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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2016

Open to Public Inspection

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

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

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

A For the 2016 calendar year, or tax year beginning 07-01-2016 , and ending 06-30-2017

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final

☒ Return/terminated

☐ Amended return

☐ Application pending

C Name of organization

AmeriCares Foundation Inc

% RICHARD K TROWBRIDGE

Doing business as

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

88 HAMILTON AVENUE

Room/suite

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

STAMFORD, CT 069023111

F Name and address of principal officer

Michael J nyenhuis

88 HAMILTON AVENUE

STAMFORD, CT 06902

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

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

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

H(c) Group exemption number ▶

I Tax-exempt status

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

J Website: ▶ WWW.AMERICARES.ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1979

M State of legal domicile CT

Part I Summary

Activities & Governance

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

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

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

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

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

5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

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

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

Revenue

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

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

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

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

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

Prior Year

Current Year

Expenses

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

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

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

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

16b Total fundraising expenses (Part IX, column (D), line 25) ▶10,481,179

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

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

19 Revenue less expenses Subtract line 18 from line 12

Beginning of Current Year

End of Year

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

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

153,730,999

8,848,399

144,882,600

607,900,396

9,061,242

598,839,154

Part II Signature Block

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

\*\*\*\*\*

Signature of officer

2017-11-15

Date

RICHARD K TROWBRIDGE JR cfo & senior V p

Type or print name and title

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

Firm's name ▶ GRANT THORNTON LLP

Firm's EIN ▶

Firm's address ▶ 757 THIRD AVENUE 3RD FLOOR

Phone no (212) 599-0100

NEW YORK, NY 100172013

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2016)

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

As the number one nonprofit provider of donated medicines and supplies, Americares reached 86 countries in FY17 with medicine, medical supplies, support and technical assistance valued at more than \$1.8 billion through our Access to Medicine, Emergency Programs, Clinical Services and Community Health Programs. Americares reaches an unrivaled network of over 4,000 local, national and international health care institutions and facilities that includes hospitals, clinics, local health centers, ministries of health and nonprofit health care networks and providers. Working through this network, Americares is focused on the following program areas: - Increasing access to critical medicine and medical supplies, - Helping communities prepare for, respond to and recover from disasters, and - Improving and expanding clinical services and promoting good health and disease prevention in vulnerable communities. In each program area, we work to address five key health themes: women's and children's health.

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

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

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

If "Yes," describe these changes on Schedule O

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

<b>4a</b>	(Code )	(Expenses \$ 1,867,147,873	including grants of \$ 1,812,384,373 )	(Revenue \$ )
See Additional Data				






















<b>4b</b>	(Code )	(Expenses \$ 39,050,590	including grants of \$ 33,548,925 )	(Revenue \$ )
See Additional Data				

<b>4c</b>	(Code )	(Expenses \$ 5,471,947	including grants of \$ 796,088 )	(Revenue \$ 789,734 )
See Additional Data				

<b>4d</b>	Other program services (Describe in Schedule O )			
	(Expenses \$	including grants of \$	(Revenue \$	)

<b>4e</b>	<b>Total program service expenses</b>	<b>1,911,670,410</b>
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**Part IV Checklist of Required Schedules**

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

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

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



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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	71	
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	152	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	
<b>b</b>	If "Yes," enter the name of the foreign country: ES, HA, IN, LI, SL, NP, RP, TZ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
<b>c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	Yes	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year.		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
<b>9a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12.		
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter		
<b>a</b>	Gross income from members or shareholders.		
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
<b>c</b>	Enter the amount of reserves on hand.		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		No
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response or note to any line in this Part VI. ☒**Section A. Governing Body and Management**

			Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	<b>1a</b>	21		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent	<b>1b</b>	20		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	<b>2</b>			No
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	<b>3</b>			No
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>			No
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>			No
<b>6</b> Did the organization have members or stockholders?	<b>6</b>			No
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<b>7a</b>			No
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>			No
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
<b>a</b> The governing body?	<b>8a</b>		Yes	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>8b</b>		Yes	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	<b>9</b>			No

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

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

**Section C. Disclosure**

<b>17</b> List the States with which a copy of this Form 990 is required to be filed▶	AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, IN, KS, KY, LA, ME, MD, MA, MI, MN, MS, MT, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI
<b>18</b> 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. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
<b>19</b> 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.	
<b>20</b> State the name, address, and telephone number of the person who possesses the organization's books and records. ▶RICHARD K TROWBRIDGE 88 HAMILTON AVENUE STAMFORD, CT 06902 (203) 658-9500	

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

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

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[illegible]

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 24

## Section B. Independent Contractors

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Mal Warwick Associates Inc, 2550 Ninth Street Suite 103 BERKELEY, CA 94710	Fundraising Counsel	1,194,942
Mail America Communications Inc, 1174 Elkton Farm Road PO Box 870 FOREST, VA 24551	Printing/Mailing	698,281
RWT PRODUCTION LLC, 8932 ORANGE HUNT LANE ANNANDALE, VA 22003	PRINTING AND MAILING	591,774
RAFANELLI EVENTS, 5 WEST 19TH STREET NEW YORK, NY 10011	EVENT PLANNING	484,636
Donor Services Group, 6715 Sunset Boulevard HOLLYWOOD, CA 90028	Fundraising	480,928

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**Part VIII** Statement of RevenueCheck if Schedule O contains a response or note to any line 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
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . .	<b>1a</b>	133,098			
	<b>b</b> Membership dues . . .	<b>1b</b>				
	<b>c</b> Fundraising events . . .	<b>1c</b>	2,434,140			
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>	463,485			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	2,376,099,304			
	<b>g</b> Noncash contributions included in lines 1a-1f \$		2,342,737,771			
	<b>h Total.</b> Add lines 1a-1f . . . . .		2,379,130,027			
<b>Program Service Revenue</b>		Business Code				
	<b>2a</b> PATIENT SERVICE REVENUE	621400	789,734	789,734		
	<b>b</b> _____					
	<b>c</b> _____					
	<b>d</b> _____					
	<b>e</b> _____					
	<b>f</b> All other program service revenue					
	<b>g Total.</b> Add lines 2a-2f . . . . .		789,734			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .		663,561			663,561
	<b>4</b> Income from investment of tax-exempt bond proceeds		0			
	<b>5</b> Royalties . . . . .		0			
	<b>6a</b> Gross rents	(i) Real (ii) Personal				
		173,765				
	<b>b</b> Less rental expenses	185,953				
	<b>c</b> Rental income or (loss)	-12,188 0				
	<b>d</b> Net rental income or (loss) . . . . .		-12,188			-12,188
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
		19,761,984 3,253,857				
	<b>b</b> Less cost or other basis and sales expenses	19,774,608 3,300,000				
	<b>c</b> Gain or (loss)	-12,624 -46,143				
	<b>d</b> Net gain or (loss) . . . . .		-58,767			-58,767
	<b>8a</b> Gross income from fundraising events (not including \$ 2,434,140 of contributions reported on line 1c) See Part IV, line 18 . . . . .	<b>a</b>	141,760			
	<b>b</b> Less direct expenses . . . . .	<b>b</b>	642,849			
	<b>c</b> Net income or (loss) from fundraising events . . . . .		-501,089			-501,089
	<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . .	<b>a</b>	0			
	<b>b</b> Less direct expenses . . . . .	<b>b</b>	0			
	<b>c</b> Net income or (loss) from gaming activities . . . . .		0			
	<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>	973,607			
	<b>b</b> Less cost of goods sold . . . . .	<b>b</b>	635,202			
	<b>c</b> Net income or (loss) from sales of inventory . . . . .		338,405			338,405
Miscellaneous Revenue	Business Code					
<b>11a</b> EL SALVADOR CAFETERIA INCOME	900099	79,633			79,633	
<b>b</b> EL SALVADOR MISCELLANEOUS INCOME	900099	4,482			4,482	
<b>c</b> _____						
<b>d</b> All other revenue . . . . .						
<b>e Total.</b> Add lines 11a-11d . . . . .		84,115				
<b>12 Total revenue.</b> See Instructions . . . . .		2,380,433,798	789,734		514,037	

**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 ☐

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>				
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	206,390,342	206,390,342		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22.	224,672,306	224,672,306		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	1,415,666,738	1,415,666,738		
<b>4</b> Benefits paid to or for members.	0			
<b>5</b> Compensation of current officers, directors, trustees, and key employees.	1,581,406	549,340	633,601	398,465
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	786,857	472,312		314,545
<b>7</b> Other salaries and wages.	9,900,072	5,612,128	1,872,456	2,415,488
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	420,317	227,291	93,623	99,403
<b>9</b> Other employee benefits.	2,026,273	1,038,383	342,916	644,974
<b>10</b> Payroll taxes.	952,420	526,601	189,789	236,030
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management.	1,560,218	1,207,415	185,970	166,833
<b>b</b> Legal.	52,948	18,638	6,912	27,398
<b>c</b> Accounting.	216,407	36,407	180,000	
<b>d</b> Lobbying.	0			
<b>e</b> Professional fundraising services. See Part IV, line 17.	1,138,223			1,138,223
<b>f</b> Investment management fees.	76,481		76,481	
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	950,857	206,288	336,423	408,146
<b>12</b> Advertising and promotion.	1,380,157	82,305	1,550	1,296,302
<b>13</b> Office expenses.	209,569	169,593	25,594	14,382
<b>14</b> Information technology.	1,410,419	105,347	435,619	869,453
<b>15</b> Royalties.	0			
<b>16</b> Occupancy.	2,126,246	1,615,991	206,414	303,841
<b>17</b> Travel.	1,626,613	1,321,651	87,844	217,118
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
<b>19</b> Conferences, conventions, and meetings.	127,244	118,622	6,694	1,928
<b>20</b> Interest.	2,167	2,167		
<b>21</b> Payments to affiliates.	0			
<b>22</b> Depreciation, depletion, and amortization.	750,387	541,655	94,714	114,018
<b>23</b> Insurance.	313,357	159,779	80,001	73,577
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
<b>a</b> INVENTORY WRITE-OFF	45,001,237	45,001,237		
<b>b</b> POSTAGE AND FREIGHT	6,519,568	5,393,087	9,263	1,117,218
<b>c</b> MISCELLANEOUS	1,445,053	534,787	286,429	623,837
<b>d</b>				
<b>e</b> All other expenses				
<b>25</b> Total functional expenses. Add lines 1 through 24e.	1,927,303,882	1,911,670,410	5,152,293	10,481,179
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

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

			(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .	2,814	<b>1</b>	14,343
	<b>2</b>	Savings and temporary cash investments . . . . .	7,191,568	<b>2</b>	3,313,505
	<b>3</b>	Pledges and grants receivable, net . . . . .	6,471,687	<b>3</b>	10,436,151
	<b>4</b>	Accounts receivable, net . . . . .	258,970	<b>4</b>	274,316
	<b>5</b>	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.	0	<b>5</b>	0
	<b>6</b>	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.	0	<b>6</b>	0
	<b>7</b>	Notes and loans receivable, net . . . . .	0	<b>7</b>	0
	<b>8</b>	Inventories for sale or use . . . . .	112,167,846	<b>8</b>	565,779,308
	<b>9</b>	Prepaid expenses and deferred charges . . . . .	775,449	<b>9</b>	605,600
	<b>10a</b>	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	7,355,189		
	<b>b</b>	Less: accumulated depreciation	4,403,316		
			3,305,733	<b>10c</b>	2,951,873
	<b>11</b>	Investments—publicly traded securities . . . . .	16,761,633	<b>11</b>	20,504,365
	<b>12</b>	Investments—other securities. See Part IV, line 11 . . . . .	5,390	<b>12</b>	5,124
	<b>13</b>	Investments—program-related. See Part IV, line 11 . . . . .	0	<b>13</b>	0
	<b>14</b>	Intangible assets . . . . .	0	<b>14</b>	0
	<b>15</b>	Other assets. See Part IV, line 11 . . . . .	6,789,909	<b>15</b>	4,015,811
	<b>16</b>	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	153,730,999	<b>16</b>	607,900,396
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .	4,570,662	<b>17</b>	4,618,183
	<b>18</b>	Grants payable . . . . .	1,117,497	<b>18</b>	758,401
	<b>19</b>	Deferred revenue . . . . .	365,430	<b>19</b>	1,056,256
	<b>20</b>	Tax-exempt bond liabilities . . . . .	0	<b>20</b>	0
	<b>21</b>	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	<b>21</b>	0
	<b>22</b>	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .	0	<b>22</b>	0
	<b>23</b>	Secured mortgages and notes payable to unrelated third parties . . . . .	0	<b>23</b>	0
	<b>24</b>	Unsecured notes and loans payable to unrelated third parties . . . . .	0	<b>24</b>	0
	<b>25</b>	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.	2,794,810	<b>25</b>	2,628,402
	<b>26</b>	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .	8,848,399	<b>26</b>	9,061,242
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
	<b>27</b>	Unrestricted net assets	72,314,494	<b>27</b>	56,573,188
	<b>28</b>	Temporarily restricted net assets . . . . .	68,393,545	<b>28</b>	537,520,994
	<b>29</b>	Permanently restricted net assets	4,174,561	<b>29</b>	4,744,972
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
	<b>30</b>	Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b>	Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b>	Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
	<b>33</b>	<b>Total net assets or fund balances . . . . .</b>	144,882,600	<b>33</b>	598,839,154
	<b>34</b>	<b>Total liabilities and net assets/fund balances . . . . .</b>	153,730,999	<b>34</b>	607,900,396

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	2,380,433,798
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	1,927,303,882
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	453,129,916
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	144,882,600
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	957,480
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-130,842
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	598,839,154

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

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



# Additional Data

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

Form 990 (2016)

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

Americares is working to improve health outcomes for patients and communities by increasing access to quality medicines and supplies for local health providers and the people and communities they serve. A strong and expanding network of over 200 pharmaceutical and medical supply corporations donate these medicines, medical supplies, personal care products, medical equipment and technology. We distribute these donations to our global partner network through two initiatives - The Global Access to Medicine Program, which distributes high-quality medicines directly to a network of 43 partners in 40 countries. Partners are selected for their capacity to securely and effectively process and utilize Americares medical and supply donations. Americares also supports volunteer medical teams as they provide primary care, perform surgeries, respond to health emergencies and strengthen local health care capacity in communities where basic medical care is often non-existent or inaccessible. In FY17, Americares provided \$57,490,312 in donated medicine and supplies as well as medical training tools and resources to these teams for their outreach trips - The U.S. Program Network, which is a network of 1,013 safety net health care providers across all 50 states and Puerto Rico. Again, partners are selected for their capacity to securely and effectively process and utilize Americares medical and supply donations. Americares is the largest provider of medical donations to the U.S. health care safety net. During the 2016-17 program year, Americares received \$2.3 billion and distributed \$1.8 billion worth of medical donations (enough medicine to fill 16 million prescriptions, to treat an estimated 1.9 million people). Americares received an extraordinary pharmaceutical donation of the hepatitis C drug, daclatasvir, valued at approximately \$1.334 billion. Daclatasvir, when combined with sofosbuvir, provides a potential cure for chronic hepatitis C infection in adults. As of June 30, 2017, Americares shipped approximately \$0.97 billion worth of this lifesaving drug to Myanmar, Nigeria, Rwanda and Vietnam, with the remaining \$0.37 billion of the product staged for shipments in early fiscal year 2018 to Indonesia, Ethiopia and, again, Myanmar. Additional initiatives in FY17 included an in-depth analysis of our distribution network of 43 global partners and 4,038 sub-recipient health care providers as well as the final phase of Americares Total Reach Study, which quantifies the number of beneficiaries of Americares donated medicines and supplies. The study was conducted in 10 countries and included a review of over 3,000 unique patient charts. We are also working to improve the capacity and technology of local supply chains so that donated medicines and supplies can have the maximum impact and help improve more people's health.

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

EMERGENCY PROGRAMS From July 2016 to June 2017, Americares responded to 25 natural disasters and humanitarian crises in 19 countries, including 12 U S states and 1 U S territory with shipments of medicines and emergency supplies as well as preparedness, response and recovery projects. Americares served over 200,000 people with recovery projects, provided 45,000 post-disaster patient consults, rehabilitated and strengthened health facilities in Nepal and the Philippines, and installed a field hospital in Ecuador that supported more than 25,000 patient visits. In FY17, Americares doubled the value of emergency medicines and supplies and number of course treatments provided from the previous fiscal year. The emergency response team continued to increase response initiation speed, responding to 71 percent of disasters within 72 hours of onset.

FY17 Responses - Colombia-Venezuela border crisis - Dominican Republic flooding - Ecuador earthquake - El Salvador Zika virus outbreak - Guatemala drought - Haiti Hurricane Matthew - India Assam and Bihar flooding - India Tamil Nadu flooding - Indonesia earthquake - Iraq Mosul conflict - Madagascar Tropical Cyclone Enawo - Myanmar Maubin flooding - Peru flooding - Philippines Typhoon Haima - Philippines Typhoon Nina - Somalia cholera outbreak - Sri Lanka flooding - Syria refugee crisis - U S April severe weather - U S Gulf Coast flooding - U S Mesa Arizona wildfires - U S Mexico border crisis - U S Tennessee wildfires - U S Texas water crisis - U S West Virginia flooding.

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

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

Clinical Services and Community Health AmeriCares supports the capacity of local health delivery partners and promotes health and disease prevention in low-income communities across the U S and worldwide In 2016-17, AmeriCares clinic in El Salvador, Clinica Integral de Atencion Familiar, provided 25,033 pATIENTS with 58,363 clinical consultations In addition, our partners, AmeriCares India and AmeriCares Free Clinics in Connecticut, provided an additional 97,676 patients with 188,403 clinical consultations AmeriCares also engages deeply with its global network of partners to develop effective models of service that include improved access, quality and impact Working together, we create, examine and refine safety-net clinical models AmeriCares-supported initiatives included a breast cancer screening and education program for women in Cambodia, a midwife training and outreach program in Liberia to promote womens and childrens health, an obstetric fistula surgical and recovery program for women in Tanzania, and a study measuring the impact of a diabetes prevention program among low-income, vulnerable U S patients In FY17, AmeriCares supported 42,242 surgeries for 817,395 patients performed by U S -based medical volunteers on 1,073 short-term medical outreach trips to 77 countries AmeriCares also provides resources and training so health workers can better serve their communities and improve the health of low-income patients With culturally and medically appropriate outreach, health workers can effectively promote disease prevention and health in their communities In our community health work, we address the root causes of illness and disease, employing an integrated approach that links treatment services to disease prevention efforts and health education All programs promote evidence-based best practices and are designed to the highest standards of project planning, implementation and monitoring and evaluation In FY17, AmeriCares community health programs in eight countries spanned a range of health themes including noncommunicable disease prevention, WASH (water, sanitation and hygiene), womens and childrens health, and psychosocial health Examples include - A Community Leadership Program in El Salvador that trained an average of 35 community health workers each month in community education and outreach around the social determinants of health - An intensive health and lifestyle coaching program for diabetes prevention and management for low-income, at-risk patients at five free and charitable clinics in the U S - A program to provide mental health and psychosocial support service training for over 2,500 health workers and midwives in Nepal in the aftermath of the devastating 2015 earthquake as well as more than 900 community theater events promoting mental health, which were attended by 270,000 audience members in earthquake-affected communities

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Elizabeth P Allen ..... Director	1 0 ..... 0 0	X						0	0	0
Carol B Bauer ..... Vice Chair (THRU 10/16)/dir	1 0 ..... 0 0	X		X				0	0	0
Elizabeth F Frank ..... Director	1 0 ..... 0 0	X						0	0	0
C Robert Henrikson ..... Director	1 0 ..... 0 0	X						0	0	0
Paul J Kuehner ..... Director	1 0 ..... 0 0	X						0	0	0
Jerry P Leamon ..... Chairman	1 0 ..... 0 0	X		X				0	0	0
Robert G Leary ..... Vice Chair/Direct (thru 04/17)	1 0 ..... 0 0	X		X				0	0	0
Alma Jane Macauley ..... Vice Chairman	1 0 ..... 0 0	X		X				0	0	0
C Dean Maglaris ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
Robert M Baylis ..... Director	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Joseph J Rucci Jr ..... Director and Secretary	1 0 ..... 0 0	X		X				0	0	0
Michael J Nyenhuis ..... President & CEO	40 0 ..... 0 0	X		X				383,477	0	65,387
Samhita Jayanti ..... Director(thru 4/17) vice chair	1 0 ..... 0 0	X		X				0	0	0
Keith McAllister ..... Director	1 0 ..... 0 0	X						0	0	0
Alan Rwambuya ..... Director	1 0 ..... 0 0	X						0	0	0
Stephen Sadove ..... Director	1 0 ..... 0 0	X						0	0	0
Stephen Gallucci ..... Director	1 0 ..... 0 0	X						0	0	0
Bryan C Hanson ..... Director	1 0 ..... 0 0	X						0	0	0
Jeffrey T Becker ..... Director	1 0 ..... 0 0	X						0	0	0
Katherine Close ..... Director	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Sarah Saint-Amand ..... Director	1 0 ..... 0 0	X						0	0	0
ROBERTA CONROY ..... DIRECTOR (AS OF 4/17)	1 0 ..... 0 0	X						0	0	0
Kevin Gilrain ..... Senior V P , Human resources	40 0 ..... 0 0			X				203,025	0	31,154
Anne Peterson MD MPH ..... Senior V P , Global Programs	40 0 ..... 0 0			X				229,081	0	25,096
Richard K Trowbridge Jr ..... CFO & Senior V P , Operations	40 0 ..... 0 0			X				253,074	0	40,257
Megin Wolfman ..... Director, Executive Office	40 0 ..... 0 0			X				94,497	0	7,287
Christine Squires ..... CHIEF DEV OFFicer(from 05/16)	40 0 ..... 0 0			X				140,549	0	13,267
Rachel Granger ..... V P Int'l Partnrshps&Programs	40 0 ..... 0 0					X		158,896	0	17,392
Gary Leeds ..... V P , Finance	40 0 ..... 0 0					X		167,799	0	30,991
Diana Maguire ..... V P , Institutional Relations	40 0 ..... 0 0					X		153,088	0	37,827

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jed Selkowitz ..... CMO & SVP, COMMUNICATIONS	40 0 ..... 0 0					X		239,670	0	22,244
dennis rice ..... CIO & SVP, communications	40 0 ..... 0 0					X		183,135	0	36,420
Garrett Ingoglia ..... V P , Emergency Response	40 0 ..... 0 0						X	139,922	0	19,497
Geoff Kneisel ..... V P , Corp Relations	40 0 ..... 0 0						X	125,042	0	33,863
Melissa Woolford ..... V P , Leadership Gifts	40 0 ..... 0 0						X	145,774	0	9,148
Martha kennard ..... V P , operations	40 0 ..... 0 0						X	133,242	0	8,723
Lee Weiner ..... V P , Direct Res (thru 2/17)	40 0 ..... 0 0						X	148,956	0	24,629

<b>SCHEDULE A</b> (Form 990 or 990-EZ)	<b>Public Charity Status and Public Support</b> Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .	OMB No 1545-0047 <b>2016</b> <b>Open to Public Inspection</b>
	Department of the Treasury Internal Revenue Service Name of the organization AmenCares Foundation Inc	Employer identification number 06-1008595

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.  
The organization is not a private foundation because it is (For lines 1 through 12, check only one box )

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university \_\_\_\_\_
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 11 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f Enter the number of supported organizations \_\_\_\_\_
- g Provide the following information about the supported organization(s) \_\_\_\_\_

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



**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►		(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
<b>1</b>	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	620,146,474	558,924,455	738,792,543	914,486,587	2,379,130,027	5,211,480,086
<b>2</b>	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
<b>3</b>	The value of services or facilities furnished by a governmental unit to the organization without charge						0
<b>4</b>	<b>Total.</b> Add lines 1 through 3	620,146,474	558,924,455	738,792,543	914,486,587	2,379,130,027	5,211,480,086
<b>5</b>	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2,572,570,913
<b>6</b>	<b>Public support.</b> Subtract line 5 from line 4						2,638,909,173

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►		(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
<b>7</b>	Amounts from line 4	620,146,474	558,924,455	738,792,543	914,486,587	2,379,130,027	5,211,480,086
<b>8</b>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	985,301	848,586	1,073,316	960,491	837,326	4,705,020
<b>9</b>	Net income from unrelated business activities, whether or not the business is regularly carried on						0
<b>10</b>	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	965,349	1,070,273	1,156,012	1,141,371	1,199,482	5,532,487
<b>11</b>	<b>Total support.</b> Add lines 7 through 10						5,221,717,593
<b>12</b>	Gross receipts from related activities, etc. (see instructions)					<b>12</b>	3,582,028

**13 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ☐**Section C. Computation of Public Support Percentage**

<b>14</b>	Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	50.537 %
<b>15</b>	Public support percentage for 2015 Schedule A, Part II, line 14	<b>15</b>	63.981 %

**16a 33 1/3% support test—2016.** 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—2015.** 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—2016.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐**b 10%-facts-and-circumstances test—2015.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐**18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6</b> <b>Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8</b> <b>Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13</b> <b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						

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

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

<b>15</b> Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	
<b>16</b> Public support percentage from 2015 Schedule A, Part III, line 15	<b>16</b>	

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

<b>17</b> Investment income percentage for <b>2016</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	
<b>18</b> Investment income percentage from <b>2015</b> Schedule A, Part III, line 17	<b>18</b>	

**19a** **33 1/3% support tests—2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

**b** **33 1/3% support tests—2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

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

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

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

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

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

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
<b>2</b> Activities Test <b>Answer (a) and (b) below.</b>		
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>3</b> Parent of Supported Organizations <b>Answer (a) and (b) below.</b>		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<b>2a</b>		
<b>2b</b>		
<b>3a</b>		
<b>3b</b>		

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

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

**Section A - Adjusted Net Income**

	(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b>	
<b>2</b> Recoveries of prior-year distributions	<b>2</b>	
<b>3</b> Other gross income (see instructions)	<b>3</b>	
<b>4</b> Add lines 1 through 3	<b>4</b>	
<b>5</b> Depreciation and depletion	<b>5</b>	
<b>6</b> Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	<b>6</b>	
<b>7</b> Other expenses (see instructions)	<b>7</b>	
<b>8 Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>	

**Section B - Minimum Asset Amount**

	(A) Prior Year	(B) Current Year (optional)
<b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	<b>1</b>	
<b>a</b> Average monthly value of securities	<b>1a</b>	
<b>b</b> Average monthly cash balances	<b>1b</b>	
<b>c</b> Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e Discount</b> claimed for blockage or other factors (explain in detail in Part VI)		
<b>2</b> Acquisition indebtedness applicable to non-exempt use assets	<b>2</b>	
<b>3</b> Subtract line 2 from line 1d	<b>3</b>	
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	
<b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b> Multiply line 5 by .035	<b>6</b>	
<b>7</b> Recoveries of prior-year distributions	<b>7</b>	
<b>8 Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	

**Section C - Distributable Amount**

		Current Year
<b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>	
<b>2</b> Enter 85% of line 1	<b>2</b>	
<b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>	
<b>4</b> Enter greater of line 2 or line 3	<b>4</b>	
<b>5</b> Income tax imposed in prior year	<b>5</b>	
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>	
<b>7</b> <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2016			
a			
b			
c From 2013. . . . .			
d From 2014. . . . .			
e From 2015. . . . .			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2016 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b Excess from 2013. . . . .			
c Excess from 2014. . . . .			
d Excess from 2015. . . . .			
e Excess from 2016. . . . .			

