT HURON, MI 48060	38-3274342	501(c)(3)	0	170,103	FMV	Medical Supplies	ON-GOING

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PEOPLES HEALTH WELLNESS CLINIC 553 NORTH MAIN STREET BARRE, VT 05641	03-0343290	Other	0	21,602	FMV	Medical Supplies	ON-GOING
PERSON CENTERED PARTNERSHIPS IN DBA AMARA WELLNESS 5108 REAGAN DRIVE CHARLOTTE, NC 28206	56-2271889	501(c)(3)	0	203,757	FMV	Medical Supplies	ON-GOING

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PHOENIX CENTER COMMUNITY SERVICE BOARD 940 GA HWY 96 WARNER ROBINS, GA 31088	58-2105225	501(c)(3)	0	116,965	FMV	Medical Supplies	ON-GOING
PLACE OF HOPE CLINIC 5405 JONESBORO ROAD LAKE CITY, GA 30260	58-2656313	Other	0	412,645	FMV	Medical Supplies	ON-GOING

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POCATELLO FREE CLINIC 1001 N 7TH AVE POCATELLO, ID 83201	82-0351133	501(c)(3)	0	330,073	FMV	Medical Supplies	ON-GOING
POLK COUNTY HEALTH CENTER 1317 W BROADWAY BOLIVAR, MO 65613	43-1268665	501(c)(3)	0	15,848	FMV	Medical Supplies	ON-GOING

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PONCE MEDICAL SCHOOL FOUNDATION INC PO Box 7004 Ponce, PR 00732	66-0379122	Other	0	489,620	FMV	Medical Supplies	EMERGENCY
PORTER STARKE SERVICES DBA MARRAM HEALTH CENTER 601 WALL STREET VALPARAISO, IN 46383	35-1330771	501(c)(3)	0	1,016,997	FMV	Medical Supplies	ON-GOING

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POTTAWATTAMIE COUNTY DIV OF PUBLIC HEALTH 600 S 4TH ST COUNCIL BLUFFS, IA 51503	42-6004433	501(c)(3)	0	14,679	FMV	Medical Supplies	ON-GOING
PRESBYTERIAN MEDICAL CARE MISSION 1857 PINE ST STE 100 ABILENE, TX 79601	75-1910600	Other	0	886,834	FMV	Medical Supplies	ON-GOING

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PROJECT HOPE PO BOX 6685 HAMDEN, CT 065170685	35-2473244	501(c)(3)	0	36,815	FMV	Medical Supplies	EMERGENCY
PROJECT SOS -SUPPORT OUR SOLDIERS INC 2412 DUE WEST DRIVE THE VILLAGES, FL 32162	27-2932657	501(c)(3)	0	14,509	FMV	Medical Supplies	EMERGENCY

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PROJECT SOS -SUPPORT OUR SOLDIERS INC 2412 DUE WEST DRIVE THE VILLAGES, FL 32162	27-2932657	501(c)(3)	0	19,919	FMV	Medical Supplies	ON-GOING
PROTEUS 1221 CENTER ST DES MOINES, IA 50309	42-1186501	501(c)(3)	0	65,652	FMV	Medical Supplies	ON-GOING

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PRYMED MEDICAL CARE CARRETERA 149 KM 13 CIALES, PR 00638	66-0428120	501(c)(3)	0	734,685	FMV	Medical Supplies	ON-GOING
PRYMED MEDICAL CARE CARRETERA 149 KM 13 CIALES, PR 00638	66-0428120	501(c)(3)	0	143,713	FMV	Medical Supplies	EMERGENCY

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RAPHA CLINIC OF WEST GEORGIA INC RAPHA CLINIC OF W GEORGIA TEMPLE, GA 30179	27-1188932	501(c)(3)	0	344,904	FMV	Medical Supplies	ON-GOING
RAPHAEL COMMUNITY FREE CLINIC INC 1807 WATER STREET KERRVILLE, TX 78028	74-2819628	501(c)(3)	0	171,502	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	15,306	FMV	Medical Supplies	ON-GOING
REMOTE AREA MEDICAL 2200 STOCK CREEK BLVD ROCKFORD, TN 37853	62-1650446	501(c)(3)	0	126,828	FMV	Medical Supplies	ON-GOING

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RENEWED HOPE HEALTH CLINIC 894 MARSHALL ST ALLEGAN, MI 49010	16-1760734	501(c)(3)	0	147,582	FMV	Medical Supplies	ON-GOING
RICHLAND HILLS HELPING HANDS MINISTRY 7100 BLVD 26 RICHLAND HILLS, TX 76180	47-5624322	501(c)(3)	0	93,440	FMV	Medical Supplies	ON-GOING

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RILEY MED CLINICFIRST BAPTIST CHURCH JONESBOR 147 CHURCH STREET JONESBORO, GA 30236	58-0685903	501(c)(3)	0	209,255	FMV	Medical Supplies	ON-GOING
RIVER CITY MINISTRY 1021 E WASH AVE NORTH LITTLE ROCK, AR 72114	71-0786539	501(c)(3)	0	188,465	FMV	Medical Supplies	ON-GOING

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RIVER HILLS COMMUNITY HEALTH CENTER 201 SOUTH MARKET STREET OTTUMWA, IA 52501	42-1489471	501(c)(3)	0	22,006	FMV	Medical Supplies	ON-GOING
RIVER HILLS COMMUNITY HEALTH CENTER 100 W MAIN ST RICHLAND, IA 52585	42-1489471	501(c)(3)	0	224,841	FMV	Medical Supplies	ON-GOING

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RIVER VALLEY FAMILY HEALTH CENTER PO BOX 529 OLATHE, CO 81425	27-3757444	501(c)(3)	0	6,608	FMV	Medical Supplies	EMERGENCY
RIVER VALLEY FAMILY HEALTH CENTER PO BOX 529 OLATHE, CO 81425	27-3757444	Other	0	906,382	FMV	Medical Supplies	ON-GOING

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RIVERVIEW HEALTH SERVICES 722 REYNOLDS AVENUE KANSAS CITY, KS 66101	48-1072716	Other	0	7,689	FMV	Medical Supplies	ON-GOING
ROANOKE CHOWAN COMMUNITY HEALTH CEN (RCCHC) 120 HEALTH CENTER DRIVE AHOSKIE, NC 27910	42-1638714	501(c)(3)	0	95,456	FMV	Medical Supplies	ON-GOING

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ROCK RIVER FREE CLINIC 1541 ANNEX ROAD JEFFERSON, WI 53549	47-0898219	501(c)(3)	0	443,782	FMV	Medical Supplies	ON-GOING
ROCK SPRINGS CLINIC 211 ROCK SPRINGS ROAD MILNER, GA 30257	26-4485460	501(c)(3)	0	354,872	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
ROLETTE COUNTY PUBLIC HEALTH DISTRICT 211 1ST AVE NE ROLLA, ND 58367	02-0761623	501(c)(3)	0	32,518	FMV	Medical Supplies	ON-GOING
ROPHE FREE CLINIC 4374 W 52ND ST INDIANAPOLIS, IN 46254	81-2339063	501(c)(3)	0	347,462	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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ROSA CLARK MEDICAL CLINIC 301 MEMORIAL DR SENECA, SC 29678	58-6076010	501(c)(3)	0	188,632	FMV	Medical Supplies	ON-GOING
ROSE GARDEN CENTER FOR HOPE AND HEALING 2020 MADISON AVE COVINGTON, KY 41014	27-2425177	501(c)(3)	0	306,464	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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ROTACARE INC 875 JERUSALEM AVE UNIONDALE, NY 11530	11-3135331	501(c)(3)	0	205,339	FMV	Medical Supplies	ON-GOING
RURAL HEALTH NETWORK OF MONROE COUNTY 3706 N ROOSEVELT BLVD KEY WEST, FL 33040	65-0474953	501(c)(3)	0	50,771	FMV	Medical Supplies	ON-GOING

