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DLN: 93493012014645

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013 cal	lendar year, or tax year beginnin	g 07-01-2013 , 2013, and ending 06	5-30-2014			
		pplicable	C Name of organization AmeriCares Foundation Inc			D Emplo	yer ider	itification number
	ress ch	_	Doing Business As	06-10	06-1008595			
∏ Na	me cha	inge	boiling business to					
Ini	ial retu	ırn		nail is not delivered to street address) Room	/suite	E Telepho	ne numl	per
Te	mınate	ed	88 HAMILTON AVENUE Suite			(203)	658-9	500
☐ Am	ended	return	City or town, state or province, cou STAMFORD, CT 069023111	ntry, and ZIP or foreign postal code		(2007)		
Г Ар	olication	n pending				G Gross r	eceıpts \$	574,809,083
			F Name and address of pri	ncıpal officer		s this a group	return	for
			Michael J nyenhuis 88 HAMILTON AVENUE		S	subordinates?		┌ Yes ┌ No
			STAMFORD,CT 06902		H(b) /	Are all subordi	nates	┌ Yes ┌ No
	v ovor	npt status	[[[[[[[[[[[[[[[[[[[(insert no)		ncluded?	a liat	()
		<u> </u>		Insert no) 4947(a)(1) or 527	_	ir No, attach	a iist	(see instructions)
J W	ebsite	e:► WV	VW AMERICARES ORG		H(c)	Group exempt	ion nun	nber 🟲
		ganızatıon	Corporation Trust Association	on Cother ►	L Year	of formation 19	79 M	State of legal domicile CT
Pa	rt I	Sum	nmary					
			lescribe the organization's missi					
			•	IEALTH & disaster relief ORGANIZA PEOPLE IN NEED AROUND THE W			MEDIC	INES, MEDICAL
<u>ခို</u>								
Ξ	.							
Governance	2	———— Check tl	his box 🛏 if the organization di	scontinued its operations or dispose	d of more th	nan 25% of its	net as:	sets
			, ,					
Activities &	3	Number	of voting members of the govern	ning body (Part VI, line 1a)			3	18
Ħ.	I			of the governing body (Part VI, line 1			4	17
<u> </u>	I			calendar year 2013 (Part V, line 2a)			5	136
ď	I		·	necessary)			6	44
	I			art VIII, column (C), line 12			7a	0
	Ь	Net unre	erated business taxable income i	rom Form 990-T, line 34		Drior Voor	7b	Current Veer
	8	Contr	ubutions and grants (Part VIII II	ne 1 h)		Prior Year 620,146,4	174	Current Year 558,924,455
₫	9			ine 2g)		655,4		727,259
Revenue	10	_	·	n (A), lines 3, 4, and 7d)		1,004,219		659,678
æ	11			lines 5, 6d, 8c, 9c, 10c, and 11e)		44,7		-65,292
	12			(must equal Part VIII, column (A),	line			
	4.0					621,850,8		560,246,100
	13			IX, column (A), lines 1-3)		590,735,2	0	521,176,478
	14			IX, column (A), line 4) ee benefits (Part IX, column (A), line				0
\$	15	5-10		ee benefits (Fart 1X, Column (A), fine	5	13,080,	160	13,920,999
Expenses	16a	Profes	ssional fundraising fees (Part IX	, column (A), line 11e)		108,4	150	700,481
ੜੇ	ь	Total fu	undraising expenses (Part IX, column (E	9), line 25) - 9,159,609	_			
	17	Other	expenses (Part IX, column (A),	56,236,6	56,236,621 28			
	18	Total	expenses Add lines 13-17 (mu	st equal Part IX, column (A), line 25)	660,160,4	192	564,795,170
	19	Reven	nue less expenses Subtract line	18 from line 12		-38,309,6		-4,549,070
Not Assets or Fund Balances					Begi	nning of Curre Year	nt	End of Year
tege Seas	20	Total	assets (Part X, line 16)			125,441,2	206	121,747,672
A.A.s.	21					10,295,9	_	10,372,148
žŽ	22		ssets or fund balances Subtract			115,145,2	245	111,375,524
Pa	rt II	Sign	nature Block		•			
				amined this return, including accomp				
			nowledge	. ,				
		T _k				1		
۵.		**** Sign:	*** ature of officer			2015-01-06 Date		
Sigr Her],				Dute		
	_		am S Post Vice President, Treasurer e or print name and title					
			Print/Type preparer's name	Preparer's signature	Date	Check If	PTIN	
		[9	Scott Thompsett			self-employed	P00741	490
Pai	d	⊢	F b. op			F		
	d pare		Firm's name F GRANT THORNTON LL	P		Firm's EIN ►		

NEW YORK, NY 100172013

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

✓ Yes No

	0 (2013)	Page 2
Part	I Statement of Program Service Accomplishments Check If Schedule O contains a response or note to any line in this Part III	<u>.[~</u>
1	riefly describe the organization's mission	
crisis frontlii delive prepai	res is an emergency response and global health organization committed to saving lives and building healthier futures for peop the United States and around the world Every day, AmeriCares puts critically needed medicines and supplies in the hands of health workers and develops innovative, sustainable health improvements in their communities. We are the leading nonprofit if g donated medicines and medical supplies to health programs around the world. We leverage this core competency with emerginess, response and recovery efforts and evidence-based programs that improve health outcomes. Since we began operations meriCares has provided more than \$11 billion in aid to people in 164 countries.	or jency
	d the organization undertake any significant program services during the year which were not listed on prior Form 990 or 990-EZ?	o
3	d the organization cease conducting, or make significant changes in how it conducts, any program rvices?	lo
4	'Yes," describe these changes on Schedule O scribe the organization's program service accomplishments for each of its three largest program services, as measured by penses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, e total expenses, and revenue, if any, for each program service reported	
4a	Code) (Expenses \$ 412,155,712 including grants of \$ 384,448,047) (Revenue \$ 0) ur Global Health programs are our largest expense by far In FY14, AmeriCares Global Health programs donated enough medicine to fill 9 2 million prescri	
	ell as 22 9 million units of medical supples, for people in need in 95 countnes. We worked to expand and restore health services following disaster and ce sting improvements in health care provision. Collaborating with partners, in FY14 we mixest §10.11 million of new find 12P health projects in 32 count in directly benefit an estimated 17 million individuals. Emergency preparedness, response and recovery. Americans esponded to 37 9 million in add for victims of introduced recovery work in six countries and supported disaster preparation projects in 12 countries. In Introd. we provided 37 9 million in ord for victims of recovery and the second of the s	tries that tries, natural sive and y \$19 plies to by torm-lealth alth as 0 in included as May ospital's t the ems afters full c, fully down and and ment at to ons case e tress of provide lives to your provide lives to you would nate that at of this he ow ealth ence of piect to proced to you would nate that at of this he one of piect to
4b	(135,401,792) (Revenue \$ 0) (Expenses \$ 137,817,626 including grants of \$ 135,401,792) (Revenue \$ 0)	acies en PAP who
4c	Code) (Expenses \$ 1,546,207 including grants of \$ 1,326,638) (Revenue \$ 1,576,789)	
~	its 11th year of operation, AmeriCares El Salvador clinic provided health care to 26,710 patients who made a total of 76,039 visits to the facility. The clinic as a robust health education program. During FY14, the clinic developed 32 health education programs, benefiting a total of 48,326 patients and family may addition, the clinic worked with 96 communities to proactively identify their health care priorities, and work to improve the collective health status of the those communities. In all, these activities represented 9,294 families, and reached a total of 55,764 individuals. Clinical Integral de Familiar is the first clinically and provided at lowest cost relative to other regional clinics and is the only primary care clinic in El Salvador to offer mammography services. Diagnographic provided at lowest cost relative to other regional clinics and is the only primary care clinic in El Salvador to offer mammography services. Diagnographic provided chemistry, hematology and ultrasound, resulting in fast, quality reports at a cost that is accessible to our patient population and colpose revices to support early detection, diagnosis and treatment of women's health conditions. Visual health services are part of routine care. The clinic engaged everal infrastructure improvements in FY14, including acquisition of land (\$175,000), expansion of parking area (\$39,936) and expansion of educational greas (\$30.542). Acquisition of land secures AmeriCares ability to expand the clinic facilities in the years to come. Currently, it affords an increase in parking area.	embers families nic in El ble stic copy in athering

areas (\$30,542) Acquisition of land secures Americares ability to expand the clinic facilities in the years to come. Currently, it affords an increase in parking capacity, which improves access and convenience for patients and employees. Additionally, expansion of the educational areas allows for greater capacity for staff and committee meetings, and community training and service programs. The clinic takes a leading role in the care and prevention of chronic non-communicable diseases such as hypertension and diabetes mellitus. In FY14, C1AF launched a program to advance the management of NCDs at the clinic and in the Ministry of Health system, starting with diabetes and hypertension. In FY14, the clinic completed a study of broad-based health outcomes of 2,500 patients to inform the program design, identify strengths and areas for improvement in clinical services, and support decision-making, education of the patient, and the participation of the community. Our clinic also services as distribution hub for donations to other health and social service institutions in El Salvador. In the course of FY14, we provided 231 institutions and communities with donations totaling \$1,061,172. We also used donated medical supplies totaling \$113,083 directly at the clinic, which represents approximately 10 percent of our donated inventors. Our network included 21 health institutions across 21 municipalities. 29 social service institutions. regulations are monitored by El Salvador's Department of Labor

Other program services (Describe in Schedule O)							
	(Expenses \$	including grants of \$) (Revenue \$)			
l e	Total program service expenses	551,519,545					

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		Νo
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		N o
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	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^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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			
а	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
е	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		Νο
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	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) and 501(c)(4) 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? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			1
	IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
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? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	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)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

- (-	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. ▽ No
la	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 65		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
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.			
L	2) 1110 1014111 1 1 1 1 1 1 1 1 1 1 1 1 1			
D	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	
a	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		
la	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 🕨 HA , ES , CE , JA , IN			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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		
,	Organizations that may receive deductible contributions under section 170(c).	OD		
	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	
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to		103	
	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	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
				INC
y	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		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
a	Did the organization make any taxable distributions under section 4966?	9a		
_	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
b		טפ		
_	Section 501(c)(7) organizations. Enter Instruction foce and constal contributions included on Part VIII. Inc. 12			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
D	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
ט	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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		
	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14h		l

Form 990 (2013) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. 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 18 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 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo $\hbox{supervision of officers, directors or trustees, or key employees to a management company or other person? \quad .}$ Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Νo Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Nο Νo Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Νo Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Νo Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes **b** Each committee with authority to act on behalf of the governing body? Yes Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Νo **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing Yes 11a

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 Yes 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c Yes 13 Yes 14 Did the organization have a written document retention and destruction policy? 14 Yes 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 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 Νo **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

Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed▶AL , AK , AZ , AR , CA , CO , CT , DC , FL , GA , HI , IL , KS , KY , LA , ME , MD , MA , MI , MN , MS , MO , NH , NJ , NM , NY , NC , ND , OH , OK , OR , PA , RI , SC , TN , UT , VA , WA , WV , WI
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

 V Own website. Another's website. Upon request. Other (explain in Schedule O)
 - 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, physical address, and telephone number of the person who possesses the books and records of the organization ►GARY L LEEDS VP CFO 88 HAMILTON AVENUE STAMFORD, CT 06902 (203) 658-9500

Form 990	(2013)	
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Part VII 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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(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

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

	(A) Name and Title	Name and Title A verage hours per more than one box, unless com week (list person is both an officer any hours and a director/trustee) organ							(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	С	(F) Estima nount of ompens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		ganızatı relate organıza	ed b
1b	Sub-Total						•	ŀ					
c d	Total from continuation sheet Total (add lines 1b and 1c).	s to Part VII, S	ection A	٠.	•	•	•	*	3,105,848	()		522,515
2	Total number of individuals (in	cluding but not	· ·	to the	se l	ıste	d abov	e) w	<u> </u>		1		322,313
	\$100,000 of reportable compe							,					
												Yes	No
3	Did the organization list any fc on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee,	or highest compen	sated employee	3		No
4	For any individual listed on line organization and related organ	e 1a, is the sum	of repo	rtable	e co						-		110
	ındıvıdual			•	•	•	• •	•			4	Yes	
5	Did any person listed on line 1 services rendered to the organ									or individual for	5		No
Se	ction B. Independent Co	ntractors											
1	Complete this table for your five compensation from the organization	e highest comp										av vear	
	compensation from the organiz	(A)	, in pens	4 (1011	101		arenue	ai ye	ar ending with or wi	(B)	T	(C	

(B) Description of services	(C) Compensation
FUNDRAISING	665,128
Fund raising	453,291
event planning	295,786
Fundraising	284,251
fundraising	270,386
	· · ·

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 ►7

Other Revenue	

Form 99								Page 9
Part V	/	Statement o Check if Schedu	f Revenue ule O contains a respons	se or note to any lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
- L	1a	Federated camp	paigns 1a	179,126				
Gifts, Grants ilar Amounts	ь	Membership du	es 1b					
Ğ.	С	Fundraising eve	ents 1c	1,952,439				
iffs, ar A	d	Related organiz	ations 1d					
s, e	e	Government grants	s (contributions) 1e					
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and 1f ot included above	556,792,890				
를 를	g	Noncash contribution 1a-1f \$	ons included in lines	528,226,272				
Con	h	Total. Add lines	s 1a-1f		558,924,455			
				Business Code				
enui	2a	EL SALVADOR PATI	ENT VISIT REVENUE	621400	661,008	661,008		
Fe∢	ь	EL SALVADOR CAFE	ETERIA INCOME	900099	62,009			62,009
921	С	EL SALVADOR MISC	CELLANEOUS INCOME	900099	4,242			4,242
Ser.	d							
E	e	• 11 • 11						
Program Serwoe Revenue	f	All other progra	am service revenue					
	g 3		s 2a – 2f		727,259			
			ome (including dividend ar amounts)		670,734			670,734
	4		tment of tax-exempt bond p	roceeds .	0			
	5	Royalties	() P1	(u) Paraanal	0			
	6a	Gross rents	(ı) Real 177,852	(II) Personal				
	ь	Less rental	166,444					
	c	expenses Rental income	11,408	0				
	d	or (loss) Net rental incor	ll me or (loss)		11,408			11,408
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	13,238,510					
	ь	Less cost or other basis and	13,249,566					
	_	sales expenses Gain or (loss)	-11,056					
	c d		s)		-11,056			-11,056
enne	8a	Gross income fi events (not incl \$1,952,	rom fundraising luding ,439	·				
Other Revenue		See Part IV, lin	a	104,390				
₹	b c		penses b [loss) from fundraısıng e	493,400 vents -	-389,010			-389,010
	9a		rom gaming activities le 19	· .				
	ь	less direct evi	a penses b					
			(loss) from gaming activ	ities	0			
	10a	Gross sales of i						
			a	885,085				
			oods sold b	653,573	231,512			231,512
		Miscellaneous	(loss) from sales of inve	Business Code	231,512			231,512
	11a	MISCELLANEC		900099	80,798			80,798
	ь							
	С							
	d	All other revenu	ue					
	е	Total. Add lines	s 11a-11d	🕨	80,798			
	12	Total revenue.	See Instructions	<u>· · · ·</u> ▶	560,246,100	661,008		660,637

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 (D) (B) Do not include amounts reported on lines 6b, (A) Program service Management and Fund raising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 87,290,057 87,290,057 Grants and other assistance to individuals in the United States See Part IV, line 22 137,184,159 137,184,159 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 296,702,262 296,702,262 Benefits paid to or for members Compensation of current officers, directors, trustees, and 2,991,611 1,339,586 671,062 980.963 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 8,173,328 4,488,907 1,727,400 1,957,021 Pension plan accruals and contributions (include section 401(k) 385,271 250,626 49,236 85,409 and 403(b) employer contributions) 1,640,928 262,108 Other employee benefits . 869,404 509,416 10 Payroll taxes 729,861 449,325 102,584 177,952 11 Fees for services (non-employees) 796,983 701,250 23,748 Management 71,985 11,145 10,912 233 Legal Accounting 166,390 16,390 150,000 O Lobbying Professional fundraising services See Part IV, line 17 700,481 700,481 Investment management fees 42,528 42,528 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 953,760 140,804 175,594 637,362 Schedule O) Advertising and promotion . 1,391,301 32,797 1,358,070 12 434 13 Office expenses . . . 93,146 62,300 12,158 18,688 14,986 170,470 14 Information technology . 677,314 491,858 15 0 Royalties . 2,007,819 202,037 333,375 16 Occupancy 1,472,407 **17** 1,039,915 742,533 69,566 227,816 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 19 Conferences, conventions, and meetings . 49,109 46,382 410 2,317 20 0 Payments to affiliates 0 21 22 Depreciation, depletion, and amortization . 487,174 283,065 72,331 131,778 23 282,911 89,936 122,560 70,415 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 INVENTORY WRITE-OFF 15,008,192 15,008,192 POSTAGE AND FREIGHT 4,988,016 3,932,481 9,141 1,046,394 C MISCELLANEOUS 1,001,509 358,160 285,040 358,309 d All other expenses е Total functional expenses. Add lines 1 through 24e 25 564,795,170 551,519,545 4.116.016 9,159,609 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 ► [if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Cash-non-interest-bearing Beginning fyear End year	Pai	rt X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
2 Savings and temporary cash investments						
3 Pledges and grants receivable, net 986,07 3 2,038,185		1	Cash-non-interest-bearing	3,402	1	1,126
4 Accounts receivable, net 74,150		2	Savings and temporary cash investments	4,677,871	2	7,275,506
S Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		3	Pledges and grants receivable, net	996, 107	3	2,038,186
Rever pulse		4	Accounts receivable, net	89,504	4	74,190
1		5	key employees, and highest compensated employees Complete Part II of	0	F	0
Section Sect	s	6	section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees'		5	
Section Sect	ē			0	6	0
Section Sect	8	7	Notes and loans receivable, net	0	7	0
10a	•	8	Inventories for sale or use	88,460,919	8	85,604,874
Part VI of Schedule D 10a 5,876,167 10b 2,821,765 3,176,967 10c 3,054,402 11 1,000 2,821,765 12 3,054,402 12 1,000 12 1,000 13 1,000 13 1,000 13 1,000 14 1,000 13 1,000 14 1,000 15 1,000 1,000 15 1,000		9	Prepaid expenses and deferred charges	559,400	9	801,693
11 Investments—publicly traded securities 23,724.016 11 18,947,667 12 170,280 13 10,280 13 10,280 13 10 13 10 13 10 13 10 13 10 13 10 14 10 15 10 14 10 15 15 15 15 15 15 15		10a				
12 Investments—other securities See Part IV, line 11 26.155 12 10.280 13 Investments—program-related See Part IV, line 11 0 13 0 14 Intangible assets 0 14 0 0 15 Other assets See Part IV, line 11 3.726,881 15 3.933,748 16 Total assets. Add lines 1 through 15 (must equal line 34) 125,441,206 16 121,747,672 17 Accounts payable and accrued expenses 5,144,420 17 5.363,917 18 Grants payable 3.342,743 18 2.339,639 19 Deferred revenue 0 19 439,863 19 Deferred revenue 0 20 0 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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 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 including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities. Add lines 17 through 25 10,295,981 26 10,372,148 27 Unrestricted net assets 70,294,534 27 67,525,632 28 Temporarily restricted net assets 40,437,681 28 39,224,758 29 Permanently restricted net assets 40,437,681 28 39,224,758 20 Total liabilities (in reliabilities (in reliabilities (in reliabilities (in reliabilities) 40,437,681 28 39,224,758 20 Total liabilities (in reliabilities		ь	Less accumulated depreciation 10b 2,821,765	3,176,951	10 c	3,054,402
13		11	Investments—publicly traded securities	23,724,016	11	18,947,667
14		12	Investments—other securities See Part IV, line 11	26,155	12	10,280
15		13	Investments—program-related See Part IV, line 11	0	13	0
16 Total assets. Add lines 1 through 15 (must equal line 34) 125,441,206 16 121,747,672		14	Intangible assets	0	14	0
17		15	Other assets See Part IV, line 11	3,726,881	15	3,939,748
18 Grants payable		16	Total assets. Add lines 1 through 15 (must equal line 34)	125,441,206	16	121,747,672
19 Deferred revenue		17	Accounts payable and accrued expenses	5,144,420	17	5,363,917
20 Tax-exempt bond liabilities		18	Grants payable	3,342,743	18	2,339,539
Secured mortgages and notes payable to unrelated third parties 1,808,798 25 2,228,729		19	Deferred revenue	0	19	439,963
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		20	Tax-exempt bond liabilities	0	20	0
Unsecured notes and loans payable to unrelated third parties	φ.	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Unsecured notes and loans payable to unrelated third parties	iii ie	22				
Unsecured notes and loans payable to unrelated third parties	qe		persons Complete Part II of Schedule L	0	22	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		23	Secured mortgages and notes payable to unrelated third parties	0	23	0
and other liabilities not included on lines 17-24) Complete Part X of Schedule D		24	Unsecured notes and loans payable to unrelated third parties	0	24	0
26 Total liabilities. Add lines 17 through 25		25	and other liabilities not included on lines 17-24) Complete Part X of Schedule			
Organizations that follow SFAS 117 (ASC 958), check here F and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets				· · · · ·		
lines 27 through 29, and lines 33 and 34. 27 67,525,632 28 Temporarily restricted net assets		26		10,295,961	26	10,372,148
30 Capital stock or trust principal, or current funds	У ФО		- · · · · · · · · · · · · · · · · · · ·			
30 Capital stock or trust principal, or current funds	GD.	27	Unrestricted net assets	70,294,534	27	67,525,632
30 Capital stock or trust principal, or current funds	<u>8</u>	28	Temporarily restricted net assets	40,437,661	28	39,224,758
30 Capital stock or trust principal, or current funds	몯	29	Permanently restricted net assets	4,413,050	29	4,625,134
30 Capital stock or trust principal, or current funds	r Fur		- · · · · · · · · · · · · · · · · · · ·			
31 Paid-in or capital surplus, or land, building or equipment fund	9	30			30	
33 Total net assets or fund balances	Ř	31			31	
33 Total net assets or fund balances	ΑS	32			32	
34 Total liabilities and net assets/fund balances	ቑ	33	Total net assets or fund balances	115,145,245	33	111,375,524
	Z	34	Total liabilities and net assets/fund balances	125,441,206	34	121,747,672