**Part VI**    **Supplemental Information.**

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

<b>Facts And Circumstances Test</b>

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493319102937	
<div>SCHEDULE D (Form 990)</div> <div>Department of the Treasury Internal Revenue Service</div>		<div>Supplemental Financial Statements</div> <div>► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.</div> <div>Information about Schedule D (Form 990) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>.</div>			<div>OMB No 1545-0047</div> <div>2016</div> <div>Open to Public Inspection</div>
Name of the organization AmeriCares Foundation Inc				Employer identification number 06-1008595	
Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.					
		(a) Donor advised funds		(b) Funds and other accounts	
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?				<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.					
1	Purpose(s) of conservation easements held by the organization (check all that apply) <input type="checkbox"/> Preservation of land for public use (e g , recreation or education) <input type="checkbox"/> Preservation of an historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year				
a	Total number of conservation easements	Held at the End of the Year			
b	Total acreage restricted by conservation easements	2a			
c	Number of conservation easements on a certified historic structure included in (a)	2b			
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2c			
		2d			
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►				
4	Number of states where property subject to conservation easement is located ►				
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?				<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►				
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$				
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?				<input type="checkbox"/> Yes <input type="checkbox"/> No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements				
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.					
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items				
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items				
(i) Revenue included on Form 990, Part VIII, line 1		► \$			
(ii) Assets included in Form 990, Part X		► \$			
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items				
a	Revenue included on Form 990, Part VIII, line 1	► \$			
b	Assets included in Form 990, Part X	► \$			
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					
		Cat No 52283D		Schedule D (Form 990) 2016	



Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

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

☐

Part V

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

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	1,420,481	1,751,764	1,701,949	1,463,525	1,293,534
b Contributions	45,000				
c Net investment earnings, gains, and losses	206,768	-31,283	49,815	238,424	169,991
d Grants or scholarships					
e Other expenditures for facilities and programs	100,000	300,000			
f Administrative expenses	5,641				
g End of year balance	1,566,608	1,420,481	1,751,764	1,701,949	1,463,525

2

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

a

Board designated or quasi-endowment

0 %

b

Permanent endowment

81 000 %

c

Temporarily restricted endowment

19 000 %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

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

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

No

No

b

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

3b

4

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

Part VI

Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		175,000		175,000
b Buildings		900,971	483,311	417,660
c Leasehold improvements		2,589,750	1,384,531	1,205,219
d Equipment		3,689,469	2,535,475	1,153,994
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				2,951,873

Schedule D (Form 990) 2016

Part VII

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

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

Part VIII

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

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

Part IX

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

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

Part X

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
SPLIT INTEREST AGREEMENTS	2,546,605
CAPITALIZED LEASE	81,797
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶	2,628,402

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

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	2,383,717,249
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	957,480
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	992,809
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	-130,842
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	1,819,447
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	2,381,897,802
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	-1,464,004
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	-1,464,004
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	2,380,433,798

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

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	1,929,760,695
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	992,809
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	1,464,004
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	2,456,813
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	1,927,303,882
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	1,927,303,882

**Part XIII Supplemental Information**

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

Return Reference	Explanation
See Additional Data Table	

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

Return Reference	Explanation

**Additional Data**

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

**Supplemental Information**

Return Reference	Explanation
ENDOWMENT FUNDS	FORM 990, SCHEDULE D, PART V, LINE 4 The Americares Foundation endowment is intended to support the general charitable mission of the organization The Foundation intends that the principal should remain untouched, while the earnings on the endowment's investments shall be used to support various charitable programs During tax year ending 2015, the foundation appropriated \$400,000 (of which \$300,000 and \$100,000 were withdrawn in 2015 and 2016 respectively) from its endowment for expenditures to support the reconfiguration of its distribution center in stamford, CT

**Supplemental Information**

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

## Supplemental Information

Return Reference	Explanation
RECONCILIATION	<p>The Americares Foundation, Inc ("Foundation") files a consolidated audited financial statement with its subsidiary, Americares Free Clinics, Inc ("Clinics") The reconciliation in Parts XI &amp; XII of Schedule D reconciles back to the Foundation's financial information as presented in the audited financial statements and not to the consolidated numbers (inclusive of clinics) REVENUE ON BOOKS NOT ON RETURN FORM 990, SCHEDULE D, PART XI, LINE 2d Changes in split-interest agreements \$130,842 FORM 990, SCHEDULE D, PART XI, LINE 4b Rental Expenses Reclassed to Offset \$185,953 Revenue (as reported in Part VIII) Special Events Reclassed to Offset \$642,849 Revenue (as reported in Part VIII) Cost of Goods Sold Reclassed to Offset \$635,202 Revenue (as reported in Part VIII) -----</p> <p>----- Total Revenue Adjustments \$1,464,004</p>

# Supplemental Information

Return Reference	Explanation
EXPENSES ON BOOKS NOT ON RETURN	FORM 990, SCHEDULE D, PART XI, LINE 4b Rental Expenses Reclassed to Offset \$185,953 Revenue (as reported in Part VIII) Special Events Reclassed to Offset \$642,849 Revenue (as reported in Part VIII) Cost of Goods Sold Reclassed to Offset \$635,202 Revenue (as reported in Part VIII) ----- Total Revenue Adjustments \$1,464,004



**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No 1545-0047

**2016**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

► **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](http://www.irs.gov/form990).**

Name of the organization  
AmeriCares Foundation Inc

**Employer identification number**

06-1008595

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

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

☒ **Yes** ☐ **No**

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
( 1 ) See Add'l Data					
( 2 )					
( 3 )					
( 4 )					
( 5 )					
<b>3a</b> Sub-total	6	126			1,422,616,888
<b>b</b> Total from continuation sheets to Part I					
<b>c Totals</b> (add lines 3a and 3b)	6	126			1,422,616,888

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

<b>1</b>	<b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
<b>( 1 )</b>	See Add'l Data								
<b>( 2 )</b>									
<b>( 3 )</b>									
<b>( 4 )</b>									
<b>( 5 )</b>	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 . . . . .								713
<b>( 6 )</b>	Enter total number of other organizations or entities . . . . .								
<b>( 7 )</b>									
<b>( 8 )</b>									
<b>( 9 )</b>									
<b>( 10 )</b>									
<b>( 11 )</b>									
<b>( 12 )</b>									
<b>( 13 )</b>									
<b>( 14 )</b>									
<b>( 15 )</b>									
<b>( 16 )</b>									

Schedule F (Form 990) 2016

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
( 1 )							
( 2 )							
( 3 )							
( 4 )							
( 5 )							
( 6 )							
( 7 )							
( 8 )							
( 9 )							
( 10 )							
( 11 )							
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**Part IV Foreign Forms**

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713)* ☐ Yes ☒ No

**Part V Supplemental Information**

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

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

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 06-1008595

**Name:** AmeriCares Foundation Inc

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean			Program Services	Disaster Relief/dvlpmt	3,924,092
East Asia and the Pacific			Program Services	Disaster Relief/dvlpmt	800,261
Europe (Including Iceland and Greenland)			Program Services	Disaster Relief/dvlpmt	49,705

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa			Program Services	Disaster Relief/dvlpmt	234,873
South America			Program Services	Disaster Relief/dvlpmt	343,464
Sub-Saharan Africa			Program Services	Disaster Relief/dvlpmt	1,365,685

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South Asia			Program Services	Disaster Relief/dvlpmt	100,551
Russia and the Newly Independent States			Program Services		131,519
East Asia and the Pacific	1	7	Grantmaking		601,913,125



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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Grantmaking		4,512,196
Middle East and North Africa			Grantmaking		20,240,864
Russia and the Newly Independent States			Grantmaking		79,164,705

**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			Grantmaking		24,350,941
South Asia	1	5	Grantmaking		16,655,971
Sub-Saharan Africa	2	7	Grantmaking		441,655,360

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America			Grantmaking		206,908
Central America and the Caribbean	2	107	Grantmaking		226,966,668

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	Shoe Distribution	11,430	WIRE	0		
		Central America and the Caribbean	Hurricane relief	20,000	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	Mobile Medical Teams	10,000	WIRE	0		
		Central America and the Caribbean	Flooding Relief	5,662	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	Facilities Aid	60,000	WIRE	0		
		East Asia and the Pacific	Breast Cancer	60,000	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	Pediatric Nutrition	135,000	WIRE	0		
		East Asia and the Pacific	Rehabilitation of Structures	88,982	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	Refugee Aid	72,569	WIRE	0		
		Middle East and North Africa	Maternal Health	360,592	WIRE	0		



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	Shoe Distribution	17,622	WIRE	0		
		Middle East and North Africa	Program Impact Evaluation	179,913	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Russia and the Newly Independent States	Shoe Distribution	10,503	WIRE	0		
		South Asia	Annual Program Support	449,985	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	Mobile Medical Clinics	41,348	WIRE	0		
		South Asia	Cadre Development and Training	84,800	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	Flooding Relief	15,000	WIRE	0		
		South Asia	Flooding Relief	10,000	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	Humanities	40,000	WIRE	0		
		South Asia	Health Services Training	472,950	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Fistula support	12,350	WIRE	0		
		Sub-Saharan Africa	Phlebotomy Training	125,000	WIRE	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Storm relief	9,236	WIRE	0		
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		353,149	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		13,280,899	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		1,817,281	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		743,181	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		695,339	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		252,378	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		79,527	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		72,012	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		63,728	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		663,408	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		200,148	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		53,176	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		10,635	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
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		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		265,119	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		178,904	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		178,665	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		141,820	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		130,491	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		116,601	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		115,400	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		103,055	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		94,969	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		74,598	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		71,491	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		70,989	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		69,909	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		68,022	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		65,098	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		47,071	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		36,630	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		33,222	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		22,717	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		22,587	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		21,168	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		20,939	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		14,396	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	EMERGENCY	0		7,509	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		1,097,259	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		818,361	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		809,104	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		569,151	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		524,820	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		522,427	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		460,443	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		385,105	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		368,890	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		338,415	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		328,850	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		328,070	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		306,381	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		304,421	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		293,438	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		285,832	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		281,954	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		281,706	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		276,861	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		273,805	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		271,266	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		265,462	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		260,797	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		255,864	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		246,548	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		242,104	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		232,927	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		232,729	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		231,845	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		229,700	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		229,363	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		227,320	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		221,831	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		219,935	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		215,983	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		207,555	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		205,351	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		202,538	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		201,840	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		199,454	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		191,541	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		177,713	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		170,516	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		167,811	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		161,620	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		153,729	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		152,406	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		150,743	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		149,835	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		147,825	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		147,027	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		146,417	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		146,381	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		143,794	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		134,662	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		134,094	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		130,929	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		130,062	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		124,986	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		124,275	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		120,097	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		119,783	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		118,762	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		115,801	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		115,076	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		114,034	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		113,801	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		111,778	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		111,070	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		109,679	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		108,637	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		108,003	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		107,496	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		106,647	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		106,234	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		101,760	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		101,441	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		101,153	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		98,597	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		97,782	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		97,148	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		96,660	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		92,613	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		92,507	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		91,882	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		91,519	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		91,034	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		89,957	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		89,832	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		85,786	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		84,968	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		84,295	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		82,134	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		81,940	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		81,006	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		80,524	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		79,317	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		78,052	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		75,260	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		74,437	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		74,287	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		74,042	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		72,680	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		71,306	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		70,665	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		69,090	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		68,649	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		68,445	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		68,351	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		67,155	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		65,014	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		64,742	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		64,469	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		62,214	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		62,013	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		61,173	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		60,819	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		60,166	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		57,704	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		56,881	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		56,644	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		55,945	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		55,875	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		54,953	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		54,490	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		54,067	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		53,807	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		53,164	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		53,105	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		52,676	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		51,912	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		51,860	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		51,170	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		50,670	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		49,295	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		49,220	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		48,001	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		47,902	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		47,684	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		47,115	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		46,237	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		46,099	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		43,580	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		43,543	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		43,298	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		43,272	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		43,101	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		42,889	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		42,680	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		42,269	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		42,261	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		40,746	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		39,984	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		39,466	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		39,270	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		39,152	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		38,987	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		38,753	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		38,626	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		38,454	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		36,398	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		36,157	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		35,061	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		34,893	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		34,561	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		34,434	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		34,382	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		34,329	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		33,698	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		33,199	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		32,445	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		32,405	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		32,078	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		32,064	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		31,771	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		31,633	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		31,559	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		29,751	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		29,630	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		28,798	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		27,347	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		26,758	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		26,075	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		25,877	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		25,843	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		25,779	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		25,598	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		25,335	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		24,576	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		24,507	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		24,501	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		24,475	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		23,917	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		23,570	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		22,682	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		22,359	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		21,508	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		21,443	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		21,180	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		20,730	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		20,194	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		19,975	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		19,790	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		19,589	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		18,438	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		18,202	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		17,999	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		17,982	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		17,926	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		17,364	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		16,526	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		16,498	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		16,489	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		16,245	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		16,136	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		15,776	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		15,709	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		14,812	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		14,211	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		13,867	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		13,862	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		13,813	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		13,255	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		13,104	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		13,047	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		12,939	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		12,672	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		12,322	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		11,828	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		11,745	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		11,416	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		11,315	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		11,106	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		11,070	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		10,954	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		10,701	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		10,558	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		10,488	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		10,425	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		10,219	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		10,140	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		10,112	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,971	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,891	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,832	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,660	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,599	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,494	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,381	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,293	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,154	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,154	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,087	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,052	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		8,822	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		8,435	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		8,150	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		8,030	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		8,022	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,972	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,948	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,713	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,701	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,680	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,601	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,495	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,472	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,411	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,398	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,335	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		7,221	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,960	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,907	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,732	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,724	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,713	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,707	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,700	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,528	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,517	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,455	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,451	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,442	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,326	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,282	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,182	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,093	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		6,040	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,990	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,972	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,769	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,761	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,712	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,659	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,636	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,588	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,540	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,522	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,217	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,144	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,091	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		5,040	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		25,027,660	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		15,734,180	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		12,002,908	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		9,240,321	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		1,871,534	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		59,785,577	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		28,350,885	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		2,633,595	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		22,256,713	Med Suppl	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	ON-GOING	0		2,589,848	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		5,267,461	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		319,410,000	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		1,498,725	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		41,582	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		270,270,000	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		182,952	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		485,471	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		417,753	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		242,547	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		235,975	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		204,435	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		182,742	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		169,986	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		169,284	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		163,945	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		160,628	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		158,484	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		150,907	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		136,327	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		134,731	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		120,336	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		119,737	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		115,583	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		109,699	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		107,127	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		101,665	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		76,890	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		72,804	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		67,225	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		65,685	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		64,281	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		60,208	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		58,322	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		58,135	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		55,249	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		55,015	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		53,444	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		51,469	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		38,454	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		36,006	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		33,539	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		33,044	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		32,273	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		31,706	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		28,287	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		24,821	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		23,484	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		21,843	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		20,567	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		19,142	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		18,357	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		17,301	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		13,713	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		12,183	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		11,543	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		11,024	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		10,735	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		10,027	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		7,399	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		6,491	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		6,390	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		5,816	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	ON-GOING	0		5,535	Med Suppl	FMV
		EAST ASIA AND THE PACIFIC	ON-GOING	0		5,173	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	EMERGENCY	0		2,964,458	Med Suppl	FMV
		EUROPE	EMERGENCY	0		163,354	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	EMERGENCY	0		34,414	Med Suppl	FMV
		EUROPE	EMERGENCY	0		6,991	Med Suppl	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	ON-GOING	0		583,735	Med Suppl	FMV
		EUROPE	ON-GOING	0		429,435	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	ON-GOING	0		225,434	Med Suppl	FMV
		EUROPE	ON-GOING	0		100,011	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY	0		324,352	Med Suppl	FMV
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY	0		579,595	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY	0		287,715	Med Suppl	FMV
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY	0		224,667	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY	0		214,769	Med Suppl	FMV
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY	0		122,357	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY	0		92,382	Med Suppl	FMV
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY	0		32,282	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY	0		12,693	Med Suppl	FMV
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY	0		11,540	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	ON-GOING	0		1,856,373	Med Suppl	FMV
		MIDDLE EAST AND NORTH AFRICA	ON-GOING	0		7,944,731	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	ON-GOING	0		7,832,960	Med Suppl	FMV
		MIDDLE EAST AND NORTH AFRICA	ON-GOING	0		36,059	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	ON-GOING	0		15,120	Med Suppl	FMV
		RUSSIA AND THE NEWLY INDEPENDENT STATES	ON-GOING	0		9,987,904	Med Suppl	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND THE NEWLY INDEPENDENT STATES	ON-GOING	0		2,645,694	Med Suppl	FMV
		RUSSIA AND THE NEWLY INDEPENDENT STATES	ON-GOING	0		66,462,081	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND THE NEWLY INDEPENDENT STATES	ON-GOING	0		68,377	Med Suppl	FMV
		SOUTH AMERICA	EMERGENCY	0		108,148	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	EMERGENCY	0		63,420	Med Suppl	FMV
		SOUTH AMERICA	EMERGENCY	0		3,189,547	Med Suppl	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	EMERGENCY	0		983,337	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		1,589,608	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		2,457,840	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		10,699,301	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		558,906	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		298,493	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		290,672	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		280,239	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		267,311	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		259,670	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		254,362	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		218,975	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		189,295	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		186,566	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		158,443	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		148,767	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		145,870	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		140,080	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		124,800	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		120,665	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		104,801	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		99,134	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		98,635	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		82,357	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		81,255	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		75,946	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		71,927	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		70,849	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		70,064	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		63,399	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		57,826	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		49,149	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		40,106	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		39,827	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		37,474	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		31,442	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		31,422	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		31,080	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		30,778	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		30,363	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		29,737	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		27,537	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		24,451	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		22,255	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		18,882	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		18,521	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		16,999	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		13,816	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		12,823	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		12,403	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		11,805	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		10,978	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		10,706	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		10,652	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		10,586	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		9,843	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		9,135	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		9,085	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		9,036	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		7,630	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		7,580	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		7,494	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		7,285	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		6,910	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		6,631	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		6,389	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		6,212	Med Suppl	FMV
		SOUTH AMERICA	ON-GOING	0		5,779	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ON-GOING	0		5,598	Med Suppl	FMV
		SOUTH ASIA	ON-GOING	0		5,336	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	ON-GOING	0		207,982	Med Suppl	FMV
		SOUTH ASIA	ON-GOING	0		149,018	Med Suppl	FMV



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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	ON-GOING	0		119,156	Med Suppl	FMV
		SOUTH ASIA	ON-GOING	0		73,848	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	ON-GOING	0		67,587	Med Suppl	FMV
		SOUTH ASIA	ON-GOING	0		67,191	Med Suppl	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	ON-GOING	0		62,605	Med Suppl	FMV
		SOUTH ASIA	ON-GOING	0		55,586	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	ON-GOING	0		48,690	Med Suppl	FMV
		SOUTH ASIA	ON-GOING	0		39,000	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	ON-GOING	0		27,299	Med Suppl	FMV
		SOUTH ASIA	ON-GOING	0		26,666	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	ON-GOING	0		22,411	Med Suppl	FMV
		SOUTH ASIA	ON-GOING	0		22,354	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	ON-GOING	0		19,257	Med Suppl	FMV
		SOUTH ASIA	ON-GOING	0		16,931	Med Suppl	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	ON-GOING	0		14,795	Med Suppl	FMV
		SOUTH ASIA	ON-GOING	0		13,685	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	ON-GOING	0		11,588	Med Suppl	FMV
		SOUTH ASIA	ON-GOING	0		7,026	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	ON-GOING	0		6,021	Med Suppl	FMV
		SOUTH ASIA	ON-GOING	0		5,337	Med Suppl	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	ON-GOING	0		5,261	Med Suppl	FMV
		SOUTH ASIA	ON-GOING	0		14,414,245	Med Suppl	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	EMERGENCY	0		176,127	Med Suppl	FMV
		SUB-SAHARAN AFRICA	EMERGENCY	0		149,114	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	EMERGENCY	0		64,240	Med Suppl	FMV
		SUB-SAHARAN AFRICA	EMERGENCY	0		35,149	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		3,556,483	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		5,216,945	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		3,525,470	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		10,989,670	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		190,428,000	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		184,296,000	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		6,333,970	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		12,422,325	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		8,091,103	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		634,475	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		99,513	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		629,799	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		629,078	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		585,312	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		584,909	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		491,912	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		428,030	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		422,362	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		406,891	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		371,841	Med Suppl	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		347,029	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		316,738	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		284,040	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		277,004	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		274,623	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		274,533	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		268,200	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		255,866	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		249,480	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		244,591	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		244,411	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		230,957	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		226,109	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		221,536	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		218,442	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		218,183	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		208,726	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		208,188	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		204,305	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		196,052	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		191,496	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		188,316	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		187,235	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		170,480	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		162,861	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		159,890	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		159,365	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		151,745	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		139,665	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		137,251	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		133,052	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		130,319	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		126,330	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		125,434	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		124,202	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		121,986	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		116,418	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		110,625	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		108,500	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		107,586	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		104,289	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		98,348	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		92,983	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		92,227	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		89,077	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		88,299	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		84,679	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		83,854	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		83,088	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		81,589	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		75,207	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		73,731	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		70,829	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		70,479	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		65,978	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		65,339	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		65,157	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		64,573	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		61,781	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		60,889	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		60,458	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		59,677	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		55,085	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		54,854	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		49,944	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		46,062	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		42,908	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		41,569	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		40,887	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		40,069	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		39,184	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		36,836	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		36,706	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		35,045	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		32,843	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		32,786	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		32,455	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		31,682	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		27,683	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		25,347	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		25,026	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		24,721	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		24,693	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		24,401	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		24,127	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		22,117	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		21,824	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		21,821	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		20,326	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		20,274	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		17,761	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		16,974	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		16,973	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		15,690	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		14,960	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		14,880	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		14,117	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		13,736	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		13,361	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		13,144	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		12,851	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		12,535	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		12,516	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		12,143	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		10,972	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		10,799	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		10,010	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		9,939	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		9,554	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		9,313	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		9,252	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		9,140	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		9,066	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		8,706	Med Suppl	FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		8,606	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		7,844	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		7,643	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		7,545	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		6,903	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		6,629	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		6,478	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		6,062	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		6,009	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		5,772	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		5,762	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		5,338	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		5,228	Med Suppl	FMV
		SUB-SAHARAN AFRICA	ON-GOING	0		5,226	Med Suppl	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ON-GOING	0		5,181	Med Suppl	FMV