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RUTHS PLACE 1411 CRAWFORD AVENUE GRANBURY, TX 76048	20-4594680	501(c)(3)	0	221,104	FMV	Medical Supplies	ON-GOING
RUTLAND FREE CLINIC 145 STATE STREET RUTLAND, VT 05701	83-0427544	501(c)(3)	0	395,838	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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SACRED HEART COMMUNITY CLINIC 620 ROUND ROCK WEST DR ROUND ROCK, TX 78681	27-2901548	501(c)(3)	0	28,209	FMV	Medical Supplies	ON-GOING
SAFE HARBOR FREE CLINIC 7209 265TH ST NW STANWOOD, WA 98292	26-3825107	501(c)(3)	0	7,672	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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SAFENETRX PHARMACY 11100 AURORA AVE URBANDALE, IA 50322	42-1518875	501(c)(3)	0	185,740	FMV	Medical Supplies	ON-GOING
SALINA FAMILY HEALTHCARE CENTER 651 EAST PRESCOTT ROAD SALINA, KS 67401	48-0858197	501(c)(3)	0	291,307	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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SALT LAKE COUNTY HEALTH DEPARTMENT 2001 STATE ST SALT LAKE CITY, UT 84114	87-6000316	501(c)(3)	0	20,419	FMV	Medical Supplies	ON-GOING
SALUD INTEGRAL EN LA MONTANA (SIM) Centro de Salud NARANJITO, PR 00719	66-0329532	Other	0	88,490	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 NARANJITO, PR 00719	66-0329532	501(c)(3)	0	36,430	FMV	Medical Supplies	EMERGENCY
SAMARITAN HEALTH CENTER 13 ROSE STREET DANBURY, CT 06810	75-3258057	501(c)(3)	0	21,925	FMV	Medical Supplies	ON-GOING

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SAMARITAN HOUSE 114 5TH AVE REDWOOD CITY, CA 94063	23-7416272	501(c)(3)	0	190,946	FMV	Medical Supplies	ON-GOING
SAMARITAN REGIONAL HEALTH CLINIC 937 BROADWAY CAPE GIRARDEAU, MO 63701	27-5427837	501(c)(3)	0	789,103	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	818,220	FMV	Medical Supplies	ON-GOING
SAMUEL DIXON FAM HEALTH CEN INC-CANYON COU 25115 AVENUE STANFORD VALENCIA, CA 91355	95-4278726	501(c)(3)	0	168,832	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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SAMUEL DIXON FAMILY HEALTH CENTERS INC-NEWHALL 25115 AVENUE STANFORD VALENCIA, CA 91355	95-4278726	501(c)(3)	0	134,479	FMV	Medical Supplies	ON-GOING
SAMUEL DIXON FAMILY HEALTH CENTERS INC-VAL VERDE 25115 AVENUE STANFORD VALENCIA, CA 91355	95-4278726	501(c)(3)	0	127,270	FMV	Medical Supplies	ON-GOING

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SAN DIEGO COUNTY MEDICAL SOCIETY FOUNDATION 5575 RUFFIN RD STE 250 SAN DIEGO, CA 92123	95-2568714	501(c)(3)	0	17,036	FMV	Medical Supplies	ON-GOING
SAN FRANCISCO FREE CLINIC 4900 CALIFORNIA ST SAN FRANCISCO, CA 94118	94-3186248	501(c)(3)	0	186,937	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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SAN JOSE CLINIC 2615 FANNIN ST STE 2703 HOUSTON, TX 77002	76-0373703	501(c)(3)	0	645,796	FMV	Medical Supplies	ON-GOING
SANTA CRUZ COMMUNITY HEALTH PO BOX 542 Santa Cruz, CA 950610542	23-7428303	501(c)(3)	0	5,457	FMV	Medical Supplies	EMERGENCY

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SAVE THE CHILDREN US 501 Kings Highway E Fairfield, CT 06825	06-0726487	501(c)(3)	0	5,263	FMV	Medical Supplies	EMERGENCY
SCHUYLER COUNSELING AND HEALTH SERVICES 127 S LIBERTY RUSHVILLE, IL 62681	37-0923523	501(c)(3)	0	11,702	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	113,881	FMV	Medical Supplies	ON-GOING
SCOTT COUNTY HEALTH DEPARTMENT 1296 N GARDNER ST SCOTTSBURG, IN 47170	00-3118924	501(c)(3)	0	646,340	FMV	Medical Supplies	ON-GOING

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SEAGER MEMORIAL CLINIC PO BOX 150143 OGDEN, UT 844150143	46-0711300	Other	0	136,569	FMV	Medical Supplies	ON-GOING
SEMO HEALTH NETWORK 6738 STATE HWY 77 BENTON, MO 63736	43-1253101	501(c)(3)	0	239,623	FMV	Medical Supplies	ON-GOING

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SENIOR FRIENDSHIP CENTERS INC 1900 BROTHER GEENEN WAY SARASOTA, FL 34236	59-1522614	501(c)(3)	0	264,400	FMV	Medical Supplies	ON-GOING
SHEPHERDS CLINIC 2800 KIRK AVE BALTIMORE, MD 21218	52-1739001	501(c)(3)	0	78,485	FMV	Medical Supplies	ON-GOING

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SHERIDAN HEALTH CENTER PO BOX 682 SHERIDAN, WY 82801	20-1389307	501(c)(3)	0	155,911	FMV	Medical Supplies	ON-GOING
SHIFA CLINIC 1092 JOHNNIE DODDS BL MT PLEASANT, SC 29464	04-3810161	501(c)(3)	0	531,514	FMV	Medical Supplies	ON-GOING

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SHIFA CLINIC OKLAHOMA CITY 3840 ST CLAIRE AVE OKLAHOMA CITY, OK 73112	04-3810161	501(c)(3)	0	117,034	FMV	Medical Supplies	ON-GOING
SILOAM FAMILY HEALTH CENTER 820 GALE LANE NASHVILLE, TN 37204	58-1867940	501(c)(3)	0	240,039	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	32,589	FMV	Medical Supplies	ON-GOING
SISTER MAURA BRANNICK HEALTH CENTER 326 S CHAPIN ST SOUTH BEND, IN 46601	53-0196617	501(c)(3)	0	99,093	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	444,937	FMV	Medical Supplies	ON-GOING
SMITHVILLE COMMUNITY CLINIC 800 BURLESON ST SMITHVILLE, TX 78957	20-4515999	501(c)(3)	0	33,835	FMV	Medical Supplies	EMERGENCY