Par	Reconcilliation of Net Assets Check 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)			F.C.O. 1	.46.400
2	Total expenses (must equal Part IX, column (A), line 25)	1		560,2	246,100
-		2		564,7	795,170
3	Revenue less expenses Subtract line 2 from line 1	3		-4,5	549,070
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		115,:	145,245
5	Net unrealized gains (losses) on investments	5		7	759,853
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			19,496
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		111,3	375,524
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed or	1		
	Separate basis Consolidated basis Both consolidated and separate basis				
ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	it of th	1e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	า			
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?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Software ID: Software Version:

EIN: 06-1008595

Name: AmeriCares Foundation Inc

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inde	pendent Cor		rs			-	-	1	I	
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th perso and a	ion (e nan o n is b	ne b oth ctor/	ox, u an of trus	inless fficer tee)		(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,1033 111307	2/1033 11130/	related organizations
Elizabeth P Allen	1 0	х						0	0	
Carol B Bauer	1 0	X						0	0	
Director Elizabeth F Frank	1 0	×						0	0	
Director C Robert Henrikson	1 0									
Director John L Kelly	1 0	X						0	0	
Director (thru 6/26/2014)		Х						0	0	
Paul J Kuehner Director	1 0	х						0	0	
Jerry P Leaman Director	1 0	х						0	0	
Robert G Leary Director	1 0	х						0	0	
Alma Jane Macauley	1 0	х		х				0	0	
Vice Chairman C Dean Maglaris	1 0	X		Х				0	0	
Chairman Robert Baylis	1 0	X						0	0	
Director Beverly L Schuch	1 0	X						0	0	
Director Fred Weisman	1 0									
Director Stephen Winter MD	1 0	X						0	0	
Director (thru 6/26/2014) Joseph J Rucci Jr	1 0	X						0	0	
Director and Secretary	10	Х		Х				0	0	
Curtis R Welling President & CEO (thru 1/14)	40 0	x		х				276,110	0	44,461
Michael J Nyenhuis President & CEO (as of 1/14)	40 0	х		х						
Samhita Jayanti Director	1 0	Х						0	0	
Keith McAllister	1 0	х						0	0	
Director Alan Rwambuya	1 0	Х						0	0	
Director Stephen Sadove	1 0	X						0	0	
Director Kevin Allan	40 0			.,						2
Senior V P , Development Kevin Gilrain	40 0			Х				192,785		30,536
Senior V P , Human resources Rachel Granger				Х				172,649		29,736
V P - post Emergency Response	40 0			х				134,551		16,515
Ella Gudwin SR V P - Strategy & Prgm Dev	40 0			х				154,482		42,791
	_								-	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Inde					J.C.	, I	·c y	Employees, mg.	iest	
(A) Name and Title	Name and Title A verage hours per week (list any hours and a director/trustee) A verage hours 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				
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former			related organizations
Garrett Ingoglia	40 0			х				125,357		17,657
V P - Emergency Response Geoff Kneisel								·		
V P - Corp Relations	40 0			х				110,027		34,832
Gary Leeds	40 0			х				153,948		31,463
Vice President/CFO										·
Diana Maguire V P - Institutional Relations	40 0			х				126,030		11,517
William Post	30 0			х				91,612		8,298
Vice President - Treasurer	10.0									_
Katherine Sears Senior V P Global Program Op	40 0			х				221,763		34,088
Carol Shattuck Senior V P - Communications	40 0			х				180,508		32,333
Lee Weiner V P - Direct Response	40 0			х				133,090		26,519
Adam Zayan V P - Global Partnerships	40 0			х				146,874		38,430
Andrea Vakos V P , Individual Philanthropy	40 0			х				108,497		40,300
Melissa Woolford V P , Leadership Gifts	40 0			х				118,297		7,549
Martha kennard	40 0			х				111,116		7,185
VP, operations Frank Bia	40 0									
Medical Director	100					х		183,507		41,521
Leslie Gianelli Director Communications	40 0					х		128,242		18,901
Steve Bardos	40 0					х		129,100		
IT Specialist peter tokarczyk	40 0					х		107,303		7,883
Director, logistics										

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As Filed Data -

DLN: 93493012014645

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

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. ▶ See separate instructions.

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

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of the organization AmeriCares Foundation Inc Employer identification number

06-1008595

The o	rganız	zation is	not a privat	te foundation becaus	eıtıs (Forl	ınes 1 throu	ıgh 11, check	only one b	ox)				
1	Γ		•	ion of churches, or as				ection 170(l	b)(1)(A)(i).				
2	Γ	A scho	ol described	d in section 170(b)(1	.)(A)(ii). (At	tach Sched	ule E)						
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	zatıon descr	ıbed ın sectio	n 170(b)(1)	(A)(iii).				
4	Γ			h organization operat	ed in conjun	ction with a	hospital des	cribed in se c	ction 170(b)(1)(A)(iii). Ente	r the	
5	Г			ity, and state erated for the benefit	t of a college	or universi	ty owned or o	perated by	a government	tal unıt	describe	d ın	_
		_	•	(A)(iv). (Complete P	_		•	. ,					
6	Γ	A feder	al, state, or	local government or	government	tal unit desc	rıbed ın secti	on 170(b)(1	L)(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				described in section									
9	ı	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross											
		•		rities related to its ex	•	-		• •	• •				
		-	-	oss investment inco				=		tax) fro	m busine	esses	
	_	•	,	ganızatıon after June	•			•	•				
10	<u> </u>	_		ganized and operated	•								
11	ı	one or the box	more public that descri	ganized and operated ly supported organizables bes the type of supp b Type II c	ations descr o <u>rti</u> ng organ	ibed in sect ization and (ion 509(a)(1 complete line) or section s 11e th <u>ro</u> u	509(a)(2) S gh 11h	ee sect	ion 509(a)(3).	Check
e f g	Γ	other the section of the ocheck the Since A	han foundati n 509(a)(2) rganization this box August 17, 2	ox, I certify that the ion managers and oth received a written do 2006, has the organi	ner than one	or more pub	S that it is a	ed organiza	tions describ e II, or Type	ed in se	ection 50	9(a)(:	1) or
			ng persons? erson who d	rectly or indirectly o	ontrols eith	er alone or i	together with	nersons de	scribed in (ii)	١		Yes	No
		. , .		governing body of th	•		-	persons de	seribed iii (ii)	•	11g(i)	1 63	140
		•		er of a person descri		3	.,				11g(ii)		
			•	lled entity of a perso			above?				11g(iii)		
h				ng information about		., .,							<u> </u>
		1 10114		ng mormation about	спо зарроте.	ou organizat							
SI	uppor	orted organization organization collines 1 - 9 above yoor IRC section (see			(iv) Is to organization col (i) listo your gove docume	ion in ted in rning	(v) Did you the organi in col (i) o suppor	zation of your	organizat col (i) org	(vi) Is the organization in col (i) organized in the US?			nount of etary port
				instructions))	Yes	No	Yes	No	Yes	No			

instructions

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 fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (f) Total beginning in) 🕨 1 Gifts, grants, contributions, and membership fees received (Do 794,563,561 662,889,899 524,509,518 620,146,474 558,924,455 3,161,033,907 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit O to the organization without charge 794,563,561 662,889,899 524,509,518 620,146,474 558,924,455 3,161,033,907 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 975,464,881 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 2,185,569,026 from line 4 Section B. Total Support Calendar year (or fiscal year (d) 2012 (e) 2013 (a) 2009 **(b)** 2010 (c) 2011 (f) Total beginning in) 🟲 620,146,474 Amounts from line 4 794,563,561 662,889,899 524,509,518 558,924,455 3,161,033,907 Gross income from interest, dividends, payments received on securities loans, rents, 707,762 1,089,351 1,061,594 985,301 848,586 4,692,594 rovalties and income from sımılar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 699,307 819,265 1,015,201 965,349 1.070.273 4,569,395 capital assets (Explain in Part IV) 11 Total support (Add lines 7 3,170,295,896 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 68 939 % Public support percentage for 2012 Schedule A, Part II, line 14 15 66 182 % 16a 33 1/3% support test—2013. 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 b 33 1/3% support test - 2012. 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 17a 10%-facts-and-circumstances test - 2013. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 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

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") 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						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	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) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).										
	Facts And Circumstances Test									
Retu	Return Reference Explanation									
		Schodulo A / Form 0	000 er 000 E7) 201							

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493012014645

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990) Open to Public

Supplemental Financial Statements

tema	al Revenue Service	and its instruct	ions is at <u>www.irs.gov/form990</u> .		Inspect	ion
	me of the organi			Employer identific	cation numbe	<u> </u>
Am	neriCares Foundation	Inc		06-1008595		
Pā	art I Organi	izations Maintaining Donor Adv	vised Funds or Other Similar F		ts. Complet	e if the
	organiz	ation answered "Yes" to Form 990				
			(a) Donor advised funds	(b) Funds and	d other accou	nts
1	Total number at	•				
2		ributions to (during year)				
3	33 3 3	ts from (during year)				
4	Aggregate valu	,				
5		ation inform all donors and donor advisc rganization's property, subject to the or		ior advised	☐ Yes	┌ No
6	used only for cl conferring impe	ation inform all grantees, donors, and do haritable purposes and not for the benef ermissible private benefit?	it of the donor or donor advisor, or for a	ny other purpose	┌ Yes	┌ No
Pa	-	rvation Easements. Complete if		<u>o Form 990, Part !</u>	IV, line 7.	
1	Preservation	onservation easements held by the organ on of land for public use (e g , recreation of natural habitat on of open space	or education) Preservation of an	n historically importa certified historic stru		
2	•	2a through 2d if the organization held a ne last day of the tax year	qualified conservation contribution in t	the form of a conserv	ation	
				Held at th	e End of the	Year
а	Total number o	f conservation easements		2a		
b	_	restricted by conservation easements		2b		
C		servation easements on a certified histo	` '	2c		
d	historic structu	servation easements included in (c) acq ire listed in the National Register		2d		
3	Number of cons	servation easements modified, transferr	ed, released, extinguished, or terminate	ed by the organization	n during	
	the tax year ►_					
4	Number of state	es where property subject to conservati	on easement is located ►			
5		nization have a written policy regarding t the conservation easements it holds?	he periodic monitoring, inspection, hand	dling of violations, ar	nd Yes	┌ No
6	Staff and volun	teer hours devoted to monitoring, inspec	cting, and enforcing conservation easer	nents during the yea	r	
7	•	enses incurred in monitoring, inspecting	, and enforcing conservation easement	s during the year		
	► \$					
8	Does each con and section 17	servation easement reported on line 2(o 0(h)(4)(B)(ii)?	l) above satisfy the requirements of sec	:tion 170(h)(4)(B)(i)	☐ Yes	┌ No
9	balance sheet,	escribe how the organization reports cor and include, if applicable, the text of the n's accounting for conservation easeme	e footnote to the organization's financia			
Pai		izations Maintaining Collection		or Other Similar	Assets.	
_		ete if the organization answered "Y		nuo ototomont 1 1	olones altait	
1a	works of art, his	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse e, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or research in furthe		
b	works of art, his	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse e the following amounts relating to these	ts held for public exhibition, education,			ıc
	(i) Revenues II	ncluded in Form 990, Part VIII, line 1		► \$		
	(ii) Assets incl	uded in Form 990, Part X		► \$		
2	If the organizat	cion received or held works of art, histori nts required to be reported under SFAS		or financial gain, prov		
а	_	ided in Form 990, Part VIII, line 1		► \$		

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	ollections of Art	<u>, His</u>	torica	<u>al Tr</u>	easu	res, or C	the	<u>r Similar As</u>	sets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, ch	neck an	y of t	he follo	owing that	are a	sıgnıfıcant use	of its	
а	Public exhibition		d	Γι	_oan o	or excl	nange prog	rams			
b	Scholarly research		e	Γ	Other	<u>-</u>					
c	Preservation for future generations										
4	Provide a description of the organization's c Part XIII	ollections and expla	ın hov	w they 1	furthe	r the o	rganızatıor	ı's ex	empt purpose i	n	
5	During the year, did the organization solicit										
Dov	assets to be sold to raise funds rather than t IV Escrow and Custodial Arrang									Yes	No
Pal	Part IV, line 9, or reported an ar						i aliswele	u i	פא נט רטוווו א	,90,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?						or other ass	ets r		┌ Yes	
b	If "Yes," explain the arrangement in Part XI	II and complete the	follov	wing tal	ole		_				
									An	nount	
c	Beginning balance							1c			
d	Additions during the year							1d			
e	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21?							┌ Yes	☐ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the	expla	anation	hasl	been p	rovided in l	Part >	KIII		Γ
Pa	rt V Endowment Funds. Complete										
1-	Paginning of year halance	(a)Current year 1,463,525	(b)	Prior yea	ır 3,534	b (c) Tw	o years back 1,340,176		hree years back 1,177,237	(e)Four	1,028,266
la L	Beginning of year balance	1,403,323		1,29	3,334		1,340,170	1	1,177,237		1,028,200
b	Contributions				-						
С	Net investment earnings, gains, and losses	238,424		16	9,991		-46,642	2	162,939		148,971
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
a	End of year balance	1,701,949		1,46	3,525		1,293,534		1,340,176		1,177,237
2	Provide the estimated percentage of the cur	rent vear end haland	e (lın	ne 1 a c	olumi	n (a)) h	neld as	1			
a	Board designated or quasi-endowment	rent year end barane	(1111	ic 19, c	Oranni	11 (a)) 1	icia as				
b	Permanent endowment - 72 048 %										
	r ennament endowment p	952 %									
С	Temporarily restricted endowment > 27 The percentages in lines 2a, 2b, and 2c sho										
За	Are there endowment funds not in the posse		ation	that ar	e held	l and a	dministere	d for	the		
	organization by	ssion or the organiza	201011	cirac ar		. unu u	anning core	u 101		Yes	No
	(i) unrelated organizations								3a(
_	(ii) related organizations								3a(No
ь 4	If "Yes" to 3a(II), are the related organization. Describe in Part XIII the intended uses of t	•						•	31)	
	t VI Land, Buildings, and Equipme					answ	vered 'Yes	to:	Form 990 Pa	rt IV	line
	11a. See Form 990, Part X, line			- game	400						
	Description of property				ost or (invest		(b) Cost or o basis (oth		(c) Accumulated depreciation	(d) i	Book value
1a	_and						178	3,156			178,156
b	Buildings						893	3,381	348,70)3	544,678
c	_easehold improvements						2,133	3,303	955,47	75	1,177,828
d I	Equipment						2,671	,327	1,517,58	37	1,153,740
	Other		<u>. </u>								
	. Add lines 1a through 1e <i>(Column (d) must o</i>		K, colu	ımn (B)	, line .	10(c).)			▶		3,054,402
									Schedule [) (Form	990) 2013

Part VII Investments—Other Securities. Co	emplete if the organization	answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. C		
See Form 990, Part X, line 13.	omplete if the organization	manamered res to form 550, rare 14, mile 11e
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F	
		0, Part IV, line 11d See Form 990, Part X, line 15
(a) Desc	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)	
Part X Other Liabilities. Complete if the org	janization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25. (a) Description of liability	(b) Book value	
-		
Federal income taxes	0	
SPLIT INTEREST AGREEMENTS	2,228,729	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	2,228,729	
2 Liphility for unportain tay positions In Dort VIII assessed	do the toyt of the feetnest to the	•

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per the organization answered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete if
1	Total revenue, gains, and other support per audited financial statements	1	563,029,523
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b 690,658		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	1,470,006
3	Subtract line 2e from line 1	3	561,559,517
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	4c	-1,313,417
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	560,246,100
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses if the organization answered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1	Total expenses and losses per audited financial statements	1	566,799,245
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	2,004,075
3	Subtract line 2e from line 1	3	564,795,170
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	564,795,170
Par	XIII Supplemental Information		
Drov	ude the descriptions required for Part II, lines 2, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b		

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				
ENDOWMENT FUNDS	FORM 990, SCHEDULE D, PART V, LINE 4 The Americares Foundation endowment is intended to support the general charitable mission of the organization. The Foundation intends that the principal should remain untouched, while the earnings on the endowment's investments shall be used to support various charitable programs.				
INCOME TAXES	FORM 990, SCHEDULE D, PART X Americares recognizes a tax position based on a "more likely than not" threshold This applies to positions taken or expected to be taken in a tax return. During fiscal 2014 and 2013, Americares evaluated its tax positions and concluded that it does not have any uncertain tax positions that meet the criteria under this standard. The tax years ending 2011, 2012, 2013, and 2014 are still open to audit for both federal and state purposes.				
REVENUE ON BOOKS NOT ON RETURN	FORM 990, SCHEDULE D, PART XI, LINE 2d CHANGES IN SPLIT INTEREST AGREEMENTS \$19,496 REVENUE ON RETURN NOT ON BOOKS FORM 990, SCHEDULE D, PART XI, LINE 4B RENTAL PROPERTY EXPENSE (\$166,444) SPECIAL EVENTS EXPENSE (\$493,400) COST OF GOODS SOLD (\$653,573)				
FORM 990, SCHEDULE D, PART XII, LINE 2D	SPECIAL EVENTS EXPENSE \$493,400 COST OF GOODS SOLD \$653,573 RENTAL PROPERTY EXPENSE \$166,444 TOTAL \$1,313,417				
RECONCILIATION	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)				

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE F

Department of the Treasury

Name of the organization

Internal Revenue Service

(Form 990)

As Filed Data -

DLN: 93493012014645

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. ▶ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Employer identification number

AmeriCares Foundation Inc					
Americales Foundation The				06-1008595	
Part I General Informatio "Yes" to Form 990, Pa			e United States. Co	omplete if the organiz	ation answered
1 For grantmakers. Does the o	9				nd
other assistance, the grantee		-	·		
to award the grants or assist	ance?				✓ Yes No
For grantmakers. Describe in assistance outside the United		ganızatıon's pr	ocedures for monitori	ng the use of its grant	s and other
3 Activites per Region (The follow	ving Part I, line 3	table can be du	iplicated if additional spa	ice is needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	4	105			269,311,316
b Total from continuation sheets to Part I					34,599,692
c Totals (add lines 3a and 3b)	4	105			303,911,008

Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 9	₹90,
	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	
		_

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

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

215

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

Part III	can be dupl	icated if addi	tional space is	needed.

Fait III Call be	duplicated if addition	nai space is ne	eueu.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Medical Outreach	Central America and the Caribbean	591			13,569,762	Medicine	FMV
(2) Medical Outreach	East Asia and the Pacific	173			4,313,981	Medicine	FMV
(3) Medical Outreach	Europe (Including Iceland and Greenland)	12			1,323,842	Medicine	FMV
(4) Medical Outreach	Mıddle East and North Afrıca	8			72,347	Medicine	FMV
(5) Medical Outreach	North America	34			618,953	Medicine	FMV
(6) Medical Outreach	Russia and the Newly Independent States	4			12,392	Medicine	FMV
(7) Medical Outreach	South America	175			3,333,631	Medicine	FMV
(8) Medical Outreach	South America	41			788,353	Medicine	FMV
(9) medical outreach	Sub-Saharan Africa	324			9,484,664	Medicine	FMV
(10) Emergency response	Central America and the Caribbean	265			10,637,329	Medicine	FMV
(11) Emergency response	East Asia and the Pacific	26			2,402,442	Medicine	FMV
(12) Emergency response	Mıddle East and North Afrıca	6			225,008	Medicine	FMV
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
		•				Scho	dule F (Form 990) 2013

Part IV Foreign Forms

1	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)	Γ	Yes	ি	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to 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)	Γ	Yes	দ	Νo
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)	Г	Yes	ত	Νo
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)	Γ	Yes	~	Νo
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)	Г	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 file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	্ব	Νo

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page **5**

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 up dates 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 performs the 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	2	99	· · · · 3 · · · · · · · · · · · · · · · · · · ·	DISASTER RELIEF/DVLPMT	2,192,171
East Asia and the Pacific	1	2	· · · 3 · · · · · · · · · · · · · · · · · · ·	DISASTER RELIEF/DVLPMT	1,817,881
Europe (Including Iceland and Greenland)			· · · · 3 · · · · · · · · · · · · · · · · · · ·	DISASTER RELIEF/DVLPMT	49,866

Form 990 Schedule Fi	Part I - Activit	ties Outside I	ne 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			Program Services	DISASTER RELIEF/DVLPMT	79,516
North America			Program Services	DISASTER RELIEF/DVLPMT	1,974,855
Russia and the Newly Independent States			Program Services	DISASTER RELIEF/DVLPMT	89,296

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 America			_	DISASTER RELIEF/DVLPMT	103,177			
South Asia	1	4	3	DISASTER RELIEF/DVLPMT	305,169			
Sub-Saharan Africa				DISASTER RELIEF/DVLPMT	596,815			

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region 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			Grantmakıng		111,835,552			
East Asia and the Pacific			Grantmakıng		37,716,049			
Europe (Including Iceland and Greenland)			Grantmakıng		9,902,693			

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region 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			Grantmakıng		29,053,899			
North America			Grantmakıng		653,523			
Russia and the Newly Independent States			Grantmaking		49,377,736			

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 America			Grantmakıng		10,172,590			
South Asia			Grantmakıng		13,390,528			
Sub-Saharan Africa			Grantmakıng		34,599,692			