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SCHEDULE G (Form 990 or 990-EZ)		Supplemental Information Regarding Fundraising or Gaming Activities			OMB No 1545-0047
Department of the Treasury Internal Revenue Service		Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .			<b>2016</b> <b>Open to Public Inspection</b>
Name of the organization AmeriCares Foundation Inc				Employer identification number 06-1008595	

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- |   |  |
|---|--|
| <b>a</b> <input checked="" type="checkbox"/> Mail solicitations               | <b>e</b> <input checked="" type="checkbox"/> Solicitation of non-government grants |
| <b>b</b> <input checked="" type="checkbox"/> Internet and email solicitations | <b>f</b> <input checked="" type="checkbox"/> Solicitation of government grants     |
| <b>c</b> <input checked="" type="checkbox"/> Phone solicitations              | <b>g</b> <input checked="" type="checkbox"/> Special fundraising events            |
| <b>d</b> <input checked="" type="checkbox"/> In-person solicitations          |  |
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ **Yes** ☐ **No**
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 DONOR SERVICES Group 6715 sunset blvd  hollywood, CA 90028	Profess Solicitor		No	1,710,534	413,247	1,297,287
2 Mal Warwick Associates Inc 2550 ninth street ste 103  berkeley, CA 94710	Fundraising Counsel		No	6,733,893	662,476	6,071,417
3 the harrington agency See Note 1 329 DICKINSON AVE  SWARTHMORE, PA 19081	FUNDRAISING COUNSEL		No	0	62,500	-62,500
4						
5						
6						
7						
8						
9						
10						
<b>Total</b> ▶				8,444,427	1,138,223	7,306,204

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
- AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

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

Revenue		(a) Event #1 <b>AIRLIFT BENEFIT</b> (event type)	(b) Event #2 (event type)	(c) Other events <b>0</b> (total number)	(d) Total events (add col (a) through col (c))
	<b>1</b> Gross receipts . . . . .	2,575,900			2,575,900
	<b>2</b> Less Contributions . . . . .	2,434,140			2,434,140
	<b>3</b> Gross income (line 1 minus line 2) . . . . .	141,760			141,760
Direct Expenses	<b>4</b> Cash prizes . . . . .				
	<b>5</b> Noncash prizes . . . . .				
	<b>6</b> Rent/facility costs . . . . .	137,895			137,895
	<b>7</b> Food and beverages . . . . .	136,457			136,457
	<b>8</b> Entertainment . . . . .	186,209			186,209
	<b>9</b> Other direct expenses . . . . .	182,288			182,288
	<b>10</b> Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶				642,849
	<b>11</b> Net income summary Subtract line 10 from line 3, column (d) . . . . . ▶				-501,089

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

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

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

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

☐ Yes ☐ No

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

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

☐ Yes ☐ No

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

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

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

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

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

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

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

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

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

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

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

**16** Gaming manager information:

Name ▶ \_\_\_\_\_

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

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

☐ Director/officer ☐ Employee ☐ Independent contractor

**17** Mandatory distributions:

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

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

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

Return Reference	Explanation
Schedule G, Part I - Fundraising Consultants	The amounts paid by Americares to the fundraising consultants listed in Schedule G are reported (as required by the Form 990) on a fiscal year basis. These consultants may be represented in Part VII, Section B as top highly paid independent contractors. The amounts reported in Part VII are reported on a calendar-year basis, therefore they may differ from amounts reported on schedule G. per all contracts, expenses are budgeted and approved separately from consulting fees. In fiscal year 2017, in addition to the consulting fees listed in Schedule G, Part I, AmeriCares paid other non-consulting fundraising expenses to Donor Services Group of \$7,048. ** Fundraiser, The Harrington Group, is a new fundraiser in fiscal year 2017.

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As Filed Data -

DLN: 93493319102937

Schedule I  
(Form 990)

OMB No 1545-0047

2016

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

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

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

Name of the organization  
AmeriCares Foundation Inc

Employer identification number  
06-1008595

Part I

General Information on Grants and Assistance

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

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

Part II

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

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

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . 618

3 Enter total number of other organizations listed in the line 1 table . . . . . 59

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) FREE MEDICINE TO PATIENTS	148297		223,652,140	FMV	prescription meds
(2) MEDICAL OUTREACH IN THE U S	46		1,020,166	FMV	MEDICAL SUPPLIES
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

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

Additional Data

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A COMMUNITY CLINIC INC 344 MARKET STREET SUNBURY, PA 17801	20-4051982	501(c)(3)	0	117,105	FMV	Medical Supplies	ON-GOING
A NEW DAY CHC 3085 E FLAMINGO RD LAS VEGAS, NV 89121	47-1608870	Other	0	872,166	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A PROMISE TO HELP 1332 WINOLA LANE BIRMINGHAM, AL 35235	26-4401185	501(c)(3)	0	112,737	FMV	Medical Supplies	ON-GOING
ABILENE-TAYLOR COUNTY PUBLIC HEALTH DIST 850 N 6TH STREET ABILENE, TX 79601	75-6000440	Other	0	554,258	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ADVANTAGE BEHAVIORAL HEALTH SYSTEMS 250 NORTH AVENUE ATHENS, GA 30601	58-2112427	Other	0	696,548	FMV	Medical Supplies	ON-GOING
AGAPE CLINIC 4104 JUNIUS STREET DALLAS, TX 75246	14-1847977	501(c)(3)	0	5,736,625	FMV	Medical Supplies	ON-GOING



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AGAPE COMMUNITY HEALTH CENTERS INC 120 KING ST JACKSONVILLE, FL 32204	16-1660966	501(c)(3)	0	26,984	FMV	Medical Supplies	ON-GOING
ALABAMA FREE CLINIC 212 COURTHOUSE SQUARE BAY MINETTE, AL 36507	63-1247879	501(c)(3)	0	234,492	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALL HANDS VOLUNTEERS 6 COUNTY RD SUITE 6 MATTAPOISETT, MA 02739	20-3414952	501(c)(3)	0	16,415	FMV	Medical Supplies	EMERGENCY
AMERICARES FREE CLINIC OF BRIDGEPORT 115 HIGHLAND AVENUE BRIDGEPORT, CT 06604	06-1422741	501(c)(3)	0	314,956	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICARES FREE CLINIC OF DANBURY 76 WEST STREET DANBURY, CT 06810	06-1422741	501(c)(3)	0	465,822	FMV	Medical Supplies	ON-GOING
AMERICARES FREE CLINIC OF NORWALK 98 SOUTH MAIN STREET NORWALK, CT 06854	06-1422741	Other	0	378,275	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICARES FREE CLINIC OF STAMFORD 88 HAMILTON AVENUE STAMFORD, CT 06902	06-1422741	501(c)(3)	0	193,857	FMV	Medical Supplies	ON-GOING
AMISTAD COMMUNITY HEALTH CENTER 1533 S BROWNLEE CORPUS CHRISTI, TX 78404	20-3008507	501(c)(3)	0	155,007	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMISTAD COMMUNITY HEALTH CENTER 1533 S BROWNLEE CORPUS CHRISTI, TX 78404	20-3008507	501(c)(3)	0	8,165	FMV	Medical Supplies	EMERGENCY
ANCHOR MENTAL HEALTH INC 1001 LAWRENCE ST WASHINGTON, DC 20017	52-0824835	501(c)(3)	0	69,134	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANDERSON FREE CLINIC 414 N FANT ST ANDERSON, SC 29621	57-0787584	501(c)(3)	0	337,185	FMV	Medical Supplies	ON-GOING
ANDREWS CENTER 2323 WEST FRONT STREET TYLER, TX 75702	75-1281410	501(c)(3)	0	607,447	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANGELS COMMUNITY CLINIC 1005 POPLAR STREET MURRAY, KY 42071	62-1777249	501(c)(3)	0	91,505	FMV	Medical Supplies	ON-GOING
ARCHWAYS INC 919 13TH ST FORT LAUDERDALE, FL 33304	59-2341993	501(c)(3)	0	145,829	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARLINGTON COUNTY DHSBHD 2120 WASHINGTON BLVD ARLINGTON, VA 22204	54-6001123	501(c)(3)	0	50,775	FMV	Medical Supplies	ON-GOING
ARLINGTON FREE CLINIC 2921 SOUTH 11TH STREET ARLINGTON, VA 22204	54-1671883	501(c)(3)	0	186,551	FMV	Medical Supplies	ON-GOING



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARTHUR NAGEL COMMUNITY CLINIC 1116 12TH STREET UNIT 3 BANDERA, TX 78003	77-0697361	501(c)(3)	0	150,374	FMV	Medical Supplies	ON-GOING
ASHLAND FREE MEDICAL CLINIC SUZANNE SLYMAN OAKLAND, CA 94602	68-0554276	501(c)(3)	0	21,082	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASPIRE INDIANA HEALTH 9615 E148TH ST NOBLESVILLE, IN 46060	47-4391083	501(c)(3)	0	140,507	FMV	Medical Supplies	ON-GOING
ATHENS NURSES CLINIC PO BOX 1732 ATHENS, GA 30601	58-2490925	501(c)(3)	0	319,893	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AUGUSTA REGIONAL FREE CLINIC 342 MULE ACADEMY Rd FISHERSVILLE, VA 22939	54-1651896	501(c)(3)	0	49,163	FMV	Medical Supplies	ON-GOING
AVENAL COMMUNITY HEALTH CENTER 405 WEST D ST LEMOORE, CA 93245	77-0425496	501(c)(3)	0	838,524	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AVICENNA COMMUNITY HEALTH CENTER 819 BLOOMINGTON ROAD CHAMPAIGN, IL 61820	27-0267757	501(c)(3)	0	22,165	FMV	Medical Supplies	ON-GOING
AVITA COMMUNITY PARTNERS 4331 THURMON Tnr FLOWERY BRANCH, GA 30542	58-2109706	Other	0	105,533	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AZ PACH 2902 W CLARENDON AVE PHOENIX, AZ 85017	46-0650798	501(c)(3)	0	366,688	FMV	Medical Supplies	ON-GOING
AZZARELLI OUTREACH CLINIC 341 N ST JOSEPH AVE KANKAKEE, IL 60901	36-2312493	501(c)(3)	0	309,720	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAPTIST COMMUNITY HEALTH SERVICES 4960 ST CLAUDE NEW ORLEANS, LA 70117	45-3792193	501(c)(3)	0	7,431	FMV	Medical Supplies	ON-GOING
BAPTIST MISSION CENTER 2125 EXCHANGE AVE OKLAHOMA CITY, OK 73108	73-0644143	501(c)(3)	0	93,357	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BARTZ-ALTADONNA COMMUNITY HEALTH CENTER 43322 GINGHAM AVE LANCASTER, CA 93535	27-3261289	501(c)(3)	0	606,851	FMV	Medical Supplies	ON-GOING
BATON ROUGE PRIMARY CARE COLLABORATIVE INC 2013 CENTRAL ROAD BATON ROUGE, LA 70807	41-2114148	501(c)(3)	0	42,156	FMV	Medical Supplies	ON-GOING

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BAYOUCLINIC INC 13833 TAPIA BAYOU LA BATRE, AL 36509	63-1270951	501(c)(3)	0	136,284	FMV	Medical Supplies	ON-GOING
BEAR LAKE COMMUNITY HEALTH CENTER 325 W LOGAN HWY GARDEN CITY, UT 84028	81-0587644	501(c)(3)	0	13,626	FMV	Medical Supplies	ON-GOING



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BECKLEY HEALTH RIGHT INC 111 RANDOLPH STREET BECKLEY, WV 25801	55-0774466	501(c)(3)	0	33,705	FMV	Medical Supplies	ON-GOING
BEHAVIORAL HEALTH SERVICES OF SOUTH GEORGIA 3120 B N OAK ST VALDOSTA, GA 31602	58-2107483	Other	0	946,234	FMV	Medical Supplies	ON-GOING

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BERKELEY FREE CLINIC 2339 DURANT AVE BERKELEY, CA 94704	94-1697002	501(c)(3)	0	9,315	FMV	Medical Supplies	ON-GOING
BETHESDA COMMUNITY CLINIC INC 111 MOUNTAIN BROOK DR CANTON, GA 30115	27-4923001	501(c)(3)	0	151,479	FMV	Medical Supplies	ON-GOING

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BETHESDA HEALTH CLINIC 409 WEST FERGUSON TYLER, TX 75702	26-0036674	501(c)(3)	0	2,164,201	FMV	Medical Supplies	ON-GOING
BLACK HAWK GRUNDY MENTAL HEALTH CENTER 3251 WEST 9TH STREET WATERLOO, IA 50702	42-0733463	501(c)(3)	0	147,951	FMV	Medical Supplies	ON-GOING

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BOLINGBROOK CHRISTIAN HEALTH CENTER 151 E BRIARCLIFF RD BOLINGBROOK, IL 60440	36-4401468	501(c)(3)	0	393,717	FMV	Medical Supplies	ON-GOING
BOND COMMUNITY HEALTH CENTER INC 1720 South Gadsden St Tallahassee, FL 32301	59-2426414	501(c)(3)	0	6,381	FMV	Medical Supplies	EMERGENCY

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BORINQUEN HEALTH CARE CENTER INC 3601 Federal Highway Miami, FL 33137	59-1417397	501(c)(3)	0	25,730	FMV	Medical Supplies	EMERGENCY
BRADLEY FREE CLINIC OF ROANOKE VALLEY 1240 3RD ST SW ROANOKE, VA 24016	23-7380491	501(c)(3)	0	10,381	FMV	Medical Supplies	ON-GOING

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BREAD OF HEALING CLINIC 1821 N 16TH ST MILWAUKEE, WI 53205	81-0669867	501(c)(3)	0	1,205,987	FMV	Medical Supplies	ON-GOING
BREWER MEDICAL CENTER PHARMACY 103 MAINE AVENUE BANGOR, ME 04401	01-0514750	501(c)(3)	0	94,325	FMV	Medical Supplies	ON-GOING

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BRIDGES TO HEALTH 1251 W KEM ROAD MARION, IN 46952	20-5405181	501(c)(3)	0	136,998	FMV	Medical Supplies	ON-GOING
BRIDGES A COMMUNITY SUPPORT SYSTEM 949 BRIDGEPORT AVENUE MILFORD, CT 06460	06-0867978	501(c)(3)	0	5,352	FMV	Medical Supplies	ON-GOING

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BROAD STREET CLINIC 534 N 35TH ST MOREHEAD CITY, NC 28557	56-1853604	501(c)(3)	0	13,936	FMV	Medical Supplies	ON-GOING
BROCK HUGHES FREE CLINIC INC 450 W MONROE ST WYTHEVILLE, VA 24382	20-2353144	501(c)(3)	0	193,851	FMV	Medical Supplies	ON-GOING



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BROWARD COMMUNITY & FAMILY HEALTH CENTERS 168 N POWERLINE RD POMPANO BEACH, FL 33069	59-3489664	501(c)(3)	0	297,889	FMV	Medical Supplies	ON-GOING
BROWARD HEALTH NORTH HOSPITAL 201 E SAMPLE ROAD DEERFIELD BEACH, FL 33064	59-6012065	501(c)(3)	0	146,681	FMV	Medical Supplies	ON-GOING

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BROWNSVILLE COMMUNITY HEALTH CENTER 191 EAST PRICE ROAD BROWNSVILLE, TX 78521	74-2176836	501(c)(3)	0	147,353	FMV	Medical Supplies	ON-GOING
BROWNSVILLE COMMUNITY HEALTH CENTER 191 EAST PRICE ROAD BROWNSVILLE, TX 78521	74-2176836	501(c)(3)	0	10,018	FMV	Medical Supplies	EMERGENCY

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BUDDHIST TZU CHI MEDICAL CENTER 1000 S GARFIELD ALHAMBRA, CA 91801	95-4457939	501(c)(3)	0	168,082	FMV	Medical Supplies	ON-GOING
BUTLER COUNTY HEALTH DEPARTMENT 1619 N MAIN ST POPLAR BLUFF, MO 63901	43-1070380	Other	0	47,720	FMV	Medical Supplies	ON-GOING

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CHANGE 37 KNOLLWOOD DRIVE SHREWSBURY, MA 01545	22-2905321	501(c)(3)	0	965,235	FMV	Medical Supplies	ON-GOING
CABRINI CLINIC 1234 PORTER STREET DETROIT, MI 48226	38-3129349	501(c)(3)	0	95,234	FMV	Medical Supplies	ON-GOING

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CACHE VALLEY COMMUNITY HEALTH CENTER 1515 N 400 E SUITE 104 NLOGAN, UT 84341	81-0587644	501(c)(3)	0	120,663	FMV	Medical Supplies	ON-GOING
CACHE VALLEY COMMUNITY HEALTH CENTER-LOGAN 944 S STATE HWY 91 LOGAN, UT 84321	81-0587644	501(c)(3)	0	232,766	FMV	Medical Supplies	ON-GOING

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CACHE VALLEY COMMUNITY HEALTH CENTER-SOUTH 26 WEST MAIN STE 3A HYRUM, UT 84319	81-0587644	501(c)(3)	0	719,475	FMV	Medical Supplies	ON-GOING
CAMILLUS HEALTH CONCERN 336 NW 5TH ST MIAMI, FL 33128	65-0063921	501(c)(3)	0	1,458,608	FMV	Medical Supplies	ON-GOING

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CAMILLUS HEALTH CONCERN 336 NW 5TH ST MIAMI, FL 33128	65-0063921	501(c)(3)	0	22,060	FMV	Medical Supplies	EMERGENCY
CAMP FROZEN CHOSEN- ALASKA HEMOPHILIA ASSOC 3851 Piper St ANCHORAGE, AK 99508	94-3143226	501(c)(3)	0	56,680	FMV	Medical Supplies	ON-GOING

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CAMP HONOR 826 N 5th Ave Phoenix, AZ 85003	86-0209257	501(c)(3)	0	118,880	FMV	Medical Supplies	ON-GOING
CAMP INDEPENDENT FIREFLY 3121S MARYLAND PKWY LAS VEGAS, NV 89109	26-0286469	501(c)(3)	0	45,220	FMV	Medical Supplies	ON-GOING



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CAMP IV-Y (AT CAMP HOUSTON) 921 Terry Ave SEATTLE, WA 98104	91-6068857	501(c)(3)	0	100,035	FMV	Medical Supplies	ON-GOING
CAMPBELL UNIVERSITY COMMUNITY CARE CLINIC 4350 US-421 LILLINGTON, NC 27546	68-0620773	501(c)(3)	0	16,336	FMV	Medical Supplies	ON-GOING

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CANYON COUNTY COMMUNITY CLINIC 524 CLEVELAND BLVD CALDWELL, ID 83605	26-4195171	501(c)(3)	0	335,937	FMV	Medical Supplies	ON-GOING
CAPE FEAR CLINIC INC 1605 DOCTORS CIRCLE WILMINGTON, NC 28401	56-1984630	501(c)(3)	0	56,754	FMV	Medical Supplies	ON-GOING

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CAPE VOLUNTEERS IN MEDICINE INC 423 N RTE 9 CAPE MAY COURT HOUSE, NJ 08210	52-2257585	501(c)(3)	0	50,096	FMV	Medical Supplies	ON-GOING
CAPITAL AREA HEALTHNETWORK 719 N 25TH STREET RICHMOND, VA 23223	54-1884190	501(c)(3)	0	99,078	FMV	Medical Supplies	ON-GOING

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CAPITAL CITY RESCUE MISSION FREE CLINIC 259 SOUTH PEARL ST ALBANY, NY 12202	56-2663290	501(c)(3)	0	458,297	FMV	Medical Supplies	ON-GOING
CARE RESOURCE 3510 Biscayne Blvd Miami, FL 33137	59-2564198	501(c)(3)	0	17,154	FMV	Medical Supplies	EMERGENCY

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CARIDAD CENTER 8645 BOYNTON BEACH BOYNTON BEACH, FL 33472	65-0149423	501(c)(3)	0	350,341	FMV	Medical Supplies	ON-GOING
CARING PLACE CLINIC 901 W BROAD ST MANSFIELD, TX 76063	27-0537258	501(c)(3)	0	78,328	FMV	Medical Supplies	ON-GOING

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CARROLL COUNTY HEALTH DEPARTMENT 101 WEST MAIN ST DELPHI, IN 46923	35-6000130	501(c)(3)	0	268,055	FMV	Medical Supplies	ON-GOING
CATHERINE MCAULEY CLINIC 5530 HOHMAN AVENUE HAMMOND, IN 46320	35-1835133	501(c)(3)	0	384,326	FMV	Medical Supplies	ON-GOING

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CATHERINES HEALTH CENTER 1211 LAFAYETTE AVE GRAND RAPIDS, MI 49505	20-3572418	501(c)(3)	0	68,072	FMV	Medical Supplies	ON-GOING
CATHOLIC CHARITIES - USA 2050 Ballenger Ave Alexandria, VA 22314	53-0196620	501(c)(3)	0	14,363	FMV	Medical Supplies	EMERGENCY

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CATHOLIC CHARITIES OF THE RIO GRANDE VALLEY INC 700 Virgen de San Juan San Juan, TX 78589	68-0599307	501(c)(3)	0	66,661	FMV	Medical Supplies	EMERGENCY
CENTER FOR FAMILY HEALTH AND EDUCATION 8727 VAN NUYS PANORAMA CITY, CA 91402	27-0224623	501(c)(3)	0	263,622	FMV	Medical Supplies	ON-GOING



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CENTER FOR PHARMACY CARE 1000 FIFTH AVENUE PITTSBURGH, PA 15282	25-1035663	501(c)(3)	0	30,185	FMV	Medical Supplies	ON-GOING
CENTRE VOLUNTEERS IN MEDICINE 2520 GREEN TECH DR STATE COLLEGE, PA 16803	25-1897969	501(c)(3)	0	57,536	FMV	Medical Supplies	ON-GOING

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CENTRO SAN VICENTE 8061 ALAMEDA AVE EL PASO, TX 79915	74-2505561	501(c)(3)	0	20,623	FMV	Medical Supplies	ON-GOING
CENTROMED 3750 Commercial Ave San Antonio, TX 78221	74-1787031	501(c)(3)	0	8,611	FMV	Medical Supplies	EMERGENCY

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CHARITABLE PHARMACY OF CENTRAL OHIO 200 EAST LIVINGSTON AVE COLUMBUS, OH 43215	27-0147099	501(c)(3)	0	663,705	FMV	Medical Supplies	ON-GOING
CHARLOTTE COMMUNITY HEALTH CLINIC 8401 MEDICAL PLAZA DR CHARLOTTE, NC 28262	56-2274174	501(c)(3)	0	86,578	FMV	Medical Supplies	ON-GOING

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CHCGDALEX CENTRAL HEALTH CENTER 5 SOUTH ALEX ROAD MIAMISBURG, OH 45342	26-1253235	501(c)(3)	0	314,094	FMV	Medical Supplies	ON-GOING
CHCGDEAST DAYTON HEALTH CENTER 2132 E THIRD ST DAYTON, OH 45403	26-1253235	501(c)(3)	0	74,621	FMV	Medical Supplies	ON-GOING

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CHILDREN AND COMMUNITY HEALTH CENTER 120 CENTRAL EXPRESSWAY MCKINNEY, TX 75070	20-0637782	501(c)(3)	0	94,465	FMV	Medical Supplies	ON-GOING
CHIPPEWA VALLEY FREE CLINIC 816 PORTER AVE EAU CLAIRE, WI 54701	39-1840231	501(c)(3)	0	197,372	FMV	Medical Supplies	ON-GOING

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CHI-ST VINCENT INTERFAITH CLINIC 830 NORTH CREEK CONWAY, AR 72032	71-0830696	501(c)(3)	0	373,314	FMV	Medical Supplies	ON-GOING
CHRIST CLINIC 25722 KINGSLAND BLVD KATY, TX 77494	90-0789318	501(c)(3)	0	93,853	FMV	Medical Supplies	ON-GOING

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CHRISTIAN APPALACHIAN PROJECT 6550 US 321 South Hagerhill, KY 41222	61-0661137	501(c)(3)	0	1,394,471	FMV	Medical Supplies	ON-GOING
CHRISTIAN FREE CLINIC IN BOTETOURT PO BOX 890 DALEVILLE, VA 24083	20-4342697	501(c)(3)	0	5,624	FMV	Medical Supplies	ON-GOING