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SNAKE RIVER COMMUNITY CLINIC PO BOX 6 LEWISTON, ID 83501	31-1726460	501(c)(3)	0	597,837	FMV	Medical Supplies	ON-GOING
SOCIAL HEALTH AND MEDICAL SERVICE CLINIC (SHAMS) 7439 FRANKFORD AVE PHILADELPHIA, PA 19136	04-3810161	501(c)(3)	0	18,773	FMV	Medical Supplies	ON-GOING

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SOCIAL WELFARE BOARD 904 S 10TH SUITE A ST JOSEPH, MO 64503	44-6000455	501(c)(3)	0	240,952	FMV	Medical Supplies	ON-GOING
SOCIEDAD PUERTORRIQUENO DE ENDOCRINOLOGIA Y DIABETO Bayamon Health Center Bayamon, PR 00960	66-0575386	Other	0	156,760	FMV	Medical Supplies	EMERGENCY

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SOCIETY OF ST VINCENT DE PAUL 2033 FISH HATCHERY RD MADISON, WI 53725	39-0824876	501(c)(3)	0	29,619	FMV	Medical Supplies	ON-GOING
SOCIETY OF ST VINCENT DE PAUL CHARITABLE PHARMACY 3826 GILBERT AVENUE DALLAS, TX 75219	26-3273175	501(c)(3)	0	695,792	FMV	Medical Supplies	ON-GOING

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SOUTH CENTRAL MISSOURI COMMUNITY HEALTH CENTER 1081 EAST 18TH STREET ROLLA, MO 65401	26-2522083	501(c)(3)	0	912,748	FMV	Medical Supplies	ON-GOING
SOUTH PARK INN MEDICAL CLINIC 263 FARMINGTON AVE FARMINGTON, CT 06030	52-1725543	501(c)(3)	0	32,565	FMV	Medical Supplies	ON-GOING

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SOUTH ROUTT MEDICAL CENTER HEALTH SERVICE DISTRICT PO BOX 8 OAK CREEK, CO 80467	84-6032810	501(c)(3)	0	87,999	FMV	Medical Supplies	ON-GOING
SOUTH SANTA ROSA INTERFAITH MINISTRIES GOOD SAMARITAN CLINC GULF BREEZE, FL 32563	59-3690750	Other	0	511,516	FMV	Medical Supplies	ON-GOING

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SOUTH TEXAS FAMILY PLANNING & HEALTH CORPORATION 4455 PADRE ISL DR CORPUS CHRISTI, TX 78411	74-1728621	501(c)(3)	0	6,396	FMV	Medical Supplies	ON-GOING
SOUTHEAST INC 16 WEST LONG STREET COLUMBUS, OH 43215	31-0940189	501(c)(3)	0	705,466	FMV	Medical Supplies	ON-GOING

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SOUTHEAST MENTAL HEALTH SERVICES 711 BARNES AVENUE LA JUNTA, CO 81050	84-0519607	501(c)(3)	0	99,819	FMV	Medical Supplies	ON-GOING
SOUTHWEST BOULEVARD FAMILY HEALTH CLINIC 300 SW BOULEVARD KANSAS CITY, KS 66103	48-1067752	501(c)(3)	0	254,957	FMV	Medical Supplies	ON-GOING

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SOUTHWEST IOWA MENTAL HEALTH CENTER 1500 EAST 10TH STREET ATLANTIC, IA 50022	42-0928938	501(c)(3)	0	46,695	FMV	Medical Supplies	ON-GOING
SOUTHWEST MISSOURI AREA COALITION 1011 W MAIN BUFFALO, MO 65622	27-3253482	501(c)(3)	0	80,377	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	172,797	FMV	Medical Supplies	ON-GOING
SPECTRA HEALTH 212 SOUTH 4TH STREET GRAND FORKS, ND 58201	27-0056777	501(c)(3)	0	21,099	FMV	Medical Supplies	ON-GOING

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SPINDLETOP CENTER 655 SOUTH 8TH STREET BEAUMONT, TX 77701	74-1684198	501(c)(3)	0	1,137,730	FMV	Medical Supplies	ON-GOING
ST ANDREW COMMUNITY MEDICAL CENTER 3101-B W HIGHWAY 98 PANAMA CITY, FL 32401	32-0103234	501(c)(3)	0	109,498	FMV	Medical Supplies	ON-GOING

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ST CLARE HEALTH MISSION PHARMACY 916 FERRY STREET LA CROSSE, WI 54601	82-3903651	501(c)(3)	0	108,692	FMV	Medical Supplies	ON-GOING
ST LUKE COMMUNITY CLINIC 316 N ROYAL AVE FRONT ROYAL, VA 22630	54-1801220	501(c)(3)	0	17,918	FMV	Medical Supplies	EMERGENCY

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ST LUKE COMMUNITY CLINIC 316 N ROYAL AVE FRONT ROYAL, VA 22630	54-1801220	501(c)(3)	0	42,012	FMV	Medical Supplies	ON-GOING
ST VINCENT DE PAUL CHARITABLE PHARMACY 1125 BANK ST CINCINNATI, OH 45214	30-0272954	501(c)(3)	0	1,156,808	FMV	Medical Supplies	ON-GOING

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ST CLARE MEDICAL OUTREACH 1407 YORK ROAD LUTHERVILLE, MD 21093	52-1681044	501(c)(3)	0	896,090	FMV	Medical Supplies	ON-GOING
ST FRANCIS COMMUNITY FREE CLINIC 1062 N KOELLER ST OSHKOSH, WI 54902	39-1334342	501(c)(3)	0	1,117,338	FMV	Medical Supplies	ON-GOING

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ST JOESPH'S NEIGHBORHOOD CENTER 417 S AVE ROCHESTER, NY 14620	46-1176792	501(c)(3)	0	586,496	FMV	Medical Supplies	ON-GOING
ST JOHN BOSCO CLINIC INC 3661 S MIAMI AVENUE MIAMI, FL 33133	65-0435764	501(c)(3)	0	1,036,118	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
ST JOSEPH HEALTH CENTER 510 W ADAMS ST PLYMOUTH, IN 46563	35-1142669	501(c)(3)	0	815,613	FMV	Medical Supplies	ON-GOING
ST JOSEPH PRIMARY CARE 4400 FALLS OF NEUSE ROAD RALEIGH, NC 27609	46-5192720	501(c)(3)	0	460,320	FMV	Medical Supplies	ON-GOING

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ST MARTINS HEALTHCARE INC ST MARTINS HEALTHCARE GARRETT, IN 46738	20-8609620	501(c)(3)	0	320,871	FMV	Medical Supplies	ON-GOING
ST MARY'S HEALTH WAGON 5626 PATRIOT DRIVE WISE, VA 24293	04-3739083	501(c)(3)	0	15,752	FMV	Medical Supplies	ON-GOING

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ST MARY'S LEGACY CLINIC 805 S NORTSHORE DR KNOXVILLE, TN 37919	46-2331706	501(c)(3)	0	178,188	FMV	Medical Supplies	ON-GOING
ST MICHAEL'S COMMUNITY SERVICES INC 1005 W 18TH STREET ANNISTON, AL 36201	82-5246184	501(c)(3)	0	508,950	FMV	Medical Supplies	ON-GOING

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ST MICHAEL'S MEDICAL CLINIC 1005 W 18TH STREET ANNISTON, AL 36201	82-5246184	501(c)(3)	0	848,996	FMV	Medical Supplies	ON-GOING
ST THOMAS CLINIC 600 PAUL HAND BOULEVARD FRANKLIN, IN 46131	35-1449379	501(c)(3)	0	198,848	FMV	Medical Supplies	ON-GOING