Form 990 Schedu	le F Part II	- Grants or Entitie	es Outside The Uni	ted States				
(a) Name of	(b) IRS code section	'		(e) A mount of	(f) Manner of	(g) A mount of non-	(h) Description of	(ı) Method of valuatıon
organization	and EIN(if applicable)	(c) Region	(d) Purpose of grant	cash grant	cash disbursement	cash assistance	non-cash assistance	(book, FMV, appraisal, other)
		Central America and	Haiti - Integrated	407,700	Wire			appraisal, other)
	1	the Carıbbean	Healthcare Program	1				
	1		CHINA Establishing a Child Centered	1				
	1		Emergency Rel	1				
	1		INDIA 2012 Encephalitis	1				
	1		Epidemic INDIA	1				
	1		2012 Assam Flooding INDIA	1				
	1		2012 ER Global	1				
	1		Prepositioning II	1				
	1		JAPAN GBV Care/Support	1				
	1		Specialist Training	1				
	1		JAPAN Mental Health Care Activities-	1				
	1		Kamaishi City	1				
	1		JAPAN Kındergarden Garden	1				
	1		JAPAN Shinchi	1				
	1		Debris Cleaning	1				
	1		Team Celebration BBQ	1				
	1		JAPAN Rikuzentakata	1				
	1		City Psychosocial Support thru JAPAN -	1				
	1		Toryo High School	1				
	1		Counseling - Miyako JAPAN Ishinomaki	1				
	1		Child-Rearing	1				
	1		Support Services JAPAN Rio Grande	1				
	1		Phase 2 - Project for	1				
	1		Supporting JAPAN Reconstruction of	1		!	!	
	1		Hachimaida workshop	1		!	!	
	1	I .	build JAPAN Health Promotion Through	1		!		
	1		Gardening in Yunuki	1		!	!	
	1		JAPAN Fureal Workshop	1		!	!	
	1		Reconstruction for	1		!	!	
	1		PWDs JAPAN Iwate Mobile Dental Units	1		!	!	
	1		Phase II	1				
	1		JAPAN Revitalization	1				
	1		Through Farming 2012 ER Global	1				
	1		Prepositioning	1				
	1		Initiative Save Myan PAKISTAN 2013 ER	1				
	1		Global Prepositioning	1				
	1		Initiative PHILIPPINES 2012	1				
	1		Typhoon Bopha	1				
	1		Emergency Relief PHILLIPPINES	1				
	1		2013 Typhoon Bopha	1				
	1		IOM Emergency Hea Sri Lanka 201	1				
			Haiti - Cholera	173,786	Wire			
		the Carıbbean	Outbreak 2010					
			Maternal Health	120,000				
	1	Central America and the Caribbean	Haiti - Cholera Outbreak 2010	85,650	Wire			
	1	itile Caribbean	Outbleak 2010	,	1	1	1	l

Form 990 Schedu	ale F Part II	- Grants or Entitle	s Outside The Ur	ited States				· /
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		Central America and the Caribbean	Haiti - Restoring & Improving Access & Treatment C	66,339	Wire			
		the Carıbbean	Haiti - Reducing Mortality Through Emergency Ambul	54,900	Wire			
			Haiti - Cholera Outbreak 2010	48,266	Wire			
			Haiti - Cholera Outbreak 2010	44,881	Wire			

Form 990 Schedu	orm 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)		
			Haiti - Restoring & Improving Access & Treatment C	30,000	Wire					
			Haiti - Cholera Outbreak 2010	28,620	Wire					
			Haiti - Perserve Maternal Health	22,267	Wire					
		the Carıbbean	Mexico - 2014 Global Disaster Pre- positioning Init	15,000	Wire					

Form 990 Schedu	n 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)		
		Central America and the Caribbean	Haiti - Cholera Outbreak 2010	13,714	Wire		_			
			Haiti - Restoring & Improving Access & Treatment C	10,000	Wire	1	!			
		1	Haiti - General GIK Support	9,000	Wire					
			Guatemala - Tom's Shoes Distribution	8,935	Wire					

Form 990 Schedu	orm 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
		East Asia and the Pacific	Philippines - Emergency Response to Haiyan for Men	299,996	Wire						
		East Asia and the Pacific	Philippines - Enhancing Local Health Systems for R	200,329	Wire						
		East Asia and the Pacific	Vietnam - Pediatric Nutrition Program - FY 14	180,000	Wire						
		East Asia and the Pacific	Philippines - Rehabilitation of Health Facilities	172,750	Wire						

Form 990 Schedv	ale F Part II	- Grants or Entiti	ies Outside The Uni	ited States				· .
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		East Asia and the Pacific	Philippines - Rehabilitation of Health Facilities	170,962	Wire			
		East Asia and the Pacific	Japan - Mental Health Programs	165,741	Wire			
		East Asia and the Pacific	Philippines - Emergency Response to Haiyan for Men	98,728	Wire			
	1	East Asia and the Pacific	Japan - Mental Health Programs	94,843	Wire			

Form 990 Schedu	ale F Part II	- Grants or Entiti	ies Outside The Un	ited States				· · · · · · · · · · · · · · · · · · ·
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		East Asia and the Pacific	Japan - Dis Prep Training Indivs & Fams to Resp E	91,993	Wire			
		Pacific	India - Uttarakhand Mobile Medical Disaster Relie	80,000	Wire			
		East Asia and the Pacific	Japan - Elder & Disabled Care	68,041	Wire			
		Pacıfic	Philippines - Capability Build and Provision of Gr	66,894	Wire			

Form 990 Schedu	₄le F Part II	: - Grants or Entitie	as Outside The Ur	iited States				·
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
			Japan - Mental Health Programs	53,225	Wire			
		Pacıfic	Japan – Evacuee Services & Resettlement	49,965	Wire			
			Japan - Mental Health Programs	46,625	Wire			
		1 _	India - Partner Support	43,097	Wire			

Form 990 Schedi	ule F Part II	- Grants or Entiti	ies Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	India - Partner Support	43,097	Wire			
		East Asia and the Pacific	Japan - Mental Health Programs	37,350	Wire			
		East Asia and the Pacific	India - Partner Support	34,354	Wire			
		East Asia and the Pacific	India - Partner Support	34,354	Wire			

Form 990 Scheau	ie i Part II	- Grants or Entition	es outside i ne un	itea States		_		_
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	India - Partner Support	34,354	Wire			
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	34,118	Wire			
		East Asia and the Pacific	Japan - Mental Health Programs	34,000	Wire			
		East Asia and the Pacific	Japan - Mental Health Programs	30,808	Wire			

Form 990 Scheau	ie i Part II	- Grants or Entition	es outside i ne un	itea States		_	_	_
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		East Asia and the Pacific	Japan - Mental Health Programs	30,541	Wire			
		East Asia and the Pacific	India - Partner Support	29,880	Wire			
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	29,880	Wire			
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	29,880	Wire			

Form 990 Schedu	ile F Part II	- Grants or Entitie	es Outside The Un	ited States				·
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			Philippines - Rehabilitation of Health Facilities	29,099	Wire			
		_	India - Partner Support	28,768	Wire			
			India - Mobile Medical Clinic	27,917	Wire			
			India - Mobile Medical Clinic	27,917	Wire			

Form 990 Schedu	ale F Part II	- Grants or Entitie	as Outside The Ur	ited States				<u>, </u>
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(1) Method of valuation (book, FMV, appraisal, other)
			Japan - Mental Health Programs	27,185	Wire			
			Philippines - Rehabilitation of Health Facilities	26,430	Wire			
			Japan - Mental Health Programs	25,567	Wire			
			India - Mobile Medical Clinic	25,346	Wire			

, Form 990 Schedu	ile F Part II	- Grants or Entiti	es Outside The Un	ited States		_	_	· .
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		East Asia and the Pacific	India - Mobile Medical Clinic	25,346	Wire			
		East Asia and the Pacific	India - Mobile Medical Clinic	25,346	Wire			
		East Asia and the Pacific	Philippines - Typhoon Haiyan- Community Interventio	25,000	Wire			
			Japan - Mental Health Programs	24,530	Wire			

, Form 990 Scheau	ie i part II	- Grants or Entitiv	ies Outsiae i ne Un	itea States		_	_	
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		East Asia and the Pacific	India - Mobile Medical Clinic	24,089	Wire			
		East Asia and the Pacific	Japan - Health Care	23,484	Wire			
			Japan - Mental Health Programs	22,894	Wire			
		East Asia and the Pacific	India - Partner Support	22,315	Wire			

Form 990 Schedu	n 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)			
			Japan - Mental Health Programs	22,083	Wire						
			India - Partner Support	21,108	Wire						
			India - Partner Support	21,000	Wire						
		Pacific	India - Uttarakhand Mobile Medical Disaster Relie	20,000	Wire						

Form 990 Scheav	orm 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
		East Asia and the Pacific	Philippines - Enhancing Local Health Systems for R	18,426	Wire						
		East Asia and the Pacific	India - Mobile Medical Clinic	16,756	Wire						
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	16,291	Wire						
		East Asia and the Pacific	India - Partner Support	15,257	Wire						

, Form 990 Schedv	ale F Part II	- Grants or Entiti	ies Outside The Uni	ited States				· .
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	15,072	Wire			
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	15,072	Wire			
		Pacıfic	Bangladesh 2014 Global Pre- positioning Initiative	15,000	Wire			
		East Asia and the Pacific	Pakıstan - 2013 ER Global Prepositioning Initiativ	15,000	Wire			

Form 990 Schedu	ile F Part II	- Grants or Entiti	es Outside The Un	ited States			rm 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)								
	1		Srı Lanka - 2013 ER Global Prepositioning Initiati	15,000	Wire											
		•	Philippines - 2013 Global Prepositioning	15,000	Wire											
	1	East Asia and the Pacific	Indonesia - 2013 Global Prepositioning	14,982	Wire											
	1	East Asia and the Pacific	India - Partner Support	14,571	Wire											

, Form 990 Scheau	orm 990 Schedule F Part II - Grants or Entitles Outside The United States										
(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
		East Asia and the Pacific	India - Partner Support	14,571	Wire						
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	13,660	Wire						
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	13,660	Wire						
		East Asia and the Pacific	India - Partner Support	13,643	Wire						

Form 990 Schedv	le F Part II اي	Grants or Entiti	ies Outside The Uni	ited States				, , , , , , , , , , , , , , , , , , ,
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		East Asia and the Pacific	Philippines - Typhoon Haiyan- Community Interventio	11,000	Wire			
			Philippines - Emergency Response to Haiyan for Men	10,689	Wire			
			India - Uttarakhand Mobile Medical Disaster Relie	10,000	Wire			
		East Asia and the Pacific	Philippines - Enhancing Local Health Systems for R	10,000	Wire			

, Form 990 Schedu	le F Part II	- Grants or Entiti	ies Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
	1		India - Shire Medical Expert Committee	9,632	Wire			
	1		India - Shire Medical Expert Committee	9,632	Wire			
			India - Shire Medical Expert Committee	9,336	Wire			
	1	1	Philippines - Toms Shes Reimbursement	8,654	Wire			

, Form 990 Schedu	le F Part II	- Grants or Entiti	ies Outside The Un	ited States		_	_	
(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
	1	East Asia and the Pacific	Afghanistan - Tom's Children's Canvas Shoes	8,618	Wire			
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	8,354	Wire			
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	8,001	Wire			
		East Asia and the Pacific	India - Mobile Medical Clinic	7,890	Wire			

Form 990 Schedi	ule F Part II	- Grants or Entiti	ies Outside The Un	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	7,841	Wire			
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	7,841	Wire			
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	7,841	Wire			
		East Asia and the Pacific	India - Mobile Medical Clinic	6,336	Wire			

Form 990 Schedi	ule F Part II	- Grants or Entiti	ies Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	6,058	Wire			
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	6,058	Wire			
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	5,843	Wire			
		East Asia and the Pacific	Japan - Community Direct Initiatives	5,827	Wire			

, Form 990 Scheau	He F Part II	- Grants or Entitiv	ies Outsiae i ne Un	itea States		_	_	
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	5,386	Wire			
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	5,386	Wire			
		East Asia and the Pacific	India - Partner Support	5,336	Wire			
		East Asia and the Pacific	India - Partner Support	5,336	Wire			

, Form 990 Scheau	He F Part II	- Grants or Entition	ies Outside The Un	itea States		_	_	
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	5,336	Wire			
		East Asia and the Pacific	India - AmeriCares India Fdn-Laverack	5,315	Wire			
		East Asia and the Pacific	India - Partner Support	5,227	Wire			
		East Asia and the Pacific	India - Partner Support	5,227	Wire			

Form 990 Schedu	ile F Part II	- Grants or Entitie	s Outside The Un	ited States	m 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)						
		1 '	Uzbekstan - Tom's Shoes Distribution August 2013	22,320	Wire									
		Russia and the Newly Independent States	Ukraine - Tom's Shoes Distribution	14,301	Wire									
		1 '	Armenia - Reimbursement - Distribution Boots	11,606	Wire									
		Russia and the Newly Independent States	Armenia - Partner Support	6,475	Wire									

Form 990 Schedu	ale F Part II	- Grants or Entitie	≱s Outside The Un	ited States				· · · · · · · · · · · · · · · · · · ·
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
	1	!	Armenia - Reimburse for Local Distrib of Childrens	5,314	Wire			
			Chile - Earthquake Response/Hygene Kits	17,500	Wire			
			Columbia - 2014 Global Prepositioning	14,992	Wire		1	
			Peru - Partner support	10,000	Wire	1		

Form 990 Schedv	₄le F Part II	- Grants or Entition	ies Outside The Un	ited States		_	_	· .
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			Ghana - One Child One World	45,858	Wire			
			Ghana - One Child One World	39,696	Wire			
			Lıberıa - Ebola Vırus Outbreak	30,574	Wire			
			Madagascar - 2014 ER Global Pre- Positioning Initia	13,563	Wire			

, Form 990 Scheau	Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
		Central America and the Caribbean	EMERGENCY			95,020	Med Suppl	Fair Mkt Val			
		Central America and the Caribbean	EMERGENCY			21,465	Med Suppl	Fair Mkt Val			
		Central America and the Caribbean	EMERGENCY			17,138	Med Suppl	Fair Mkt Val			
		Central America and the Caribbean	EMERGENCY			6,410	Med Suppl	Fair Mkt Val			

, Form 990 Scheav	He F Part II	- Grants or Entitle	as Outside The Un	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		Central America and the Caribbean	EMERGENCY			5,199	Med Suppl	Fair Mkt Val
		East Asia and the Pacific	EMERGENCY			84,548	Med Suppl	Fair Mkt Val
		East Asia and the Pacific	EMERGENCY			13,961,768	Med Suppl	Fair Mkt Val
		East Asia and the Pacific	EMERGENCY			1,628,926	Med Suppl	Fair Mkt Val

, Form 990 Scheav	vie E bart II	- Grants or Entition	es outside ine on	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		East Asia and the Pacific	EMERGENCY			408,353	Med Suppl	Fair Mkt Val
		East Asia and the Pacific	EMERGENCY			358,551	. Med Suppl	Fair Mkt Val
		East Asia and the Pacific	EMERGENCY			94,100	Med Suppl	Fair Mkt Val
		East Asia and the Pacific	EMERGENCY			36,476	Med Suppl	Fair Mkt Val

, Form 990 Scheav	vie E bart II	- Grants or Entition	es outside ine on	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		East Asia and the Pacific	EMERGENCY			27,800	Med Suppl	Fair Mkt Val
		East Asia and the Pacific	EMERGENCY			16,772	Med Suppl	Fair Mkt Val
		East Asia and the Pacific	EMERGENCY			11,626	Med Suppl	Fair Mkt Val
		East Asia and the Pacific	EMERGENCY			8,887	Med Suppl	Fair Mkt Val

, Form 990 Schedu	ile F Part II	- Grants or Entiti	ies Outside The Un	ited States	_			· .
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	EMERGENCY			8,227	Med Suppl	Fair Mkt Val
		East Asia and the Pacific	EMERGENCY			5,512	Med Suppl	Fair Mkt Val
		Europe (Including Iceland and Greenland)	EMERGENCY			18,000	Med Suppl	Fair Mkt Val
		Europe (Including Iceland and Greenland)	EMERGENCY			13,000	Med Suppl	Fair Mkt Val

e F Part II	- Grants or Entitie	es outside ine un	ited States				_
(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
	Middle East and North Africa	EMERGENCY			853,052	Med Suppl	Fair Mkt Val
1	Sub-Saharan Africa	EMERGENCY			15,250	Med Suppl	Fair Mkt Val
1	Sub-Saharan Africa	EMERGENCY			759,348	Med Suppl	Fair Mkt Val
1	Sub-Saharan Africa	EMERGENCY	1		71,518	Med Suppl	Fair Mkt Val
ī	(b) IRS code section and EIN(if applicable)	(b) IRS code section and EIN(if applicable) Middle East and North Africa Sub-Saharan Africa	(b) IRS code section and EIN(if applicable) Middle East and North Africa Sub-Saharan Africa (c) Region (d) Purpose of grant EMERGENCY EMERGENCY Sub-Saharan Africa EMERGENCY	section and EIN(if applicable) Middle East and North Africa Sub-Saharan Africa Sub-Saharan Africa Media EMERGENCY EMERGENCY Sub-Saharan Africa EMERGENCY Sub-Saharan Africa	(b) IRS code section and EIN(if applicable) Middle East and North Africa Sub-Saharan Africa Middle EMERGENCY Sub-Saharan Africa Mercon (d) Purpose of grant (e) Amount of cash disbursement (e) Amount of cash disbursement (f) Manner of cash disbursement (e) Amount of cash disbursement (f) Manner of cash disbursement	(b) IRS code section and EIN(if applicable) Middle East and North Africa Sub-Saharan Africa Middle EMERGENCY Sub-Saharan Africa Mergency Mer	(b) IRS code section and EIN (if applicable) Middle East and North Africa Sub-Saharan Africa (d) Purpose of grant (e) Amount of cash grant (e) Amount of cash disbursement (f) Manner of cash disbursement (g) Amount of non-cash assistance (h) Description of non-cash assistance 853,052 Med Suppl 15,250 Med Suppl 759,348 Med Suppl

, Form 990 Scheav	-orm 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
		Sub-Saharan Afrıca	EMERGENCY			42,046	Med Suppl	Fair Mkt Val			
		Sub-Saharan Africa	EMERGENCY			39,510	Med Suppl	Fair Mkt Val			
		Sub-Saharan Afrıca	EMERGENCY			18,000	Med Suppl	Fair Mkt Val			
		Sub-Saharan Africa	EMERGENCY	1		17,800	Med Suppl	Fair Mkt Val			
i								,			

Form 990 Schedu	ıle F Part II	- Grants or Entitie	es Outside The Un	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) A mount 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			10,332,965	Med Suppl	Fair Mkt Val
		Central America and the Caribbean	ON-GOING			4,506,320	Med Suppl	Fair Mkt Val
		Central America and the Caribbean	ON-GOING			3,274,258	Med Suppl	Fair Mkt Val
		Central America and the Caribbean	ON-GOING	1		4,318,234	Med Suppl	Fair Mkt Val

Form 990 Scneau	ie i Part II	- Grants or Entitle	es outside ine un	itea States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount 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			3,949,211	Med Suppl	Fair Mkt Val
		Central America and the Caribbean	ON-GOING			1,823,075	Med Suppl	Fair Mkt Val
		Central America and the Caribbean	ON-GOING			33,677,120	Med Suppl	Fair Mkt Val
		Central America and the Caribbean	ON-GOING			14,697,083	Med Suppl	Fair Mkt Val

, Form 990 Scheau	ie F Part II	- Grants or Entitle	is Outside The Ur	ited States		_	_	<u>'</u>
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount 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			91,041	Med Suppl	Fair Mkt Val
		Central America and the Caribbean	ON-GOING			7,055,814	Med Suppl	Fair Mkt Val
		Central America and the Caribbean	ON-GOING			525,600	Med Suppl	Fair Mkt Val
		East Asia and the Pacific	ON-GOING			5,279,479	Med Suppl	Fair Mkt Val

, Form 990 Scheau	le F Part II	- Grants or Entition	es Outside The Ur	iited States	rm 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)						
		East Asia and the Pacific	ON-GOING			3,253,844	Med Suppl	Fair Mkt Val						
		East Asia and the Pacific	ON-GOING			3,210,303	Med Suppl	Fair Mkt Val						
		East Asia and the Pacific	ON-GOING			223,451	Med Suppl	Fair Mkt Val						
		Europe (Including Iceland and Greenland)	ON-GOING			189,806	Med Suppl	Fair Mkt Val						

, Form 990 Sched <i>u</i>	ile F Part II	- Grants or Entition	es Outside The Un	iited States		_	_	· .
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	ON-GOING			3,791,832	Med Suppl	Fair Mkt Val
		Europe (Including Iceland and Greenland)	ON-GOING			3,508,835	Med Suppl	Fair Mkt Val
		Europe (Including Iceland and Greenland)	ON-GOING			1,072,670	Med Suppl	Fair Mkt Val
		Mıddle East and North Afrıca	ON-GOING			7,327,943	Med Suppl	Fair Mkt Val

, Form 990 Scheav	He F Part II	- Grants or Entitie	es Outside The Un	ited States	_	_	_	
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount 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			1,025,603	Med Suppl	Fair Mkt Val
		Middle East and North Africa	ON-GOING			10,659,746	Med Suppl	Fair Mkt Val
		Middle East and North Africa	ON-GOING			8,845,496	Med Suppl	Fair Mkt Val
		Middle East and North Africa	ON-GOING			1,487,160	Med Suppl	Fair Mkt Val

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		Russia and the Newly Independent States	ON-GOING			2,525,060	Med Suppl	Fair Mkt Val		
		Russia and the Newly Independent States	ON-GOING			159,160	Med Suppl	Fair Mkt Val		
		Russia and the Newly Independent States	ON-GOING			46,640,722	Med Suppl	Fair Mkt Val		
		South America	ON-GOING			437,885	Med Suppl	Fair Mkt Val		
4	•	'	•	·	'		· '	1		

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
		South America	ON-GOING	1		869,250	Med Suppl	Fair Mkt Val		
		South America	ON-GOING	1		452,580	Med Suppl	Fair Mkt Val		
		South America	ON-GOING	1		5,035,959	Med Suppl	Fair Mkt Val		
,		South Asia	ON-GOING	1		1,960,970	Med Suppl	Fair Mkt Val		
<i>1</i>	Ť.	•	•	-	-	•	•	·		

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
		South Asia	ON-GOING			1,994,341	Med Suppl	Fair Mkt Val		
		South Asia	ON-GOING	1		2,048,894	Med Suppl	Fair Mkt Val		
1		South Asia	ON-GOING			1,941,059	Med Suppl	Fair Mkt Val		
1		South Asia	ON-GOING	1		126,684	Med Suppl	Fair Mkt Val		
·	•	•	•	•	-	•		*		

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		South Asia	ON-GOING	1		3,843,062	Med Suppl	Fair Mkt Val		
		South Asia	ON-GOING	1		76,764	Med Suppl	Fair Mkt Val		
		Sub-Saharan Africa	ON-GOING	1		4,848,393	Med Suppl	Fair Mkt Val		
		Sub-Saharan Africa	ON-GOING	1		6,018,646	Med Suppl	Fair Mkt Val		
1		,								

, Form 990 Scheav	Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
		Sub-Saharan Africa	ON-GOING			2,982,397	Med Suppl	Fair Mkt Val			
		Sub-Saharan Africa	ON-GOING			296,252	Med Suppl	Fair Mkt Val			
		Sub-Saharan Africa	ON-GOING			83,546	Med Suppl	Fair Mkt Val			
		Sub-Saharan Africa	ON-GOING			836,103	Med Suppl	Fair Mkt Val			
1								•			

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		Sub-Saharan Africa	ON-GOING			441,672	Med Suppl	Fair Mkt Val		
		Sub-Saharan Africa	ON-GOING			356,052	Med Suppl	Fair Mkt Val		
		Sub-Saharan Africa	ON-GOING			247,947	Med Suppl	Fair Mkt Val		
1		Sub-Saharan Africa	ON-GOING			3,751,949	Med Suppl	Fair Mkt Val		
4								•		

, Form 990 Scheav	m 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		Sub-Saharan Africa	ON-GOING			759,838	Med Suppl	Fair Mkt Val		
		Sub-Saharan Afrıca	ON-GOING			3,133,106	Med Suppl	Fair Mkt Val		
		Sub-Saharan Afrıca	ON-GOING			213,042	Med Suppl	Fair Mkt Val		
		Central America and the Caribbean	POST-EMERGENCY			95,575	Med Suppl	Fair Mkt Val		

, Form 990 Schedu	m 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		Central America and the Caribbean	POST-EMERGENCY			86,694	Med Suppl	Fair Mkt Val		
		Central America and the Caribbean	POST-EMERGENCY			77,551	Med Suppl	Fair Mkt Val		
		the Carıbbean	POST-EMERGENCY BE ABLE TO AFFORD THEM			70,321	Med Suppl	Fair Mkt Val		
		Central America and the Caribbean	POST-EMERGENCY		,	38,237	Med Suppl	Fair Mkt Val		

, Form 990 Scheav	1 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
		Central America and the Caribbean	POST-EMERGENCY			36,350	Med Suppl	Fair Mkt Val			
		Central America and the Caribbean	POST-EMERGENCY			23,057	Med Suppl	Fair Mkt Val			
		Central America and the Caribbean	POST-EMERGENCY			12,601	Med Suppl	Fair Mkt Val			
		Central America and the Caribbean	POST-EMERGENCY			11,835	Med Suppl	Fair Mkt Val			

, Form 990 Sched <i>u</i>	ile F Part II	- Grants or Entitle	as Outside The Un	ited States				'
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	POST-EMERGENCY			9,603	Med Suppl	Fair Mkt Val
		Central America and the Caribbean	POST-EMERGENCY			9,004	Med Suppl	Fair Mkt Val
		Central America and the Caribbean	POST-EMERGENCY			6,975	Med Suppl	Fair Mkt Val
		the Carıbbean	POST-EMERGENCY Support, USA NY- AmeriCares Mobile Clinic Hurricane Sandy Support II			6,697	Med Suppl	Fair Mkt Val

, Form 990 Scheav	m 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		Central America and the Caribbean	POST-EMERGENCY			6,191	Med Suppl	Fair Mkt Val		
		Central America and the Caribbean	POST-EMERGENCY			5,998	Med Suppl	Fair Mkt Val		
		Central America and the Caribbean	POST-EMERGENCY			5,224	Med Suppl	Fair Mkt Val		

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As Filed Data -

DLN: 93493012014645

OMB No 1545-0047

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to 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. See separate instructions.

► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

	re of the organization					Employer	iuent	ii ication number	
A M	eriCares Foundation Inc					06-1008	595		
Pa	Fundraising Act				on answered "Yes" to part.	o Form 990, Part	t IV,	line 17.	
1 a	Indicate whether the organ Mail solicitations	ization raised funds	through ar	ny of the f	following activities Che Solicitation of non-		s		
b c d	c Phone solicitations d F In-person solicitations			f g	f Solicitation of government grants g Special fundraising events				
2a	Did the organization have a or key employees listed in							Γ _{Yes} Γ N	
b	If "Yes," list the ten highes to be compensated at least			fundraise	rs) pursuant to agreeme	nts under which th	e fun	draiser is	
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) A mount paid (or retained by fundraiser listed col (i))	(vi) A mount paid to (or retained by) organization	
1	DONORDIGITAL INC	INTERNET	Yes	No No	3,177,030	222,	250	2,954,780	
2	DONOR SERVICES Group	TELEPHONE		No	1,550,987	109,	276	1,441,711	
3	Mal Warwick Associates	Direct mail		No	3,770,218	345,	675	3,424,543	
4	SDA Teleservices Inc	telephone		No	54,919	23,	280	31,639	
5									
6									
7									
8									
9									
10									
Tota	al			>	8,553,154	700,	481	7,852,673	

List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY,

Pai	rt II	Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 1 more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 events with gross receipts greater than \$5,000.						
		<u> </u>	(a) Event #1 airlift benefit (event type)	(b) Event #2	(c) O ther events 0 (total number)	(d) Total events (add col (a) through col (c))		
₽	1	Gross receipts	2,056,829			2,056,829		
Revenue	2	Less Contributions	1,952,439			1,952,439		
<u>*</u>	3	Gross income (line 1 minus line 2)	104,390			104,390		
	4	Cash prizes						
"	5	Noncash prizes						
Expenses	6	Rent/facility costs	233,191	L		233,191		
蓋	7	Food and beverages .	123,187	7		123,187		
Direct	8	Entertainment	25,000			25,000		
출	9	Other direct expenses .	112,022	2		112,022		
	10	Direct expense summary Add lin	es 4 through 9 in column	n(d)		(493,400)		
	11	Net income summary Subtract li	-			-389,010		
Par	t II			"Yes" to Form 990, Pa	rt IV, line 19, or rep			
Revenue		\$15,000 on Form 990-EZ, lii	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))		
<u>~</u>	1	Gross revenue						
Ses	2	Cash prizes						
Expenses	3	Non-cash prizes						
	4	Rent/facility costs						
DEG D	5	Other direct expenses						
	6	Volunteer labor	✓ Yes	Г Yes% Г No				
	7	Direct expense summary Add lines	s 2 through 5 in column ((d)	•			
	8	Net gaming income summary Subt	ract line 7 from line 1, co	olumn (d)	<u> ▶</u>			
9 a b	a Is the organization licensed to operate gaming activities in each of these states?							
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?								

Schedule G	(Form	990	or 990-EZ)	2013

D	,
Рапе	

Sche	edule G (Form 990 or 990-EZ) 2013	3		Page 3						
Door	the organization energte gaming as	ctivities with nonmombers	57							
				I Yes I No						
12			st or a member of a partnership or other entity							
				· · Yes No						
13	Indicate the percentage of gaming	•								
a	- ·									
ь	An outside facility									
14	Enter the name and address of the	person who prepares the	organization's gaming/special events books and re	ecords						
	Name 🟲									
	Address ►									
15a	Doos the organization have a cont	ract with a third party from	n whom the organization receives gaming							
13a	-	• • •		Г., Г.,						
L	revenue?									
Ь	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the									
	amount of gaming revenue retained by the third party 🕨 \$									
С	If "Yes," enter name and address of the third party									
	Name 🕨									
	Address ▶									
16	Gaming manager information	Gaming manager information								
	Name ▶									
	Gaming manager compensation 🟲 \$									
	Description of services provided	Description of services provided 🟲								
	Director/officer	Employee	Independent contractor							
17	Mandatory distributions									
а	Is the organization required under	state law to make charita	ible distributions from the gaming proceeds to							
	retain the state gaming license?			· Fyes FNo						
Ь	Enter the amount of distributions r	Enter the amount of distributions required under state law distributed to other exempt organizations or spent								
	ın the organızatıon's own exempt a	ictivities during the tax ye	ear 🕨 💲							
Pai		o, 15b, 15c, 16, and 17	planations required by Part I, line 2b, colum b, as applicable. Also complete this part to p							
	Return Reference		Explanation							
Fund	edule G, Part I - Iraising sultants	required by the Form Section B as top high a calendar-year basi:	Americares to the fundraising consultants listed in 990) on a fiscal year basis. These consultants mainly paid independent contractors. The amounts repise, therefore they may differ from amounts reported ted and approved separately from consulting fees.	ay be represented in Part VII, ported in Part VII are reported on						

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DLN: 93493012014645

OMB No 1545-0047

Schedule I (Form 990)

Department of the Treasury

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Open to Public

Inspection Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number AmeriCares Foundation Inc 06-1008595 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 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 Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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 **(b)** EIN (c) IRC Code (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization section cash valuation non-cash assistance or assistance grant or government if applicable assistance (book, FMV, appraisal, other) See Additional Data Table

Enter total number of section 501		ed in the line 1 table .	 	· · •	581

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Free Medicine to Patients	146657		135,688,518	FMV	prescription meds
(2) Medical Outreach in the U S	83		1,782,367	fmv	medical supplies
Part IV Supplemental Informa	ation. Provide the info	rmation required in P	art I, line 2, Part III,	column (b), and any other	additional information.

Part IV Supplemental In	iformation. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
I	LINE 2 - Americares Monitoring 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, 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 I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
URBAN NEIGHBORHOOD SERVICES - Community Health Wor 1718 Mermaid Avenue Brooklyn, NY 11224	14-1997299	501 (c)(3)	140,000				USA - Hurricane Sandy Youth Emotional Relief Proje USA NY- Hurrican Sandy Relief

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NORMAN REGINAL HEALTH FOUNDATION - Procurement-Lab 901 North Porter Norman,OK 73070	73-1203942	501 (c)(3)	251,772				USA - Oklahoma Tornado Grants			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CHILDREN'S HEALTH FUND - Children & Families Recov 215 West 125th Street New York, NY 10027	13-3468427	501 (c)(3)	110,975				USA - Hurricane Sandy Youth Emotional Relief Proje		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ROCKAWAY RESCUE ALLIANCE - Shore Soup Project 121 Beach 92nd Rockaway Beach,NY 11693	13-2612524	501 (c)(3)	100,000				USA - Hurricane Sandy - October, 2012			

Form 990,Schedule 1, Pa	Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
CHCANYS - Rapid Damage Data Collection Tool 111 Broadway New York, NY 10006	13-2690296	501 (c)(3)	91,300				USA - Hurricane Sandy - October, 2012				

Form 990,Schedule I, Pa	Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Sunset Park Health Council - NY Peer Health Outrea 150-55th Street Brooklyn,NY 11220	20-2508411	501 (c)(3)	89,707				USA - Hurricane Sandy Youth Emotional Relief Proje		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Village of Gifford Water Tower Repairs 104 E Center Street Gifford, IL 61847	37-6020971	115	81,763				USA - Illinois Tornado 2013 Recovery Grants		

Form 990,Schedule 1, Pa	-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
JEWISH FAMILY SERVICES - Integrated Health Partner 607 North Jerome Avenue Margate,NJ 08402	22-2119902	501 (c)(3)	75,000				USA - Hurricane Sandy		

Form 990,Schedule 1, Pa	-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Catholic Charities Diocese of Camden - Bilingual m 1845 Haddon Avenue Camden, NJ 08103	22-3759994	501 (c)(3)	71,064				USA - Hurricane Sandy - October, 2012		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ACTION CENTER FOR EDUCATION & COMMUNITY - Art Ther 57-10 Beach Channel Drive Arverne, NY 11691	75-3014243	501 (c)(3)	66,314				USA - Hurricane Sandy Youth Emotional Relief Proje			

Form 990,Schedule 1, Pa	Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
Project Hospitality for Health Referral Counselor 100 Park Avenue Staten Island, NY 10302	13-3234441	501 (c)(3)	65,690				USA - Hurricane Sandy - October, 2012 CARD S), USA NY-2012 Hurricane Sandy- Staten Island Case Management				

Form 990,Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
Jewish Community Center of Staten Island - Counsel 1466 Manor Road Staten Island, NY 10314	13-5563356	501 (c)(3)	63,302				USA - Hurricane Sandy Youth Emotional Relief Proje	

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
Evangelical Lutheran Church in America - Lutheran 8765 West Higgins Road Chicago,IL 60631	41-1568278	501 (c)(3)	60,000				USA - Illinois Tornadoes Disaster Case Mgmnt Cham	

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
Saint Francis Medical Center for Telehealth Capabi 530 NE Glen Oak Ave Peoria,IL 61637	37-0662569	501 (c)(3)	115,959				USA - Illinois - Resource Management Software & Ac USA 2012 Hurricane Sandy - Free Service to the Un insured	

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HOMEFRONT - Long Term Housing Recovery 88 Hamilton Avenue Stamford, CT 06902	30-0281085	501 (c)(3)	50,000				USA - Hurricane Sandy - October, 2012			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Tazewell County Emergency Management Agency - upgr 21304 State Route 9 Tremont,IL 61568	37-6002171	115	38,097				USA - Illinois Telehealth Capability for OSF			

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PROVIDENCE HOUSE DOMESTIC VIOLENCE - Counseling & 88 Schoolhouse Road Whiting, NJ 08759	21-0634494	501 (c)(3)	37,192				USA - Hurricane Sandy Youth Emotional Relief Proje			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 HEALTH ACTION OF STATEN ISLAND - Mobil H 56 Bay Street Staten Island,NY 10301	13-3556132	501 (c)(3)	35,000				USA - Hurricane Sandy - October, 2012			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SRT Inc - Oklahoma Leadership development 7628 Doris Place Oklahoma City,OK 73162	45-4528673	501 (c)(3)	34,570				USA - Oklahoma Leadershıp Development		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Champaign County Emergency Manage Agency for Resou 1905 E Main Street Urbana,IL 61802	37-6006910	501 (c)(3)	21,722				USA - Illinois - Resource Management Software & Ac			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Greater Meridian Health Clinic for Temporary Medic 2701 Davis Street Meridian, MS 39301	64-0732893	501 (c)(3)	12,600				USA - Mississippi Temporary Medical Site			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WHEELING HEALTH RIGHT INC 61-29TH ST WHEELING,WV 26003	31-1149085	501(c)(3)		1,773,404	Fair Market Value	Medical Supplies	ON-GOING		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NEIGHBOR FOR NEIGHBOR 505 E 36TH STREET NORTH TULSA,OK 74106	73-0776404	501(c)(3)		1,306,190	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BREAD OF HEALING CLINIC 1821 N 16TH ST MILWAUKEE,WI 53205	81-0669867	501(c)(3)		1,205,141	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GREATER HICKORY COOPERATIVE CHRISTIAN MINISTRY 31 1ST AVE SE HICKORY,NC 28602	56-0934855	501(c)(3)		1,168,014	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 CLINICS INC 88 HAMILTON AVENUE STAMFORD,CT 06902	06-1008595	501(c)(3)		1,147,119	Fair Market Value		ON-GOING Rockaway, Coney Island and Red Hook, USA Medical Support for Sandy Survivors in Staten Island, USA NY - Operating Supoort for PNHP-NY Metro Hurricane Sandy			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
STEHOUWER FREE CLINIC 201 N MITCHELL CADILLAC,MI 49601	61-1401888	501(c)(3)		1,114,771	Fair Market Value	Medical Supplies	ON-GOING		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LEFLORE COUNTY HEALTH CENTER 706 HWY 82 WEST GREENWOOD,MS 38930	20-0069223	501(c)(3)		1,095,042	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NORTHSHORE SCOTTSDALE PHARMACY 3564 SCOTTSDALE ST PORTAGE,IN 46368	35-2028588	501(c)(3)		1,069,785	Fair Market Value		ON-GOING Disabilities, USA OK- Replacement of Durable Medical Equipment			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 MEDICINE FOUNDATION 1131 SALUDA STREET ROCK HILL,SC 297305776	57-0891008	501(c)(3)		1,008,211	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEALING HANDS MINISTRIES INC 8515 GREENVILLE AVENUE DALLAS,TX 75243	65-1259379	501(c)(3)		963,712	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TARZANA TREATMENT CENTERS INC 18646 OXNARD STREET TARZANA,CA 91356	94-2219349	501(c)(3)		879,491	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 CHARLESMCAULEY CLINIC 5024 N GROVE OKLAHOMA CITY,OK 73122	73-0701035	501(c)(3)		859,209	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GULF COAST HEALTH CENTER INC 2548 MEMORIAL BLVD PORT ARTHUR,TX 77640	76-0289927	501(c)(3)		837,294	Fair Market Value	Medical Supplies	ON-GOING		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SHELBY COMMUNITY HEALTH CENTER 1640 E STATE RD 44 SHELBYVILLE,IN 46176	30-0174146	501(c)(3)		836,189	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MedLink Georgia Inc 11 CHARLIE MORRIS ROAD COLBERT,GA 30628	58-1394645	501(c)(3)		800,114	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FIRSTMED HEALTH AND WELLNES 3343 S EASTERN AVENUE LAS VEGAS,NV 89169	27-0759056	501(c)(3)		782,948	Fair Market Value	Medical Supplies	ON-GOING		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GREATER KILLEEN FREE CLINIC 718 N 2ND STREET STE A KILLEEN,TX 76541	74-2724725	501(c)(3)		780,170	Fair Market Value		ON-GOING Hurricane Sandy Emergency Food Pantry Response Response			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
COMPASSIONATE CARE OF SHELBY COUNTY INC 124 N OHIO AVE SIDNEY,OH 45365	20-8479583	501(c)(3)		779,115	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
WV HEALTH RIGHT INC 1520 WASHINGTON ST CHARLESTON, WV 25311	31-1066881	501(c)(3)		764,515	Fair Market Value		ON-GOING USA NY- Muck out/Mold Remediation for Rockaways				