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CHRISTIAN HEALTH CENTER 1115 FAIRVIEW CAMDEN, AR 71701	71-0804142	501(c)(3)	0	304,143	FMV	Medical Supplies	ON-GOING
CHRISTIAN MEDICAL MINISTRIES 6842 INTL Center BLVD FORT MYERS, FL 33912	47-2641606	501(c)(3)	0	152,517	FMV	Medical Supplies	ON-GOING



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CHURCH HEALTH SERVICES 115 N CENTER STREET BEAVER DAM, WI 53916	39-1759669	501(c)(3)	0	11,716	FMV	Medical Supplies	ON-GOING
CHURCH HILL FREE CLINIC PO BOX 166 CHURCH HILL, TN 37642	62-1391365	501(c)(3)	0	211,469	FMV	Medical Supplies	ON-GOING

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CIRCLE HEALTH SERVICES 12201 EUCLID AVE CLEVELAND, OH 44106	23-7078501	501(c)(3)	0	184,209	FMV	Medical Supplies	ON-GOING
CITRUS HEALTH NETWORK INC 4175 W 20 AVENUE Hialeah, FL 33012	59-1865751	501(c)(3)	0	5,146	FMV	Medical Supplies	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY ON A HILL MINISTRIES HEALTH CLINIC 100 S PINE ST SUITE 140 ZEELAND, MI 49464	20-3901260	501(c)(3)	0	524,959	FMV	Medical Supplies	ON-GOING
CITY SQUARE 2835 AL LIPSCOMB WAY DALLAS, TX 75215	79-2332948	501(c)(3)	0	788,045	FMV	Medical Supplies	ON-GOING

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CL BRUMBACK PRIMARY CARE CLINICS 2601 10th Ave N Palm Springs, FL 33461	45-5591655	Other	0	14,306	FMV	Medical Supplies	EMERGENCY
CLAY BEHAVIORAL HEALTH CENTER 1726 KINGSLEY AVE ORANGE PARK, FL 32073	59-2219317	501(c)(3)	0	471,428	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CLEARWATER FREE CLINIC 707 HARRISON AVE CLEARWATER, FL 33755	59-1852871	501(c)(3)	0	233,773	FMV	Medical Supplies	ON-GOING
CLEMSON FREE CLINIC PO BOX 941 CLEMSON, SC 29633	73-1720431	501(c)(3)	0	122,726	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CLEVELAND COUNTY HEALTH DEPARTMENT 200 S POST RD SHELBY, NC 28152	56-6000288	Other	0	451,090	FMV	Medical Supplies	ON-GOING
CMAP EXPRESS 1101 4TH ST ALEXANDRIA, LA 71301	02-0751416	501(c)(3)	0	112,379	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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COACHELLA VALLEY VOLUNTEERS IN MEDICINE 82915 AVENUE 48 INDIO, CA 92201	26-3312826	501(c)(3)	0	45,507	FMV	Medical Supplies	ON-GOING
COMCARE OF SEDGWICK COUNTY 934 N WATER WICHITA, KS 67203	48-6000798	Other	0	405,533	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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COMMUNICARE HEALTH CENTERS 3066 East Commerce San Antonio, TX 78220	47-2185616	501(c)(3)	0	8,577	FMV	Medical Supplies	EMERGENCY
COMMUNITY CARE AT IRVING 1302 LANE ST IRVING, TX 75061	75-2536818	501(c)(3)	0	98,145	FMV	Medical Supplies	ON-GOING



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COMMUNITY CARE CENTER FOR FORSYTH CO INC 2135 NEW WALKERTOWN WINSTON SALEM, NC 27101	58-1403699	501(c)(3)	0	501,918	FMV	Medical Supplies	ON-GOING
COMMUNITY CARE CLINIC 608 E GARFIELD AVE GETTYSBURG, SD 57442	46-0396683	501(c)(3)	0	133,436	FMV	Medical Supplies	ON-GOING

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COMMUNITY CARE CLINIC OF DARE PO BOX 1329 NAGS HEAD, NC 27959	20-2230717	501(c)(3)	0	55,113	FMV	Medical Supplies	ON-GOING
COMMUNITY CARE CLINIC OF HIGHLANDS-CASHIERS INC 52 AUNT DORA DRIVE HIGHLANDS, NC 28741	65-1251915	501(c)(3)	0	262,874	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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COMMUNITY FREE CLINIC INC 249 MILL STREET HAGERSTOWN, MD 21740	52-1772594	501(c)(3)	0	618,944	FMV	Medical Supplies	ON-GOING
COMMUNITY HEALTH AND SOCIAL SERVICES CENTER 5635 W FORT ST DETROIT, MI 48209	38-3094394	501(c)(3)	0	46,649	FMV	Medical Supplies	ON-GOING

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COMMUNITY HEALTH CARE CLINIC 900 N FRANKLIN NORMAL, IL 61761	37-1316328	501(c)(3)	0	123,685	FMV	Medical Supplies	ON-GOING
COMMUNITY HEALTH CENTER OF SOUTHEAST KANSAS 3011 MICHIGAN ST PITTSBURG KS, KS 66762	75-3003364	501(c)(3)	0	199,447	FMV	Medical Supplies	ON-GOING

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COMMUNITY HEALTH CENTERS INC 12716 NE 36TH STREET SPENCER, OK 73084	73-0930123	501(c)(3)	0	418,937	FMV	Medical Supplies	ON-GOING
COMMUNITY HEALTH CENTERS INC 110 S Woodland St Winter Garden, FL 34787	59-1480970	501(c)(3)	0	13,483	FMV	Medical Supplies	EMERGENCY

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COMMUNITY HEALTH CLINIC OF HARDIN & LARUE 114 E MEMORIAL DR ELIZABETHTOWN, KY 42701	30-0042070	501(c)(3)	0	477,770	FMV	Medical Supplies	ON-GOING
COMMUNITY HEALTH IMPROVEMENT CENTER 320 E CENTRAL AVE DECATUR, IL 62521	37-0961830	501(c)(3)	0	252,304	FMV	Medical Supplies	ON-GOING

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COMMUNITY HEALTH OF SOUTH FLORIDA INC 10300 SW 216TH STREET MIAMI, FL 33190	53-1372690	501(c)(3)	0	10,635	FMV	Medical Supplies	EMERGENCY
COMMUNITY HEALTH SERVICE INC 701 W 6TH STREET GRAFTON, ND 58237	41-1000060	501(c)(3)	0	361,184	FMV	Medical Supplies	ON-GOING

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COMMUNITY HEALTH SERVICES OF ADDISON COUNTY 100 PORTER DRIVE MIDDLEBURY, VT 05753	03-0359531	501(c)(3)	0	10,910	FMV	Medical Supplies	ON-GOING
COMMUNITY HEALTH SERVICES OF UNION COUNTY 1338-C EAST SUNSET DRIVE MONROE, NC 28112	46-0495947	501(c)(3)	0	171,808	FMV	Medical Supplies	ON-GOING



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COMMUNITY HEALTHCARE OF LUBBOCK 1610 5TH STREET LUBBOCK, TX 79401	75-2424925	501(c)(3)	0	5,729	FMV	Medical Supplies	EMERGENCY
COMMUNITY HEALTH-IN-PtnRSHIP Svcs (CHIPS) CHIPS HEALTHWELLNESS SAINT LOUIS, MO 63106	43-1589851	501(c)(3)	0	96,106	FMV	Medical Supplies	ON-GOING

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COMMUNITY HEALTHWORX 1543 MCGINNIS STREET ALEXANDRIA, LA 71301	72-1444312	501(c)(3)	0	81,778	FMV	Medical Supplies	ON-GOING
COMMUNITY HELPING HANDS HEALTH CLINIC 34-C COURTHOUSE SQUARE CLEVELAND, GA 30528	64-0950194	501(c)(3)	0	594,435	FMV	Medical Supplies	ON-GOING

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COMMUNITY HELPING PLACE FREE MEDICAL CLINC 56 CAMP GLISSON ROAD DAHLONEGA, GA 30533	37-1554432	501(c)(3)	0	62,929	FMV	Medical Supplies	ON-GOING
COMMUNITY MEDICAL CLINIC OF AIKEN COUNTY 244 GREENVILLE ST NW AIKEN, SC 29801	57-1063263	501(c)(3)	0	8,082	FMV	Medical Supplies	ON-GOING

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COMMUNITY MEDICAL CLINIC OF KERSHAW COUNTY 110 C EAST DEKALB STREET CAMDEN, SC 29020	57-1074191	Other	0	45,517	FMV	Medical Supplies	ON-GOING
COMMUNITY MEDICINE FOUNDATION 1131 SALUDA STREET ROCK HILL, SC 29730	57-0891008	501(c)(3)	0	946,052	FMV	Medical Supplies	ON-GOING

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COMMUNITY RESOURCE COORDINATORS 4354 Sherwood Forest Baton Rouge, LA 70816	72-0918214	501(c)(3)	0	7,588	FMV	Medical Supplies	EMERGENCY
COMMUNITY VOLUNTEERS IN MEDICINE 300B LAWRENCE DRIVE WEST CHESTER, PA 19380	23-2944553	501(c)(3)	0	1,010,329	FMV	Medical Supplies	ON-GOING

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COMMUNITYHEALTH 2611 W CHICAGO AVE CHICAGO, IL 60622	36-3931793	501(c)(3)	0	112,513	FMV	Medical Supplies	ON-GOING
COMPASSION CONNECT INC 18040 SW ALEXANDER ST BEAVERTON, OR 97006	26-2304524	501(c)(3)	0	797,559	FMV	Medical Supplies	ON-GOING

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COMPASSIONATE CARE OF SHELBY COUNTY INC 124 N OHIO AVE SIDNEY, OH 45365	20-8479583	501(c)(3)	0	887,711	FMV	Medical Supplies	ON-GOING
COOPERATIVE CHRISTIAN MINISTRIES AND CLINIC 133 ARBOR STREET HOT SPRINGS, AR 71901	62-1671396	501(c)(3)	0	9,572	FMV	Medical Supplies	ON-GOING

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COORDINATED HEALTH SERVICES INC 2110 BROAD STREET AUGUSTA, GA 30904	58-2060572	501(c)(3)	0	170,390	FMV	Medical Supplies	ON-GOING
COOS COUNTY FAMILY HEALTH SERVICES CCFHS BERLIN, NH 03570	02-0350051	Other	0	191,340	FMV	Medical Supplies	ON-GOING



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CORNERSTONE FAMILY HEALTHCARE 2570 ROUTE 9W CORNWALL, NY 12518	06-1036715	501(c)(3)	0	190,180	FMV	Medical Supplies	ON-GOING
CORPUS CHRISTI METRO MINISTRIES 1919 LEOPARD ST CORPUS CHRISTI, TX 78408	74-2247261	501(c)(3)	0	28,406	FMV	Medical Supplies	ON-GOING

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COVENANT COMMUNITY CARE 559 WEST GRAND BLVD DETROIT, MI 48216	38-3533998	501(c)(3)	0	287,621	FMV	Medical Supplies	ON-GOING
COVERED BRIDGE HEALTHCARE OF ST JOSEPH COUNTY IN 658 E MAIN ST CENTREVILLE, MI 49032	47-4591341	Other	0	7,773	FMV	Medical Supplies	ON-GOING

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CPC BEHAVIORAL HEALTHCARE 10 INDUSTRIAL WAY EAST EATONTOWN, NJ 07724	21-0719369	501(c)(3)	0	263,777	FMV	Medical Supplies	ON-GOING
CREEKS BEHAVIORAL HEALTH SERVICES 323 W 6TH OKMULGEE, OK 74447	73-1108774	501(c)(3)	0	102,048	FMV	Medical Supplies	ON-GOING

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CRISIS CONTROL MINISTRY 200 E 10TH St WINSTONSALEM, NC 27101	23-7348168	501(c)(3)	0	47,107	FMV	Medical Supplies	ON-GOING
CROSS AND CROWN CLINIC 1008 MCKINLEY ST OKLAHOMA CITY, OK 73106	73-1608071	501(c)(3)	0	236,602	FMV	Medical Supplies	ON-GOING

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CROSSINGS COMMUNITY CLINIC 10255 N PENN AVE OKLAHOMA CITY, OK 73120	86-1115863	501(c)(3)	0	313,589	FMV	Medical Supplies	ON-GOING
CROSSOVER MINISTRY 108 COWARDIN AVE RICHMOND, VA 23224	54-1371067	501(c)(3)	0	251,692	FMV	Medical Supplies	ON-GOING

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DADE COUNTY HEALTH DEPARTMENT 413 W WATER STREET GREENFIELD, MO 65661	43-1266535	Other	0	7,415	FMV	Medical Supplies	ON-GOING
DAMIAN FAMILY CARE CENTERS INC 138-02 QUEENS BLVD BRIARWOOD, NY 11435	22-3433831	501(c)(3)	0	39,617	FMV	Medical Supplies	ON-GOING

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DAVID LAWRENCE CENTER 6075 BATHEY Ln Bldg B-3 NAPLES, FL 34116	59-2206025	501(c)(3)	0	90,484	FMV	Medical Supplies	ON-GOING
DAVIDSON MEDICAL MINISTRIES 420 N SALISBURY ST LEXINGTON, NC 27292	56-1746266	501(c)(3)	0	519,869	FMV	Medical Supplies	ON-GOING

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DELTA HEALTH ALLIANCELELAND MEDICAL CLINIC PO BOX 277 STONEVILLE, MS 38776	64-0892954	501(c)(3)	0	232,041	FMV	Medical Supplies	ON-GOING
DENTON COUNTY MHMR 2519 SCRIPTURE ST DENTON, TX 76201	75-1368151	501(c)(3)	0	85,698	FMV	Medical Supplies	ON-GOING



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DEO CLINIC P O BOX 814 DALTON, GA 30722	46-0789000	501(c)(3)	0	146,995	FMV	Medical Supplies	ON-GOING
DILLON COUNTY FREE MEDICAL CLINIC 310 E Washington St Dillon, SC 29536	36-4669012	501(c)(3)	0	297,953	FMV	Medical Supplies	EMERGENCY

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DIVINE GRACE MEDICAL MISSIONARIES 10600 FONDREN RD HOUSTON, TX 77096	27-4000666	501(c)(3)	0	2,822,218	FMV	Medical Supplies	ON-GOING
DOWNTOWN CLINIC 611 SOUTH SECOND STREET LARAMIE, WY 82070	83-0326354	501(c)(3)	0	20,678	FMV	Medical Supplies	ON-GOING

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DR GARY BURNSTEIN COMMUNITY HEALTH CLINIC 45580 WOODWARD AVE PONTIAC, MI 48341	32-0015321	501(c)(3)	0	75,202	FMV	Medical Supplies	ON-GOING
DRJOEL & CAROL BOWER SCHOOL HEALTH Ctr 400 PALO VERDE DR HENDERSON, NV 89015	88-0464591	501(c)(3)	0	19,694	FMV	Medical Supplies	ON-GOING

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DREAM CENTERS WOMEN'S CLINIC 4360 MONTEBELLO COLORADO SPRINGS, CO 80918	27-4876080	501(c)(3)	0	482,824	FMV	Medical Supplies	ON-GOING
DUFFY HEALTH CENTER INC 94 MAIN ST ORLEANS, MA 02653	04-3373741	501(c)(3)	0	315,950	FMV	Medical Supplies	ON-GOING

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DUPLIN MEDICAL ASSOCIATION 600 S SYCAMORE ST ROSE HILL, NC 28398	56-1414420	501(c)(3)	0	958,051	FMV	Medical Supplies	ON-GOING
EAST BAY COMMUNITY ACTION PROGRAM 6 JOHN H CHAFEE BLVD NEWPORT, RI 02840	05-0310024	501(c)(3)	0	53,045	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDWARD R LEAHY JR Ctr Clin FOR UNINSURED 800 LINDEN STREET SCRANTON, PA 18510	24-0795495	501(c)(3)	0	75,621	FMV	Medical Supplies	ON-GOING
ELLENTON HEALTH CLINIC PUBLIC HEALTH DIS 185 NORTH BAKER STREET ELLENTON, GA 31747	23-7379607	501(c)(3)	0	108,588	FMV	Medical Supplies	ON-GOING

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ESCAMBIA COMMUNITY CLINICS INC 14 W Jordan Street Pensacola, FL 32501	59-3105246	501(c)(3)	0	5,318	FMV	Medical Supplies	EMERGENCY
ETOWAH BAPTIST CHARITY PHARMACY POBOX 571 NOBLE, OK 73068	73-1637087	501(c)(3)	0	20,464	FMV	Medical Supplies	ON-GOING

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ETOWAH FREE COMMUNITY CLINIC 423 S 3RD STREET GADSDEN, AL 35901	82-0562064	501(c)(3)	0	196,660	FMV	Medical Supplies	ON-GOING
EUNICE COMMUNITY HEALTH CENTER 450 MOOSA BLVD STE E EUNICE, LA 70535	27-0213992	501(c)(3)	0	919,882	FMV	Medical Supplies	ON-GOING



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EUNICE COMMUNITY HEALTH CENTER 450 MOOSA BLVD STE E EUNICE, LA 70535	27-0213992	501(c)(3)	0	126,656	FMV	Medical Supplies	EMERGENCY
EXCELTH INC FQHC 4422 GENERAL MEYER NEW ORLEANS, LA 70131	72-1193464	Other	0	595,781	FMV	Medical Supplies	ON-GOING

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FAIR HAVEN COMMUNITY HEALTH CLINIC INC 374 GRAND AVENUE NEW HAVEN, CT 06513	06-0883545	501(c)(3)	0	5,400	FMV	Medical Supplies	ON-GOING
FAITH COMM PHARMACY (STVINCENT DE PAUL) 7033 BURLINGTON PIKE FLORENCE, KY 41042	61-1378914	501(c)(3)	0	2,049,519	FMV	Medical Supplies	ON-GOING

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FAMILY CARE HEALTH CENTERS 401 HOLLY HILLS AVE SAINT LOUIS, MO 63111	23-7076112	501(c)(3)	0	53,784	FMV	Medical Supplies	ON-GOING
FAMILY CENTERS HEALTH CARE 111 WILBUR PECK COURT GREENWICH, CT 06830	06-0646656	501(c)(3)	0	16,272	FMV	Medical Supplies	ON-GOING

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FAMILY HEALTH SERVICES 794 EASTLAND TWIN FALLS, ID 83301	82-0371093	501(c)(3)	0	39,797	FMV	Medical Supplies	ON-GOING
FEED MY SHEEP 116 W AVENUE G TEMPLE, TX 76504	74-2724033	501(c)(3)	0	471,280	FMV	Medical Supplies	ON-GOING

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FEEDING AMERICA 35 East Wacker Drive Chicago, IL 60601	36-3673599	501(c)(3)	0	89,300	FMV	Medical Supplies	EMERGENCY
FERN CARE FREE CLINIC INC 751 E NINE MILE RD FERNDALE, MI 48220	32-0246843	501(c)(3)	0	6,110	FMV	Medical Supplies	ON-GOING

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FIRST BAPTIST CHURCH MEDICALDENTAL CLINIC 1607 CHERRY STREET VICKSBURG, MS 39180	64-0356253	501(c)(3)	0	354,363	FMV	Medical Supplies	ON-GOING
FIRST REFUGE MINISTRIES MEDICAL CLINIC 1701 BROADWAY STREET DENTON, TX 76201	45-5606427	501(c)(3)	0	219,090	FMV	Medical Supplies	ON-GOING

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FISH RIVER RURAL HEALTH 10 CARTER STREET EAGLE LAKE, ME 04739	01-0452749	501(c)(3)	0	210,467	FMV	Medical Supplies	ON-GOING
FIU COLLEGE OF MEDICINE MOBILE HEALTH Cntr 11200 SW 8TH STREET MIAMI, FL 33199	23-7047106	501(c)(3)	0	21,563	FMV	Medical Supplies	ON-GOING

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FLAGLER COUNTY FREE CLINIC 703 EAST MOODY BLVD BUNNELL, FL 32110	20-5036975	501(c)(3)	0	1,325,551	FMV	Medical Supplies	ON-GOING
FLORIDA COMMUNITY HEALTH CENTERS INC 4450 Tiffany Dr West Palm Beach, FL 33407	59-1671640	501(c)(3)	0	11,733	FMV	Medical Supplies	EMERGENCY



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FLORIDA HOSPITAL WATERMAN COMMUNITY HEALTH CLINIC 2300 KURT STREET EUSTIS, FL 32726	59-3140669	501(c)(3)	0	40,452	FMV	Medical Supplies	ON-GOING
FOREST BAPTIST CHURCH MEDICAL MISSION CLIN PO BOX 338 FOREST, MS 39074	64-0368681	Other	0	205,709	FMV	Medical Supplies	ON-GOING

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FOUNDATION FOR HIV AND KIDNEY DIALYSIS INC 14 ZIRKEL AVENUE PISCATAWAY, NJ 08854	43-2024266	501(c)(3)	0	36,245	FMV	Medical Supplies	ON-GOING
FOUR HOLES INDIAN ORGANIZATION DBA EIFC 1125 RIDGE RD RIDGEVILLE, SC 29472	82-1691197	501(c)(3)	0	1,213,667	FMV	Medical Supplies	ON-GOING

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FRAMINGHAM BOARD OF HEALTH 150 CONCORD STREET FRAMINGHAM, MA 01702	04-6001151	501(c)(3)	0	86,923	FMV	Medical Supplies	ON-GOING
FREE CLINIC OF CULPEPER 610 LAUREL STREET CULPEPER, VA 22701	52-1366700	501(c)(3)	0	65,496	FMV	Medical Supplies	ON-GOING

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FREE CLINIC OF PULASKI COUNTY INC 25 FOURTH ST NW PULASKI, VA 24301	52-1318621	501(c)(3)	0	22,611	FMV	Medical Supplies	ON-GOING
FREE CLINIC OF SOUTHWEST WASHINGTON 4100 PLOMONDON ST VANCOUVER, WA 98661	91-1707542	501(c)(3)	0	8,307	FMV	Medical Supplies	ON-GOING

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FREE CLINIC SUSSEX COUNTY 67 HIGH STREET NEWTON, NJ 07860	45-4224214	501(c)(3)	0	226,150	FMV	Medical Supplies	ON-GOING
FREE MEDICAL CLINIC 47 W LONG AVENUE DUBOIS, PA 15801	25-1804763	501(c)(3)	0	1,127,715	FMV	Medical Supplies	ON-GOING

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FREE MEDICAL CLINIC OF DARLINGTON COUNTY 203 GROVE STREET DARLINGTON, SC 29532	58-2445265	501(c)(3)	0	22,912	FMV	Medical Supplies	ON-GOING
FREE MEDICAL CLINIC OF NSV INC 301 N CAMERON ST WINCHESTER, VA 22601	54-1373296	501(c)(3)	0	55,511	FMV	Medical Supplies	ON-GOING

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FREE MEDICAL CLINIC OF OAK RIDGE 116 E DIVISION RD OAK RIDGE, TN 37830	90-0715369	501(c)(3)	0	139,002	FMV	Medical Supplies	ON-GOING
FUNDACION MANOS JUNTAS 1330 CLASSEN BLVD OKLAHOMA CITY, OK 73106	73-1523135	501(c)(3)	0	179,499	FMV	Medical Supplies	ON-GOING

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GAIN INC(GREATER ASSt TO THOSE IN NEED) 712 W 3RD STREET LITTLE ROCK, AR 72201	71-0763418	501(c)(3)	0	440,049	FMV	Medical Supplies	ON-GOING
GATEWAY FOUNDATION - CARBONDALE 55 E JACKSON CHICAGO, IL 60604	36-2670036	501(c)(3)	0	7,337	FMV	Medical Supplies	ON-GOING



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GATEWAY FOUNDATION - CASEYVILLE 600 W LINCOLN AVENUE CASEYVILLE, IL 62232	36-2670036	501(c)(3)	0	386,771	FMV	Medical Supplies	ON-GOING
GATEWAY FOUNDATION - CHICAGO WEST 55 E JACKSON CHICAGO, IL 60604	36-2670036	501(c)(3)	0	251,921	FMV	Medical Supplies	ON-GOING

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GATEWAY FOUNDATION - SPRINGFIELD AND PEKIN 55 E JACKSON CHICAGO, IL 60604	37-1394445	501(c)(3)	0	8,136	FMV	Medical Supplies	ON-GOING
GATEWAY FOUNDATION LAKE VILLA 55 E JACKSON CHICAGO, IL 60604	36-2670036	501(c)(3)	0	163,139	FMV	Medical Supplies	ON-GOING