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ST THOMAS EAST END MEDICAL CENTER CORP 4605 Tutu Park Mall St Thomas, VI 00802	66-0585077	501(c)(3)	0	16,110	FMV	Medical Supplies	EMERGENCY
ST VINCENT DE PAUL FREE CLINIC 1004 EAST MAIN STREET MERRILL, WI 54452	45-0508546	501(c)(3)	0	36,971	FMV	Medical Supplies	ON-GOING

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ST VINCENT DE PAUL MEDICAL CLINIC 420 W WATKINS RD PHOENIX, AZ 85013	86-0096789	501(c)(3)	0	138,681	FMV	Medical Supplies	ON-GOING
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER 3350 E STREET SAN DIEGO, CA 921023332	33-0492302	501(c)(3)	0	23,169	FMV	Medical Supplies	ON-GOING

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ST VINCENT DEPAUL COMMUNITY PHARMACY 502 GRAMMONT ST MONROE, LA 71201	90-0014479	501(c)(3)	0	122,994	FMV	Medical Supplies	ON-GOING
ST VINCENT'S MOBILE HEALTH OUTREACH MINISTRY 3 SHIRCLIFF WAY JACKSONVILLE, FL 32204	53-0196617	501(c)(3)	0	88,905	FMV	Medical Supplies	ON-GOING

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ST VINCENT'S STUDENT FREE CLINIC 2817 POST OFFICE ST GALVESTON, TX 77550	74-1384864	501(c)(3)	0	211,814	FMV	Medical Supplies	ON-GOING
STMARY'S DINING ROOM 545 WSONORA ST STOCKTON, CA 95203	94-2687280	501(c)(3)	0	460,138	FMV	Medical Supplies	ON-GOING

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STAMFORD HEALTH One Hospital Plaza Stamford, CT 06901	06-0646917	501(c)(3)	0	32,500	FMV	Medical Supplies	EMERGENCY
STAR - STAND TOGETHER AND RECOVER CENTERS INC 3003 N CENTRAL AVE PHOENIX, AZ 85012	86-0586210	501(c)(3)	0	7,209	FMV	Medical Supplies	ON-GOING

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STATE OF MASSACHUSETTS - MEMA 181 Royal Plaza Road Marlborough, MA 01752	99-9999999	501(c)(3)	0	832,000	FMV	Medical Supplies	EMERGENCY
STEPHEN F AUSTIN COMMUNITY HEALTH CENTER 1612 Callaway Dr Alvin, TX 77511	41-2273820	115	0	84,030	FMV	Medical Supplies	EMERGENCY

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STILLWATER COMMUNITY HEALTH CENTER 821 S PINE STILLWATER, OK 74074	73-1502192	501(c)(3)	0	186,728	FMV	Medical Supplies	ON-GOING
SULZBACHER HEALTH CENTER 611 E ADAMS ST JACKSONVILLE, FL 32202	59-3229898	501(c)(3)	0	12,982	FMV	Medical Supplies	ON-GOING

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SUMPTER FREE MEDICAL CLINIC DBA SUMPTER FREE HEALT 1083 HWY 35 SAINT STEPHEN, SC 29479	27-1097304	501(c)(3)	0	351,190	FMV	Medical Supplies	ON-GOING
SURRY MEDICAL MINISTRIES PO BOX 349 MOUNT AIRY, NC 27030	56-1829347	501(c)(3)	0	258,084	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	186,011	FMV	Medical Supplies	ON-GOING
TALBOT HOUSE MINISTRIES OF LAKE LAND INC 814 NORTH KENTUCKY AVE LAKE LAND, FL 33801	85-8012641	501(c)(3)	0	479,028	FMV	Medical Supplies	ON-GOING

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TAMA COUNTY PUBLIC HEALTH AND HOME CARE 129 W HIGH ST TOLEDO, IA 52342	42-6005285	501(c)(3)	0	9,444	FMV	Medical Supplies	ON-GOING
TARZANA TREATMENT CENTERS INC 18646 OXNARD STREET TARZANA, CA 91356	94-2219349	Other	0	471,457	FMV	Medical Supplies	ON-GOING

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TEMPLE COMMUNITY CLINIC 1905 CURTIS B ELLIOT DRIVE TEMPLE, TX 76501	74-2634500	501(c)(3)	0	123,418	FMV	Medical Supplies	ON-GOING
TEWKSBURY HEALTH DEPT 1009 MAIN ST TEWKSBURY, MA 01876	04-6001322	501(c)(3)	0	5,986	FMV	Medical Supplies	ON-GOING

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TEXAS CHILDRENS HOSPITAL 6701 Fannin Street Houston, TX 77030	74-1100555	115	0	71,927	FMV	Medical Supplies	EMERGENCY
THE ARK PHARMACY CHICAGO, IL 60645	23-7164967	501(c)(3)	0	115,407	FMV	Medical Supplies	ON-GOING

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THE BRIDGE CLINIC 6349 WHITE BERRY LANE LOVES PARK, IL 61111	27-3097955	501(c)(3)	0	148,035	FMV	Medical Supplies	ON-GOING
THE CARE CLINIC 239 ROBESON STREET FAYETTEVILLE, NC 28301	56-1837010	Other	0	79,873	FMV	Medical Supplies	ON-GOING

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THE CLINIC 143 CHURCH ST PHOENIXVILLE, PA 19460	23-3072363	501(c)(3)	0	802,949	FMV	Medical Supplies	ON-GOING
THE EL PASO BAPTIST CLINIC 2700 NPIEDRAS ST EL PASO, TX 79930	20-3046801	501(c)(3)	0	150,518	FMV	Medical Supplies	ON-GOING

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THE FLOATING HOSPITAL 4140 27TH ST LONG ISLAND CITY, NY 11101	13-1624169	501(c)(3)	0	375,414	FMV	Medical Supplies	ON-GOING
THE FREE CLINIC 2707 34TH STREET LUBBOCK, TX 79410	75-2668014	501(c)(3)	0	444,377	FMV	Medical Supplies	ON-GOING

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THE FREE CLINIC OF MEDINA COUNTY 970 E WASHINGTON STREET MEDINA, OH 44256	30-0092944	Other	0	87,785	FMV	Medical Supplies	ON-GOING
THE FREE CLINICS OF HENDERSON COUNTY 841 CASE STREET HENDERSONVILLE, NC 28792	56-2212024	501(c)(3)	0	30,406	FMV	Medical Supplies	ON-GOING

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THE FREE MEDICAL CLINIC 1875 HARDEN STREET COLUMBIA, SC 29204	57-0779279	501(c)(3)	0	52,383	FMV	Medical Supplies	ON-GOING
THE FRIENDSHIP CLINIC 704 SOUTH LATAH BOISE, ID 83705	20-0184266	501(c)(3)	0	33,474	FMV	Medical Supplies	ON-GOING

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THE GOOD SAMARITAN CENTER 140 INDUSTRIAL L FREDERICKSBURG, TX 78624	91-2129853	501(c)(3)	0	481,123	FMV	Medical Supplies	ON-GOING
THE HOPI TRIBE PO Box 123 Kykotsmovi, AZ 86039	86-0134082	501(c)(3)	0	161,283	FMV	Medical Supplies	EMERGENCY