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SAMARITAN REGIONAL HEALTH CLINIC 937 BROADWAY CAPE GIRARDEAU, MO 63701	27-5427837	501(c)(3)		689,670	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 CARE CENTER FOR FORSYTH CO INC 2135 NEW WALKERTOWN RD WINSTON SALEM, NC 27101	58-1403699	501(c)(3)		688,861	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Bethesda Community Clinic Inc 107 MOUNTAIN BROOK DR CANTON,GA 30115	27-4923001	501(c)(3)		686,591	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 CLINIC OF SHELBYVILLE BEDFORD CO 200 DOVER ST SUITE 203 SHELBYVILLE,TN 37160	34-1974609	501(c)(3)		665,546	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SOCIAL WELFARE BOARD 904 S 10TH SUITE A ST JOSEPH,MO 64503	44-6000455	501(c)(3)		659,442	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CHRIST CLINIC 5504 FIRST STREET KATY,TX 77493	90-0789318	501(c)(3)		603,166	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEALTH AND HOPE CLINIC INC 1718 E OLIVE RD PENSACOLA,FL 32514	26-4336638	501(c)(3)		600,813	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WOMENS HEALTH CONNECTIONS 205 E BARAZOS ST PALESTINE,TX 75801	20-0776090	501(c)(3)		585,761	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
EUNICE COMMUNITY HEALTH CENTER 450 MOOSA BLVD STE E EUNICE,LA 70535	27-0213992	501(c)(3)		585,277	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 HUDSON COMMUNITY ACTION CORPORATION 714-31ST STREET UNION CITY,NJ 07087	22-1818699	501(c)(3)		578,041	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AGAPE CLINIC AT GRACE UNITED METHODIST CHURCH 4105 JUNIUS STREET DALLAS,TX 75246	14-1847977	501(c)(3)		572,218	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BETHESDA HEALTH CLINIC 409 WEST FERGUSON TYLER,TX 75702	26-0036674	501(c)(3)		546,037	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Excelth Inc FQHC 4422 GENERAL MEYER NEW ORLEANS, LA 70131	72-1193464	501(c)(3)		535,945	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Light of the World Clinic Inc 806 E PROSPECT ROAD OAKLAND PARK,FL 33334	65-0266070	501(c)(3)		526,686	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 HEALTH CENTERS INC 12716 NE 36TH STREET SPENCER,OK 73084	73-0930123	501(c)(3)		523,119	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PRESBYTERIAN MEDICAL CARE MISSION 1857 PINE ST STE 100 ABILENE,TX 79601	75-1910600	501(c)(3)		522,886	Fair Market Value	Medical Supplies	ON-GOING		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Mission Arlington Medical Clinic 210 W SOUTH ARLINGTON,TX 76010	75-2724385	501(c)(3)		517,002	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Rural Health Clinic of the Cumberlands 9400 SPARTA HIGHWAY CROSSVILLE,TN 38572	20-5562191	501(c)(3)		509,815	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GREATER TEXOMA HEALTH CLINIC 900 N ARMSTRONG AVE DENISON,TX 75020	81-0584983	501(c)(3)		504,683	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ORANGEBURG-CALHOUN FREE MEDICAL CLINIC 860 HOLLY STREET ORANGEBURG,SC 29115	26-3762573	501(c)(3)		503,951	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 MISSION CENTER 2125 EXCHANGE AVE OKLAHOMA CITY,OK 73108	73-0644143	501(c)(3)		476,401	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ROCK SPRINGS CLINIC 219 ROCK SPRINGS ROAD MILNER,GA 30257	26-4485460	501(c)(3)		457,400	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 FLOATING HOSPITAL 4140 27TH ST LONG ISLAND CITY,NY 11101	13-1624169	501(c)(3)		456,641	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 HELPING HANDS HEALTH CLINIC 34-C COURTHOUSE SQUARE CLEVELAND,GA 30528	64-0950194	501(c)(3)		453,510	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Medical Outreach Ministries 1401 E SOUTH BOULEVARD MONTGOMERY,AL 36116		501(c)(3)		448,289	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SNAKE RIVER COMMUNITY CLINIC 215 10TH STREET LEWISTON,ID 83501	31-1726460	501(c)(3)		438,654	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
DR GARY BURNSTEIN COMMUNITY HEALTH CLINIC 90 W UNIVERSITY PONTIAC,MI 48342	32-0015321	501(c)(3)		437,412	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Johnstown Free Medical Clinic 340 MAIN STREET JOHNSTOWN,PA 15901	23-2922409	501(c)(3)		433,555	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Samritan Clinic 4704 AUGUSTA RD GARDEN CITY,GA 31408	58-2288758	501(c)(3)		411,092	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE GOOD SAMARITAN CENTER 140 INDUSTRIAL FREDERICKSBURG,TX 78624	91-2129853	501(c)(3)		410,354	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(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 WEST STATE S FULTON,TN 38257	45-3745315	501(c)(3)		403,994	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 HEALTH CLINIC OF HARDIN & LARUE COUNTIES 114 E MEMORIAL DR ELIZABETHTOWN, KY 42701	30-0042070	501(c)(3)		403,417	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SEMO HEALTH NETWORK 415 MAIN STREET NEW MADRID,MO 63869	43-1253101	501(c)(3)		402,079	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ST CLARE HEALTH CLINIC 1121 S INDIANA AVE CROWN POINT,IN 46307	35-1330472	501(c)(3)		398,712	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ANGELS COMMUNITY CLINIC 1005 POPLAR STREET MURRAY,KY 42071	62-1777249	501(c)(3)		397,132	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEALTHQUEST OF UNION COUNTY 415 E FRANKLIN STREET MONROE,NC 28112	56-2117596	501(c)(3)		396,955	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 COUNTY HEALTH CENTER 677 E MAIN CENTREVILLE,MI 49032	38-2473493	501(c)(3)		396,761	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Social Welfare Board 904 S 10TH SUITE A ST JOSEPH,MO 64503	44-6000455	501(c)(3)		394,972	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OPEN DOOR COMMUNITY HEALTH CENTERS 670 9TH ST ARCATA,CA 95521	95-2671455	501(c)(3)		393,079	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FAITH FAMILY CLINIC 700 S ZARZAMORA SAN ANTONIO,TX 78207	26-3791828	501(c)(3)		385,734	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SACRED HEART COMMUNITY CLINIC 620 ROUND ROCK WEST 8 ROUND ROCK,TX 78681	27-2901548	501(c)(3)		379,053	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Presbyterian Medical Care Mission 1857 PINE ST STE 100 ABILENE,TX 79601	75-1910600	501(c)(3)		370,591	Fair Market Value	Medical Supplies	ON-GOING		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 COUNTY HEALTH SERVICES 150 VALPREDA RD SAN MARCOS,CA 92069	95-2847102	501(c)(3)		363,290	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Clinic 143 CHURCH ST PHOENIXVILLE,PA 19460	23-3072363	501(c)(3)		359,610	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
VOLUNTEERS IN MEDICINE CLINIC 2260 MARCOLA ROAD SPRINGFIELD,OR 97477	93-1276816	501(c)(3)		355,731	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEALTH UNIT ON DAVISON AVENUE CLNIC 13240 WOODROW WILSON ave DETROIT,MI 48238	37-1490937	501(c)(3)		352,683	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Helping Kids Health Access Without Walls 968 E SAHARA LAS VEGAS,NV 89104	20-5552699	501(c)(3)		348,876	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VALLEY FAMILY HEALTH CARE 1441 NE 10TH AVE PAYETTE,ID 83655	82-0371383	501(c)(3)		346,053	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Samaritan Regional Health Clinic 937 BROADWAY CAPE GIRARDEAU, MO 63701	27-5427837	501(c)(3)		345,760	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PEOPLES CLINIC FOR THE UNINSURED 183 N Schuyler Ave Kankakee, IL 60901	45-4183388	501(c)(3)		343,823	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MARTIN LUTHER KING HEALTH CENTER 865 OLIVE STREET SHREVEPORT,LA 71104	72-1079721	501(c)(3)		342,113	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LOW COUNTRY HEALTH CARE SYSTEM INC PO BOX 990 FAIRFAX,SC 29827	58-2366697	501(c)(3)		340,314	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OPEN DOOR HEALTH CENTER 1350 SW 4 ST HOMESTEAD,FL 33030	83-0375996	501(c)(3)		337,420	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FIRST BAPTIST CHURCH MEDICALDENTAL CLINIC 1607 CHERRY STREET VICKSBURG,MS 39180	64-0356253	501(c)(3)		336,605	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Kids Come First Community Health Center 1556 S SULTANA AVE ONTARIO,CA 91761	33-0969025	501(c)(3)		331,155	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FAMILY RESOURCE CENTER On Your Feet Inc San Diego, CA 92105	35-2329448	501(c)(3)		326,123	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MINISTRIES OF JESUS 1100 E I-35 FRONTAGE ROAD EDMOND,OK 73034	73-1622804	501(c)(3)		320,527	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 MISSION SERVICES DBA ST JOHN BOSCO CLINIC 3661 S MIAMI AVENUE MIAMI,FL 33133	65-0435764	501(c)(3)		320,203	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 FREE MEDICAL CLINIC OF GREATER CLEVELAND 12201 EUCLID AVE CLEVELAND,OH 44146	23-7078501	501(c)(3)		320,020	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CONWAY INTERFAITH CLINIC 830 NORTH CREEK CONWAY,AR 72032	41-2058756	501(c)(3)		317,793	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RUTHS PLACE 1411 CRAWFORD AVENUE GRANBURY,TX 76048	20-4594680	501(c)(3)		314,275	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Fundacion Manos Juntas 1330 NORTH CLASSEN BLVD OKLAHOMA CITY,OK 73106	73-1523135	501(c)(3)		310,903	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VOLUNTEER HEALTH CORPS OF BATON ROUGE 4655 SHERWOOD COMMON BATON ROUGE, LA 70816	20-4852337	501(c)(3)		308,682	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 Rescue Mission Free Clinic 402 4TH STREET SE ROANOKE,VA 24013	54-0573900	501(c)(3)		308,424	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CATHERINE MCAULEY CLINIC 5514 HOHMAN AVE HAMMOND,IN 46320	35-1835133	501(c)(3)		308,370	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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	501(c)(3)		308,156	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AVENAL COMMUNITY HEALTH CENTER 1000 SKYLINE BLVD AVENAL, CA 93204	77-0425496	501(c)(3)		306,386	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NEW HORIZONS COMMUNITY SERVICE BOARD 2100 COMER AVE COLUMBUS,GA 31904	58-2108870	501(c)(3)		304,968	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NEIGHBORHOOD HEALTH CLINIC 121 GOODLETTE RD N NAPLES,FL 34102	59-3546884	501(c)(3)		303,346	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MEDICAL OUTREACH MINISTRIES 1401 E SOUTH BOULEVARD MONTGOMERY,AL 36116	63-1204645	501(c)(3)		302,774	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Hope Health Clinic 1025 SANIBEL WAY LAGRANGE,KY 40031	45-2340606	501(c)(3)		301,928	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
EDWARD R LEAHY JR CENTER CLINIC FOR THE UNINSURE 800 LINDEN STREET SCRANTON,PA 18510	24-0795495	501(c)(3)		294,999	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 2208 W HEFNER RD OKLAHOMA CITY,OK 73112	86-1115863	501(c)(3)		294,644	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEALTHREACH COMMUNITY CLINIC 400 EAST STATESVILLE MOORESVILLE,NC 28115	20-1020941	501(c)(3)		292,609	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ROANOKE CHOWAN COMMUNITY HEALTH CENTER (RCCHC) 120 HEALTH CENTER DRIVE AHOSKIE,NC 27910	42-1638714	501(c)(3)		291,858	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
KEVINS COMMUNITY CENTER 153 S MAIN STREET NEWTOWN,CT 06470	61-1436909	501(c)(3)		291,329	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CONWAY INTERFAITH CLINIC 830 NORTH CREEK CONWAY,AR 72032	41-2058756	501(c)(3)		290,974	Fair Market Value	Medical Supplies	EMERGENCY			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HELPING HANDS CLINIC INC 810 HARPER AVE LENOIR,NC 28645	56-2076541	501(c)(3)		285,891	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
KANSAS CITY CARE CLINIC 3515 BROADWAY KANSAS CITY,MO 64111	43-0967292	501(c)(3)		277,034	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PEOPLES COMMUNITY CLINIC 4139 VERDUGO ROAD A LOS ANGELES,CA 90065	80-0716363	501(c)(3)		275,122	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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)		274,648	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
GRACE MEDICAL HOME 51 PENNSYLVANIA ST ORLANDO,FL 32806	26-1817966	501(c)(3)		273,519	Fair Market Value	Medical Supplies	ON-GOING				

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 HEALTH CARE 410 ROUTE 9 CAPE MAY COURTHOUSE, NJ 08210	22-2763588	501(c)(3)		273,490	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 Health Care Clinic 902 N FRANKLIN NORMAL,IL 61761	37-1316328	501(c)(3)		272,305	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GEORGIA HIGHLANDS MEDICAL SERVICES INC 260 ELM ST CUMMING,GA 30040	58-1338038	501(c)(3)		271,097	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VNAPOTTAWATTAMIE COUNTY PUBLIC HEALTH DEPARTMENT 822 S MAIN ST COUNCIL BLUFFS,IA 51534	42-6004433	501(c)(3)		271,077	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PRIMARY CARE & HOPE CLINIC 1453 HOPE WAY MURFREESBORO,TN 37129	62-1482091	501(c)(3)		264,260	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ST MARYS HEALTH CENTER 1302 DRAYTON ST SAVANNAH,GA 31401	58-2282758	501(c)(3)		261,736	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RUTLAND FREE CLINIC 145 STATE STREET RUTLAND,VT 05701	83-0427544	501(c)(3)		261,513	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CHRISTIAN APPALACHIAN PROJECT 6550 US 321 South Hagerhill, KY 41222	61-0661137	501(c)(3)		261,097	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEARTBRIGHT FOUNDATION INC 2923 SOUTH TRYON CHARLOTTE,NC 28203	45-0496759	501(c)(3)		261,033	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
JOHNSTOWN FREE MEDICAL CLINIC 340 MAIN STREET JOHNSTOWN,PA 15901	23-2922409	501(c)(3)		258,265	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
DIVINE GRACE MEDICAL MISSIONARIES 2 MOCKINGBIRD CIRCLE HOUSTON,TX 77074	27-4000666	501(c)(3)		258,110	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PALMETTO HEALTH COUNCILINC 643 MAIN STREET PALMETTO,GA 30268	58-1307597	501(c)(3)		257,936	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 VINCENT DE PAUL CHARITABLE PHARMACY 1125 BANK ST CINCINNATI,OH 45214	30-0272954	501(c)(3)		254,556	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BLUEGRASS COMMUNITY HEALTH CENTER 1306 VERSAILLES ROAD LEXINGTON,KY 40504	61-1131682	501(c)(3)		246,705	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
ATHENS NURSES CLINIC 496 REESE STREET ATHENS,GA 30601	58-2490925	501(c)(3)		246,420	Fair Market Value	Medical Supplies	ON-GOING				

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
COOS COUNTY FAMILY HEALTH SERVICES CCFHS BERLIN,NH 03570	02-0350051	501(c)(3)		244,625	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Bethesda Health Clinic 409 WEST FERGUSON TYLER,TX 75702	26-0036674	501(c)(3)		242,769	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PUBLIC HEALTH - SEATTLE & KING COUNTY 401 5TH AVE SEATTLE, WA 98104	91-6001327	501(c)(3)		240,081	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 HOUSE FREE COMMUNITY HEALTH CENTER 213 N MAIN ST DEARING, GA 30808	32-0126528	501(c)(3)		238,522	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ALCONA CITIZENS FOR HEALTH (DBA ALCONA HEALTH CENT 177 N BARLOW RD LINCOLN,MI 48742	38-2170985	501(c)(3)		237,814	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MATTHEW 25 HEALTH AND DENTAL CLINIC 413 E JEFFERSON BLVD FORT WAYNE,IN 46802	35-1484951	501(c)(3)		235,079	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CARIDAD CENTER 8645 W BOYNTON BEACH blvd BOYNTON BEACH,FL 33472	65-0149423	501(c)(3)		233,660	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
EAST ARKANSAS FAMILY HEALTH CENTER INC 215 EAST BOND AVE WEST MEMPHIS,AR 72301	23-7128104	501(c)(3)		229,187	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 KITCHEN CLINIC 1630 N JEFFERSON SPRINGFIELD,MO 65803	43-1384531	501(c)(3)		227,981	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
EXCELTH INC FQHC 4422 GENERAL MEYER NEW ORLEANS, LA 70131	72-1193464	501(c)(3)		227,048	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TRAY FREE CLINIC 652 WEST 11TH STREET TRACY,CA 95376	26-4130481	501(c)(3)		222,199	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FOREST BAPTIST CHURCH MEDICAL MISSION CLINIC 439 EAST FIRST ST FOREST, MS 39074	64-0368681	501(c)(3)		221,618	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Goodwin Community Health Center Inc dba CMAP 2605 PARKWOOD DR BRUNSWICK, GA 31520	01-0576945	501(c)(3)		219,799	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 SQUARE 2835 GRAND AVE DALLAS,TX 75215	79-2332948	501(c)(3)		217,112	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ANDERSON FREE CLINIC 414 N FANT ST ANDERSON,SC 29621	57-0787584	501(c)(3)		216,104	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CHRISTIAN HEALTH CENTER 1115 FAIRVIEW CAMDEN,AR 71701	71-0804142	501(c)(3)		209,948	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CAPE FEAR CLINIC INC 1605 DOCTORS CIRCLE WILMINGTON,NC 28401	56-1984630	501(c)(3)		209,620	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 COUNTRY HEALTHCARE 2920 N 4TH STREET FLAGSTAFF,AZ 86004	86-0663432	501(c)(3)		206,162	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Grace Medical Clinic 211 S 8TH ST MAYFIELD,KY 42066	61-1351519	501(c)(3)		205,651	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ROTACARE INC 875 JERUSALEM AVE UNIONDALE,NY 11530	11-3135331	501(c)(3)		202,908	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Open Arms Health Clinic 3921 W GREEN OAKS BLVD ARLINGTON,TX 76017	45-0621201	501(c)(3)		202,712	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CLEVELAND COUNTY HEALTH DEPARTMENT 315 E GROVER ST SHELBY,NC 28150	56-6000288	115		201,520	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CROSS AND CROWN CLINIC 1008 N MCKINLEY STREET OKLAHOMA CITY,OK 73108	73-1608071	501(c)(3)		200,954	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MISSION ARLINGTON MEDICAL CLINIC 210 W SOUTH ARLINGTON,TX 76010	75-2724385	501(c)(3)		198,504	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 VINCENT DEPAUL COMMUNITY PHARMACY 502 GRAMMONT ST MONROE,LA 71201	90-0014479	501(c)(3)		198,300	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 FREE CLINIC INC 249 MILL STREET HAGERSTOWN,MD 21740	52-1772594	501(c)(3)		198,114	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PARK WEST MEDICAL CENTER 9352 Park West Knoxville,TN 37923	62-1646734	501(c)(3)		196,944	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 CLINIC OF PASCO INC 5334 ASPEN ST NEW PORT RICHEY,FL 34652	59-3072334	501(c)(3)		196,720	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OPEN ARMS HEALTH CLINIC 3921 W GREEN OAKS BLVD ARLINGTON,TX 76017	45-0621201	501(c)(3)		194,953	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Cabrini Clinic 1234 PORTER STREET DETROIT,MI 48226	38-3129349	501(c)(3)		194,342	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LORAIN COUNTY FREE CLINIC 3323 PEARL AVE LORAIN,OH 44055	34-1506180	501(c)(3)		191,626	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FREE CLINIC OF CULPEPER 610 LAUREL STREET CULPEPER,VA 22701	52-1366700	501(c)(3)		190,585	Fair Market Value	Medical Supplies	ON-GOING		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ACS Community LIFT Medical Services 5045 WEST 1ST AVE DENVER, CO 80219	52-0643036	501(c)(3)		190,373	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GREATER TRENTON CMHC INC 1001 SPRUCE STREET TRENTON,NJ 08638	22-2351183	501(c)(3)		185,622	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SAFE HARBOR FREE CLINIC 7209 265TH ST STANWOOD,WA 98292	26-3825107	501(c)(3)		184,605	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNISON BEHAVIORAL HEALTH 1007 MARY STREET WAYCROSS,GA 31501	58-2107877	501(c)(3)		183,392	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SAN JOSE CLINIC 2615 FANNIN ST HOUSTON,TX 77002	76-0373703	501(c)(3)		182,170	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CABRINI CLINIC 1234 PORTER STREET DETROIT,MI 48226	38-3129349	501(c)(3)		178,904	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LAKE COUNTY FREE CLINIC 54 SOUTH STATE ST SUITE 302 PAINESVILLE,OH 44077	34-1081191	501(c)(3)		177,478	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
COMMUNITY HEALTH CLINIC OF JOPLIN 701 S JOPLIN AVE JOPLIN,MO 64801	43-1643962	501(c)(3)		171,233	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NORTHPOINTE BEHAVIORAL HEALTHCARE SYSTEMS 715 PYLE DR KINGSFORD,MI 49802	38-3210490	501(c)(3)		169,913	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HOPE HEALTH CLINIC 1025 SANIBEL WAY LAGRANGE,KY 40031	45-2340606	501(c)(3)		167,408	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Clare Health Clinic 1121 S INDIANA AVE CROWN POINT,IN 46307	35-1330472	501(c)(3)		165,363	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
JEFFERSON COUNTY FOURTH STREET HEALTH CENTER ONE ROSS PARK STEUBENVILLE,OH 43952	20-3924355	501(c)(3)		165,333	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Capital Area Healthnetwork 719 N 25TH STREET RICHMOND,VA 23223	54-1884190	501(c)(3)		164,961	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEALING HANDS HEALTH CENTER 210 MEMORIAL DR BRISTOL,TN 37620	62-1677000	501(c)(3)		163,686	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WESTMINSTER FREE CLINIC 5560 NAPOLEON DRIVE OAK PARK,CA 91377	77-0563241	501(c)(3)		161,991	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 MEDICAL CLINIC 615 WASHINGTON STREET SHELBYVILLE,KY 40065	61-1211189	501(c)(3)		161,659	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CHRISTIAN COMMUNITY ACTION 200 SOUTH MILL STREET LEWISVILLE,TX 75057	23-7319371	501(c)(3)		161,391	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FLORIDA HOSPITAL WATERMAN COMMUNITY HEALTH CLINIC 2300 KURT STREET EUSTIS,FL 32726	59-3140669	501(c)(3)		161,243	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 LUKES FREE MEDICAL CLINIC 162 N DEAN ST SPARTANBURG,SC 29302	57-0943232	501(c)(3)		159,848	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SMITH MEDICAL CLINIC INC 116 BASKERVILL DRIVE PAWLEYS ISLAND,SC 29585	57-0786699	501(c)(3)		159,203	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FOUNDATION FOR HIV AND KIDNEY DIALYSIS INC 14 ZIRKEL AVENUE PISCATAWAY,NJ 08854	43-2024266	501(c)(3)		158,566	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MORTON COMPREHENSIVE SERVICES 1334 N LANSING AVE TULSA,OK 74106	73-1177858	501(c)(3)		158,104	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MAMOU HEALTH RESOURCES INC 300 SOUTH STREET MAMOU,LA 70554	72-0949444	501(c)(3)		156,783	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CENTRO SAN VICENTE 8061 ALAMEDA AVE EL PASO,TX 79915	74-2505561	501(c)(3)		153,789	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ETOWAH FREE COMMUNITY CLINIC 423 S 3RD STREET GADSDEN,AL 35901	82-0562064	501(c)(3)		151,567	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Etowah Free Community Clinic 423 S 3RD STREET GADSDEN,AL 35901	82-0562064	501(c)(3)		150,529	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MENTAL HEALTH CENTER OF DENVER 4141 E DICKENSON PL DENVER,CO 80222	74-2499946	501(c)(3)		147,562	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SOUTHWEST MISSOURI AREA COALITION 11 TERRACE LN BUFFALO,MO 65622	27-3253482	501(c)(3)		146,425	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICARES FREE CLINIC OF NORWALK 98 SOUTH MAIN STREET NORWALK,CT 06854	06-1008595	501(c)(3)		141,536	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
REACH OUT OF MONTGOMERY COUNTY 25 E FORAKER DAYTON,OH 45409	31-1434282	501(c)(3)		139,157	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
The Health Care Connection 1401 STEFFEN AVENUE CINCINNATI,OH 45215	31-0822524	501(c)(3)		135,542	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
DAMIAN FAMILY CARE CENTERS INC 138-02 QUEENS BLVD BRIARWOOD,NY 11435	22-3433831	501(c)(3)		135,373	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 VINCENTS STUDENT FREE CLINIC 2817 POST OFFICE ST GALVESTON,TX 77550	74-1384864	501(c)(3)		134,728	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ELLENSBURG COMMUNITY HEALTH CLINIC 110 W 6TH AVE ELLENSBURG, WA 98926	65-1185178	501(c)(3)		134,158	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 BRIDGE CLINIC 318 NORTH CHURCH STREET ROCKFORD,IL 61111	27-3097955	501(c)(3)		133,882	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Raphael Community Free Clinic Inc 1807 Water Street Kerrville,TX 78028	74-2819628	501(c)(3)		132,020	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HOPE CLINIC OF GARLAND 808 WAVE A GARLAND, TX 75040	75-2960314	501(c)(3)		131,959	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Delta Health Alliance PO BOX 277 STONEVILLE,MS 38776	64-0892954	501(c)(3)		130,268	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 HEALTH CENTER OF CENTRAL WYOMING 5000 BLACKMORE RD CASPER, WY 82609	83-0326307	501(c)(3)		129,447	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CROSSOVER MINISTRY 108 COWARDIN AVE RICHMOND,VA 23224	54-1371067	501(c)(3)		129,332	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GRAND AVE FREE MEDICAL CLINICFREE CLINICS OF IOWA 605 NORTH GRAND AVENUE SPENCER,IA 51301	42-1428706	501(c)(3)		128,168	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CHCGDEast Dayton Health Center 2132 E THIRD ST DAYTON,OH 45403	26-1253235	501(c)(3)		127,923	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Grace Medical Home 51 PENNSYLVANIA ST ORLANDO,FL 32806	26-1817966	501(c)(3)		127,870	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 Medical Clinic 615 WASHINGTON STREET SHELBYVILLE,KY 40065	61-1211189	501(c)(3)		127,580	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Free Clinic Inc 249 MILL STREET HAGERSTOWN,MD 21740	52-1772594	501(c)(3)		127,397	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Interfaith Clinic 403 W OAK SUITE 200 EL DORADO,AR 71730	71-0236863	501(c)(3)		126,297	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 HEALTHWORX 1543 MCGINNIS STREET ALEXANDRIA,LA 71301	72-1444312	501(c)(3)		125,028	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SEMO Health NetWork 415 MAIN STREET NEW MADRID, MO 63869	43-1253101	501(c)(3)		124,867	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GOOCHLAND FREE CLINIC AND FAMILY SERVICES 1800 SANDY HOOK RD GOOCHLAND,VA 23063	54-1967650	501(c)(3)		124,802	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SAN FRANCISCO FREE CLINIC 4900 CALIFORNIA ST SAN FRANCISCO,CA 94118	94-3186248	501(c)(3)		124,686	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PEOPLES CLINIC 3110 GOULDEN PORT HURON,MI 48060	38-3274342	501(c)(3)		123,560	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
The Good Samaritan Health Center 313 Arnold Avenue Greenville, MS 38701	26-2117290	501(c)(3)		123,261	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FORT BEND FAMILY HEALTH CENTER DBA ACCESSHEALTH 400 AUSTIN ST RICHMOND,TX 774694406	74-1951476	501(c)(3)		121,823	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NEWHOPE CLINIC 41 S COURT STREET OWINGSVILLE,KY 40360	61-1363437	501(c)(3)		121,183	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 DR ALBERT B CLEAGE SR MEMORIAL HEALTH CENT 700 SEWARD STREET DETROIT,MI 48202	11-3754940	501(c)(3)		120,936	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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)		119,071	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LAFAYETTE COMMUNITY HEALTHCARE CLINIC 1317 JEFFERSON STREET LAFAYETTE, LA 70501	72-1221982	501(c)(3)		117,657	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VOLUNTEERS IN MEDICINE 190 N PENNSYLVANIA WILKES BARRE,PA 18702		501(c)(3)		117,257	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Samuel Dixon Family Health Centers Inc 25115 W Avenue Stanford Valencia, CA 91355	95-4278726	501(c)(3)		115,925	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Mission Medical Clinic 2125 E LASALLE COLORADO SPRINGS,CO 80909	68-0506812	501(c)(3)		115,922	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CAPITAL AREA HEALTHNETWORK 719 N 25TH STREET RICHMOND,VA 23223	54-1884190	501(c)(3)		114,042	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 Community Services Outreach Center 142 WEBSTER AVENUE ROCHESTER,NY 14609	16-1463421	501(c)(3)		113,478	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Family Health Partnership Clinic 401 CONGRESS PARKWAY CRYSTAL LAKE,IL 60014	36-4277029	501(c)(3)		113,226	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
YAKIMA NEIGHBORHOOD HEALTH SERVICES 12 SOUTH 8TH STREET YAKIMA,WA 989072605	91-0928817	501(c)(3)		112,287	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
URBAN MINISTRIES OF WAKE COUNTY INC 1390 CAPITAL BLVD RALEIGH,NC 27603	58-1422700	501(c)(3)		112,221	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SOUTHEAST INC 16 WEST LONG STREET COLUMBUS,OH 43215	31-0940189	501(c)(3)		112,106	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DELTA HEALTH ALLIANCE PO BOX 277 STONEVILLE,MS 38776	64-0892954	501(c)(3)		111,260	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 MEDINA HEALTH MINISTRY 970 E WASHINGTON STREET MEDINA,OH 44256	30-0092944	501(c)(3)		108,712	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GOOD HEALTH CLINIC INC 91555 OVERSEAS HWY TAVERNIER,FL 33070	04-3745805	501(c)(3)		108,320	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GAIN INC (GREATER ASSISTANCE TO THOSE IN NEED) 712 W 3RD STREET LITTLE ROCK,AR 72201	71-0763418	501(c)(3)		107,672	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WARREN COUNTY FREE CLINIC INC 546 WRIDGEWAY ST WARRENTON,NC 27589	20-4307481	501(c)(3)		103,562	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SET FAMILY MEDICAL CLINICS 2864 S CIRCLE COLORADO SPRINGS,CO 80906	84-1183335	501(c)(3)		103,030	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GREENVILLE FREE MEDICAL CLINIC 600 ARLINGTON AVENUE GREENVILLE, SC 29601	57-0855205	501(c)(3)		101,293	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Partnering for Health 501 HOWARD AVE SUITE 204B ALTOONA,PA 16601	25-1842308	501(c)(3)		99,355	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ETOWAH FREE COMMUNITY CLINIC 423 S 3RD STREET GADSDEN,AL 35901	82-0562064	501(c)(3)		99,039	Fair Market Value	Medical Supplies	EMERGENCY			

Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
IBN SINA FOUNDATION 11226 S WILCREST DR HOUSTON,TX 77099	76-0698464	501(c)(3)		98,170	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NEIGHBORHOOD SERVICE ORGANIZATION 3430 THIRD AVE DETROIT,MI 48201	38-1561624	501(c)(3)		98,031	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FAITH FAMILY MEDICAL CLINIC 326 21ST AVE N NASHVILLE,TN 37203	62-1816811	501(c)(3)		97,638	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Open Door Clinic of Alamance County 319 N GRAHAM-HOPEDALE RD BURLINGTON,NC 27217	56-1794210	501(c)(3)		97,433	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Mamou Health Resources Inc 300 SOUTH STREET MAMOU,LA 70554	72-0949444	501(c)(3)		96,992	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FREE MEDICAL CLINIC OF OAK RIDGE 116 E DIVISION RD OAK RIDGE,TN 37830	90-0715369	501(c)(3)		95,973	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 Shepherd Community Clinic 240 E WASHINGTON MARTINSVILLE,IN 46151	35-1365963	501(c)(3)		93,921	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 CARE CLINIC OF HIGHLANDS-CASHIERS INC 52 AUNT DORA DRIVE HIGHLANDS,NC 28741	65-1251915	501(c)(3)		93,038	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Trı City Health Partnership 318 WALNUT STREET SAINT CHARLES,IL 60174	36-4475369	501(c)(3)		92,618	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 914 W CARLISLE AVE SPOKANE, WA 99205	91-1435174	501(c)(3)		92,430	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ETOWAH BAPTIST CHARITY PHARMACY 18901 E ETOWAH RD NOBLE,OK 73068	73-1637087	501(c)(3)		92,278	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PARTNERS FOR HEALING INC 109 WEST BLACKWELL TULLAHOMA,TN 37388	62-1834800	501(c)(3)		90,684	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FREE MEDICAL CLINIC 47 W LONG AVENUE DUBOIS,PA 15801	25-1804763	501(c)(3)		90,430	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MANNA MINISTRIES INC 120 STREET A SUITE A PICAYUNE,MS 39466	20-1788094	501(c)(3)		90,123	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
POLK COUNTY HEALTH CENTER 1317 W BROADWAY BOLIVAR, MO 65613	43-1268665	501(c)(3)		89,000	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
KONZA PRAIRIE COMMUNITY HEALTH CENTER 361 GRANT AVENUE JUNCTION CITY,KS 66441	48-1150706	501(c)(3)		88,879	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CATHERINES HEALTH CENTER 1211 LAFAYETTE GRAND RAPIDS,MI 49505	20-3572418	501(c)(3)		86,674	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GOOD SHEPHERD CLINIC 6392 MURPHY DRIVE MORROW,GA 30260	58-2578581	501(c)(3)		86,318	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MOORE FREE CARE CLINIC INC 211 TRIMBLE SOUTHERN PINES,NC 28387	01-0781234	501(c)(3)		85,711	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MALTA HOUSE OF CARE INC 19 WOODLAND STREET HARTFORD,CT 06105	20-3562424	501(c)(3)		85,636	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 CLINIC 143 CHURCH ST PHOENIXVILLE,PA 19460	23-3072363	501(c)(3)		85,423	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 BROWARD HOSPITAL DISTRICT DBA BROWARD HEAL 303 SE 17TH FORT LAUDERDALE, FL 33316	59-6012065	501(c)(3)		85,348	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ARTHUR NAGEL COMMUNITY CLINIC 1116 12TH STREET UNIT 3 BANDERA,TX 78003	77-0697361	501(c)(3)		85,229	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BROAD STREET CLINIC 534 N 35TH STREET SUITE K MOREHEAD CITY, NC 28557	56-1853604	501(c)(3)		84,782	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ZUFALL HEALTH CENTER 18 W BLACKWELL STREET DOVER,NJ 07801	22-3125397	501(c)(3)		83,538	Faır Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LA CLINICA DE LA ESPERANZA 3200 GRAND AVENUE DES MOINES,IA 50312	42-0680452	501(c)(3)		83,528	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GET UP PROJECT 10401 ANDERSON MILL RD AUSTIN,TX 78750	45-4931906	501(c)(3)		83,187	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SANTA ROSA COMMUNITY HEALTH CENTERS 3569 ROUND BARN CR SANTA ROSA,CA 95403	68-0365296	501(c)(3)		82,966	Fair Market Value	Medical Supplies	ON-GOING		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TRAVERSE HEALTH CLINIC 3147 LOGAN VALLEY RD TRAVERSE CITY, MI 49684	30-0224028	501(c)(3)		82,563	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HARMONY HEALTH CLINIC 201 E ROOSEVELT LITTLE ROCK,AR 72206	20-5691313	501(c)(3)		81,162	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CRISIS CONTROL MINISTRY 200 EAST 10TH WINSTONSALEM,NC 27101	23-7348168	501(c)(3)		80,345	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FernCare Free Clinic Inc 459 E Nine Mile Road Ferndale, MI 48220	32-0246843	501(c)(3)		79,880	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
COMMUNITY HEALTH CENTER OF THE BLACK HILLS 504 E MONROE ST RAPID CITY,SD 57701	46-0418932	501(c)(3)		79,137	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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)		76,828	Fair Market Value	Medical Supplies	ON-GOING		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
DADE COUNTY HEALTH DEPARTMENT 413 W WATER STREET GREENFIELD, MO 65661	43-1266535	115		76,471	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BEAR LAKECACHE VALLEY COMMUNITY HEALTH CENTER 1515 N 400 E SUITE 104 NLOGAN,UT 84341	81-0587644	501(c)(3)		75,722	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 House Free Community Health Center 213 N MAIN ST DEARING,GA 30808	32-0126528	501(c)(3)		75,031	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE GOOD SAMARITAN CLINIC OF JACKSON COUNTY 293 HOSPITAL ROAD SYLVA,NC 28779	56-2266536	501(c)(3)		72,020	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 OPEN DOOR CLINIC 130 W CENTRAL CHIPPEWA FALLS, WI 54729	20-3673759	501(c)(3)		71,980	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEALTHCARE FOR THE HOMELESS - HOUSTON 2505 FANNIN STREET HOUSTON,TX 77002	76-0647934	501(c)(3)		71,713	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VOLUNTEERS IN MEDICINE CLINIC OF MONROE COUNTY 811 W SECOND STREET BLOOMINGTON,IN 47403	20-5383915	501(c)(3)		71,382	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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	501(c)(3)		71,081	Fair Market Value	Medical Supplies	ON-GOING		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SERVOLUTION HEALTH SERVICES INC 245 POWELL VALLEY SPEEDWELL,TN 37870	45-4486454	501(c)(3)		70,239	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Clinic 401 ARNOLD STREET NE CULLMAN,AL 35055	20-0149215	501(c)(3)		68,897	Fair Market Value	Medical Supplies	ON-GOING		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VOLUNTEERS IN MEDICINE INC 1039 S DUCHESNE ST CHARLES,MO 63301	43-1791543	501(c)(3)		68,180	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
JEWISH RENAISSANCE MEDICAL CENTER 275 HOBART ST PERTH AMBOY,NJ 08861	22-3780067	501(c)(3)		67,633	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Nhan Hoa Comprehensive Health Care Clinic 7761 GARDEN GROVE BLVD GARDEN GROVE, CA 92841	33-0477323	501(c)(3)		67,232	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GOODWIN COMMUNITY HEALTH CENTER INC DBA CMAP 2605 PARKWOOD DR BRUNSWICK,GA 31520	01-0576945	501(c)(3)		66,824	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
KIDS COME FIRST COMMUNITY HEALTH CENTER 1556 S SULTANA AVE ONTARIO,CA 91761	33-0969025	501(c)(3)		65,984	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 JOSEPHS NEIGHBORHOOD CENTER ST JOSEPHS NEIGHBORHOOD CTR ROCHESTER,NY 14620	46-1176792	501(c)(3)		65,529	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PARTNERING FOR HEALTH 501 HOWARD AVE SUITE 204B ALTOONA,PA 16601	25-1842308	501(c)(3)		64,797	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GLACIER COMMUNITY HEALTH CENTER 519 E MAIN STREET CUT BANK,MT 59427	77-0597067	501(c)(3)		64,485	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Southwest Missouri Area Coalition 11 TERRACE LN BUFFALO,MO 65622	27-3253482	501(c)(3)		64,203	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEALTH PARTNERS OF WESTERN OHIO 441 E 8TH ST LIMA,OH 45804	56-2330309	501(c)(3)		64,038	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
COMMUNITYHEALTH 2611 W CHICAGO AVE CHICAGO,IL 60622	36-3931793	501(c)(3)		63,656	Fair Market Value	Medical Supplies	ON-GOING		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 SALVATION ARMY - USA WESTERN TERRITORY 1370 Pennsylvania Street Denver, CO 80203	94-1156347	501(c)(3)		63,377	Fair Market Value	Medical Supplies	EMERGENCY			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NEW ORLEANS DREAM CENTER 1137 SAINT CHARLES NEW ORLEANS,LA 70130	30-0591534	501(c)(3)		62,937	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF LOUISVILLE WINGS CLINIC 550 S JACKSON STREET LOUISVILLE,KY 40202	61-1029626	501(c)(3)		62,644	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LA CLINICA CRISTIANA 3200 WOODWARD AV MUSCLE SHOALS, AL 35661	20-1624284	501(c)(3)		62,490	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 COMMUNITY FREE CLINIC 528 A LAKE CONCORD RD CONCORD, NC 28025	58-2131301	501(c)(3)		62,400	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OZANAM CHARITABLE PHARMACY INC 571 DAUPHIN STREET MOBILE,AL 36602	72-1386236	501(c)(3)		62,390	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SOUTHWEST UTAH PUBLIC HEALTH DEPARTMENT 620 SOUTH 400 EAST 400 STGEORGE,UT 84770	87-0331280	115		61,590	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Grand Prairie Wellness Center 1710 Small Street Grand Prairie,TX 75050	75-2877107	501(c)(3)		61,385	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RICHMOND AREA HIGH BLOOD PRESSURE CENTER 1200 WEST CARY STREET RICHMOND,VA 23220	52-1303481	501(c)(3)		61,234	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Get Up Project 10401 ANDERSON MILL RD AUSTIN,TX 78750	45-4931906	501(c)(3)		61,212	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 75232	75-6003612	501(c)(3)		60,919	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NORTHWEST ARKANSAS FREE HEALTH CENTER 1100 NORTH WOOLSEY FAYETTEVILLE,AR 72703	58-1691790	501(c)(3)		60,826	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF MIAMI 1601 NW 12 AVE 4067 MIAMI,FL 33136	59-0624458	501(c)(3)		60,687	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 DALLAS SHARED MINISTRIES 2875 MERRELL ROAD DALLAS,TX 75229	75-1908563	501(c)(3)		60,475	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MCKINNEY MEDICAL CENTER 218 QUARTERMAN ST WAYCROSS,GA 31501	58-2101260	501(c)(3)		60,160	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CORPUS CHRISTI METRO MINISTRIES 1919 LEOPARD ST CORPUS CHRISTI,TX 78408	74-2247261	501(c)(3)		59,741	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Way Free Medical Clinic Inc 479 HOUSTON GREEN COVE,FL 32043	76-0828154	501(c)(3)		59,040	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Kansas City Free Health Clinic 3515 BROADWAY KANSAS CITY,MO 64111	43-0967292	501(c)(3)		58,998	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Shepherds Care Medical Clinic 304 B PONY ROAD ZEBULON,NC 27597	26-2757593	501(c)(3)		58,445	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WAIMANLO HEALTH CENTER WAIMANALO HEALTH WAIMANALO,HI 967951247	99-0273205	501(c)(3)		58,351	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
VOLUNTEERS IN MEDICINE 14395 MANCHESTER RD MANCHESTER,MO 63011	27-5088124	501(c)(3)		57,255	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Macon Volunteer Clinic 376 ROGERS AVE MACON,GA 31204	74-3055376	501(c)(3)		56,540	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
A COMMUNITY CLINIC INC 335 MARKET STREET SUNBURY,PA 17801	20-4051982	501(c)(3)		55,973	Fair Market Value	Medical Supplies	ON-GOING		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 HEALTH AND SOCIAL SERVICES CENTER 5635 W FORT ST DETROIT,MI 482093154	38-3094394	501(c)(3)		55,694	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Dr Albert B Cleage Sr Memorial Health Cent 700 SEWARD STREET DETROIT,MI 48202	11-3754940	501(c)(3)		55,308	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Arthur Nagel Community Clinic 1116 12TH STREET UNIT 3 BANDERA,TX 78003	77-0697361	501(c)(3)		55,036	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Westminster Free Clinic 5560 NAPOLEON DRIVE OAK PARK,CA 91377	77-0563241	501(c)(3)		54,877	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 PHARMACY & HEALTH SERVICES INC 2502 TAMIAMI TRAIL NORTH NOKOMIS,FL 34275	26-2295558	501(c)(3)		54,493	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Unity Health Care Inc 1220 12TH STREET SE WASHINGTON, DC 20003	52-1572431	501(c)(3)		53,970	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Church Hill Free Clinic 401 Richmond Street Church Hill,TN 37642	62-1391365	501(c)(3)		53,848	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Floating Hospital 4140 27TH ST LONG ISLAND CITY,NY 11101	13-1624169	501(c)(3)		53,723	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Volunteers In Medicine Clinic 2260 MARCOLA ROAD SPRINGFIELD,OR 97477	93-1276816	501(c)(3)		53,328	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 1300 N 1st street Yakima, WA 98901	23-7050061	501(c)(3)		52,857	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CHILDREN AND COMMUNITY HEALTH CENTER 120 S CENTRAL EXPRESSWAY MCKINNEY,TX 75070	20-0637782	501(c)(3)		52,108	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Greater Texoma Health Clinic 900 N ARMSTRONG AVE DENISON,TX 75020	81-0584983	501(c)(3)		51,709	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
REFUGE CLINIC 525 CORRAL STREET LEXINGTON,KY 40508	37-1547506	501(c)(3)		51,248	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FIRST REFUGE MINISTRIES MEDICAL CLINIC 1701 BROADWAY STREET DENTON,TX 76201	45-5606427	501(c)(3)		51,107	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WASATCH HOMELESS HEALTH CARE INC 409 WEST 400 SOUTH SALT LAKE CITY,UT 84101	87-0569356	501(c)(3)		50,652	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LAKE ST LOUIS VOLUNTEERS IN MEDICINE 10714 VETERANS MEMORIAL LAKE ST LOUIS,MO 63367		501(c)(3)		50,325	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BREVARD HEALTH ALLIANCE 2120 SARNO RD MELBOURNE,FL 32935	90-0068515	501(c)(3)		50,174	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PEOPLES HEALTH WELLNESS CLINIC 553 NORTH MAIN STREET BARRE,VT 05641	03-0343290	501(c)(3)		50,053	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GRACE MEDICAL CLINIC 211 S 8TH ST MAYFIELD,KY 42066	61-1351519	501(c)(3)		49,625	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Athens Nurses Clinic 496 REESE STREET ATHENS,GA 30601	58-2490925	501(c)(3)		49,180	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
New Orleans Dream Center 1137 SAINT CHARLES AVENUE NEW ORLEANS, LA 70130	30-0591534	501(c)(3)		48,497	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
I CARE SAN ANTONIO 1 HAVEN FOR HOPE WAY SAN ANTONIO,TX 78207	74-2690192	501(c)(3)		48,121	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UTAH COUNTY HEALTH DEPARTMENT 151 S UNIVERSITY AVE PROVO,UT 84601	87-6000312	115		47,748	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Rock Springs Clinic 219 ROCK SPRINGS ROAD MILNER,GA 30257	26-4485460	501(c)(3)		46,106	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Neighborhood Health Clinic 121 GOODLETTE RD N NAPLES,FL 34102	59-3546884	501(c)(3)		46,075	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SILOAM FAMILY HEALTH CENTER 820 GALE LANE NASHVILLE,TN 37204	58-1867940	501(c)(3)		46,036	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Refuge Clinic 525 CORRAL STREET LEXINGTON,KY 40508	37-1547506	501(c)(3)		46,028	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PITT COUNTY CARE INC BRODY BLDG 2N-45 GREENVILLE,NC 27834	56-2097183	501(c)(3)		45,532	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEALTH ACCESS INC 489 WASHINGTON AVENUE CLARKSBURG, WV 26301	55-0715066	501(c)(3)		44,855	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GEORGIA FARMWORKER HEALTH PROGRAM 920 SOUTH WEST ST BAINBRIDGE,GA 39819	58-6000359	501(c)(3)		44,096	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 NEIGHBORHOOD CHRISTIAN CLINIC 1929 W FILLMORE PHOENIX,AZ 85009	86-0839580	501(c)(3)		43,860	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RIVER VALLEY CHRISTIAN CLINIC 1714 STATE HWY 22 DARDANELLE,AR 72834	20-5193973	501(c)(3)		43,625	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Ministries of Jesus 1100 E I-35 FRONTAGE ROAD EDMOND,OK 73034	73-1622804	501(c)(3)		43,556	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Care Clinic of Highlands-Cashiers Inc 52 AUNT DORA DRIVE HIGHLANDS,NC 28741	65-1251915	501(c)(3)		43,036	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEALTHNET OF ROCK COUNTY INC 23 W MILWAUKEE STREET JANESVILLE, WI 53548	39-1778804	501(c)(3)		42,216	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LOVELAND COMMUNITY HEALTH CENTER PHARMACY 302 3rd Street SE LOVELAND, CO 80537	84-0613289	501(c)(3)		42,180	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Northwest Human Services 681 CENTER STREET NE SALEM,OR 97301	93-0605570	501(c)(3)		41,738	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CARING HANDS HEALTH CLINIC 34-C COURTHOUSE SQUARE CLEVELAND,GA 30528	64-0950194	501(c)(3)		41,316	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GREATER NEW ORLEANS IMMUNIZATION NETWORK 201 EVANS RD HARAHAN,LA 70123	72-0467503	501(c)(3)		41,060	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AUGUSTA REGIONAL FREE CLINIC 342 MULE ACADEMY ROAD FISHERSVILLE,VA 22939	54-1651896	501(c)(3)		40,993	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
GREATER GREENWOOD UNITED MINISTRY FREE MEDICAL CLI 1404 EDGEFIELD STREET GREENWOOD,SC 29384	57-1012393	501(c)(3)		40,978	Fair Market Value	Medical Supplies	ON-GOING				