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GENESEO PARISH OUTREACH CENTER INC 4520 GENESEE ST RT63 GENESEO, NY 14454	14-1916822	501(c)(3)	0	15,649	FMV	Medical Supplies	ON-GOING
GEORGIA FARMWORKER HEALTH PROGRAM 920 SOUTH WEST ST BAINBRIDGE, GA 39819	58-6000359	501(c)(3)	0	7,919	FMV	Medical Supplies	ON-GOING

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GEORGIA REHABILITATION OUTREACH INC 1777 WASHINGTON ROAD EAST POINT, GA 30344	58-2379911	501(c)(3)	0	42,214	FMV	Medical Supplies	ON-GOING
GET HEALTHY MEGA CLINIC 801 E NOLANA AVE MCALLEN, TX 78504	27-2389624	501(c)(3)	0	110,540	FMV	Medical Supplies	ON-GOING

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GET UP PROJECT 8101 CAMERON RD AUSTIN, TX 78754	45-4931906	501(c)(3)	0	52,632	FMV	Medical Supplies	ON-GOING
GLACIER COMMUNITY HEALTH CENTER 519 E MAIN STREET CUT BANK, MT 59427	77-0597067	501(c)(3)	0	91,420	FMV	Medical Supplies	ON-GOING

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GLENDALE COMMUNITY FREE HEALTH CLINIC 134 N KENWOOD ST GLENDALE, CA 91206	87-0732681	501(c)(3)	0	10,910	FMV	Medical Supplies	ON-GOING
GOOD HEALTH CLINIC INC 91555 OVERSEAS HWY TAVERNIER, FL 33070	04-3745805	501(c)(3)	0	35,204	FMV	Medical Supplies	ON-GOING

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GOOD NEIGHBOR FREE MEDICAL CLIN OF BEAUFORT 30 PRfsl VILLAGE CIR BEAUFORT, SC 29907	26-0335357	501(c)(3)	0	5,142	FMV	Medical Supplies	ON-GOING
GOOD NEWS CLINICS 810 PINE STREET GAINESVILLE, GA 30501	58-2058853	501(c)(3)	0	7,261	FMV	Medical Supplies	ON-GOING

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GOOD NEWS MINISTRIES GOOD NEWS Hlth CLIN 11 EASTERN AVE INDIANAPOLIS, IN 46201	35-0999233	501(c)(3)	0	82,629	FMV	Medical Supplies	ON-GOING
GOOD NEWS MINISTRIES GOOD SAMARITAN HEALTH CLINIC 11 EASTERN AVE INDIANAPOLIS, IN 46201	35-0999233	501(c)(3)	0	72,310	FMV	Medical Supplies	ON-GOING



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GOOD SAMARITAN CLINIC 4704 AUGUSTA RD GARDEN CITY, GA 31408	58-2288758	Other	0	461,426	FMV	Medical Supplies	ON-GOING
GOOD SAMARITAN CLINIC OF WEST VOLUSIA INC 136 E PLYMOUTH AVENUE DELAND, FL 32724	30-0408193	501(c)(3)	0	39,277	FMV	Medical Supplies	ON-GOING

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GOOD SAMARITAN HEALTH AND WELLNESS CENTER 209 W STATE LINE Rd S FULTON, TN 38257	45-3745315	501(c)(3)	0	837,268	FMV	Medical Supplies	ON-GOING
GOOD SAMARITAN HEALTH CENTER 1015 DONALD LEE HOLLOWELL ATLANTA, GA 30318	58-2373395	501(c)(3)	0	19,873	FMV	Medical Supplies	ON-GOING

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GOOD SAMARITAN HEALTH CENTER OF GWINNETT 5949 BUFORD HWY NORCROSS, GA 30071	27-0080400	501(c)(3)	0	137,105	FMV	Medical Supplies	ON-GOING
GOOD SAMARITAN HEALTH CLINIC 401 ARNOLD STREET NE CULLMAN, AL 35055	20-0149215	501(c)(3)	0	355,992	FMV	Medical Supplies	ON-GOING

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GOOD SAMARITAN HEALTH CLINIC OF PASCO INC 5334 ASPEN ST NEW PORT RICHEY, FL 34652	59-3072334	501(c)(3)	0	681,167	FMV	Medical Supplies	ON-GOING
GOOD SAMARITAN HOUSE FREE COMMUNITY HEALTH CENTER 213 N MAIN ST DEARING, GA 30808	32-0126528	Other	0	400,604	FMV	Medical Supplies	ON-GOING

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GOOD SAMARITAN MEDICAL CLINIC 139 CHURCH ST CHESTER, SC 29706	82-0549226	501(c)(3)	0	662,257	FMV	Medical Supplies	ON-GOING
GOOD SAMARITAN PHARMACY & HEALTH SERVICES 2502 TAMIAMI TRAIL NORTH NOKOMIS, FL 34275	26-2295558	501(c)(3)	0	306,700	FMV	Medical Supplies	ON-GOING

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GOOD SHEPHERD CLINIC PO BOX 6 MORROW, GA 30260	58-2578581	501(c)(3)	0	804,364	FMV	Medical Supplies	ON-GOING
GOOD SHEPHERD CLINIC 200 DAWSON COMMONS DAWSONVILLE, GA 30534	27-0245804	501(c)(3)	0	66,179	FMV	Medical Supplies	ON-GOING

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GOOD SHEPHERD Hlthcare CLIN OF MUSKOGEEOK 2130 West Okmulgee MUSKOGEE, OK 74401	73-1581613	501(c)(3)	0	2,734,726	FMV	Medical Supplies	ON-GOING
GOOD SHEPHERD MINISTRIES OF OKLAHOMA INC 222 NW 12TH STREET OKLAHOMA CITY, OK 73103	20-0526892	501(c)(3)	0	528,117	FMV	Medical Supplies	ON-GOING

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GOOD SHEPHERD PHARMACY 2166 CUBA MILLINGTON MILLINGTON, TN 38053	46-3313048	501(c)(3)	0	1,965,899	FMV	Medical Supplies	ON-GOING
GOODWIN COMMUNITY HEALTH Cntr DBA CMAP 2605 PARKWOOD DR BRUNSWICK, GA 31520	01-0576945	501(c)(3)	0	143,719	FMV	Medical Supplies	ON-GOING



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GRACE CLINIC 800 WEST CANAL DRIVE KENNEWICK, WA 99336	77-0592408	Other	0	64,987	FMV	Medical Supplies	ON-GOING
GRACE CLINICS OF OHIO INC 40 SOUTH FRANKLIN ST DELAWARE, OH 43015	27-0415624	501(c)(3)	0	44,141	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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GRACE COMMUNITY HEALTH CENTER 1019 CUMBERLAND FALLS HWY CORBIN, KY 40734	26-1779437	501(c)(3)	0	22,955	FMV	Medical Supplies	ON-GOING
GRACE MEDICAL HOME 51 PENNSYLVANIA ST ORLANDO, FL 32806	26-1817966	501(c)(3)	0	1,564,642	FMV	Medical Supplies	ON-GOING

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GRAND AVE FREE MEDICAL CLINIC FREE CLINICS OF IOWA 605 NORTH GRAND AVENUE SPENCER, IA 51301	42-1428706	501(c)(3)	0	29,808	FMV	Medical Supplies	ON-GOING
GRAPEVINE RELIEF & COMMUNITY EXCHANGE (GRACE) 837 E WALNUT STREET GRAPEVINE, TX 76051	75-2195702	501(c)(3)	0	37,734	FMV	Medical Supplies	ON-GOING

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GREATER GREENWOOD UNITED MINISTRY FREE Mdcl 1404 EDGEFIELD STREET GREENWOOD, SC 29646	57-1012393	501(c)(3)	0	18,628	FMV	Medical Supplies	ON-GOING
GREATER HICKORY COOP CHRISTIAN MINISTRY 31 1ST AVE SE HICKORY, NC 28602	56-0934855	501(c)(3)	0	789,262	FMV	Medical Supplies	ON-GOING

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GREATER KILLEEN FREE CLINIC 718 N 2ND STREET STE A KILLEEN, TX 76541	74-2724725	501(c)(3)	0	1,592,056	FMV	Medical Supplies	ON-GOING
GREATER KILLEEN FREE CLINIC 718 N 2ND STREET STE A KILLEEN, TX 76541	74-2724725	501(c)(3)	0	8,577	FMV	Medical Supplies	EMERGENCY

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GREATER TEXOMA HEALTH CLINIC 900 N ARMSTRONG AVE DENISON, TX 75020	81-0584983	501(c)(3)	0	296,762	FMV	Medical Supplies	ON-GOING
GREENVILLE FREE MEDICAL CLINIC PO BOX 8993 GREENVILLE, SC 29604	57-0855205	501(c)(3)	0	414,011	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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GUADALUPE CLINIC 940 S SAINT FRANCIS WICHITA, KS 67211	20-1285208	Other	0	341,635	FMV	Medical Supplies	ON-GOING
GUIDANCECARE CENTER INC 3000 41ST STREET OCEAN MARATHON, FL 33050	59-1458324	501(c)(3)	0	488,135	FMV	Medical Supplies	ON-GOING

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GULF BEND CENTER 6502 NURSERY DR VICTORIA, TX 77904	74-1659064	501(c)(3)	0	209,089	FMV	Medical Supplies	ON-GOING
GULF COAST HEALTH CENTER INC 2548 MEMORIAL BLVD PORT ARTHUR, TX 77640	76-0289927	501(c)(3)	0	1,702,440	FMV	Medical Supplies	ON-GOING



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GULF COAST HEALTH CENTER INC 2548 MEMORIAL BLVD PORT ARTHUR, TX 77640	76-0289927	501(c)(3)	0	5,626	FMV	Medical Supplies	EMERGENCY
GULU PROJECT INC 5400 JOHNSON DRIVE MISSION, KS 66205	82-1003879	501(c)(3)	0	5,767	FMV	Medical Supplies	ON-GOING

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HALEY CENTER 122 WEST CENTRAL AVE WINTER HAVEN, FL 33880	59-0766974	501(c)(3)	0	181,636	FMV	Medical Supplies	ON-GOING
HANDS CLINIC OF ST LUCIE COUNTY 3855 S US HWY 1 FORT PIERCE, FL 34982	26-3945016	501(c)(3)	0	27,185	FMV	Medical Supplies	ON-GOING

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HANDS OF HOPE CLINIC INC 1010 HOSPITAL BLDG B STOCKBRIDGE, GA 30281	42-1591970	501(c)(3)	0	105,648	FMV	Medical Supplies	ON-GOING
HARBOR COMMUNITY CLINIC 593 W 6TH ST SAN PEDRO, CA 90731	23-7103245	501(c)(3)	0	12,486	FMV	Medical Supplies	ON-GOING

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HARMONY HEALTH CLINIC 201 E ROOSEVELT LITTLE ROCK, AR 72206	20-5691313	501(c)(3)	0	63,290	FMV	Medical Supplies	ON-GOING
HARRISONBURG ROCKINGHAM FREE CLINIC 25 WEST WATER STREET HARRISONBURG, VA 22801	54-1568909	501(c)(3)	0	12,812	FMV	Medical Supplies	ON-GOING

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HARTVILLE MIGRANT MINISTRIES PO BOX 682 HARTVILLE, OH 44632	34-0899100	501(c)(3)	0	81,187	FMV	Medical Supplies	ON-GOING
HAVEN FREE CLINIC 800 HOWARD AVE 1ST FL NEW HAVEN, CT 06519	06-0646973	501(c)(3)	0	376,951	FMV	Medical Supplies	ON-GOING

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HEAL THE CITY CLINIC PHARMACY 604 S TENNESSEE AMARILLO, TX 79106	46-5694050	501(c)(3)	0	51,411	FMV	Medical Supplies	ON-GOING
HEAL INC 2600 MLK JR dr ATLANTA, GA 30331	26-3990559	501(c)(3)	0	180,494	FMV	Medical Supplies	ON-GOING

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HEALING BRIDGE CLINIC 215 WILLOW BEND PEACHTREE CITY, GA 30269	26-3555799	501(c)(3)	0	78,361	FMV	Medical Supplies	ON-GOING
HEALING HANDS MINISTRIES INC 8515 GREENVILLE AVE DALLAS, TX 75243	65-1259379	501(c)(3)	0	22,865	FMV	Medical Supplies	ON-GOING

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HEALTH ACCESS INC 489 WASHINGTON AVENUE CLARKSBURG, WV 26301	55-0715066	501(c)(3)	0	97,099	FMV	Medical Supplies	ON-GOING
HEALTH AND HOPE CLINIC INC 1718 E OLIVE RD PENSACOLA, FL 32514	26-4336638	501(c)(3)	0	122,189	FMV	Medical Supplies	ON-GOING



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HEALTH AND HOPE MEDICAL OUTREACH 1911 COOKS HILL ROAD CENTRALIA, WA 98531	27-4432389	501(c)(3)	0	22,657	FMV	Medical Supplies	ON-GOING
HEALTH BRIGADE 1010 N THOMPSON ST RICHMOND, VA 23230	54-0927792	501(c)(3)	0	33,896	FMV	Medical Supplies	ON-GOING

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HEALTH PARTNERS FREE CLINIC 1300 NORTH COUNTY ROAD 25A TROY, OH 45373	31-1596731	501(c)(3)	0	61,993	FMV	Medical Supplies	ON-GOING
HEALTH PARTNERS OF WESTERN OHIO 329 N WEST ST LIMA, OH 45801	56-2330309	501(c)(3)	0	42,890	FMV	Medical Supplies	ON-GOING

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HEALTH UNIT ON DAVISON AVENUE CLNIC 13240 WOODROW WILSON ST DETROIT, MI 48238	37-1490937	501(c)(3)	0	135,521	FMV	Medical Supplies	ON-GOING
HEALTHCARE FOR THE HOMELESS - HOUSTON 1934 CAROLINE STREET HOUSTON, TX 77002	76-0647934	501(c)(3)	0	43,806	FMV	Medical Supplies	ON-GOING

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HEALTHNET OF ROCK COUNTY INC 23 W MILWAUKEE STREET JANESVILLE, WI 53548	39-1778804	501(c)(3)	0	184,197	FMV	Medical Supplies	ON-GOING
HEALTHQUEST OF UNION COUNTY 415 E FRANKLIN STREET MONROE, NC 28112	56-2117596	501(c)(3)	0	218,571	FMV	Medical Supplies	ON-GOING

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HEALTHREACH COMMUNITY CLINIC 400 E STATESVILLE AVE MOORESVILLE, NC 28115	20-1020941	501(c)(3)	0	632,700	FMV	Medical Supplies	ON-GOING
HEART MINISTRY CENTER 2222 BINNEY STREET OMAHA, NE 68110	81-0614816	501(c)(3)	0	32,549	FMV	Medical Supplies	ON-GOING

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HEART TO HEART INTERNATIONAL 13250 West 98th Street Lenexa, KS 66215	48-1108359	501(c)(3)	0	10,855	FMV	Medical Supplies	EMERGENCY
HEARTBRIGHT FOUNDATION INC 2923 S TRYON CHARLOTTE, NC 28203	45-0496759	501(c)(3)	0	232,156	FMV	Medical Supplies	ON-GOING

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HEARTS AND HANDS CLINIC 127 N COLLEGE ST STATESBORO, GA 30458	26-4597700	501(c)(3)	0	185,581	FMV	Medical Supplies	ON-GOING
HELPING HAND CLINIC 507 NORTH STEELE ST SANFORD, NC 27330	56-1752295	501(c)(3)	0	114,021	FMV	Medical Supplies	ON-GOING

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HELPING HANDS CLINIC INC 810 HARPER AVE LENOIR, NC 28645	56-2076541	501(c)(3)	0	215,342	FMV	Medical Supplies	ON-GOING
HELPING HANDS MINISTRY OF RICHLAND HILLS 7294 GLENVIEW DR RICHLAND HILLS, TX 76180	47-5624322	501(c)(3)	0	406,384	FMV	Medical Supplies	ON-GOING



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HEMOPHILIA TREATMENT CENTER OF NEVADA 3121 MARYLAND Pkwy LAS VEGAS, NV 89109	26-0286469	501(c)(3)	0	88,110	FMV	Medical Supplies	ON-GOING
HENRY J AUSTIN HEALTH CENTER INC 321 NORTH WARREN STREET TRENTON, NJ 08618	22-2682708	501(c)(3)	0	74,723	FMV	Medical Supplies	ON-GOING

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HICKORY COUNTY HEALTH DEPARTMENT 201 CEDAR STREET HERMITAGE, MO 65668	43-1274096	Other	0	101,720	FMV	Medical Supplies	ON-GOING
HILL COUNTRY COMMUNITY MHMR CENTER 819 WATER STREET KERRVILLE, TX 78028	74-2822017	501(c)(3)	0	12,635	FMV	Medical Supplies	ON-GOING

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HIPPOCRATES MEDICAL CLINIC INC 308 N PINE ST MOMENCE, IL 60954	81-1065602	501(c)(3)	0	111,006	FMV	Medical Supplies	ON-GOING
HIS HANDS FREE MEDICAL CLINIC 400 12TH ST SE CEDAR RAPIDS, IA 52403	39-1878606	501(c)(3)	0	499,224	FMV	Medical Supplies	ON-GOING

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HOLLAND FREE HEALTH CLINIC 99 WEST 26TH ST HOLLAND, MI 49423	30-0072620	501(c)(3)	0	9,696	FMV	Medical Supplies	ON-GOING
HOPE CHRISTIAN HEALTH CENTER 4357 CORPORATE Cntr NORTH LAS VEGAS, NV 89030	46-3098169	501(c)(3)	0	368,974	FMV	Medical Supplies	ON-GOING

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HOPE CLINIC 203 NORTH STREET BAYBORO, NC 28515	56-2114681	501(c)(3)	0	232,850	FMV	Medical Supplies	ON-GOING
HOPE CLINIC PO BOX 4025 BARTLESVILLE, OK 74006	46-4417141	501(c)(3)	0	43,283	FMV	Medical Supplies	ON-GOING

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HOPE CLINIC AND CARE CENTER 2693 W GRAND CHUTE BLVD APPLETON, WI 54913	47-3031346	501(c)(3)	0	336,918	FMV	Medical Supplies	ON-GOING
HOPE CLINIC OF GARLAND 800 S 6TH St GARLAND, TX 75040	75-2960314	501(c)(3)	0	52,541	FMV	Medical Supplies	ON-GOING

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HOPE CLINIC OF MCKINNEY PO BOX 2542 MCKINNEY, TX 75070	81-3813928	501(c)(3)	0	8,324	FMV	Medical Supplies	ON-GOING
HOPE HEALTH CLINIC 1025 SANIBEL WAY LAGRANGE, KY 40031	46-5509958	501(c)(3)	0	164,733	FMV	Medical Supplies	ON-GOING

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HOPE MEDICAL CLINIC 10101 60TH STREET LEXINGTON, OK 73051	73-1338039	Other	0	952,771	FMV	Medical Supplies	ON-GOING
HOPE MEDICAL CLINIC HOPE MEDICAL CLINIC YPSILANTI, MI 48197	38-2469007	501(c)(3)	0	302,794	FMV	Medical Supplies	ON-GOING



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HOPE MEDICALDENTAL CLINIC 111 MEADOWVIEW DRIVE CLEBURNE, TX 76033	75-2953856	501(c)(3)	0	109,814	FMV	Medical Supplies	ON-GOING
HOPEHEALTH MANNING FAMILY PRACTICE 12 WEST SOUTH STREET MANNING, SC 29102	57-0984427	501(c)(3)	0	326,304	FMV	Medical Supplies	ON-GOING

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HOPELIGHT MEDICAL CLINIC 1351 COLLYER ST LONGMONT, CO 80501	46-4657471	501(c)(3)	0	231,530	FMV	Medical Supplies	ON-GOING
HOUSTON AREA COMMUNITY Svcs(HACS)PHARMACY 2150 W 18TH ST HOUSTON, TX 77008	76-0549240	501(c)(3)	0	118,102	FMV	Medical Supplies	ON-GOING

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HOUSTON COUNTY VOLUNTEER MEDICAL CLINIC 107 HICKORY LANE BONAIRE, GA 31005	20-1859450	501(c)(3)	0	107,881	FMV	Medical Supplies	ON-GOING
I CARE SAN ANTONIO 1 HAVEN FOR HOPE WAY SAN ANTONIO, TX 78207	74-2690192	501(c)(3)	0	107,740	FMV	Medical Supplies	ON-GOING

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IBN SINA FOUNDATION 11226 S WILCREST DR HOUSTON, TX 77099	76-0698464	501(c)(3)	0	509,426	FMV	Medical Supplies	ON-GOING
ILIULIUK FAMILY AND HEALTH SERVICES 34 LAVELLE COURT UNALASKA, AK 99685	92-0041961	501(c)(3)	0	7,655	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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IMPACT CHRISTIAN MINISTRIES CLINIC 115 W SOLOMON ST GRIFFIN, GA 30223	27-0344233	501(c)(3)	0	337,834	FMV	Medical Supplies	ON-GOING
INHEALTH COMMUNITY WELLNESS FREE CLINIC 109 1/2 E BLUFF ST BOSCOBEL, WI 53805	33-1170597	501(c)(3)	0	37,243	FMV	Medical Supplies	ON-GOING

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INTERFAITH CLINIC 403 W OAK SUITE 200 EL DORADO, AR 71730	71-0236863	501(c)(3)	0	517,445	FMV	Medical Supplies	ON-GOING
IRVING COMMUNITY CLINIC 1302 LANE ST IRVING, TX 75061	75-2536818	501(c)(3)	0	134,430	FMV	Medical Supplies	ON-GOING

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ISLAMIC ASSOCIATION OF NORTH TEXAS 840 ABRAMS ROAD RICHARDSON, TX 75081	23-7181345	501(c)(3)	0	47,047	FMV	Medical Supplies	ON-GOING
ISLAND HEALTH CARE 245 VINEYARD HAVEN RD EDGARTOWN, MA 02539	47-0870772	501(c)(3)	0	38,344	FMV	Medical Supplies	ON-GOING

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JACKSON COUNTY HEALTH DEPARTMENT 801 W SECOND ST SEYMOUR, IN 47274	35-6000159	501(c)(3)	0	94,085	FMV	Medical Supplies	ON-GOING
JEFFERSON CENTER FOR MENTAL HEALTH 4851 INDEPENDENCE ST WHEAT RIDGE, CO 80033	84-0474717	501(c)(3)	0	2,128,410	FMV	Medical Supplies	ON-GOING



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JEFFERSON COUNTY HUMAN SERVICES 1541 ANNEX RD JEFFERSON, WI 53549	39-6005705	Other	0	136,578	FMV	Medical Supplies	ON-GOING
JESSIE TRICE COMMUNITY HEALTH CENTER 5607 Nw 27th Avenue Suite 1 Miami, FL 33142	59-1235617	501(c)(3)	0	14,306	FMV	Medical Supplies	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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JOHNSTOWN FREE MEDICAL CLINIC 340 MAIN STREET JOHNSTOWN, PA 15901	23-2922409	501(c)(3)	0	290,276	FMV	Medical Supplies	ON-GOING
KALSIPEL TRIBE OF INDIANSCAMAS Cntr CLINIC 1821 NORTH LECLERC ROAD CUSICK, WA 99119	91-0875018	Other	0	168,715	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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KATAHDIN VALLEY HEALTH CENTER 30 HOULTON ST PATTEN, ME 04747	23-7411014	Other	0	30,392	FMV	Medical Supplies	ON-GOING
KATALLASSO FAMILY HEALTH CENTER 38 SOUTH BELVIDERE AVENUE YORK, PA 17401	45-3170905	501(c)(3)	0	120,351	FMV	Medical Supplies	ON-GOING

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KEVINS COMMUNITY CENTER 25 COMMERCE ROAD NEWTOWN, CT 06470	61-1436909	501(c)(3)	0	409,470	FMV	Medical Supplies	ON-GOING
KIDS FIRST HEALTH CARE 4675 E 69TH AVENUE COMMERCE CITY, CO 80022	84-0799374	501(c)(3)	0	20,125	FMV	Medical Supplies	ON-GOING

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KITSAP MENTAL HEALTH SERVICES 5455Almira Drive NE BREMERTON, WA 98311	91-1020106	501(c)(3)	0	66,574	FMV	Medical Supplies	ON-GOING
KNOX COUNTY HEALTH CLINIC 22 WHITE STREET ROCKLAND, ME 04841	01-0528885	501(c)(3)	0	28,490	FMV	Medical Supplies	ON-GOING

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LA CLINICA CRISTIANA 1915 AVALON AVENUE MUSCLE SHOALS, AL 35661	20-1624284	501(c)(3)	0	275,329	FMV	Medical Supplies	ON-GOING
LA CLINICA DE LA ESPERANZA 3200 GRAND AVENUE DES MOINES, IA 50312	42-0680452	501(c)(3)	0	38,654	FMV	Medical Supplies	ON-GOING