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THE MAYORS FUND TO ADVANCE NEW YORK CITY 253 Broadway 6th Floor New York, NY 10007	13-3783906	7871	0	1,709,228	FMV	Medical Supplies	EMERGENCY
THE NEIGHBORHOOD CHRISTIAN CLINIC 1929 W FILLMORE PHOENIX, AZ 85009	86-0839580	501(c)(3)	0	489,866	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	5,893	FMV	Medical Supplies	ON-GOING
THE RESCUE MISSION FREE CLINIC 402 4TH STREET SE ROANOKE, VA 24013	54-0573900	501(c)(3)	0	30,585	FMV	Medical Supplies	EMERGENCY

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THE SALVATION ARMY 615 Slaters Lane Alexandria, VA 22314	22-2406433	501(c)(3)	0	84,591	FMV	Medical Supplies	EMERGENCY
THE SALVATION ARMY - USA WESTERN TERRITORY 1370 Pennsylvania Street Denver, CO 80203	94-1156347	501(c)(3)	0	162,500	FMV	Medical Supplies	EMERGENCY

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THE SOUTH SUBURBAN COUNCIL ON ALCOHOLISM & SUBSTAN 1909 CHEKER SQ EAST HAZEL CREST, IL 60429	36-2654921	501(c)(3)	0	18,145	FMV	Medical Supplies	ON-GOING
THE TEXAS INTL INSTITUTE OF HEALTH PROFESSIONS 8121 BROADWAY STREET HOUSTON, TX 77061	46-1267820	501(c)(3)	0	1,705,599	FMV	Medical Supplies	EMERGENCY

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THE UNIVERSITY OF NORTH CAROLINA HEALTH CARE SYSTE 4400 EMPEROR BLVD MORRISVILLE, NC 27703	56-2206970	501(c)(3)	0	90,115	FMV	Medical Supplies	ON-GOING
THE VILLAGE SOUTH WESTCARE 169 EFLAGER STREET MIAMI, FL 33131	59-1452736	115	0	56,558	FMV	Medical Supplies	ON-GOING

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THE WAY FREE MEDICAL CLINIC INC 479 HOUSTON ST GREEN COVE SPRINGS, FL 32043	76-0828154	501(c)(3)	0	263,988	FMV	Medical Supplies	ON-GOING
THUNDERMIST HEALTH CENTER 450 CLINTON ST WOONSOCKET, RI 028953207	05-0355097	501(c)(3)	0	6,998	FMV	Medical Supplies	ON-GOING

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TOMAGWA 455 SCHOOL STREET TOMBALL, TX 77375	76-0280324	501(c)(3)	0	64,525	FMV	Medical Supplies	ON-GOING
TOTAL FAMILY MEDICAL LLC 22601 HWY 190 ROBERT, LA 70455	46-1385117	501(c)(3)	0	274,830	FMV	Medical Supplies	ON-GOING

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TREASURE COAST COMMUNITY HEALTH INC 1555 Indian River Blvd VERO BEACH, FL 32960	59-3219191	Other	0	303,340	FMV	Medical Supplies	ON-GOING
TRI CITY HEALTH PARTNERSHIP 318 WALNUT STREET SAINT CHARLES, IL 60174	36-4475369	501(c)(3)	0	96,609	FMV	Medical Supplies	ON-GOING

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TRIANGLE AREA NETWORK - ORANGE 3737 NORTH 16TH STREET ORANGE, TX 77632	76-0226835	501(c)(3)	0	990,817	FMV	Medical Supplies	ON-GOING
TRIANGLE AREA NETWORK - BEAUMONT 1495 N 7TH STREET BEAUMONT, TX 77702	76-0226835	501(c)(3)	0	744,390	FMV	Medical Supplies	ON-GOING

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TRI-COUNTY HUMAN SERVICES-DETOX STABILIZATION UNIT 2725 HWY 60 E BARTOW, FL 33830	59-1708182	501(c)(3)	0	9,351	FMV	Medical Supplies	ON-GOING
TROPICAL TEXAS BEHAVIORAL HEALTH 1901 S 24TH AVENUE EDINBURG, TX 78539	74-1565510	501(c)(3)	0	176,080	FMV	Medical Supplies	ON-GOING

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UBI CARITAS 4450 HIGHLAND AVE BEAUMONT, TX 77705	76-0558225	501(c)(3)	0	191,731	FMV	Medical Supplies	ON-GOING
UBI CARITAS 4450 HIGHLAND AVE BEAUMONT, TX 77705	76-0558225	501(c)(3)	0	486,682	FMV	Medical Supplies	EMERGENCY

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University of Connecticut Health Center 263 Farmington Ave FARMINGTON, CT 06030	52-1725543	501(c)(3)	0	139,492	FMV	Medical Supplies	ON-GOING
UCSD STUDENT RUN FREE CLINIC PROJECT 9500 GILMAN DRIVE LA JOLLA, CA 920930696	95-2872494	501(c)(3)	0	103,377	FMV	Medical Supplies	ON-GOING

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UFL COLLEGE OF MED PEDIATRIC DIABETES CLINICS 1699 SW 16th Avenue Gainesville, FL 32608	59-6002052	501(c)(3)	0	63,416	FMV	Medical Supplies	EMERGENCY
UHI COMMUNITYCARE CLINIC 4745 NW 183 ST MIAMI, FL 33055	65-0268904	501(c)(3)	0	106,580	FMV	Medical Supplies	ON-GOING

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UNDERGROUND FREE CLINIC PO BOX 75157 TAMPA, FL 33675	20-4722214	501(c)(3)	0	322,053	FMV	Medical Supplies	ON-GOING
UNION COUNTY HEALTH DEPARTMENT 940 LONDON AVE MARYSVILLE, OH 43040	31-6400087	501(c)(3)	0	18,548	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
UNION GOSPEL MISSION CLINIC UNION GOSPEL DALLAS, TX 75247	75-6003612	Other	0	172,358	FMV	Medical Supplies	ON-GOING
UNION GOSPEL MISSION CLINIC 1300 N 1ST STREET YAKIMA, WA 98901	23-7050061	501(c)(3)	0	657,864	FMV	Medical Supplies	ON-GOING

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UNISON BEHAVIORAL HEALTH 1007 MARY STREET WAYCROSS, GA 31503	58-2107877	Other	0	38,843	FMV	Medical Supplies	ON-GOING
UNITED HEALTH PARTNERS (UHP) 3723 ROWLOCK VINE DR HOUSTON, TX 77084	61-1757254	Other	0	1,435,440	FMV	Medical Supplies	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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UNITED HEALTH PARTNERS (UHP) 3723 ROWLOCK VINE DR HOUSTON, TX 77084	61-1757254	501(c)(3)	0	1,696,757	FMV	Medical Supplies	ON-GOING
UNIVERSITY HOSPITALS CLEVELAND MEDICAL CENTER 11100 Euclid Avenue Cleveland, OH 44106	34-1567805	501(c)(3)	0	66,311	FMV	Medical Supplies	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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UNIVERSITY OF ARIZONA MOBILE HEALTH PROGRAM 655 N ALVERNON WAY TUCSON, AZ 85711	74-2652689	501(c)(3)	0	33,751	FMV	Medical Supplies	ON-GOING
UNIVERSITY OF MIAMI 1601 NW 12 AVE 4067 MIAMI, FL 33136	59-0624458	115	0	116,725	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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UNIVERSITY OF TULSA 800 S TUCKER DRIVE TULSA, OK 74105	73-0579298	501(c)(3)	0	71,029	FMV	Medical Supplies	ON-GOING
UNIVERSITY OF UTAH- UTAH NALOXONE 525 E 100 S Salt Lake City, UT 84102	87-6000525	501(c)(3)	0	150,429	FMV	Medical Supplies	ON-GOING