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ONE STOP CLINIC 701 17TH AVE W BRADENTON,FL 34205	59-3340921	501(c)(3)		40,461	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VOLUNTEERS IN MEDICINE CHATTANOOGA 5705 MARLIN ROAD CHATTANOOGA,TN 37411		501(c)(3)		39,671	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
The Kitchen Clinic 1630 N JEFFERSON AVE SPRINGFIELD, MO 65803	43-1384531	501(c)(3)		39,107	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
World Reach inc DBA Bethesda Health Center 133 STETSON DR CHARLOTTE,NC 28262	56-2015959	501(c)(3)		38,891	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FAMILY HEALTH CENTERS INC 2215 PORTLAND AVENUE LOUISVILLE,KY 40212	61-0716483	501(c)(3)		38,860	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NORTHWEST HUMAN SERVICES 681 CENTER STREET NE SALEM,OR 97301	93-0605570	501(c)(3)		38,796	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Pitt County Care Inc BRODY BLDG 2N-45 GREENVILLE,NC 27834	56-2097183	501(c)(3)		38,573	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VOLUNTEERS IN MEDICINE VOLUNTEERS HILTON HEAD ISLAND,SC 29926	57-0959206	501(c)(3)		38,255	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 PEOPLES CITY MISSION FREE MEDICAL CLINIC 110 Q STREET LINCOLN,NE 68512	26-3819766	501(c)(3)		37,623	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OPEN DOOR CLINIC OF ALAMANCE COUNTY 319 N GRAHAM-HOPEDALE RD BURLINGTON,NC 27217	56-1794210	501(c)(3)		37,485	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Scotland Community Health Clinic 1405-B WEST BLVD LAURINBURG,NC 28353	20-2841940	501(c)(3)		36,496	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GOOD SAMARITAN HEALTH CLINIC 401 ARNOLD STREET NE CULLMAN,AL 35055	20-0149215	501(c)(3)		36,447	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
METRO COMMUNITY PROVIDER NETWORK INC 3701 S BROADWAY ENGLEWOOD, CO 80113	74-2477108	501(c)(3)		36,423	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
EBENEZER MEDICAL OUTREACH 1448 10TH AVE HUNTINGTON,WV 25701	55-0745033	501(c)(3)		36,351	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
I Care San Antonio 1 HAVEN FOR HOPE WAY SAN ANTONIO,TX 78207	74-2690192	501(c)(3)		36,338	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CLINICA COLORADO 8406 CLAY ST WESTMINSTER,CO 80031	27-3794068	501(c)(3)		35,859	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
KATAHDIN VALLEY HEALTH CENTER 30 HOULTON ST PATTEN,ME 04747	23-7411014	501(c)(3)		35,408	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Richmond Area High Blood Pressure Center 1200 WEST CARY STREET RICHMOND,VA 23220	52-1303481	501(c)(3)		35,200	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CHIPPEWA VALLEY FREE CLINIC 836 RICHARD DR EAU CLAIRE,WI 54701	39-1840231	501(c)(3)		35,024	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BROCKTON NEIGHBORHOOD HEALTH CENTER 63 MAIN STREET BROCKTON,MA 02301	04-3165044	501(c)(3)		34,476	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 HEALTH CARE CLINIC 902 N FRANKLIN NORMAL,IL 61761	37-1316328	501(c)(3)		34,333	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SCOTLAND COMMUNITY HEALTH CLINIC 1405-B WEST BLVD LAURINBURG,NC 28353	20-2841940	501(c)(3)		34,266	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEALTH PARTNERS FREE CLINIC 1300 NORTH COUNTY TROY,OH 45373	31-1596731	501(c)(3)		33,626	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CHCGDSouthview Health Center 25 THORPE DR DAYTON,OH 45420	26-1253235	501(c)(3)		33,488	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Native American Community Health Center-West 2423 W DUNLAP AVE PHOENIX,AZ 85021	94-2540194	501(c)(3)		32,964	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BRIDGES TO HEALTH 1251 W KEM ROAD MARION,IN 46952	20-5405181	501(c)(3)		32,877	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Westside Family Healthcare 300 Water St Wilmington, DE 19801	22-2488654	501(c)(3)		32,848	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FEEDING AMERICA 35 East Wacker Drive Chicago,IL 60601	36-3673599	501(c)(3)		32,839	Fair Market Value	Medical Supplies	EMERGENCY			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CATHOLIC CHARITIES DENVER 4045 Pecos Street Denver,CO 80211	84-0686679	501(c)(3)		32,792	Fair Market Value	Medical Supplies	EMERGENCY		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HEAL Inc 2600 Martin Luther King Jr Dr Atlanta, GA 30311	26-3990559	501(c)(3)		32,599	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TRINITY CLINIC 507 4TH STREET CALVIN,OK 74531	73-1325401	501(c)(3)		32,548	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 LA FREE CLINIC DBA SABAN COMMUNITY CLINIC 8405 BEVERLY BLVD LOS ANGELES,CA 90048	95-2539105	501(c)(3)		32,362	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Caring Hands Health Clinic 34-C COURTHOUSE SQUARE CLEVELAND,GA 30528	64-0950194	501(c)(3)		32,283	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Volunteers In Medicine Inc 1039 S DUCHESNE ST CHARLES,MO 63301	43-1791543	501(c)(3)		31,934	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ONEWORLD COMMUNITY HEALTH CENTERS INC 4920 S 30TH STREET OMAHA,NE 68107	47-0548990	501(c)(3)		30,562	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Proteus 3850 Merle Hay Road Des Moines,IA 50310	42-1186501	501(c)(3)		30,512	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SHEPHERDS CARE MEDICAL CLINIC 304 B PONY ROAD ZEBULON,NC 27597	26-2757593	501(c)(3)		29,976	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
JUST KIDS DENTAL 1313 FAIRGROUNDS ROAD TWO HARBORS,MN 55616		501(c)(3)		29,965	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Edward R Leahy Jr Center Clinic for the Uninsure 800 LINDEN STREET SCRANTON,PA 18510	24-0795495	501(c)(3)		29,876	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICARES FREE CLINIC OF BRIDGEPORT 115 HIGHLAND AVENUE BRIDGEPORT,CT 06604	06-1422741	501(c)(3)		29,642	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ELLENTON HEALTH CLINIC PUBLIC HEALTH DISTRICT 8-2 185 NORTH BAKER STREET ELLENTON,GA 31747	23-7379607	501(c)(3)		29,480	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NHAN HOA COMPREHENSIVE HEALTH CARE CLINIC 7761 GARDEN GROVE BLVD GARDEN GROVE,CA 92841	l	501(c)(3)		29,399	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NASSON HEALTH CAREYCCAC PO BOX 72 SANFORD,ME 04073	01-6020406	501(c)(3)		29,233	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
The Good Samaritan Clinic of Jackson County 293 HOSPITAL ROAD SYLVA,NC 28779	56-2266536	501(c)(3)		29,117	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 415 EAST 3900 SOUTH SALT LAKE CITY,UT 84115	20-2313461	501(c)(3)		28,910	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BUNCOMBE COUNTY DEPARTMENT OF HEALTH 40 COXE AVENUE ASHEVILLE,NC 28801	56-6000279	115		28,890	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Stehouwer Free Clinic 201 N MITCHELL CADILLAC, MI 49601	61-1401888	501(c)(3)		28,829	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
DOCTORS OF THE WORLD- USA INC 137 VARICK STREET NEW YORK, NY 10013	35-2426718	501(c)(3)		28,527	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Volunteers in Medicine 190 N PENN AVE WILKES BARRE,PA 18702	20-3531527	501(c)(3)		28,125	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Konza Prairie Community Health Center 361 GRANT AVENUE JUNCTION CITY, KS 66441	48-1150706	501(c)(3)		27,985	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 ACTION CENTER 57-10 Beach Channel Drive Far Rockaway, NY 11692	75-3014243	501(c)(3)		27,918	Fair Market Value	Medical Supplies	POST-EMERGENCY			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Lower Lights Christian Health Center Inc 1160 WEST BROAD STREET COLUMBUS,OH 43222		501(c)(3)		27,798	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEALING BRIDGE CLINIC 215 WILLOWBEND RD PEACHTREE CITY,GA 30269	26-3555799	501(c)(3)		27,565	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 OF AUSTIN IMMUNIZATION PROGRAM SHOTS FOR TOTS/BIG SHOTS AUSTIN,TX 78752	74-6000085	115		27,366	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RAPHA CLINIC OF WEST GEORGIA INC 109B ALLEN MEMORIAL DR BREMEN,GA 30110	27-1188932	501(c)(3)		26,806	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 SALVATION ARMY - PENSACOLA FL 1501 North Q Street Pensacola,FL 32505	13-3485289	501(c)(3)		26,618	Fair Market Value	Medical Supplies	EMERGENCY			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WHATCOM COUNTY HEALTH DEPARTMENT 1500 N STATE ST BELLINGHAM, WA 98225	91-6001383	115		26,307	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HELPING HAND CLINIC 507 NORTH STEELE ST SANFORD, NC 27330	56-1752295	501(c)(3)		26,300	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Clearwater Free Clinic 707 N FT HARRISON AVE CLEARWATER,FL 33755	59-1852871	501(c)(3)		26,154	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LA MAESTRA COMMUNITY CLINIC 4060 FAIRMOUNT AVE SAN DIEGO,CA 92105	33-0473171	501(c)(3)		26,151	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PEOPLES HEALTH CLINIC 650 ROUND VALLEY DRIVE PARK CITY,UT 84060	87-0638042	501(c)(3)		25,897	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
INTERFAITH CLINIC 403 W OAK SUITE 200 EL DORADO,AR 71730	71-0236863	501(c)(3)		25,777	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Waimanlo Health Center WAIMANALO HEALTH CENTER WAIMANALO, HI 967951247	99-0273205	501(c)(3)		25,569	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BUTLER COUNTY HEALTH DEPARTMENT 1619 NORTH MAIN STREET POPLAR BLUFF,MO 63901		115		25,546	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 75232	75-6003612	501(c)(3)		25,522	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Dade County Health Department 413 W WATER STREET GREENFIELD, MO 65661	43-1266535	115		25,284	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LONOKE COUNTY CHRISTIAN CLINIC 502 RITCHIE ROAD CABOT,AR 72023	26-1585012	501(c)(3)		25,205	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SHEPHERDS CLINIC 2800 KIRK AVE BALTIMORE, MD 21218	52-1739001	501(c)(3)		25,200	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PediPlace 502 S OLD ORCHARD LEWISVILLE,TX 75067	75-2512752	501(c)(3)		24,891	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WESLEY HEALTH CENTER 1300 S 10TH ST PHOENIX,AZ 85034	86-0133770	501(c)(3)		24,681	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SUMMIT COUNTY HEALTH DEPARTMENT 85 NORTH 50 EAST COALVILLE,UT 84017	87-6000295	115		24,635	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LAS CLINICAS DEL NORTE STATE ROAD 571 EL RITO,NM 87530	85-0249591	501(c)(3)		24,307	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PROMISE COMMUNITY HEALTH CENTER 338 1ST AVE NW SIOUX CENTER,IA 51250	20-5896415	501(c)(3)		24,173	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CARE ALLIANCE HEALTH CENTER 1530 ST CLAIR AVE CLEVELAND,OH 44114	34-1748776	501(c)(3)		23,754	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HERITAGE HEALTH AND HOUSING 1727 AMSTERDAM AVE NEW YORK, NY 10031	13-2661509	501(c)(3)		23,601	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MATAGORDA EPISCOPAL HEALTH OUTREACH PROGRAM MEHOP BAY CITY,TX 77414	20-0537948	501(c)(3)		23,507	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VOLUNTEER HEALTHCARE CLINIC 4215 MEDICAL PARKWAY AUSTIN,TX 78756	74-6082464	501(c)(3)		22,732	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 HEALTH CARE CONNECTION 1401 STEFFEN AVENUE CINCINNATI,OH 45215	31-0822524	501(c)(3)		22,168	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MACON VOLUNTEER CLINIC 376 ROGERS AVE MACON,GA 31204	74-3055376	501(c)(3)		22,062	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Livingstone Community Development Corporation 12362 BEACH BLVD STANTON,CA 90680	27-0947808	501(c)(3)		21,556	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 LUKES CLINIC 132 SEYMOUR AVE JACKSON,MI 49202	32-0038675	501(c)(3)		21,453	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 OLYMPIA FREE CLINIC 108 STATE AVE NW OLYMPIA,WA 98501	27-1606329	501(c)(3)		21,405	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Phoenix Fire Department Baby Shots Program 1818 S 16th St Phoenix,AZ 85034	86-6000256	115		20,530	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BEAR RIVER HEALTH DEPARTMENT 655 EAST 1300 NORTH LOGAN,UT 84341	87-0109001	115		20,530	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CENTRAL UTAH PUBLIC HEALTH DEPARTRMENT 70 WESTVIEW DR RICHFIELD,UT 84701	87-0629869	115		20,530	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MARYS CENTER 3912 GEORGIA AVE NW WASHINGTON,DC 20011	52-1594116	501(c)(3)		20,530	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WEBSTER CITY FREE CLINIC 820 JAMES STREET WEBSTER CITY,IA 50595	42-1428706	501(c)(3)		20,468	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Lake Area Free Clinic 856B ARMOUR RD OCONOMOWOC, WI 53066	39-2006388	501(c)(3)		19,869	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SACRED HEART HOSPITAL PENSACOLA 5151 N NINTH AVE PENSACOLA,FL 32504	90-0036572	501(c)(3)		19,768	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FREE MEDICAL CLINIC OF DARLINGTON COUNTY 203 GROVE STREET DARLINGTON,SC 29532	58-2445265	501(c)(3)		19,517	Fair Market Value	Medical Supplies	ON-GOING		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
COASTAL FAMILY HEALTH CENTER 1046 DIVISION STREET BILOXI,MS 39530	64-0592416	501(c)(3)		19,460	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
EISNER PEDIATRIC & FAMILY MEDICAL CENTER 1500 S OLIVE ST LOS ANGELES,CA 90015	95-1690966	501(c)(3)		19,294	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HEARTS AND HANDS CLINIC 127 NORTH COLLEGE STATESBORO,GA 30458	26-4597700	501(c)(3)		19,051	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PROJECT HOSPITALITY 100 Park Avenue Staten Island,NY 10302	13-3234441	501(c)(3)		18,934	Fair Market Value	Medical Supplies	POST-EMERGENCY		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Catherine McAuley Clinic 5514 HOHMAN AVE HAMMOND,IN 46320	35-1835133	501(c)(3)		18,700	Fair Market Value	Medical Supplies	ON-GOING		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BENTON FRANKLIN HEALTH DISTRICT 7102 OKANOGAN PLACE KENNEICK, WA 99336	91-1018182	115		18,625	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Bighorn Valley Health Center 10 WEST 4TH STREET HARDIN,MT 59034	27-3113428	501(c)(3)		18,481	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Conway Interfaith Clinic 830 NORTH CREEK CONWAY,AR 72032	41-2058756	501(c)(3)		18,340	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Neighbor for Neighbor 505 E 36TH STREET NORTH TULSA,OK 74106	73-0776404	501(c)(3)		18,292	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SHELTER HEALTH SERVICES 534 SPRATT ST CHARLOTTE,NC 28206	20-3041985	501(c)(3)		18,069	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEGIRA PROGRAMS INC 8623 NORTH WAYNE ROAD WESTLAND,MI 48185	38-2172765	501(c)(3)		18,018	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CHARITABLE CHRISTIAN MEDICAL CLINIC 133 ARBOR HOT SPRINGS,AR 71901	62-1671396	501(c)(3)		17,821	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PARKVIEW MEDICAL CLINIC 1205 DR MARTIN L KING JR WAY HAINES CITY,FL 33844	01-0790991	501(c)(3)		17,637	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Sacramento Native American Health Center Inc 2020 J STREET SACRAMENTO,CA 95811	20-4287737	501(c)(3)		17,615	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 & WELLNESS 175 SAMARITAN DRIVE JASPER,GA 30143	58-2576315	501(c)(3)		17,497	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Ellenton Health Clinic Public Health District 8-2 185 NORTH BAKER STREET ELLENTON,GA 31747	23-7379607	501(c)(3)		17,454	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEALTH CARE NETWORK INC 904 STATE STREET RACINE,WI 53404	42-1299913	501(c)(3)		17,446	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HANDS OF HOPE CLINIC INC 1010 HOSPITAL DRIVE BLDG B STOCKBRIDGE,GA 30281	42-1591970	501(c)(3)		17,364	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
JEWISH FAMILY SERVICES OF ATLANTIC AND CAPE MAY 607 N Jerome Avenue Margate, NJ 08402	22-2119902	501(c)(3)		17,213	Fair Market Value	Medical Supplies	POST-EMERGENCY			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SIOUXLAND COMMUNITY HEALTH CENTER 1021 NEBRASKA ST SIOUX CITY,IA 51105	42-1374894	501(c)(3)		17,147	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Olympia Free Clinic 108 STATE AVE NW OLYMPIA,WA 98501	27-1606329	501(c)(3)		16,867	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CHARLES TOWN HEALTH RIGHT INC 1212 N MILDRED ST RANSON,WV 25438	55-0778553	501(c)(3)		16,782	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MARIN COMMUNITY CLINICS 3110 KERNER BLVD SAN RAFAEL,CA 94901	94-2237120	501(c)(3)		16,756	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Health Care for the Homeless MDC-SeaMar CHC 2342 Tacoma Ave Tacoma, WA 98402	91-1020139	501(c)(3)		16,582	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Northeast Health DistrictClarke County HD 345 N HARRIS STREET ATHENS, GA 30601	58-6000361	501(c)(3)		16,424	Fair Market Value	Medical Supplies	ON-GOING		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WEBSTER COUNTY HEALTH DEPARTMENT 723 1ST AVENUE SOUTH FORT DODGE,IA 50501	42-6004677	501(c)(3)		16,424	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GLYNN CO BOARD HEALTH DBA COASTAL HEALTH DISTRICT 24 OGLETHORPE PROFESSIONAL BLV SAVANNAH,GA 31406	58-1092888	501(c)(3)		16,424	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 SALVATION ARMY 1370 Pennsylvania Street Denver, CO 80203	94-1156347	501(c)(3)		16,081	Fair Market Value	Medical Supplies	EMERGENCY		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
RotaCare Inc 875 JERUSALEM AVE UNIONDALE,NY 11530	11-3135331	501(c)(3)		15,767	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
A Community Clinic Inc 335 MARKET STREET SUNBURY,PA 17801	20-4051982	501(c)(3)		15,717	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Lee County Volunteers in Medicine 1154 LEE BOULEVARD LEHIGH ACRES,FL 33936	01-0941498	501(c)(3)		15,641	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 FREE CLINICS OF HENDERSON COUNTY 841 CASE STREET HENDERSONVILLE, NC 28792	56-2212024	501(c)(3)		15,108	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NATIVE AMERICAN COMMUNITY HEALTH CENTER-WEST 2423 W DUNLAP AVE PHOENIX,AZ 85021	94-2540194	501(c)(3)		15,101	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ARKANSAS HEALTH DEPARTMENT 4815 W Markham St Little Rock, AR 72205	71-6007358	115		15,020	Fair Market Value	Medical Supplies	EMERGENCY		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CHCGDEAST DAYTON HEALTH CENTER 2132 E THIRD ST DAYTON,OH 45403	26-1253235	501(c)(3)		14,980	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WHITE HOUSE CLINICS 1010 MAIN ST SOUTH MCKEE,KY 40447	61-0843731	501(c)(3)		14,888	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RANDOLPH FAMILY HEALTH CARE MERCE 1831 N FAYETTEVILLE ST ASHEBORO,NC 27203	56-1799394	501(c)(3)		14,390	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TRI CITY HEALTH PARTNERSHIP 318 WALNUT STREET SAINT CHARLES,IL 60174	36-4475369	501(c)(3)		14,336	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Crossroad Health Center 5 E LIBERTY CINCINNATI,OH 45202	31-1321054	501(c)(3)		13,868	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 RESCUE MISSION FREE CLINIC 402 4TH STREET SE ROANOKE,VA 24013	54-0573900	501(c)(3)		13,863	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
DOWNTOWN CLINIC 611 SOUTH SECOND STREET LARAMIE,WY 82070	83-0326354	501(c)(3)		13,862	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Magis Clinic Siena/Francis House Omaha,NE 68102	47-0376583	501(c)(3)		13,784	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
University of Miami 1601 NW 12 AVE 4067 MIAMI,FL 33136	59-0624458	501(c)(3)		13,648	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PROJECT SOS SUPPORT OUR SOLIDERS 2412 Due West Drive The Villages,FL 32162	27-2392657	501(c)(3)		13,436	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEARTLAND COMMUNITY HEALTH CLINIC 1701 W GARDEN PEORIA,IL 61605	37-1270794	501(c)(3)		13,356	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HOPE MedicalDental Clinic 111 MEADOWVIEW DRIVE CLEBURNE,TX 76033	75-2953856	501(c)(3)		13,316	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Neighborhood Christian Clinic 1929 W FILLMORE PHOENIX,AZ 85009	86-0839580	501(c)(3)		13,242	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
KITSAP PUBLIC HEALTH DISTRICT 345 6TH ST STE 300 BREMERTON,WA 98337	42-1689063	501(c)(3)		13,228	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
M-POWER MINISTRIES HEALTH CENTER 4022 4TH AVE SOUTH BIRMINGHAM,AL 35222	31-1639601	501(c)(3)		13,057	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE COMMUNITY FREE CLINIC OF NEWPORT NEWS 727 25TH STREET NEWPORT NEWS,VA 23607	27-3510814	501(c)(3)		13,016	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WESTERN STARK FREE CLINIC 820 AMHERST ROAD NE MASSILLON,OH 44646	34-1887206	501(c)(3)		12,885	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ACCESS HEALTH INC PO BOX 47 BAR MILLS,ME 04004	01-0757566	501(c)(3)		12,492	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 HEALTH SERVICES 4675 E 69TH AVENUE COMMERCE CITY,CO 80022	84-0799374	501(c)(3)		12,478	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OCEAN COUNTY HEALTH DEPARTMENT 175 Sunset Avenue Toms River, NJ 08754	22-3061367	115		12,318	Fair Market Value	Medical Supplies	EMERGENCY			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 of Austin Immunization Program SHOTS FOR TOTS/BIG SHOTS AUSTIN,TX 78752	74-6000085	501(c)(3)		12,318	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DUPAGE COUNTY HEALTH DEPARTMENT 111 N COUNTY FARM ROAD WHEATON,IL 60187	36-6006553	501(c)(3)		12,318	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Everett Health Department 484 Broadway Everett, MA 02149	04-6001386	115		12,318	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Weber Morgan Health Dept 477 23RD ST OGDEN,UT 84401	87-6000308	115		12,318	Fair Market Value	Medical Supplies	ON-GOING		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNITED WAY OF CENTRAL WEST VIRGINIA One United Way Plaza Charleston, WV 25301	55-0402755	501(c)(3)		12,125	Fair Market Value	Medical Supplies	EMERGENCY		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Free Medical Clinic of Oak Ridge 116 E DIVISION RD OAK RIDGE,TN 37830	90-0715369	501(c)(3)		12,120	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RIVER HILLS COMMUNITY HEALTH CENTER 201 SOUTH MARKET STREET OTTUMWA,IA 52501	42-1489471	501(c)(3)		11,816	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HOPE MEDICALDENTAL CLINIC 111 MEADOWVIEW DRIVE CLEBURNE,TX 76033	75-2953856	501(c)(3)		11,324	Fair Market Value	Medical Supplies	ON-GOING			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 THOMAS CLINIC 600 PAUL HAND BOULEVARD FRANKLIN,IN 46131	35-1449379	501(c)(3)		11,213	Fair Market Value	Medical Supplies	ON-GOING		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Coordinated Health Services Inc 2110 BROAD STREET AUGUSTA,GA 30904	58-2060572	501(c)(3)		11,192	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 JOESPHS NEIGHBORHOOD CENTER ST JOSEPHS NEIGHBORHOOD CTR ROCHESTER,NY 14620	46-1176792	501(c)(3)		11,068	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CRESCENT COMMUNITY CLINIC 5244 COMMERCIAL WAY SPRING HILL,FL 34606	30-0475982	501(c)(3)		11,054	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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)		11,041	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PIMA COUNTY HEALTH DEPARTMENT 3950 S COUNTRY CLUB TUCSON,AZ 85714	86-6000543	115		10,868	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
One Stop Clinic 701 17TH AVE W BRADENTON,FL 34205	59-3340921	501(c)(3)		10,823	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CHARLOTTE COMMUNITY HEALTH CLINIC 6900 FARMINGDALE DR CHARLOTTE,NC 28212	56-2274174	501(c)(3)		10,551	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 LA Free Clinic DBA Saban Free Clinic 8405 BEVERLY BLVD LOS ANGELES,CA 90048	95-2539105	501(c)(3)		10,539	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CATHOLIC CHARITIES FREE HEALTH CARE CENTER 212 NINTH ST PITTSBURGH,PA 15222	65-1307739	501(c)(3)		10,427	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
COCHISE HEALTH & SOCIAL SERVICES - COCHISE COUNTY 4115 E FOOTHILLS DR SIERRA VISTA, AZ 85635	86-6000398	501(c)(3)		10,265	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SIOUXLAND DISTRICT HEALTH DEPARTMENT 1014 NEBRASKA STREET SIOUX CITY,IA 51105	42-6005221	115		10,265	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NAVAJO COUNTY PUBLIC HEALTH 600 N 9TH PLACE SHOW LOW,AZ 85901	86-6000541	501(c)(3)		10,265	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MASSAC MEMORIAL HOSPITAL 28 Chick Street Metropolis,IL 62960	20-3843017	501(c)(3)		10,195	Fair Market Value	Medical Supplies	EMERGENCY			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CASA DE SALUD CASA DE SALUD ST LOUIS,MO 63103	27-0732049	501(c)(3)		10,137	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 SALVATION ARMY - EASTERN TERRITORY 440 West Nyack Road West Nyack,NY 10994	13-3485289	501(c)(3)		10,133	Fair Market Value	Medical Supplies	EMERGENCY			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Rutland Free Clinic 145 STATE STREET RUTLAND,VT 05701	83-0427544	501(c)(3)		9,956	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Care Clinic 501 W US HWY 60 MOUNTAIN VIEW, MO 65548	56-2418664	501(c)(3)		9,946	Fair Market Value	Medical Supplies	ON-GOING		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Ann Silverman Community Health Clinic 595 West State Street Doylestown,PA 18901	23-2892823	501(c)(3)		9,570	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BCFS 1506 Bexar Crossing San Antonio, TX 78232	74-1260710	501(c)(3)		9,500	Fair Market Value	Medical Supplies	EMERGENCY			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PARKER FAMILY HEALTH CENTER 211 SHREWSBURY AVE RED BANK,NJ 07701	22-3619518	501(c)(3)		9,196	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Health Unit on Davison Avenue Clnic 13240 WOODROW WILSON AVE DETROIT,MI 48238	37-1490937	501(c)(3)		9,117	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Pa	-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 MARY'S FOOD BANK ALLIANCE 2831 North 31st Avenue Phoenix,AZ 85009	23-7353532	501(c)(3)		8,860	Fair Market Value	Medical Supplies	EMERGENCY			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Thundermist Health Center 450 Clinton Street Woonsocket, RI 02895	05-0355097	501(c)(3)		8,741	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Eastern Idaho Public Health District 1250 HOLLIPARK DRIVE IDAHO FALLS,ID 83401	82-6000952	115		8,360	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ORLANDO HEALTHINC- HOWARD PHILLIPS CENTER-TEEN XPR 601 W MICHIGAN ST ORLANDO,FL 32805	59-1726273	501(c)(3)		8,292	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HeartBright Foundation Inc 2923 SOUTH TRYON SUITE 200 CHARLOTTE,NC 28203	45-0496759	501(c)(3)		8,268	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MIDLAND COMMUNITY CHILDRENS CLINIC 1101 E FRONT STREET MIDLAND,TX 79702	75-1875246	501(c)(3)		8,242	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SNO HOMISH HEALTH DISTRICT 3020 RUCKER AVE SUITE 208 EVERETT, WA 98201	91-1866899	115		8,212	Fair Market Value	Medical Supplies	EMERGENCY			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Scotts Bluff County Health Department 3700 Ave B Scottsbluff,NE 69361	47-6006506	115		8,212	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BUENA VISTA COUNTY PUBLIC HEALTH AND HOME CARE 1709 E RICHLAND ST STORM LAKE,IA 50588	42-6005256	501(c)(3)		8,212	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
COLUMBIA COUNTY DOH 325 COLUMBIA STREET HUDSON,NY 12534	14-6002564	115		8,212	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 HEALTH CENTERS INC 12716 NE 36TH STREET SPENCER,OK 73084	73-0930123	501(c)(3)		8,209	Fair Market Value	Medical Supplies	EMERGENCY			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PECOS VALLEY MEDICAL CENTER 199 HWY 50 PECOS,NM 87552	85-0300494	501(c)(3)		8,011	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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)		7,820	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FREE CLINIC SUSSEX COUNTY 4 DILLER AVE NEWTON,NJ 07860	45-4224214	501(c)(3)		7,787	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Shasta Community Health Center 1035 PLACER ST REDDING, CA 96001	68-0165855	501(c)(3)		7,204	Fair Market Value	Medical Supplies	ON-GOING			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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)		7,005	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OZARK TRICOUNTY HEALTHCARE CONSORTIUM DBS ACCEESS ACCESS Family Care Neosho,MO 64850	43-1752799	501(c)(3)		6,896	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Detroit Health Care for the Homeless 15400 W McNichols Detroit, MI 48235	38-2724796	501(c)(3)		6,799	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CHEROKEE COUNTY HEALTH DEPARTMENT 1219 Univ110 East Walnut Street Columbus,KS 66725	48-6041799	115		6,704	Fair Market Value	Medical Supplies	EMERGENCY			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Medical Care Center of Leesburg Inc 1210 West Main Street Leesburg,FL 34748	59-3585112	501(c)(3)		6,521	Fair Market Value	Medical Supplies	ON-GOING		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Health Ministry of the Southern Tier 300 Nasser Civic Senter Corning, NY 14830	51-0432450	501(c)(3)		6,485	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LEE COUNTY VOLUNTEERS IN MEDICINE 1154 LEE BOULEVARD LEHIGH ACRES,FL 33936	01-0941498	501(c)(3)		6,436	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CHRISTIAN HEALTH CENTER 2001 CARES DRIVE HEBER SPRINGS, AR 72543	71-0852792	501(c)(3)		6,225	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WOFCC HOPE CLINIC PO BOX 1727 ELK CITY,OK 736481727	26-1284785	501(c)(3)		6,220	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LIVINGSTON COUNTY HEALTH CENTER 800 ADAM DRIVE CHILLICOTHE,MO 64601	43-1103989	501(c)(3)		6,159	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SACRAMENTO NATIVE AMERICAN HEALTH CENTER INC 2020 J STREET SACRAMENTO,CA 95811	20-4287737	501(c)(3)		6,159	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WEST CENTRAL DISTRICT HEALTH DEPARTMENT 111 N DEWEY ST NORTH PLATTE,NE 69101	47-0879835	115		6,159	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 COAST HEALTH MINISTRY 16110 DETROIT AVENUE LAKEWOOD,OH 44107	34-1536257	501(c)(3)		6,028	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HEALTH PARTNERS INC 3070 CRAIN HIGHWAY WALDORF, MD 20601	52-1767044	501(c)(3)		5,923	Fair Market Value	Medical Supplies	ON-GOING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LIGHTHOUSE MEDICAL MINISTRIES 2801 SOUTH ROBINSON OKLAHOMA CITY,OK 73109	20-0503733	501(c)(3)		5,791	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
KANE COUNTY HEALTH DEPARTMENT 1240 N HIGHLAND AVE AURORA,IL 60506	36-6006585	115		5,778	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Open Door Health Center 1350 SW 4 ST HOMESTEAD,FL 33030	83-0375996	501(c)(3)		5,653	Fair Market Value	Medical Supplies	ON-GOING		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TOTAL LIVING CENTER FREE MEDICAL CLINIC 2221 9TH ST SW CANTON,OH 44706	34-1387834	501(c)(3)		5,588	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MISSION TRAVIS MERCY 775 WEST BOWIE STREET FORT WORTH,TX 76110	45-3841621	501(c)(3)		5,515	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Open Door Clinic 130 W CENTRAL CHIPPEWA FALLS, WI 54729	20-3673759	501(c)(3)		5,514	Fair Market Value	Medical Supplies	ON-GOING			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MASON COUNTY PUBLIC HEALTH PO BOX 1666 SHELTON,WA 98584	91-6001354	501(c)(3)		5,397	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 Vincent de Paul Clinic 420 WEST WATKINS PHOENIX,AZ 85003	86-0096789	501(c)(3)		5,397	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
RILEY COUNTY HEALTH DEPARTMENT 2030 TECUMSEH ROAD MANHATTAN,KS 66502	48-6023850	115		5,338	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HEALTHLINC INC 454 S COLLEGE AVE VALPARAISO,IN 46383	35-2147792	501(c)(3)		5,317	Fair Market Value	Medical Supplies	ON-GOING		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Health Care Network Inc 904 STATE STREET RACINE, WI 53404	42-1299913	501(c)(3)		5,256	Fair Market Value	Medical Supplies	ON-GOING		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CENTER FOR PHARMACY CARE 1000 FIFTH AVENUE PITTSBURGH,PA 15282	25-1035663	501(c)(3)		5,033	Fair Market Value	Medical Supplies	ON-GOING		