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LA CROSSE COUNTY Mtl HLTH OUTPATIENT CLIN 300 FOURTH ST NORTH LA CROSSE, WI 54601	39-6005709	Other	0	79,222	FMV	Medical Supplies	ON-GOING
LAKE AREA FREE CLINIC 856B ARMOUR RD OCONOMOWOC, WI 53066	39-2006388	501(c)(3)	0	98,148	FMV	Medical Supplies	ON-GOING

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LAKE COUNTY FREE CLINIC 54 S STATE ST PAINESVILLE, OH 44077	34-1081191	501(c)(3)	0	259,530	FMV	Medical Supplies	ON-GOING
LAKE ST LOUIS VOLUNTEERS IN MEDICINE 10714 VETERANS MEM LAKE ST LOUIS, MO 63367	27-3109107	501(c)(3)	0	14,520	FMV	Medical Supplies	ON-GOING



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LAKESHORE COMMUNITY HEALTH CARE PO BOX 959 SHEBOYGAN, WI 53082	26-4321839	501(c)(3)	0	56,632	FMV	Medical Supplies	ON-GOING
LAKEVIEW CENTER INC 1221 W LAKEVIEW AVE PENSACOLA, FL 32501	59-0737872	501(c)(3)	0	737,055	FMV	Medical Supplies	ON-GOING

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LAS CLINICAS DEL NORTE STATE ROAD 571 BLDG 28 EL RITO, NM 87530	85-0249591	501(c)(3)	0	37,483	FMV	Medical Supplies	ON-GOING
LAWTON COMMUNITY HEALTH CENTER 5404 SW LEE BLVD LAWTON, OK 73505	73-6061037	Other	0	193,500	FMV	Medical Supplies	ON-GOING

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LEBANON VALLEY VOLUNTEERS IN MEDICINE 711 S 8TH ST LEBANON, PA 17042	26-3915958	501(c)(3)	0	24,362	FMV	Medical Supplies	ON-GOING
LEFLORE COUNTY HEALTH CENTER 706 HWY 82 WEST GREENWOOD, MS 38930	20-0069223	501(c)(3)	0	978,951	FMV	Medical Supplies	ON-GOING

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LEWIS & CLARK BEHAVIORIAL HEALTH SERVICES 1028 WALNUT STREET YANKTON, SD 57078	16-1900308	501(c)(3)	0	415,385	FMV	Medical Supplies	ON-GOING
LIFEPATH SYSTEMS 1515 HERITAGE DRIVE MCKINNEY, TX 75069	75-1761911	501(c)(3)	0	3,521,108	FMV	Medical Supplies	ON-GOING

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LIFESPRING HEALTH SYSTEMS 460 SPRING STREET JEFFERSONVILLE, IN 47130	35-1097350	501(c)(3)	0	171,862	FMV	Medical Supplies	ON-GOING
LIFESTREAM BEHAVIORAL CENTER 515 MAIN STREET LEESBURG, FL 34748	59-1561501	501(c)(3)	0	2,882,678	FMV	Medical Supplies	ON-GOING

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LIGHT OF THE WORLD CLINIC INC 5333 N DIXIE HWY OAKLAND PARK, FL 33334	65-0266070	501(c)(3)	0	647,151	FMV	Medical Supplies	ON-GOING
LINN COUNTY PUBLIC HEALTH 501 13th st nw CEDAR RAPIDS, IA 52405	42-6004338	Other	0	12,348	FMV	Medical Supplies	ON-GOING

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LLOYD F MOSS FREE CLINIC 1301 SAM PERRY FREDERICKSBURG, VA 22401	54-1677934	501(c)(3)	0	256,804	FMV	Medical Supplies	ON-GOING
LORAIN COUNTY FREE CLINIC 3323 PEARL AVE LORAIN, OH 44055	34-1506180	501(c)(3)	0	177,977	FMV	Medical Supplies	ON-GOING

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LOUDOUN FREE CLINIC 224A CORNWALL ST NW LEESBURG VA, VA 20176	54-1921059	501(c)(3)	0	21,238	FMV	Medical Supplies	ON-GOING
LUKE SOCIETY PO BOX 16194 GALVESTON, TX 77552	74-2211973	501(c)(3)	0	388,682	FMV	Medical Supplies	ON-GOING



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MACON VOLUNTEER CLINIC 376 ROGERS AVE MACON, GA 31204	74-3055376	501(c)(3)	0	317,359	FMV	Medical Supplies	ON-GOING
MALIHEH FREE CLINIC 415 E 3900 S SALT LAKE CITY, UT 84115	20-2313461	501(c)(3)	0	9,369	FMV	Medical Supplies	ON-GOING

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MALTA HOUSE OF CARE INC 19 WOODLAND STREET HARTFORD, CT 06105	20-3562424	501(c)(3)	0	332,845	FMV	Medical Supplies	ON-GOING
MAMOU HEALTH RESOURCES INC 300 SOUTH STREET MAMOU, LA 70554	72-0949444	501(c)(3)	0	151,691	FMV	Medical Supplies	ON-GOING

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MANNA MINISTRIES INC 120 STREET A SUITE A PICAYUNE, MS 39466	20-1788094	Other	0	51,727	FMV	Medical Supplies	ON-GOING
MARIAM CLINIC 4441-106 SIX FORKS RD RALEIGH, NC 27609	20-3011248	501(c)(3)	0	25,032	FMV	Medical Supplies	ON-GOING

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MARION COUNTY PUBLIC HEALTH 2003 N LINCOLN KNOXVILLE, IA 50138	42-6004844	Other	0	12,661	FMV	Medical Supplies	ON-GOING
MARTIN LUTHER KING HEALTH CENTER 865 OLIVE STREET SHREVEPORT, LA 71104	72-1079721	501(c)(3)	0	131,897	FMV	Medical Supplies	ON-GOING

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MATAGORDA EPISCOPAL HEALTH OUTREACH PROGRAM MEHOP BAY CITY, TX 77414	20-0537948	501(c)(3)	0	846,706	FMV	Medical Supplies	ON-GOING
MATTAWA COMMUNITY MEDICAL CLINIC 210 GOVERNMENT ROAD MATTAWA, WA 99349	91-1499763	501(c)(3)	0	383,411	FMV	Medical Supplies	ON-GOING

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MATTHEW 25 HEALTH AND DENTAL CLINIC 413 E JEFFERSON BLVD FORT WAYNE, IN 46802	35-1484951	501(c)(3)	0	290,385	FMV	Medical Supplies	ON-GOING
MATTHEW WALKER COMPREHENSIVE HEALTH CENTER 1035 14TH AVENUE NORTH NASHVILLE, TN 37208	62-1035426	501(c)(3)	0	44,252	FMV	Medical Supplies	ON-GOING

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MCDONALD COUNTY HEALTH DEPARTMENT 500 OLIN STREET PINEVILLE, MO 64856	44-6000554	Other	0	13,278	FMV	Medical Supplies	ON-GOING
MCINTOSH TRAIL CSB 1435 NORTH EXPRESSWAY GRIFFIN, GA 30223	58-2098758	Other	0	1,509,409	FMV	Medical Supplies	ON-GOING

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MEDICAL MISSION ADVENTURE 11540 BONHAM AVE SYLMAR, CA 91342	04-3661520	501(c)(3)	0	331,297	FMV	Medical Supplies	ON-GOING
MEDICAL MISSIONS FOR CHRIST CLINIC PO BOX 1948 CAMDENTON, MO 65020	20-3637019	501(c)(3)	0	19,247	FMV	Medical Supplies	ON-GOING



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MEDICAL OUTREACH MINISTRIES 1401 E SOUTH BOULEVARD MONTGOMERY, AL 36116	63-1204645	501(c)(3)	0	185,773	FMV	Medical Supplies	ON-GOING
MEDICAL SERVICE BUREAU INC 1530 S OLIVER WICHITA, KS 67218	48-0891620	501(c)(3)	0	14,328	FMV	Medical Supplies	ON-GOING

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MEDLINK GEORGIA INC 11 CHARLIE MORRIS ROAD COLBERT, GA 30628	58-1394645	501(c)(3)	0	80,164	FMV	Medical Supplies	ON-GOING
MEL LEAMAN FREE CLINIC 601 RADIO HILL RD MARION, VA 24354	54-1993876	501(c)(3)	0	12,632	FMV	Medical Supplies	ON-GOING

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MERCI CLINIC 1315 TATUM DRIVE NEW BERN, NC 28560	56-2034052	501(c)(3)	0	7,296	FMV	Medical Supplies	ON-GOING
MERCY HEALTH CENTER INC 700 OGLETHORPE AVE ATHENS, GA 30606	58-2603523	501(c)(3)	0	286,298	FMV	Medical Supplies	ON-GOING

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MERCY MEDICAL CLINIC 615 WASHINGTON STREET SHELBYVILLE, KY 40065	61-1211189	501(c)(3)	0	196,046	FMV	Medical Supplies	ON-GOING
MERIDIAN BEHAVIORAL HEALTHCARE INC 4300 SW 13TH STREET GAINESVILLE, FL 32608	59-1906214	501(c)(3)	0	456,274	FMV	Medical Supplies	ON-GOING

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METRO ATLANTA RECOVERY RESIDENCY INC 2815 CLEARVIEW PLACE DORAVILLE, GA 30223	23-7442673	501(c)(3)	0	11,263	FMV	Medical Supplies	ON-GOING
METROCARE SERVICES 1345 RIVER BEND DRIVE DALLAS, TX 75247	75-1285603	Other	0	106,236	FMV	Medical Supplies	ON-GOING

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METROCREST COMMUNITY CLINIC 1 MEDICAL Pkwy FARMERS BRANCH, TX 75234	75-2616002	501(c)(3)	0	142,004	FMV	Medical Supplies	ON-GOING
METROWEST FREE MEDICAL PROGRAM 105 HUDSON RD SUDBURY, MA 01776	04-3822273	501(c)(3)	0	36,669	FMV	Medical Supplies	ON-GOING

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MHRC FACT TEAM 10550 DEERWOOD PARK JACKSONVILLE, FL 32256	59-1905344	501(c)(3)	0	178,737	FMV	Medical Supplies	ON-GOING
MIAMI BEACH COMMUNITY HEALTH CENTER 11645 BISCAYNE BLVD MIAMI, FL 33181	59-1829984	501(c)(3)	0	5,695	FMV	Medical Supplies	EMERGENCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MIAMI RESCUE MISSION CLINIC INC 2015 NW 1ST AVE MIAMI, FL 33127	45-1481860	501(c)(3)	0	117,129	FMV	Medical Supplies	ON-GOING
MIDDLE PENINSULA NORTHERN NECK CSB PO BOX 2468 GLOUCESTER, VA 23061	54-0958505	501(c)(3)	0	785,538	FMV	Medical Supplies	ON-GOING



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MIDLAND COMMUNITY CHILDRENS CLINIC 1101 E FRONT STREET MIDLAND, TX 79702	75-1875246	501(c)(3)	0	6,048	FMV	Medical Supplies	ON-GOING
MILAN PUSKAR HEALTH RIGHT 341 SPRUCE STREET MORGANTOWN, WV 26507	31-1118673	501(c)(3)	0	59,546	FMV	Medical Supplies	ON-GOING

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MINISTRIES OF JESUS 1100 E I-35 FRONTAGE ROAD EDMOND, OK 73034	73-1622804	501(c)(3)	0	612,802	FMV	Medical Supplies	ON-GOING
MISSION ARLINGTON MEDICAL CLINIC 210 W SOUTH ARLINGTON, TX 76010	75-2724385	501(c)(3)	0	994,426	FMV	Medical Supplies	ON-GOING

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MISSION CLINIC OF PALM SPRINGS INC 3300 10TH AVE n PALM SPRINGS, FL 33461	47-3441097	501(c)(3)	0	52,447	FMV	Medical Supplies	ON-GOING
MISSION MEDICAL CENTER 2125 LASALLE ST COLORADO SPRINGS, CO 80909	68-0506812	501(c)(3)	0	53,851	FMV	Medical Supplies	ON-GOING

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MISSION OF MERCY 22 S MARKET ST FREDERICK, MD 21701	86-0704883	501(c)(3)	0	1,069,476	FMV	Medical Supplies	ON-GOING
MISSION OF MERCY-ARIZONA 821 W WARNER ROAD CHANDLER, AZ 85225	86-0704883	501(c)(3)	0	18,554	FMV	Medical Supplies	ON-GOING

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MISSION TRAVIS MERCY PO BOX 11557 FORT WORTH, TX 76110	45-3841621	501(c)(3)	0	27,267	FMV	Medical Supplies	ON-GOING
MISSION WACO HEALTH CLINIC 1315 N 15TH ST WACO, TX 76707	74-2605621	501(c)(3)	0	163,713	FMV	Medical Supplies	ON-GOING

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MODESTO GOSPEL MISSION 964 WOODLAND DR TURLOCK, CA 95382	94-6102833	501(c)(3)	0	14,540	FMV	Medical Supplies	ON-GOING
MOUNTAIN HEALTH & COMMUNITY SERVICES INC 31115 HWY 94 CAMPO, CA 91906	33-0164420	501(c)(3)	0	32,274	FMV	Medical Supplies	ON-GOING

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M-POWER MINISTRIES HEALTH CENTER 4022 4TH AVE SOUTH BIRMINGHAM, AL 35222	31-1639601	501(c)(3)	0	77,708	FMV	Medical Supplies	ON-GOING
MUSLIM COMMUNITY CENTER FOR HUMAN SERVICES 7600 GLENVIEW DR RICHLAND HILLS, TX 76180	75-2580088	501(c)(3)	0	329,919	FMV	Medical Supplies	ON-GOING

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NATIONAL Cntr FOR BEHAVIORAL Hlth SOLUTIONS 3031 IH 10 WEST SAN ANTONIO, TX 78201	47-0857847	501(c)(3)	0	2,862,576	FMV	Medical Supplies	ON-GOING
NAVAJO COUNTY PUBLIC HEALTH 600 N 9TH PLACE SHOW LOW, AZ 85901	86-6000541	Other	0	18,188	FMV	Medical Supplies	ON-GOING



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NEIGHBOR FOR NEIGHBOR 505 E 36TH ST N TULSA, OK 74106	73-0776404	501(c)(3)	0	642,740	FMV	Medical Supplies	ON-GOING
NEIGHBORHOOD HEALTH CLINIC 121 GOODLETTE RD N NAPLES, FL 34102	59-3546884	501(c)(3)	0	204,828	FMV	Medical Supplies	ON-GOING

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NEIGHBORHOOD SERVICE ORGANIZATION NSO TUMAINI CENTER DETROIT, MI 48201	38-1561624	501(c)(3)	0	109,494	FMV	Medical Supplies	ON-GOING
NEVADA OBSTETRICAL CHARITY CLINIC 1950 PINTO LANE LAS VEGAS, NV 89106	26-4834603	501(c)(3)	0	184,172	FMV	Medical Supplies	ON-GOING

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NEW HOPE CLINIC INC 201 BOILING SPRING RD SOUTHPORT, NC 28461	31-1614379	501(c)(3)	0	12,113	FMV	Medical Supplies	ON-GOING
NEW ORLEANS DREAM CENTER 1137 SAINT CHARLES AV NEW ORLEANS, LA 70130	46-1935367	501(c)(3)	0	123,484	FMV	Medical Supplies	ON-GOING

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NEW ORLEANS DREAM CENTER 1137 SAINT CHARLES AV NEW ORLEANS, LA 70130	46-1935367	501(c)(3)	0	7,224	FMV	Medical Supplies	EMERGENCY
NEW ORLEANS HEALTH DEPARTMENT 1300 Perdido St New Orleans, LA 70112	72-6000969	Other	0	16,268	FMV	Medical Supplies	EMERGENCY

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NEWHOPE CLINIC 41 S COURT STREET OWINGSVILLE, KY 40360	61-1363437	501(c)(3)	0	150,984	FMV	Medical Supplies	ON-GOING
NORTH BROWARD HOSPITAL DISTRICT 200 NW 7TH AVE FORT LAUDERDALE, FL 33311	59-6012065	501(c)(3)	0	124,255	FMV	Medical Supplies	ON-GOING

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NORTH BROWARD HOSPITAL DISTRICT DBA 303 SE 17TH ST FORT LAUDERDALE, FL 33316	59-6012065	501(c)(3)	0	397,121	FMV	Medical Supplies	ON-GOING
NORTH HUDSON COMMUNITY ACTION CORPORATION 800-31ST STREET UNION CITY, NJ 07087	22-1818699	501(c)(3)	0	401,999	FMV	Medical Supplies	ON-GOING

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NORTH JEFFERSON COUNTY CLINIC PHARMACY 1295 PEARL ST BEAUMONT, TX 77701	74-6000291	Other	0	12,449	FMV	Medical Supplies	ON-GOING
NORTHERN NECK FREE HEALTH CLINIC 51 William B Graham Ct KILMARNOCK, VA 22482	54-1679279	501(c)(3)	0	20,965	FMV	Medical Supplies	ON-GOING

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NORTHLAND COMMUNITY HEALTH CENTER 416 KUNDERT ST TURTLE LAKE, ND 58575	33-1029318	501(c)(3)	0	13,513	FMV	Medical Supplies	ON-GOING
NORTHPOINTE BEHAVIORAL HEALTHCARE SYSTEMS 715 PYLE DR KINGSFORD, MI 49802	38-3210490	Other	0	64,866	FMV	Medical Supplies	ON-GOING



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NORTHSHORE SCOTTSDALE PHARMACY 3564 SCOTTSDALE ST PORTAGE, IN 46368	35-2028588	501(c)(3)	0	3,337,795	FMV	Medical Supplies	ON-GOING
NORTHWEST HUMAN SERVICES INC 681 CENTER STREET NE SALEM, OR 97301	93-0605570	501(c)(3)	0	19,372	FMV	Medical Supplies	ON-GOING

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NOVA SCRIPTSCENTRAL 6400 ARLINGTON BLVD FALLS CHURCH, VA 22042	65-1275162	501(c)(3)	0	238,574	FMV	Medical Supplies	ON-GOING
OAKLAWN 330 LAKEVIEW DR GOSHEN, IN 46528	35-1070041	501(c)(3)	0	282,678	FMV	Medical Supplies	ON-GOING

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OASIS OF HOPE CENTER 522 LEONARD ST GRAND RAPIDS, MI 49504	20-2781312	501(c)(3)	0	49,968	FMV	Medical Supplies	ON-GOING
OHIO VALLEY HEALTH CENTER ONE ROSS PARK STEUBENVILLE, OH 43952	20-3924355	501(c)(3)	0	675,107	FMV	Medical Supplies	ON-GOING

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OLDE TOWNE MEDICAL & DENTAL CENTER 5249 OLDE TOWNE ROAD WILLIAMSBURG, VA 23188	54-1663905	501(c)(3)	0	8,760	FMV	Medical Supplies	ON-GOING
ONE STOP CLINIC 701 17TH AVE W BRADENTON, FL 34205	59-3340921	501(c)(3)	0	473,025	FMV	Medical Supplies	ON-GOING

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ONEWORLD COMMUNITY HEALTH CENTERS INC 4920 S 30TH ST OMAHA, NE 68107	47-0548990	501(c)(3)	0	213,674	FMV	Medical Supplies	ON-GOING
OPEN ARMS CLINIC 109 BIG A ROAD TOCCOA, GA 30577	20-3296577	501(c)(3)	0	103,006	FMV	Medical Supplies	ON-GOING

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OPEN ARMS HEALTH CLINIC 3921 W GREEN OAKS BLVD ARLINGTON, TX 76017	45-0621201	501(c)(3)	0	884,806	FMV	Medical Supplies	ON-GOING
OPEN CITIES HEALTH CENTER 409 N DUNLAP STREET ST PAUL, MN 55104	36-3381598	501(c)(3)	0	30,616	FMV	Medical Supplies	ON-GOING

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OPEN DOOR CLINIC OF ALAMANCE COUNTY 319 GRAHAM-HOPEDALE RD BURLINGTON, NC 27217	56-1794210	501(c)(3)	0	253,307	FMV	Medical Supplies	ON-GOING
OPEN DOOR HEALTH CENTER 151 NW 11TH ST HOMESTEAD, FL 33030	83-0375996	501(c)(3)	0	1,949,606	FMV	Medical Supplies	ON-GOING

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ORANGE COUNTY FREE CLINIC PO BOX 441 ORANGE, VA 22960	25-1922019	501(c)(3)	0	22,904	FMV	Medical Supplies	ON-GOING
ORANGEBURG-CALHOUN FREE MEDICAL CLINIC 141 CENTRE STREET ORANGEBURG, SC 29115	26-3762573	501(c)(3)	0	228,528	FMV	Medical Supplies	ON-GOING



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OUR LADY OF THE LAKE REGIONAL MEDICAL Cntr 5000 Hennessy Blvd Baton Rouge, LA 70808	72-0423651	501(c)(3)	0	24,823	FMV	Medical Supplies	EMERGENCY
OZARKS COMMUNITY HEALTH CENTER 102 JACKSON HERMITAGE, MO 65668	20-5822485	501(c)(3)	0	77,268	FMV	Medical Supplies	ON-GOING

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PALMETTO HEALTH COUNCIL INC 643 MAIN STREET PALMETTO, GA 30268	58-1307597	501(c)(3)	0	9,360,882	FMV	Medical Supplies	ON-GOING
PARTNERS FOR HEALING INC 109 WEST BLACKWELL TULLAHOMA, TN 37388	62-1834800	501(c)(3)	0	7,602	FMV	Medical Supplies	ON-GOING

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PATIENT'S FIRST CARE DBA MALINDA'S PATIENT CARE 19115 Florida Blvd Suite A Albany, LA 70711	45-2815734	Other	0	20,428	FMV	Medical Supplies	EMERGENCY
PAUITE INDIAN TRIBE OF UTAH 440 NORTH PAIUTE DRIVE CEDAR CITY, UT 84721	87-0365095	Other	0	448,503	FMV	Medical Supplies	ON-GOING

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PEDIPLACE 502 OLD ORCHARD Ln LEWISVILLE, TX 75067	75-2512752	501(c)(3)	0	8,554	FMV	Medical Supplies	ON-GOING
PEOPLES CLINIC 3111 ELECTRIC AVE PORT HURON, MI 48060	38-3274342	Other	0	108,208	FMV	Medical Supplies	ON-GOING

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PEOPLES HEALTH WELLNESS CLINIC 553 NORTH MAIN STREET BARRE, VT 05641	03-0343290	501(c)(3)	0	86,698	FMV	Medical Supplies	ON-GOING
PERSONAL ENRICHMENT THROUGH MENTAL HEALTH 11254 58TH ST PINELLAS PARK, FL 33782	59-3453549	501(c)(3)	0	91,936	FMV	Medical Supplies	ON-GOING

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PHILLIPS NEIGHBORHOOD CLINIC 720 WASHINGTON AVENUE MINNEAPOLIS, MN 55414	41-1843943	501(c)(3)	0	12,543	FMV	Medical Supplies	ON-GOING
PLANO CHILDRENS MEDICAL CLINIC 1407 14TH STREET PLANO, TX 75074	75-2252866	Other	0	8,422	FMV	Medical Supplies	ON-GOING

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POCATELLO FREE CLINIC 429 WASHINGTON POCATELLO, ID 83201	82-0351133	501(c)(3)	0	650,683	FMV	Medical Supplies	ON-GOING
POLK COUNTY HEALTH CENTER 1317 W BROADWAY BOLIVAR, MO 65613	43-1268665	Other	0	64,918	FMV	Medical Supplies	ON-GOING

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PORTER STARKE SERVICES DBA MARRAM HEALTH CENTER 601 WALL STREET VALPARAISO, IN 46383	35-1330771	501(c)(3)	0	358,944	FMV	Medical Supplies	ON-GOING
PORTLAND COMMUNITY HEALTH CENTER 180 PARK AVE PORTLAND, ME 04102	45-4960453	501(c)(3)	0	21,946	FMV	Medical Supplies	ON-GOING



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PRESBYTERIAN MEDICAL CARE MISSION 1857 PINE ST STE 100 ABILENE, TX 79601	75-1910600	501(c)(3)	0	747,206	FMV	Medical Supplies	ON-GOING
PRIMARY CARE & HOPE CLINIC 1453 HOPE WAY MURFREESBORO, TN 37129	62-1482091	501(c)(3)	0	197,398	FMV	Medical Supplies	ON-GOING

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PROTEUS 3850 MERLE HAY ROAD DES MOINES, IA 50310	42-1186501	501(c)(3)	0	83,850	FMV	Medical Supplies	ON-GOING
PROVIDENCE MEDICAL GROUP 4400 NE HALSEY ST PORTLAND, OR 97213	93-1097258	501(c)(3)	0	35,264	FMV	Medical Supplies	ON-GOING