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UPHAM'S CORNER HEALTH CENTER 500 COLUMBIA ROAD DORCHESTER, MA 02125	23-7211732	501(c)(3)	0	137,507	FMV	Medical Supplies	ON-GOING
URBAN HEALTH AND WELLNESS 317 GEORGIA AVE ATLANTA, GA 30312	81-3845426	501(c)(3)	0	37,540	FMV	Medical Supplies	ON-GOING

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URBAN MINISTRIES OF WAKE COUNTY INC 1390 CAPITAL BLVD RALEIGH, NC 27603	58-1422700	501(c)(3)	0	128,494	FMV	Medical Supplies	ON-GOING
URGENT & PRIMARY CARE OF CLARKSDALE PO BOX 2098 CLARKSDALE, MS 38614	82-1075385	501(c)(3)	0	37,342	FMV	Medical Supplies	EMERGENCY

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URGENT & PRIMARY CARE OF CLARKSDALE PO BOX 2098 CLARKSDALE, MS 38614	82-1075385	Other	0	232,550	FMV	Medical Supplies	ON-GOING
UT HEALTH SCIENCE CENTER AT SAN ANT - FOCUS CMHE AT UTHSCSA SAN ANTONIO, TX 782293900	74-1586031	Other	0	395,616	FMV	Medical Supplies	ON-GOING

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VANDERBILT UNIVERSITY MEDICAL CENTER 1211 MED CENTER DR NASHVILLE, TN 372327610	35-2528741	115	0	308,033	FMV	Medical Supplies	ON-GOING
VARIETY CARE PO BOX 250 GRANDFIELD, OK 73546	73-1088577	501(c)(3)	0	1,494,759	FMV	Medical Supplies	ON-GOING

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VECINOS FARMWORKER HEALTH PROGRAM 3971 LITTLE SAVANNAH RD CULLOWHEE, NC 28723	57-1192063	Other	0	833,374	FMV	Medical Supplies	ON-GOING
VIRGINIA B ANDES VOLUNTEER COMMUNITIY CLINIC 21297 OLEAN BLVD PORT CHARLOTTE, FL 33952	65-0958642	501(c)(3)	0	378,618	FMV	Medical Supplies	ON-GOING

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VOLUNTEER HEALTHCARE CLINIC 4215 MEDICAL PARKWAY AUSTIN, TX 78756	74-6082464	501(c)(3)	0	297,037	FMV	Medical Supplies	ON-GOING
VOLUNTEERS IN MEDICINE VOLUN IN MED HILTON HEAD ISLAND, SC 29926	57-0959206	501(c)(3)	0	558,119	FMV	Medical Supplies	ON-GOING

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VOLUNTEERS IN MED - CLINIC OF THE CASCADES 2300 NE NEFF RD BEND, OR 97701	93-1327847	501(c)(3)	0	189,902	FMV	Medical Supplies	ON-GOING
VOLUNTEERS IN MEDICINE - SAN DIEGO 1457 E MADISON AVENUE EL CAJON, CA 92019	26-0057391	501(c)(3)	0	10,100	FMV	Medical Supplies	ON-GOING

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VOLUNTEERS IN MEDICINE CLINIC 2260 MARCOLA ROAD SPRINGFIELD, OR 97477	93-1276816	501(c)(3)	0	88,988	FMV	Medical Supplies	ON-GOING
VOLUNTEERS IN MEDICINE CLINIC 417 SE BALBOA AVENUE STUART, FL 34994	65-1115793	501(c)(3)	0	416,159	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	430,716	FMV	Medical Supplies	ON-GOING
VOLUNTEERS IN MEDICINE WILKES BARRE 190 N PENNSYLVANIA WILKES BARRE, PA 18702	20-3531527	501(c)(3)	0	104,250	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	51,287	FMV	Medical Supplies	ON-GOING
WA DEPARTMENT OF ENTERPRISE SERVICES 1500 Jefferson St SE Olympia, WA 98501	45-2096870	501(c)(3)	0	162,500	FMV	Medical Supplies	EMERGENCY

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WAHID MEDICAL CORP PO BOX 547 PATTERSON, CA 95363	45-3797437	115	0	693,304	FMV	Medical Supplies	ON-GOING
WAIMANLO HEALTH CENTER WAIMANALO HEALTH WAIMANALO, HI 967951247	99-0273205	Other	0	104,963	FMV	Medical Supplies	ON-GOING

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WALWORTH CTY DEPT OF HEALTH & HUMAN SVCS 1910 COUNTY ROAD NN ELKHORN, WI 53121	39-6005752	501(c)(3)	0	219,194	FMV	Medical Supplies	ON-GOING
WATER CITY CARE MISSION INC 1512 COUNTY ROAD I OSHKOSH, WI 54902	84-3899508	Other	0	224,663	FMV	Medical Supplies	ON-GOING

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WATER STREET HEALTH SERVICES 210 S PRINCE STREET LANCASTER, PA 17603	23-2798318	501(c)(3)	0	17,241	FMV	Medical Supplies	ON-GOING
WE CARE OF CENTRAL FLORIDA INC 205 FARNOL STREET SW WINTER HAVEN, FL 33880	59-3529279	501(c)(3)	0	9,489	FMV	Medical Supplies	ON-GOING

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WE CARE OF CENTRAL FLORIDA INC 205 FARNOL STREET SW WINTER HAVEN, FL 33880	59-3529279	501(c)(3)	0	12,706	FMV	Medical Supplies	EMERGENCY
WELLNESS TREE COMMUNITY CLINIC 173 MARTIN ST TWIN FALLS, ID 83301	26-1249939	501(c)(3)	0	1,338,979	FMV	Medical Supplies	ON-GOING

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WESLEY CHURCH HEALTH CENTER INC 410 S PITTSBURGH CONNELLSVILLE, PA 15425	25-1844565	501(c)(3)	0	189,234	FMV	Medical Supplies	ON-GOING
WESLEY HEALTH CENTER 1300 S 10TH ST PHOENIX, AZ 85034	86-0133770	501(c)(3)	0	534,807	FMV	Medical Supplies	ON-GOING

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WEST CALDWELL HEALTH COUNCIL INC 4330 COLLETTS COLLETTSVILLE, NC 286119000	59-1756933	501(c)(3)	0	264,006	FMV	Medical Supplies	ON-GOING
WEST FLORIDA COMMUNITY CARE CENTER 1221 W LAKEVIEW AVE PENSACOLA, FL 32501	59-3323051	501(c)(3)	0	175,749	FMV	Medical Supplies	ON-GOING

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WEST HAWAII COMMUNITY HEALTH CENTER 75-5751 KUAKINI HWY KAILUAKONA, HI 96740	20-0495394	501(c)(3)	0	864,191	FMV	Medical Supplies	ON-GOING
WESTCARE GULFCOAST FLORIDA INC 8800 49TH ST N PINELLAS PARK, FL 33782	59-3714627	501(c)(3)	0	15,255	FMV	Medical Supplies	ON-GOING