Form 990,Schedule 1, Pa	rt II, Grants an	a Otner Assistance	e to Governments	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAIRFIELD COMMUNITY HEALTH CENTER 1155 EAST MAIN STREET LANCASTER,OH 43130	27-1092132	501(c)(3)		5,016	Fair Market Value	Medical Supplies	ON-GOING

Form 990,Schedule 1, Pai	rt II, Grants an	<u>a Otner Assistance</u>	e to Governments	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEA MAR COMMUNITY HEALTH CENTER 1040 S HENDERSON ST SEATTLE, WA 98108	91-1020139	501(c)(3)		5,016	Fair Market Value	Medical Supplies	ON-GOING

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DLN: 93493012014645

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization AmeriCares Foundation Inc

Employer identification number

06-1008595

Pa	rt 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 in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	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 in 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			
	▼ Compensation committee			
	Form 990 of other organizations A pproval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	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) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
	Any related organization?	5b		No
_	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in 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

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred bene compensation			
See Addıtıonal Data Table							

Schedule J (Form 990) 2013

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
Form 990, Schedule J, Part I, Line 4 (a)	Adam Zayan, VP of Global Partnerships, received a severance payment in calendar year 2014, this will be reported on the succeeding year's Form 990

Schedule J (Form 990) 2013

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		(B) Breakdown of	f W-2 and/or 1099-MI	.SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
Curtis R Welling President & CEO (thru 1/14)	(I) (II)				15,442	29,019	320,571		
Kevin Allan Senior V P , Development	(I) (II)				11,619	18,917	223,321		
Kevin Gilrain Senior V P , Human resources	(I) (II)				10,432	19,304	202,385		
Rachel Granger V P - post Emergency Response	(1) (11)				8,100	8,415	151,066		
Ella Gudwin SR VP - Strategy & Prgm Dev	(I)				9,697	33,094	197,273		
Gary Leeds Vice President/CFO	(I) (II)				9,436	22,027	185,411		
Katherine Sears Senior V P Global Program Op	(I) (II)				13,542	20,546	255,851		
Carol Shattuck Senior VP - Communications	(I) (II)	180,508			11,029	21,304	212,841		
Lee Weiner V P - Direct Response	(I) (II)					26,519	159,609		
Adam Zayan V P - Global Partnerships	(I) (II)				9,083	29,347	185,304		
Frank Bia Medical Director	(I) (II)	183,507			11,354	30,167	225,028		

DLN: 93493012014645

OMB No 1545-0047

SCHEDULE M (Form 990)

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number

ner	Cares Foundation Inc			0	5-1008595			
Pa	rt I Types of Property			,				
	Aut. Warden of out	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contri			nts
	Art—Works of art							
_	Art—Historical treasures							
	Art—Fractional Interests							
	Books and publications			2 2 2 2 2 2 2 2				
5	Clothing and household goods	X		2,239,075	market price			
6	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X		1 175 220	MARKET PRICE			
	Securities—Closely held stock .			1,173,220	MARKETTRICE			
	Securities—Partnership, LLC, or trust interests							
.2	Securities—Miscellaneous							
	Qualified conservation contribution—Historic							
_	structures							
	Qualified conservation contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory	X	91,588	·	cost/wholesale pr			
	Drugs and medical supplies .	X	23,266,142	521,643,309	COST/WHOLESA	LE PR	ICE	
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other►(IENE ITEMS)	X	1,225,784	3,898,129	COST/WHOLESA	LEPR	ICE	
	Other ►()	-						
	Other ►()							
	Other ► ()							-
	Number of Forms 8283 received by th	L organizat	ion during the tax year for	contributions	1			
.9	for which the organization completed i	_	= · · · · · · · · · · · · · · · · · · ·	1 .	29			
≀ ∩~	During the year, did the organization	receive by	contribution any proporty	reported in Dart T. lines 1	through 20 that		Yes	No
JUa								
	it must hold for at least three years for				u to be used			١.,
_	for exempt purposes for the entire ho		1′			30a		No
b	If "Yes," describe the arrangement in	n Part II						
31	Does the organization have a gift acc	eptance po	licy that requires the revie	ew of any non-standard c	ontributions?	31	Yes	
}2a	Does the organization hire or use this contributions?	d parties oi	r related organizations to s	solicit, process, or sell no	oncash • • •	32a	Yes	
	If "Yes," describe in Part II							
33	If the organization did not report an a	mount in co	olumn (c) for a type of prop	erty for which column (a	ıs checked.	1		i

describe in Part II

Form 990, Schedule M, Line 32(b)

	nether the organization is reporting in Part I, column (b), the number of contributions, the
	eived, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation

americares will use its own investment broker to sell those donated securities

To the extent that Americares receives non-cash contributions in the form of donated securities,

Schedule M (Form 990) (2013)

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

Name of the organization	Employer identification number
AmeriCares Foundation Inc	
	06-1008595

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. Before filing, the Form 990 is reviewed by management and distributed to the Audit Committee of the Board of Directors for review and comment. Comments are addressed and the form is distributed to the entire Board of Directors.

Return Reference	Explanation
Conflict of Interest Policy	Form 990, Part VI, Line 12 if a Director or Executive Officer believes that he or she may have a conflict of interest with respect to any particular transaction, he or she shall promptly and fully disclose the potential conflict to the Chief Executive Officer ("CEO") and the Chair of the Governance Committee and the latter shall then promptly notify all members of the Governance Committee A if the Governance Committee determines that there is in fact a conflict with respect of a Director, the conflict shall be reported to the full Board, and the affected Director shall agree to answer any questions about the matter that other Board members may have if the particular transaction requires a vote of the Board, or of one of its committees, the affected Director shall not be counted for purposes of a quorum nor shall he or she vote on the matter. The minutes shall report the quorum determination and the voting. B if the Governance Committee determines that there is in fact a conflict concerning a particular transaction with respect to an Executive Officer, they shall exercise their best judgment about the appropriate course to follow, which may include 1 approval of the transaction despite the conflict if they are reasonably certain that the best interests of AmeriCares will be served thereby, or 2 referral of the issue to legal counsel for advice, or 3 referral of the issue to the appropriate committee of the Board of Directors, or to the full Board, for decision Except that in all cases wherein the Governance Committee determines that there is in fact a conflict of interest concerning a particular transaction involving an Officer of AmeriCares, the full Board shall be notified of the resolution of the issue and the affected Officer shall agree to answer any questions about the matter that Board members may have C if the Governance Committee determines that there is no conflict of interest with respect to a particular transaction involving a Director or Officer, they need not notify the Board of Directors, but the

Return Reference	Explanation
Process for determining compensation	Form 990, Part VI, Line 15 The Board of Directors determines compensation of the CEO. The organization's Chief Executive determines the compensation of the other senior staff and may utilize available market data, salary survey results and other available tools to substantiate decisions. At least bi-annually, the organization participate in the InsideNGO Salary and Benefits Survey. This survey provides compensation data for the President/CEO/Executive Director level position, among others, based on responses from over 140 participating organizations. All participants are engaged in international development or relief work. This information is shared at an annual meeting of the Compensation Committee of the Board of Directors (January), and in combination with data collected from peer organization Form 990's, the CEO's salary is evaluated against the marketplace.

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 summarized in its annual report, which is available on its website and by request, full financial statements are available upon 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

Return Reference	Explanation
Other changes in net assets	Form 990, Part XI, Line 9 Split interest agreement \$19,496

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2013

OMB No 1545-0047

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SCHEDULE R (Form 990)

Department of the Treasury

Name of the organization AmeriCares Foundation Inc

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. ► See separate instructions.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

06-1008595

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity

Part II Identification of Related Tax-Exempt Organiza or more related tax-exempt organizations during the	tions Complete ıf t tax year.	he organization ar	nswered "Yes" on I	Form 990, Part IV	line 34 because it	had or	ne
(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	Section (13) co ent	g) 512(b) ontrolled tity?
(1) AmeriCares Free Clinics Inc	Health care	СТ	501(c)(3)	7	na	Yes Yes	No
88 Hamilton Avenue Stamford, CT 06902 06-1422741	300	5.	\\				
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 501	35Y		Schedule R (Form	1 990) 2	2013

Part III	Identification of Related Org because it had one or more rela						ation ansv	vered "Ye	es" on	Form	990, Part	IV, lu	ne 34	ļ
(a) Name, address, and EIN of related organization			(b) Primary activity	(c) Legal domicile (state or foreign country)	entity -	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(h Disprop r allocat	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	j) eral or agıng :ner?	(k) Percentage ownership
						,			Yes	No		Yes	No	
												_		
													\square	
Part IV	Identification of Related Org line 34 because it had one or mo	ore related organız							wered	d "Yes				IV,
Na	(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controllir entity	(e) Type of entit (C corp, S corp, or trust)	y Share of income	total Share	(g) e of end- -year ssets		(h) ercentage wnership	Section (b) (continue)	i) on 512 (13) rolled tity?	No.
							1			-	ĺ	Yes	<u>*</u>	No
												ı		

Pa	rt V	Transactions With Related Organizations Complete if the organization ans	wered "Yes" on Form	n 990, Part IV, line	e 34, 35b, or 36.						
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule											
1 D	uring th	he tax year, dıd the orgranızatıon engage ın any of the following transactions with one or more	related organizations li	sted in Parts II-IV?	•						
а	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity										
b Gift, grant, or capital contribution to related organization(s)											
c	Gıft, g	grant, or capital contribution from related organization(s)				1c		No			
d	Loans	s or loan guarantees to or for related organization(s)				1d		No			
e Loans or loan guarantees by related organization(s)											
f	Divide	ends from related organization(s)				1f		No			
g	Sale	of assets to related organization(s)				1g		No			
h	Purch	nase of assets from related organization(s)				1h		No			
i	i Exchange of assets with related organization(s)										
j Lease of facilities, equipment, or other assets to related organization(s)											
k	Lease	e of facilities, equipment, or other assets from related organization(s)				1k		No			
Performance of services or membership or fundraising solicitations for related organization(s)											
m Performance of services or membership or fundraising solicitations by related organization(s)											
n	Sharın	g of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No			
o	Sharır	ng of paid employees with related organization(s)				10		No			
р	Reimb	bursement paid to related organization(s) for expenses				1 p		No			
q		bursement paid by related organization(s) for expenses				1q	Yes				
r	Other	transfer of cash or property to related organization(s)				1r		No			
s	Other	transfer of cash or property from related organization(s)				1s	Yes				
2	Ifthe	answer to any of the above is "Yes," see the instructions for information on who must comple	te this line, including co	overed relationships	and transaction thresholds						
		(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining an	nount ı	nvolved				
(1) A	MERICAR	RES FREE CLINICS INC	В	1,323,273	fmv						
(2) A	MERICAR	RES FREE CLINICS INC	q	61,288	cash						
(3) A	MERICAR	RES FREE CLINICS INC	S	250,000	cash						

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷	_	(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013