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RAINELLE MEDICAL CENTER INC 176 Medical Center Drive Rainelle, WV 25962	55-0686113	501(c)(3)	0	111,137	FMV	Medical Supplies	EMERGENCY
RAPHA CLINIC OF WEST GEORGIA INC 253 hwy 78 e TEMPLE, GA 30179	27-1188932	501(c)(3)	0	30,543	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAPHAEL COMMUNITY FREE CLINIC INC 1807 WATER STREET KERRVILLE, TX 78028	74-2819628	501(c)(3)	0	149,141	FMV	Medical Supplies	ON-GOING
REACH OUT OF MONTGOMERY COUNTY 25 E FORAKER DAYTON, OH 45409	31-1434282	501(c)(3)	0	203,987	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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RECOVERY CONSULTANTS OF ATLANTA INC 3423 COVINGTON DRIVE DECATUR, GA 30032	58-2480021	501(c)(3)	0	130,984	FMV	Medical Supplies	ON-GOING
REFRESH F5 INC 25 W MAIN STREET AUSTIN, IN 47102	81-3730871	Other	0	72,924	FMV	Medical Supplies	ON-GOING

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REFUGE CLINIC 2349 RICHMOND RD LEXINGTON, KY 40502	37-1547506	501(c)(3)	0	55,351	FMV	Medical Supplies	ON-GOING
REGION III BEHAVIOR HEALTH 515 NORTH 16TH ST PAYETTE, ID 83661	82-6000995	Other	0	82,297	FMV	Medical Supplies	ON-GOING

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REMOTE AREA MEDICAL 2200 STOCK CREEK BLVD ROCKFORD, TN 37853	62-1650446	501(c)(3)	0	1,633,640	FMV	Medical Supplies	ON-GOING
REMOTE AREA MEDICAL 2200 STOCK CREEK BLVD ROCKFORD, TN 37853	62-1650446	501(c)(3)	0	46,912	FMV	Medical Supplies	EMERGENCY

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RENEWED HOPE HEALTH CLINIC 894 MARSHALL ALLEGAN, MI 49010	16-1760734	501(c)(3)	0	485,355	FMV	Medical Supplies	ON-GOING
RICHMOND AREA HIGH BLOOD PRESSURE CENTER 1200 WEST CARY STREET RICHMOND, VA 23220	52-1303481	501(c)(3)	0	138,917	FMV	Medical Supplies	ON-GOING



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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RILEY MEDICAL CLINICFIRST BAPTIST CHURCH 147 CHURCH STREET JONESBORO, GA 30236	58-0685903	501(c)(3)	0	160,019	FMV	Medical Supplies	ON-GOING
RIVER HILLS COMMUNITY HEALTH CENTER 201 SOUTH MARKET STREET OTTUMWA, IA 52501	42-1489471	501(c)(3)	0	396,557	FMV	Medical Supplies	ON-GOING

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RIVER HILLS COMMUNITY HEALTH CENTER 100 W MAIN ST RICHLAND, IA 52585	42-1489471	501(c)(3)	0	207,545	FMV	Medical Supplies	ON-GOING
RIVER VALLEY FAMILY HEALTH CENTER 308 MAIN STREET OLATHE, CO 81425	27-3757444	Other	0	1,008,183	FMV	Medical Supplies	ON-GOING

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RIVERVIEW HEALTH SERVICES 722 REYNOLDS AVENUE KANSAS CITY, KS 66101	48-1072716	501(c)(3)	0	14,703	FMV	Medical Supplies	ON-GOING
ROANOKE CHOWAN COMMUNITY HEALTH Cntr (RCCHC) 120 HEALTH CENTER DRIVE AHOSKIE, NC 27910	42-1638714	501(c)(3)	0	248,813	FMV	Medical Supplies	ON-GOING

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ROBERT C BYRD CLINIC 1464 Jefferson Street Lewisburg, WV 24901	55-0559322	501(c)(3)	0	80,913	FMV	Medical Supplies	EMERGENCY
ROBESON HEALTH CARE CORPORATION 60 COMMERCE PLAZA PEMBROKE, NC 28372	58-1622664	501(c)(3)	0	10,394	FMV	Medical Supplies	ON-GOING

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ROCK SPRINGS CLINIC 211 ROCK SPRINGS ROAD MILNER, GA 30257	26-4485460	501(c)(3)	0	585,198	FMV	Medical Supplies	ON-GOING
ROSA CLARK MEDICAL CLINIC 210 SOUTH OAK ST SENECA, SC 29678	58-6076010	501(c)(3)	0	25,341	FMV	Medical Supplies	ON-GOING

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ROSE GARDEN CENTER FOR HOPE AND HEALING 2020 MADISON AVE COVINGTON, KY 41014	27-2425177	501(c)(3)	0	182,522	FMV	Medical Supplies	ON-GOING
ROTACARE INC 875 JERUSALEM AVE UNIONDALE, NY 11530	11-3135331	501(c)(3)	0	255,402	FMV	Medical Supplies	ON-GOING

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RURAL HEALTH NETWORK OF MONROE COUNTY 3706 N ROOSEVELT BLVD KEY WEST, FL 33040	65-0474953	501(c)(3)	0	502,658	FMV	Medical Supplies	ON-GOING
RUTHS PLACE 1411 CRAWFORD AVENUE GRANBURY, TX 76048	20-4594680	501(c)(3)	0	66,994	FMV	Medical Supplies	ON-GOING

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RUTLAND FREE CLINIC 145 STATE STREET RUTLAND, VT 05701	83-0427544	501(c)(3)	0	29,304	FMV	Medical Supplies	ON-GOING
SACRED HEART COMMUNITY CLINIC 620 ROUND ROCK WEST DR ROUND ROCK, TX 78681	27-2901548	501(c)(3)	0	210,530	FMV	Medical Supplies	ON-GOING



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SAFE HARBOR FREE CLINIC 7209 265TH ST NW STANWOOD, WA 98292	26-3825107	501(c)(3)	0	320,987	FMV	Medical Supplies	ON-GOING
SALINA FAMILY HEALTHCARE CENTER 651 EAST PRESCOTT ROAD SALINA, KS 67401	48-0858197	501(c)(3)	0	396,249	FMV	Medical Supplies	ON-GOING

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SALT LAKE COUNTY HEALTH DEPARTMENT 2001 STATE ST SALT LAKE CITY, UT 84114	87-6000316	Other	0	107,620	FMV	Medical Supplies	ON-GOING
SAMARITAN HEALTH CENTER 13 ROSE STREET DANBURY, CT 06810	75-3258057	501(c)(3)	0	32,578	FMV	Medical Supplies	ON-GOING

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SAMARITAN HEALTH CLINIC OF PICKENS COUNTY 303 DACUSVILLE HIGHWAY EASLEY, SC 29640	57-0947115	501(c)(3)	0	176,484	FMV	Medical Supplies	ON-GOING
SAMARITAN HOUSE 114 5TH AVE REDWOOD CITY, CA 94063	23-7416272	501(c)(3)	0	209,534	FMV	Medical Supplies	ON-GOING

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SAMARITAN REGIONAL HEALTH CLINIC 937 BROADWAY CAPE GIRARDEAU, MO 63701	27-5427837	501(c)(3)	0	861,076	FMV	Medical Supplies	ON-GOING
SAMARITAN REGIONAL HEALTH CLINIC 937 BROADWAY CAPE GIRARDEAU, MO 63701	27-5427837	501(c)(3)	0	10,855	FMV	Medical Supplies	EMERGENCY

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SAMARITANS TOUCH CARE CENTER 3015 HERRING AVE SEBRING, FL 33870	02-0773338	501(c)(3)	0	120,852	FMV	Medical Supplies	ON-GOING
SAMUEL DIXON FAMILY HEALTH CENTERS INC 25115 AVENUE STANFORD VALENCIA, CA 91355	95-4278726	501(c)(3)	0	140,468	FMV	Medical Supplies	ON-GOING

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SAMUEL DIXON FAMILY Hlth Cntrs-NEWHALL 25115 AVENUE STANFORD VALENCIA, CA 91355	95-4278726	501(c)(3)	0	8,851	FMV	Medical Supplies	ON-GOING
SAMUEL DIXON FAMILY Hlth cntrs-VAL VERDE 25115 AVENUE STANFORD VALENCIA, CA 91355	95-4278726	501(c)(3)	0	14,756	FMV	Medical Supplies	ON-GOING

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SAN FRANCISCO FREE CLINIC 4900 CALIFORNIA ST SAN FRANCISCO, CA 94118	94-3186248	501(c)(3)	0	261,569	FMV	Medical Supplies	ON-GOING
SAN JOSE CLINIC 2615 FANNIN ST HOUSTON, TX 77002	76-0373703	501(c)(3)	0	883,698	FMV	Medical Supplies	ON-GOING

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SANTA MARIAS CHILDREN AND FAMILY CENTER 9209 COLIMA RD WHITTIER, CA 90605	27-1879748	501(c)(3)	0	239,231	FMV	Medical Supplies	ON-GOING
SANTA ROSA COMMUNITY HEALTH CENTERS 3569 ROUND BARN CR SANTA ROSA, CA 95403	68-0365296	501(c)(3)	0	16,429	FMV	Medical Supplies	ON-GOING



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SCHOOL HEALTH CLINICS OF SANTA CLARA COUNTY 6840 VIA DEL ORO SAN JOSE, CA 95119	77-0031679	501(c)(3)	0	55,715	FMV	Medical Supplies	ON-GOING
SCHUYLER COUNSELING AND HEALTH SERVICES 127 S LIBERTY RUSHVILLE, IL 62681	37-0923523	501(c)(3)	0	59,303	FMV	Medical Supplies	ON-GOING

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SCOTLAND COMMUNITY HEALTH CLINIC 1405-B WEST BLVD LAURINBURG, NC 28353	20-2841940	501(c)(3)	0	187,678	FMV	Medical Supplies	ON-GOING
SCOTT COUNTY HEALTH DEPARTMENT 1471 N GARDNER ST SCOTTSBURG, IN 47170	00-3118924	Other	0	206,005	FMV	Medical Supplies	ON-GOING

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SEAGER MEMORIAL CLINIC PO BOX 150143 OGDEN, UT 84415	46-0711300	501(c)(3)	0	253,946	FMV	Medical Supplies	ON-GOING
SEATTLEKING COUNTY CLINIC 305 HARRISON STREET SEATTLE, WA 98109	91-1003385	501(c)(3)	0	17,970	FMV	Medical Supplies	ON-GOING

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SEMO HEALTH NETWORK 421 SEMO DRIVE NEW MADRID, MO 63869	43-1253101	501(c)(3)	0	2,655,141	FMV	Medical Supplies	ON-GOING
SENIOR FRIENDSHIP CENTERS INC 1900 BROTHER GEENEN WAY SARASOTA, FL 34236	59-1522614	501(c)(3)	0	102,160	FMV	Medical Supplies	ON-GOING

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SET FAMILY MEDICAL CLINICS 2864 CIRCLE DR COLORADO SPRINGS, CO 80906	84-1183335	501(c)(3)	0	15,708	FMV	Medical Supplies	ON-GOING
SETON CENTRAL OUTPATIENT PHARMACY 1500 RED RIVER ST 14052 AUSTIN, TX 78701	74-1109643	501(c)(3)	0	28,746	FMV	Medical Supplies	ON-GOING

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SHELBY COMMUNITY HEALTH CENTER 1640 E STATE RD 44 SHELBYVILLE, IN 46176	30-0174146	501(c)(3)	0	16,208	FMV	Medical Supplies	ON-GOING
SHELTER HEALTH SERVICES 534 SPRATT ST CHARLOTTE, NC 28206	20-3041985	501(c)(3)	0	66,105	FMV	Medical Supplies	ON-GOING

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SHEPHERDS CARE MEDICAL CLINIC 304 B PONY ROAD ZEBULON, NC 27597	26-2757593	501(c)(3)	0	28,950	FMV	Medical Supplies	ON-GOING
SHEPHERDS CLINIC 2800 KIRK AVE BALTIMORE, MD 21218	52-1739001	501(c)(3)	0	55,085	FMV	Medical Supplies	ON-GOING

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SHIFA CLINIC 1092 JOHNNIE DODDS MT PLEASANT, SC 29464	04-3810161	501(c)(3)	0	338,170	FMV	Medical Supplies	ON-GOING
SILOAM FAMILY HEALTH CENTER 820 GALE LANE NASHVILLE, TN 37204	58-1867940	501(c)(3)	0	247,612	FMV	Medical Supplies	ON-GOING



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SISTER MAURA BRANNICK HEALTH CENTER 326 S CHAPIN ST SOUTH BEND, IN 46601	53-0196617	501(c)(3)	0	94,104	FMV	Medical Supplies	ON-GOING
SMITH MEDICAL CLINIC INC 99 BASKERVILL Dr PAWLEYS ISLAND, SC 29585	57-0786699	501(c)(3)	0	764,602	FMV	Medical Supplies	ON-GOING

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SMITH MEDICAL CLINIC INC 99 BASKERVILL DR PAWLEYS ISLAND, SC 29585	57-0786699	501(c)(3)	0	8,324	FMV	Medical Supplies	EMERGENCY
SMITHVILLE COMMUNITY CLINIC 800 BURLESON ST SMITHVILLE, TX 78957	20-4515999	501(c)(3)	0	137,312	FMV	Medical Supplies	ON-GOING

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SNAKE RIVER COMMUNITY CLINIC 215 10TH STREET LEWISTON, ID 83501	31-1726460	501(c)(3)	0	291,167	FMV	Medical Supplies	ON-GOING
SOCIAL WELFARE BOARD 904 S 10TH SUITE A ST JOSEPH, MO 64503	44-6000455	Other	0	60,264	FMV	Medical Supplies	ON-GOING

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SOCIETY OF ST VINCENT DE PAUL 2033 FISH HATCHERY ROAD MADISON, WI 53713	39-0824876	501(c)(3)	0	87,757	FMV	Medical Supplies	ON-GOING
SOUTH CENTRAL MISSOURI COMMUNITY Hlth cntr 1050 WEST 10TH STREET ROLLA, MO 65401	26-2522083	501(c)(3)	0	373,053	FMV	Medical Supplies	ON-GOING

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SOUTH ROUTT MEDICAL Cntr Hlth Svc DISTRICT PO BOX 8 OAK CREEK, CO 80467	84-6032810	Other	0	137,470	FMV	Medical Supplies	ON-GOING
SOUTHEAST INC 16 WEST LONG STREET COLUMBUS, OH 43215	31-0940189	501(c)(3)	0	608,888	FMV	Medical Supplies	ON-GOING

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SOUTHEAST MENTAL HEALTH SERVICES 711 BARNES AVENUE LA JUNTA, CO 81050	84-0519607	501(c)(3)	0	73,605	FMV	Medical Supplies	ON-GOING
SOUTHSIDE COMMUNITY HEALTH SERVICES INC 324 EAST 35TH STREET MINNEAPOLIS, MN 55409	23-7113799	501(c)(3)	0	11,377	FMV	Medical Supplies	ON-GOING

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHWEST BOULEVARD FAMILY HEALTH CLINIC 300 SW BOULEVARD KANSAS CITY, KS 66103	48-1067752	501(c)(3)	0	780,893	FMV	Medical Supplies	ON-GOING
SOUTHWEST IOWA MENTAL HEALTH CENTER 1500 EAST 10TH STREET ATLANTIC, IA 50022	42-0928938	501(c)(3)	0	129,453	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHWEST MISSOURI AREA COALITION 1011 W MAIN BUFFALO, MO 65622	27-3253482	501(c)(3)	0	59,733	FMV	Medical Supplies	ON-GOING
SPACE COAST VOLUNTEERS IN MEDICINE 2555 JUDGE FRAN JAMIESON VIERA, FL 32940	27-2135914	501(c)(3)	0	190,780	FMV	Medical Supplies	ON-GOING



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SPINDLETOP CENTER 655 S 8TH STREET BEAUMONT, TX 77701	74-1684198	501(c)(3)	0	4,352,248	FMV	Medical Supplies	ON-GOING
SPRING BRANCH COMMUNITY HEALTH CENTER 800 W SAM HOUSTON PKWY HOUSTON, TX 77042	30-0198705	501(c)(3)	0	70,635	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ST CHARLES MCAULEY CLINIC 5024 N GROVE OKLAHOMA CITY, OK 73122	73-0701035	501(c)(3)	0	28,689	FMV	Medical Supplies	ON-GOING
ST LUKE COMMUNITY CLINIC 316 N ROYAL AVE FRONT ROYAL, VA 22630	54-1801220	501(c)(3)	0	34,223	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ST VINCENT DE PAUL CHARITABLE PHARMACY 1125 BANK ST CINCINNATI, OH 45214	30-0272954	501(c)(3)	0	896,004	FMV	Medical Supplies	ON-GOING
ST CLARE HEALTH CLINIC 1121 S INDIANA AVE CROWN POINT, IN 46307	35-1330472	Other	0	88,436	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ST CLARE MEDICAL OUTREACH 1407 YORK ROAD LUTHERVILLE, MD 21093	52-1681044	501(c)(3)	0	1,594,869	FMV	Medical Supplies	ON-GOING
ST JOESPHS NEIGHBORHOOD CENTER 417 S Ave ROCHESTER, NY 14620	46-1176792	501(c)(3)	0	712,944	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ST JOHN BOSCO CLINIC INC 3661 S MIAMI AVENUE MIAMI, FL 33133	65-0435764	501(c)(3)	0	482,962	FMV	Medical Supplies	ON-GOING
ST JOSEPH HEALTH CENTER 510 W ADAMS ST PLYMOUTH, IN 46563	35-1142669	501(c)(3)	0	574,298	FMV	Medical Supplies	ON-GOING

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ST LUKES CLINIC 132 SEYMOUR AVE JACKSON, MI 49202	32-0038675	501(c)(3)	0	99,433	FMV	Medical Supplies	ON-GOING
ST MARTINS HEALTHCARE INC ST MARTINS HEALTHCARE GARRETT, IN 46738	20-8609620	501(c)(3)	0	34,261	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ST MARYS HEALTH WAGON 5626 PATRIOT DRIVE WISE, VA 24293	04-3739083	501(c)(3)	0	130,438	FMV	Medical Supplies	ON-GOING
ST MARYS LEGACY CLINIC 805 S NORTSHORE DR KNOXVILLE, TN 37919	46-2331706	501(c)(3)	0	261,282	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ST MARYS HEALTH CENTER 1302 DRAYTON ST SAVANNAH, GA 31401	58-2282758	501(c)(3)	0	71,530	FMV	Medical Supplies	ON-GOING
ST MICHAELS COMMUNITY SERVICES INC 1005 W 18TH STREET ANNISTON, AL 36201	63-0974974	501(c)(3)	0	696,569	FMV	Medical Supplies	ON-GOING



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ST THOMAS CLINIC 600 PAUL HAND BOULEVARD FRANKLIN, IN 46131	35-1449379	501(c)(3)	0	59,138	FMV	Medical Supplies	ON-GOING
ST VINCENT DE PAUL VILLAGE FAMILY Hlth cntr 1501 IMPERIAL AVENUE SAN DIEGO, CA 92101	33-0492302	501(c)(3)	0	64,502	FMV	Medical Supplies	ON-GOING

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ST VINCENT DEPAUL COMMUNITY PHARMACY 502 GRAMMONT ST MONROE, LA 71201	90-0014479	501(c)(3)	0	191,632	FMV	Medical Supplies	ON-GOING
ST VINCENTS MOBILE HLTH OUTREACH MINISTRY 2591 OAK STREET JACKSONVILLE, FL 32204	53-0196617	501(c)(3)	0	134,844	FMV	Medical Supplies	ON-GOING

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ST VINCENTS STUDENT FREE CLINIC 2817 POST OFFICE ST GALVESTON, TX 77550	74-1384864	501(c)(3)	0	412,863	FMV	Medical Supplies	ON-GOING
STMARYS DINING ROOM 545 WSONORA ST STOCKTON, CA 95203	94-2687280	501(c)(3)	0	7,682,027	FMV	Medical Supplies	ON-GOING

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STAYWELL HEALTH CENTER 80 PHOENIX AVENUE WATERBURY, CT 06702	22-3160873	501(c)(3)	0	187,586	FMV	Medical Supplies	ON-GOING
STEHOUWER FREE CLINIC 201 N MITCHELL CADILLAC, MI 49601	61-1401888	501(c)(3)	0	534,614	FMV	Medical Supplies	ON-GOING

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STEPHEN F AUSTIN COMMUNITY HEALTH CENTER 1612 Callaway Dr Alvin, TX 77511	41-2273820	501(c)(3)	0	8,577	FMV	Medical Supplies	EMERGENCY
STEPS INC 1033 N PINE HILLS ROAD ORLANDO, FL 32808	63-0839630	501(c)(3)	0	7,788	FMV	Medical Supplies	ON-GOING

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SU CLINICA 1706 Treasure Hills Harlingen, TX 78550	74-2357970	501(c)(3)	0	5,729	FMV	Medical Supplies	EMERGENCY
SULZBACHER HEALTH CENTER 611 E ADAMS ST JACKSONVILLE, FL 32202	59-3229898	501(c)(3)	0	2,514,351	FMV	Medical Supplies	ON-GOING

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SUMPTER FREE Medical CLINic 1083 HWY 35 SAINT STEPHEN, SC 29479	27-1097304	501(c)(3)	0	351,589	FMV	Medical Supplies	ON-GOING
SUMPTER FREE MEDICAL CLINIC 1083 HWY 35 SAINT STEPHEN, SC 29479	27-1097304	501(c)(3)	0	130,388	FMV	Medical Supplies	EMERGENCY

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SUNCOAST COMMUNITY HEALTH CENTERS INC 313 S Lakewood Drive Brandon, FL 33511	59-1741303	501(c)(3)	0	5,318	FMV	Medical Supplies	EMERGENCY
SURRY MEDICAL MINISTRIES PO BOX 349 MOUNT AIRY, NC 27030	56-1829347	501(c)(3)	0	355,873	FMV	Medical Supplies	ON-GOING



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SWAIN COUNTY CARING CORNER PO BOX 1998 BRYSON CITY, NC 28713	47-2593010	501(c)(3)	0	182,655	FMV	Medical Supplies	ON-GOING
SWEETWATER EPISCOPAL ACADEMY 251 E LAKE BRANTLEY DR LONGWOOD, FL 32779	59-2404885	501(c)(3)	0	19,319	FMV	Medical Supplies	ON-GOING

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TALBOT HOUSE MINISTRIES OF LAKE LAND INC 814 NORTH KENTUCKY AVE LAKE LAND, FL 33801	85-8012641	501(c)(3)	0	831,088	FMV	Medical Supplies	ON-GOING
TARZANA TREATMENT CENTERS INC 18646 OXNARD STREET TARZANA, CA 91356	94-2219349	501(c)(3)	0	387,910	FMV	Medical Supplies	ON-GOING

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TEMPLE COMMUNITY CLINIC 1905 CURTIS B ELLIOT DRIVE TEMPLE, TX 76501	74-2634500	501(c)(3)	0	70,681	FMV	Medical Supplies	ON-GOING
THE ARK 6450 N CALIFORNIA AVE CHICAGO, IL 60645	23-7164967	501(c)(3)	0	103,305	FMV	Medical Supplies	ON-GOING

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THE BRIDGE CLINIC 6349 WHITE BERRY LANE LOVES PARK, IL 61111	27-3097955	Other	0	96,485	FMV	Medical Supplies	ON-GOING
THE CARE CLINIC 239 ROBESON STREET FAYETTEVILLE, NC 28301	56-1837010	501(c)(3)	0	348,965	FMV	Medical Supplies	ON-GOING

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THE CENTER FOR BLACK WOMENS WELLNESS 477 WINDSOR STREET ATLANTA, GA 30312	58-2212203	501(c)(3)	0	62,743	FMV	Medical Supplies	ON-GOING
THE CLINIC 143 CHURCH ST PHOENIXVILLE, PA 19460	23-3072363	501(c)(3)	0	503,220	FMV	Medical Supplies	ON-GOING

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THE COMMUNITY FREE CLINIC OF NEWPORT NEWS 727 25TH STREET NEWPORT NEWS, VA 23607	27-3510814	501(c)(3)	0	22,837	FMV	Medical Supplies	ON-GOING
THE FLOATING HOSPITAL 4140 27TH ST LONG ISLAND CITY, NY 11101	13-1624169	501(c)(3)	0	140,076	FMV	Medical Supplies	ON-GOING