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WESTCARE TENNESSEE 207 W MAIN STREET DANDRIDGE, TN 37725	27-3702109	501(c)(3)	0	138,695	FMV	Medical Supplies	ON-GOING
WESTMINSTER FREE CLINIC 5560 Napoleon Ave Oak Park, CA 913601326	77-0563241	501(c)(3)	0	450,032	FMV	Medical Supplies	ON-GOING

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WHEELING HEALTH RIGHT INC 61-29TH ST WHEELING, WV 26003	31-1149085	501(c)(3)	0	6,608	FMV	Medical Supplies	EMERGENCY
WHEELING HEALTH RIGHT INC 61-29TH ST WHEELING, WV 26003	31-1149085	501(c)(3)	0	233,255	FMV	Medical Supplies	ON-GOING

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WHITEFOORD INC 1353 George W Brumley Atlanta, GA 30317	58-2180056	501(c)(3)	0	11,661	FMV	Medical Supplies	EMERGENCY
WHOLE FAMILY HEALTH CENTER 827 18TH ST VERO BEACH, FL 32960	65-0715258	501(c)(3)	0	26,532	FMV	Medical Supplies	ON-GOING

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WILL COUNTY COMMUNITY HEALTH CENTER (WCCHC) 1106 NEAL AVE JOLIET, IL 604332548	36-3971168	501(c)(3)	0	397,455	FMV	Medical Supplies	ON-GOING
WILL-GRUNDY MEDICAL CLINIC 213 EAST CASS STREET JOLIET, IL 60432	36-3492306	501(c)(3)	0	81,080	FMV	Medical Supplies	ON-GOING

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WILLING HELPERS MEDICAL INC POB 2508 COVINGTON, GA 30015	56-2602392	501(c)(3)	0	95,943	FMV	Medical Supplies	ON-GOING
WOFCC HOPE CLINIC 609 WEST AVENUE E ELK CITY, OK 73644	26-1284785	501(c)(3)	0	241,357	FMV	Medical Supplies	ON-GOING

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WOLVERINE STREET MEDICINE 2582 DEAKE AVE ANN ARBOR, MI 48108	38-6006309	501(c)(3)	0	62,481	FMV	Medical Supplies	ON-GOING
WOVEN HEALTH 1 MEDICAL PARKWAY FARMERS BRANCH, TX 75234	75-2616002	501(c)(3)	0	796,567	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	183,502	FMV	Medical Supplies	ON-GOING
YALE NEW HAVEN HEALTH 20 York St New Haven, CT 06511	22-2529464	501(c)(3)	0	32,500	FMV	Medical Supplies	EMERGENCY

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YALE UNIVERSITY 25 Science Park New Haven, CT 06511	06-0646973	501(c)(3)	0	71,792	FMV	Medical Supplies	EMERGENCY
YOUR BEST PATHWAY TO HEALTH BENNY MOORE OOLTEWAH, TN 37363	81-3012737	501(c)(3)	0	155,387	FMV	Medical Supplies	ON-GOING

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MIGRANT HEALTH CENTER Calle Ramon E Betanecs Mayaguez, PR 00680	66-0427801	501(c)(3)	17,365				EMERGENCY
IBN Sina Foundation Inc 11126 S Wilcrest Drive Houston, TX 77099	76-0698464	501(c)(3)	9,000				ON-GOING

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America for the Arts 215 Lakeshore Park Road Boulder, CO 80302	32-0261204	501(c)(3)	9,000				EMERGENCY
Corporacion de Servicios Medicos Primarios 128 Ave Dr Susoni Hatillo, PR 00659	66-0427194	501(c)(3)	10,000				EMERGENCY

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Covenant House Texas Inc 1111 Lovett Boulevard Houston, TX 77006	76-0050882	Other	10,000				ON-GOING
Amistad Community Health Center Inc 1533 S BROWNLEE CORPUS CHRISTI, TX 78404	20-3008507	Other	10,000				ON-GOING

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Victoria County Public Health Department 2805 N Navarro Street Victoria, TX 77901	74-6002445	501(c)(3)	10,000				ON-GOING
TOMAGWA HealthCare Ministries 455 SCHOOL STREET TOMBALL, TX 77375	76-0280324	115	10,000				ON-GOING

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United Health Partners 3723 ROWLOCK VINE DR HOUSTON, TX 77084	61-1757254	501(c)(3)	10,000				ON-GOING
Stephen F Austin Community Health Center 1612 Callaway Dr Alvin, TX 77511	41-2273820	501(c)(3)	10,000				ON-GOING

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Casa El Buen Samaritano PO Box 20487 Houston, TX 77225	37-1546805	501(c)(3)	10,000				ON-GOING
S TX FAMILY PLANNING & HEALTH CORPORATION 4455 S PADRE ISL CORPUS CHRISTI, TX 78411	74-1728621	501(c)(3)	10,000				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
Chambers Community Health Centers Inc 200 Hospital Drive Anahuac, TX 77514	26-0223749	501(c)(3)	10,000				ON-GOING
Hope Medical Clinic Inc 150 Beach Drive Destin, FL 32541	26-3811078	Other	9,000				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
COMMUNITY VOLUNTEERS IN MEDICINE 300B LAWRENCE DRIVE WEST CHESTER, PA 19380	23-2944553	501(c)(3)	10,000				ON-GOING
Community Free Clinic 249 Mill Street Hagerstown, MD 21740	52-1772594	501(c)(3)	10,000				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
Mercy Health Center 700 Oglethorpe Ave Athens, GA 30606	58-2603523	501(c)(3)	10,000				ON-GOING
RAPHAEL COMMUNITY FREE CLINIC INC 1807 WATER STREET KERRVILLE, TX 78028	74-2819628	501(c)(3)	10,000				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
THE TEXAS INTL INSTITUTE OF HEALTH PROFESSIONS 8121 BROADWAY STREET HOUSTON, TX 77061	46-1267820	501(c)(3)	10,000				ON-GOING
SAN JOSE CLINIC 2615 FANNIN ST HOUSTON, TX 77002	76-0373703	501(c)(3)	10,000				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
Easter Seals of Greater Houston 4888 Loop Central Houston, TX 77081	74-1238418	501(c)(3)	10,000				EMERGENCY
On Eagle's Wings Inc 1 Medical Pkwy Farmers Branch, TX 75234	75-2616002	501(c)(3)	10,000				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
Insight Outreach Inc 62-3a Estate Thomas St St Thomas, VI 00802	66-0929544	501(c)(3)	73,346				EMERGENCY
Centro de Servicios Primarios GUILLERMO RIEFKHOL 99 PATILLAS, PR 00723	66-0430826	501(c)(3)	24,960				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
Lutheran Social Services of the Virgin Islands In 516B Hospital Street Frederiksted, VI 00840	67-0250807	501(c)(3)	81,932				EMERGENCY
CATHERINES HEALTH CENTER 1211 LAFAYETTE AVE GRAND RAPIDS, MI 49505	20-3572418	501(c)(3)	100,000				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
MALIHEH FREE CLINIC 941 E 3300 S SALT LAKE CITY, UT 84107	20-2313461	501(c)(3)	25,000				ON-GOING
PEDIPLACE 502 S OLD ORCHARD L LEWISVILLE, TX 75067	75-2512752	501(c)(3)	100,000				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
Christ Clinic 25722 Kingsland Blvd Katy, TX 77494	90-0789318	501(c)(3)	100,000				ON-GOING
HEAL THE CITY 609 S CAROLINA AMARILLO, TX 79106	46-5694050	501(c)(3)	100,000				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
AVICENNA FREE CLINIC 1838 FRANKFORD AVE PANAMA CITY, FL 32405	82-2554695	501(c)(3)	155,706				ON-GOING
ORCHARD HOSPITAL 240 Spruce Street Gridley, CA 95948	94-1049467	501(c)(3)	160,000				EMERGENCY

Schedule J (Form 990)	Compensation Information	OMB No. 1545-0047
		2019
		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. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.	
Name of the organization AMERICARES FOUNDATION INC		Employer identification number 06-1008595

Part I Questions Regarding Compensation		Yes	No
1a 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.			
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on 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		1b	
2 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 on Line 1a?		2	
3 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.			
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract		
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 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:			
a Receive a severance payment or change-of-control payment?		4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b	Yes
c Participate in, or receive payment from, an equity-based compensation arrangement?		4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 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:			
a The organization?		5a	No
b Any related organization?		5b	No
If "Yes," on line 5a or 5b, describe in Part III.			
6 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:			
a The organization?		6a	No
b Any related organization?		6b	No
If "Yes," on line 6a or 6b, describe in Part III.			
7 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.		7	Yes
8 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.		8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9	

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.

[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 4b	President & CEO, Michael J. Nyenhuis, participates in a Section 457(f) plan. The Foundation contributed \$28,350 into Mr. Nyenhuis' Section 457(f) plan in calendar year 2019. Upon voluntarily ceasing employment with Americares in March 2020, Mr. Nyenhuis forfeited his Section 457(f) plan balance. No other Americares employees participate in this plan and so the plan was terminated. SCHEDULE J, PART I, LINE 7 President & CEO, Michael Nyenhuis, received a discretionary bonus in calendar year 2019 for exceeding certain performance-based objectives established by the Compensation Committee. The determination to issue a bonus is based on a recommendation by the Compensation Committee to the full Board, for Board approval. 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				
1 Jenny Goldstein as of 03/2020 SVP & Chief Development Offic.	(i)	165,514	0	0	10,350	41,324	217,188	0
	(ii)	0	0	0	0	0	0	0
1 Kevin Gilrain Senior V.P., Human resources	(i)	220,581	0	0	13,440	28,766	262,787	0
	(ii)	0	0	0	0	0	0	0
2 Rachel Granger V.P. Int'l Partnrshps&Programs	(i)	177,714	0	0	10,694	11,722	200,130	0
	(ii)	0	0	0	0	0	0	0
3 Vish Jain VP Information Technology	(i)	167,962	0	0	10,068	600	178,630	0
	(ii)	0	0	0	0	0	0	0
4 Martha kennard VP, Global Prog Ops	(i)	145,785	0	0	8,701	600	155,086	0
	(ii)	0	0	0	0	0	0	0
5 Geoff Kneisel V.P., Corporate Relations	(i)	134,688	0	0	8,441	40,428	183,557	0
	(ii)	0	0	0	0	0	0	0
6 Diana Maguire V.P., Institutional Relations	(i)	155,950	0	0	9,579	41,546	207,075	0
	(ii)	0	0	0	0	0	0	0
7 Michael J Nyenhuis President/CEO (Thru 03/2020)	(i)	408,323	30,000	0	45,150	16,283	499,756	0
	(ii)	0	0	0	0	0	0	0
8 E Anne Peterson MD MPH SVP Global Prog (Thru 06/2020)	(i)	250,143	0	0	15,194	15,219	280,556	0
	(ii)	0	0	0	0	0	0	0
9 Jed Selkowitz CMO & SVP, COMMUNICATIONS	(i)	265,075	0	0	15,735	1,049	281,859	0
	(ii)	0	0	0	0	0	0	0
10 Christine Squires President/CEO (as of 03/2020)	(i)	314,627	0	0	16,351	38,844	369,822	0
	(ii)	0	0	0	0	0	0	0
11 Richard K Trowbridge Jr CFO, Treasurer, SVP, GIK Ops	(i)	265,442	0	0	16,351	40,314	322,107	0
	(ii)	0	0	0	0	0	0	0
12 Julie Varughese VP Tech Unit and CMO	(i)	161,836	0	0	10,068	6,744	178,648	0
	(ii)	0	0	0	0	0	0	0
13 susan Willett Sr. Director, Controller	(i)	168,503	0	0	10,043	3,660	182,206	0
	(ii)	0	0	0	0	0	0	0
14 Megin Wolfman SVP & COS (as of 04/2020)	(i)	136,805	0	0	8,400	34,741	179,946	0
	(ii)	0	0	0	0	0	0	0
15 Melissa Woolford V.P., Leadership Gifts	(i)	158,286	0	0	9,310	1,255	168,851	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
►Attach to Form 990.
►Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
AMERICARES FOUNDATION INC

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	117	1,482,755	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	198,672	98,343	cost/wholesale price
20 Drugs and medical supplies	X	28,869,894	1,359,643,252	COST/WHOLESALE PRICE
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>HYGIENE ITEMS</u>)	X	1,543,117	4,073,639	COST/WHOLESALE PRICE
26 Other ► (<u>Apparel</u>)	X	166,660	2,954,495	COST/WHOLESALE PRICE
27 Other ► (<u> </u>)				
28 Other ► (<u> </u>)				

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

67

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 isn't required to be used for exempt purposes for the entire holding period?

30a

Yes

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 didn't 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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

**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 subject to a detailed review by the Chief Financial Officer and Americares Legal Counsel prior to its submission to the Audit Committee. 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.

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. AmeriCares has a Compensation Committee in place that determines the President & CEOs compensation based on compensation survey results conducted by an independent third party consultant. With the onboarding of a new President & CEO, Americares commissioned a fresh compensation study in October of 2020 to align compensation with the current market. The Compensation Committee of the Board of Directors ultimately ratified the President and CEOs compensation. For all other individuals reported on the 990 (as well as all Americares staff), the President & Chief Executive Officer, in consultation with the Chief Financial Officer, determines compensation utilizing available market data, salary survey results and other available tools to substantiate decisions. Americares, likewise, commissioned a separate compensation study in October of 2020 to cover all staff.</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 www.guidestar.org . 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 (\$359,624) ----- TOTAL ADJUSTMENTS for LINE 9 (\$359,624)

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.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

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	
(2)Americares Foundation Tanzania Ekacliff Build 2nd Fl Isamilo Plot Block D Balewa Rd, MWANZA TZ	Relief/Aid	TZ			Americares	Yes	
(3)Americares Limited 4 Henderson Street Development House Fl Room, Blantyre MI	Relief/Aid	MI			Americares	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
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b Gift, grant, or capital contribution to related organization(s)	Yes	
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)	Yes	
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o Sharing of paid employees with related organization(s)	Yes	
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		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	1,253,196	fmv (goods)
(2)AMERICARES FREE CLINICS INC	Q	140,231	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).

Return Reference	Explanation