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THE FREE CLINICS OF HENDERSON COUNTY 841 CASE STREET HENDERSONVILLE, NC 28792	56-2212024	501(c)(3)	0	441,326	FMV	Medical Supplies	ON-GOING
THE FREE MEDICAL CLINIC 1875 HARDEN STREET COLUMBIA, SC 29204	57-0779279	501(c)(3)	0	131,471	FMV	Medical Supplies	ON-GOING

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THE FREE MEDICAL CLIN OF GREATER CLEVELAND 12201 EUCLID AVE CLEVELAND, OH 44106	23-7078501	501(c)(3)	0	308,259	FMV	Medical Supplies	ON-GOING
THE FRIENDSHIP CLINIC 704 LATAH BOISE, ID 83705	20-0184266	501(c)(3)	0	109,382	FMV	Medical Supplies	ON-GOING



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THE GOOD SAMARITAN CENTER 140 INd LOOP FREDERICKSBURG, TX 78624	91-2129853	501(c)(3)	0	557,391	FMV	Medical Supplies	ON-GOING
THE GOOD SAMARITAN CLINIC OF JACKSON COUNTY 293 HOSPITAL ROAD SUITE B SYLVA, NC 28779	56-2266536	501(c)(3)	0	98,227	FMV	Medical Supplies	ON-GOING

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THE GREATER BOSTON FOOD BANK 70 SOUTH BAY AVE BOSTON, MA 02118	01-1234567	501(c)(3)	0	63,548	FMV	Medical Supplies	ON-GOING
THE GREATER HUDSON VALLEY FAMILY Hlth cntr 2570 ROUTE 9W CORNWALL, NY 12518	06-1036715	501(c)(3)	0	55,158	FMV	Medical Supplies	ON-GOING

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THE LA FREE CLIN DBA SABAN COMMUNITY CLIN 8405 BEVERLY BLVD LOS ANGELES, CA 90048	95-2539105	501(c)(3)	0	10,806	FMV	Medical Supplies	ON-GOING
THE MEDINA HEALTH MINISTRY 970 E WASHINGTON STREET MEDINA, OH 44256	30-0092944	501(c)(3)	0	38,681	FMV	Medical Supplies	ON-GOING

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THE Ntnl Cntr FOR BEHAVIORAL Hlth SOLUTION 3031 IH 10 W SAN ANTONIO, TX 78201	47-0857847	501(c)(3)	0	696,742	FMV	Medical Supplies	ON-GOING
THE NEIGHBORHOOD CHRISTIAN CLINIC 1929 W FILLMORE PHOENIX, AZ 85009	86-0839580	501(c)(3)	0	117,456	FMV	Medical Supplies	ON-GOING

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THE NIGHT MINISTRY 4711 N RAVENSWOOD CHICAGO, IL 60640	36-3145764	501(c)(3)	0	7,151	FMV	Medical Supplies	ON-GOING
THE OLYMPIA FREE CLINIC 108 STATE AVE NW OLYMPIA, WA 98501	27-1606329	501(c)(3)	0	42,850	FMV	Medical Supplies	ON-GOING

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THE SALVATION ARMY 10291 MCGREGOR BLVD FT MYERS, FL 33919	58-0660607	501(c)(3)	0	335,204	FMV	Medical Supplies	ON-GOING
THE SALVATION ARMY - TEXAS DIVISION 6500 Harry Hines Blvd Dallas, TX 75235	75-0800678	501(c)(3)	0	59,050	FMV	Medical Supplies	EMERGENCY

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THE SALVATION ARMY BATON ROUGE 7361 Airline Highway Baton Rouge, LA 70805	58-0660607	501(c)(3)	0	11,271	FMV	Medical Supplies	EMERGENCY
THE SALVATION ARMY OF FLORIDA 930 East 139th Ave Tampa, FL 33613	58-0660607	501(c)(3)	0	34,180	FMV	Medical Supplies	EMERGENCY

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THE TEXAS INTL INST OF Hlth PROFESSIONS 8121 BROADWAY STREET HOUSTON, TX 77061	46-1267820	501(c)(3)	0	365,515	FMV	Medical Supplies	ON-GOING
THE VILLAGE SOUTH WESTCARE 169 EFLAGER STREET MIAMI, FL 33131	59-1452736	501(c)(3)	0	307,772	FMV	Medical Supplies	ON-GOING



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THE WAY FREE MEDICAL CLINIC INC 479 HOUSTON GREEN COVE SPRINGS, FL 32043	76-0828154	501(c)(3)	0	445,162	FMV	Medical Supplies	ON-GOING
THE WRIGHT CENTERCOMMUNITY HEALTH HUB 640 MADISON AVE SCRANTON, PA 18510	27-3582779	501(c)(3)	0	260,633	FMV	Medical Supplies	ON-GOING

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THRESHOLDS INC 4101 N RAVENSWOOD CHICAGO, IL 60613	36-2518901	501(c)(3)	0	17,555	FMV	Medical Supplies	ON-GOING
THUNDERMIST HEALTH CENTER 450 CLINTON STREET WOONSOCKET, RI 02895	05-0355097	501(c)(3)	0	67,355	FMV	Medical Supplies	ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TLC PHARMACY 555 COSTILLA ST COLORADO SPRINGS, CO 80903	84-1345520	501(c)(3)	0	32,435	FMV	Medical Supplies	ON-GOING
TOMAGWA 455 SCHOOL ST TOMAGWA TOMBALL, TX 77375	76-0280324	501(c)(3)	0	45,882	FMV	Medical Supplies	ON-GOING

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TOTAL FAMILY MEDICAL 22601 HWY 190 ROBERT, LA 70455	46-1385117	Other	0	192,057	FMV	Medical Supplies	EMERGENCY
TOTAL FAMILY MEDICAL LLC 22601 HWY 190 ROBERT, LA 70455	46-1385117	Other	0	152,786	FMV	Medical Supplies	ON-GOING

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TREASUE COAST COMMUNITY HEALTH INC 1553 US Hwy 1 VERO BEACH, FL 32962	59-3219191	501(c)(3)	0	83,646	FMV	Medical Supplies	ON-GOING
TREASURE COAST COMMUNITY HEALTH INC 1553 us hwy 1 VERO BEACH, FL 32962	59-3219191	501(c)(3)	0	5,318	FMV	Medical Supplies	EMERGENCY

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TRI CITY HEALTH PARTNERSHIP 318 WALNUT STREET SAINT CHARLES, IL 60174	36-4475369	501(c)(3)	0	9,290	FMV	Medical Supplies	ON-GOING
TRINITY CLINIC 507 4TH STREET CALVIN, OK 74531	73-1325401	501(c)(3)	0	328,518	FMV	Medical Supplies	ON-GOING

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TROPICAL TEXAS BEHAVIORAL HEALTH 1901 S 24TH AVENUE EDINBURG, TX 78539	74-1565510	501(c)(3)	0	522,863	FMV	Medical Supplies	ON-GOING
TRUE HEALTH 4930 E Lake Mary Blvd Sanford, FL 32771	59-1741286	501(c)(3)	0	11,459	FMV	Medical Supplies	EMERGENCY

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TYLER FAMILY CIRCLE OF CARE 523 SOUTH FANNIN TYLER, TX 75702	45-2578435	501(c)(3)	0	10,316	FMV	Medical Supplies	ON-GOING
UNION GOSPEL MISSION 3211 irving blvd DALLAS, TX 75247	75-6003612	501(c)(3)	0	101,562	FMV	Medical Supplies	ON-GOING



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UNION GOSPEL MISSION CLINIC 1300 N 1ST STREET YAKIMA, WA 98901	23-7050061	Other	0	329,126	FMV	Medical Supplies	ON-GOING
UNISON BEHAVIORAL HEALTH 1007 MARY STREET WAYCROSS, GA 31501	58-2107877	Other	0	166,284	FMV	Medical Supplies	ON-GOING

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UNITED MEDICAL CENTERS 2525 N Veterans Blvd Eagle Pass, TX 78852	74-1993570	501(c)(3)	0	8,611	FMV	Medical Supplies	EMERGENCY
UNIVERSITY OF LOUISVILLE 550 CLINIC 550 S JACKSON STREET LOUISVILLE, KY 40202	61-1029626	501(c)(3)	0	6,606	FMV	Medical Supplies	ON-GOING

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UNIVERSITY OF MIAMI 1601 NW 12 AVE 4067 MIAMI, FL 33136	59-0624458	501(c)(3)	0	9,092	FMV	Medical Supplies	ON-GOING
UNIVERSITY OF WI OSHKOSH LIVING Hlth clin 510 DOCTORS COURT OSHKOSH, WI 54901	39-6076856	501(c)(3)	0	205,976	FMV	Medical Supplies	ON-GOING

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UPHAMS CORNER HEALTH CENTER 500 COLUMBIA ROAD DORCHESTER, MA 02125	23-7211732	501(c)(3)	0	38,394	FMV	Medical Supplies	ON-GOING
URBAN HEALTH AND WELLNESS 645 GRANT ST SE ATLANTA, GA 30312	27-0000606	501(c)(3)	0	78,258	FMV	Medical Supplies	ON-GOING

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URBAN MINISTRIES OF WAKE COUNTY INC 1390 CAPITAL BLVD RALEIGH, NC 27603	58-1422700	501(c)(3)	0	193,024	FMV	Medical Supplies	ON-GOING
UT Hlth SCIENCE Cntr AT SAN ANTONIO-FOCUS CMHE AT UTHSCSA SAN ANTONIO, TX 78229	74-1586031	Other	0	68,450	FMV	Medical Supplies	ON-GOING

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VALLEY COMMUNITY HEALTHCARE 6801 COLDWATER CYN NORTH HOLLYWOOD, CA 91605	23-7050082	501(c)(3)	0	44,975	FMV	Medical Supplies	ON-GOING
VARIETY CARE PO BOX 250 GRANDFIELD, OK 73546	73-1088577	Other	0	1,024,397	FMV	Medical Supplies	ON-GOING

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VERA FRENCH COMMUNITY MENTAL HEALTH CENTER 1441 W CENTRAL PARK DAVENPORT, IA 52804	42-0716337	501(c)(3)	0	42,581	FMV	Medical Supplies	ON-GOING
VIRGINIA B ANDES VOLUNTEER COMMUNITIY CLIN 21297 OLEAN BLVD PORT CHARLOTTE, FL 33952	65-0958642	501(c)(3)	0	632,003	FMV	Medical Supplies	ON-GOING

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VISTA COMMUNITY HEALTH CENTER 14117 HUBBARD ST STE M SYLMAR, CA 91342	45-4642549	501(c)(3)	0	1,067,576	FMV	Medical Supplies	ON-GOING
VNAPOTTAWATTAMIE COUNTY PUBLIC HLTH DEPT 822 S MAIN ST COUNCIL BLUFFS, IA 51534	42-6004433	501(c)(3)	0	125,572	FMV	Medical Supplies	ON-GOING



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VOLUNTEER BEHAVIORAL HEALTH CARE SYSTEM 1200 S WILLOW AVE COOKEVILLE, TN 38506	62-1589440	501(c)(3)	0	128,380	FMV	Medical Supplies	ON-GOING
VOLUNTEER HEALTHCARE CLINIC 4215 MEDICAL PARKWAY AUSTIN, TX 78756	74-6082464	501(c)(3)	0	26,373	FMV	Medical Supplies	ON-GOING

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VOLUNTEERS IN MEDICINE 15 northridge HILTON HEAD ISLAND, SC 29926	57-0959206	501(c)(3)	0	110,146	FMV	Medical Supplies	EMERGENCY
VOLUNTEERS IN MEDICINE 15 northridge HILTON HEAD ISLAND, SC 29926	57-0959206	501(c)(3)	0	109,968	FMV	Medical Supplies	ON-GOING

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VOLUNTEERS IN MEDICINE 190 N PA AVE WILKES BARRE, PA 18702	20-3531527	501(c)(3)	0	10,826	FMV	Medical Supplies	ON-GOING
VOLUNTEERS IN MEDICINE- CLIN OF THE CASCADES 2300 NE NEFF RD BEND, OR 97701	93-1327847	501(c)(3)	0	205,419	FMV	Medical Supplies	ON-GOING

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VOLUNTEERS IN MEDICINE - SAN DIEGO 1457 E MADISON AVENUE EL CAJON, CA 92019	26-0057391	501(c)(3)	0	66,582	FMV	Medical Supplies	ON-GOING
VOLUNTEERS IN MEDICINE CLINIC 417 SE BALBOA AVENUE STUART, FL 34994	65-1115793	501(c)(3)	0	629,714	FMV	Medical Supplies	ON-GOING

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VOLUNTEERS IN MEDICINE CLINIC 2260 MARCOLA ROAD SPRINGFIELD, OR 97477	93-1276816	501(c)(3)	0	123,090	FMV	Medical Supplies	ON-GOING
VOLUNTEERS IN MEDICINE CLIN OF MONROE CNTY 811 W SECOND STREET BLOOMINGTON, IN 47403	20-5383915	501(c)(3)	0	142,798	FMV	Medical Supplies	ON-GOING

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VOLUNTEERS IN MEDICINE OF THE OLYMPICS PO BOX 639 PORT ANGELES, WA 98362	01-0590704	501(c)(3)	0	27,729	FMV	Medical Supplies	ON-GOING
VOLUNTEERS IN MEDICINE WILKES BARRE 190 N PA AVE WILKES BARRE, PA 18702	20-3531527	501(c)(3)	0	69,781	FMV	Medical Supplies	ON-GOING

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VOLUNTEERS IN MEDICINE INC 1039 S DUCHESNE ST CHARLES, MO 63301	43-1791543	501(c)(3)	0	127,722	FMV	Medical Supplies	ON-GOING
VOLUSIA VOLUNTEERS IN MEDICINE 113 LOCKHART STREET DAYTONA BEACH, FL 32114	47-1005976	501(c)(3)	0	19,954	FMV	Medical Supplies	ON-GOING

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WAHID MEDICAL CORP P O BOX 547 PATTERSON, CA 95363	45-3797437	Other	0	92,663	FMV	Medical Supplies	ON-GOING
WAIMANLO HEALTH CENTER 41-1347 kalaniana'ole hy WAIMANALO, HI 96795	99-0273205	Other	0	129,591	FMV	Medical Supplies	ON-GOING



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WASATCH HOMELESS HEALTH CARE INC 409 WEST 400 SOUTH SALT LAKE CITY, UT 84101	87-0569356	501(c)(3)	0	433,624	FMV	Medical Supplies	ON-GOING
WATER STREET HEALTH SERVICES 210 S PRINCE STREET LANCASTER, PA 17603	23-2798318	501(c)(3)	0	5,421	FMV	Medical Supplies	ON-GOING

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WEBSTER CITY FREE CLINIC 820 JAMES STREET WEBSTER CITY, IA 50595	42-1428706	501(c)(3)	0	44,813	FMV	Medical Supplies	ON-GOING
WEBSTER COUNTY HEALTH UNIT 233 E WASHINGTON MARSHFIELD, MO 65706	43-1533477	Other	0	6,506	FMV	Medical Supplies	ON-GOING

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WELCOME HEALTH FORMERLY NWA FREE HELTH CTR 1100 N WOOLSEY AVE FAYETTEVILLE, AR 72703	58-1691790	501(c)(3)	0	6,380	FMV	Medical Supplies	ON-GOING
WELLNESS POINTE 1107 E Marshall Ave Longview, TX 75601	75-2723993	501(c)(3)	0	10,018	FMV	Medical Supplies	EMERGENCY

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WELLNESS TREE COMMUNITY CLINIC 173 MARTIN STREET TWIN FALLS, ID 83301	26-1249939	501(c)(3)	0	625,918	FMV	Medical Supplies	ON-GOING
WESLEY CHURCH HEALTH CENTER INC 410 S PITTSBURGH ST CONNELLVILLE, PA 15425	25-1844565	501(c)(3)	0	41,275	FMV	Medical Supplies	ON-GOING

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WEST CENTRAL DISTRICT HEALTH DEPARTMENT 111 N DEWEY ST NORTH PLATTE, NE 69101	47-0879835	Other	0	441,026	FMV	Medical Supplies	ON-GOING
WEST FLORIDA COMMUNITY CARE CENTER 1221 W LAKEVIEW AVE PENSACOLA, FL 32501	59-3323051	501(c)(3)	0	32,323	FMV	Medical Supplies	ON-GOING

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WEST HAWAII COMMUNITY HEALTH CENTER 75-5751 KUAKINI HWY KAILUAKONA, HI 96740	20-0495394	501(c)(3)	0	663,722	FMV	Medical Supplies	ON-GOING
WEST PLAINS CHRISTIAN CLINIC 1117 ALASKA STREET WEST PLAINS, MO 65775	27-1307333	501(c)(3)	0	46,038	FMV	Medical Supplies	ON-GOING

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WESTCARE GULFCAOST FLORIDA INC 100 2ND AVE S ST PETERSBURG, FL 33701	59-3714627	501(c)(3)	0	455,388	FMV	Medical Supplies	ON-GOING
WESTMINSTER FREE CLINIC 5560 NAPOLEON DRIVE OAK PARK, CA 91377	77-0563241	501(c)(3)	0	373,891	FMV	Medical Supplies	ON-GOING

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WESTSIDE FAMILY HEALTHCARE 300 WATER ST WILMINGTON, DE 19801	22-2488654	501(c)(3)	0	7,587	FMV	Medical Supplies	ON-GOING
WHEELING HEALTH RIGHT INC 61-29TH ST WHEELING, WV 26003	31-1149085	501(c)(3)	0	453,696	FMV	Medical Supplies	ON-GOING



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WHOLE FAMILY HEALTH CENTER 603 INDIAN RIVER DR FORT PIERCE, FL 34950	65-0715258	501(c)(3)	0	370,468	FMV	Medical Supplies	ON-GOING
WILL-GRUNDY MEDICAL CLINIC 213 EAST CASS STREET JOLIET, IL 60432	36-3492306	501(c)(3)	0	23,664	FMV	Medical Supplies	ON-GOING

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WOFCC HOPE CLINIC PO BOX 1727 ELK CITY, OK 73648	26-1284785	501(c)(3)	0	186,597	FMV	Medical Supplies	ON-GOING
WOMENS HEALTH CONNECTIONS 205 E BARAZOS ST PALESTINE, TX 75801	20-0776090	501(c)(3)	0	16,780	FMV	Medical Supplies	ON-GOING

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WORLD REACH INC DBA BETHESDA HEALTH CENTER 133 STETSON DR CHARLOTTE, NC 28262	56-2015959	501(c)(3)	0	687,222	FMV	Medical Supplies	ON-GOING
WV HEALTH RIGHT INC 1520 WASHINGTON ST CHARLESTON, WV 25311	31-1066881	501(c)(3)	0	361,621	FMV	Medical Supplies	ON-GOING

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WV HEALTH RIGHT INC 1520 WASHINGTON ST CHARLESTON, WV 25311	31-1066881	501(c)(3)	0	6,612	FMV	Medical Supplies	EMERGENCY
MG HEALTHCARE INSIGHTS LLC 5097 PINE RIDGE DRIVE GOLDEN, CO 80403	81-4467306	501(c)(3)	7,500	0			ON-GOING

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ALL HANDS VOLUNTEERS 6 COUNTY RD SUITE 6 MATTAPOISETT, MA 02739	20-3414952	501(c)(3)	10,000	0			EMERGENCY
TOTAL FAMILY MEDICAL 22601 HWY 190 ROBERT, LA 70455	46-1385117	Other	37,000	0			EMERGENCY

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INSTITUTE FOR HEALTHCARE ADVANCEMENT 501 S IDAHO ST LA HABRA, CA 90631	33-0483197	501(c)(3)	52,113	0			ON-GOING
CHCANYS Health Center 111 Broadway Suite 1402 New York, NY 10006	13-2690296	501(c)(3)	21,853	0			ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GRACE MEDICAL HOME 51 Pennsylvania Street Orlando, FL 32806	26-1817966	501(c)(3)	20,000	0			ON-GOING
GREENVILLE FREE MEDICAL CLINIC PO BOX 8993 GREENVILLE, SC 29604	57-0855205	501(c)(3)	20,000	0			ON-GOING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST MARYS HEALTH WAGON 5626 PATRIOT DRIVE Wise, VA 24293	04-3739083	501(c)(3)	20,000	0			ON-GOING



Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
▶ Attach to Form 990.  
▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2015

Open to Public Inspection

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

Questions Regarding Compensation

	Yes	No
<b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
<b>b</b> If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	<b>1b</b>	
<b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	<b>2</b>	
<b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <div><div><input type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Approval by the board or compensation committee</div></div>		
<b>4</b> During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: <b>a</b> Receive a severance payment or change-of-control payment?	<b>4a</b>	No
<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?	<b>4b</b>	Yes
<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	<b>4c</b>	No
<b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>		
<b>5</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <b>a</b> The organization?	<b>5a</b>	No
<b>b</b> Any related organization? If "Yes," on line 5a or 5b, describe in Part III.	<b>5b</b>	No
<b>6</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: <b>a</b> The organization?	<b>6a</b>	No
<b>b</b> Any related organization? If "Yes," on line 6a or 6b, describe in Part III.	<b>6b</b>	No
<b>7</b> For persons listed on 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.	<b>7</b>	No
<b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	<b>8</b>	No
<b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	<b>9</b>	

**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 on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

**Part III**   **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
SCHEDULE J, PART I, LINE 4B	President & CEO, Michael J. Nyenhuis, participates in a Section 457(f) plan. The Foundation contributed \$15,000 into Mr. Nyenhuis' Section 457(f) plan in calendar year 2016.

Additional Data

Software ID:

Software Version:

EIN: 06-1008595

Name: AmeriCares Foundation Inc

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1Michael J Nyenhuis President & CEO	(i)	363,477	20,000	0	46,625	18,762	448,864	0
	(ii)	0	0	0	0	- 0	- 0	0
2Kevin Gilrain Senior V P , Human resources	(i)	203,025	0	0	12,300	18,854	234,179	0
	(ii)	0	0	0	0	- 0	- 0	0
3Rachel Granger V P Int'l Partnrshps&Programs	(i)	158,896	0	0	9,548	7,844	176,288	0
	(ii)	0	0	0	0	- 0	- 0	0
4Garrett Ingoglia V P , Emergency Response	(i)	139,922	0	0	8,593	10,904	159,419	0
	(ii)	0	0	0	0	- 0	- 0	0
5Geoff Kneisel V P , Corp Relations	(i)	125,042	0	0	7,725	26,138	158,905	0
	(ii)	0	0	0	0	- 0	- 0	0
6Gary LeedsV P , Finance	(i)	167,799	0	0	10,303	20,688	198,790	0
	(ii)	0	0	0	0	- 0	- 0	0
7Diana Maguire V P , Institutional Relations	(i)	153,088	0	0	9,480	28,347	190,915	0
	(ii)	0	0	0	0	- 0	- 0	0
8Lee Weiner V P , Direct Res (thru 2/17)	(i)	148,956	0	0	0	24,629	173,585	0
	(ii)	0	0	0	0	- 0	- 0	0
9Melissa Woolford V P , Leadership Gifts	(i)	145,774	0	0	8,520	628	154,922	0
	(ii)	0	0	0	0	- 0	- 0	0
10Martha kennard V P , operations	(i)	133,242	0	0	7,978	745	141,965	0
	(ii)	0	0	0	0	- 0	- 0	0
11Anne Peterson MD MPH Senior V P , Global Programs	(i)	229,081	0	0	13,905	11,191	254,177	0
	(ii)	0	0	0	0	- 0	- 0	0
12Richard K Trowbndge Jr CFO & Senior V P , Operations	(i)	253,074	0	0	15,300	24,957	293,331	0
	(ii)	0	0	0	0	- 0	- 0	0
13Christine Squires CHIEF DEV OFFicer(from 05/16)	(i)	140,549	0	0	8,438	4,829	153,816	0
	(ii)	0	0	0	0	- 0	- 0	0
14Jed Selkowitz CMO & SVP, COMMUNICATIONS	(i)	239,670	0	0	14,400	7,844	261,914	0
	(ii)	0	0	0	0	- 0	- 0	0
15dennis rice CIO & SVP, communications	(i)	183,135	0	0	11,124	25,296	219,555	0
	(ii)	0	0	0	0	- 0	- 0	0

SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
►Attach to Form 990.  
►Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization  
AmeriCares Foundation Inc

Employer identification number  
06-1008595

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	88	842,059	fair market value
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .	X	40,696,365	2,338,095,316	COST/WHOLESALE PRICE
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( <u>HYGIENE ITEMS</u> )	X	513,212	1,878,579	COST/WHOLESALE PRICE
26 Other ► ( <u>Apparel</u> )	X	296,810	1,921,817	COST/WHOLESALE PRICE
27 Other ► ( _____ )				
28 Other ► ( _____ )				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	52

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that  
it must hold for at least three years from the date of the initial contribution, and which is not required to be used  
for exempt purposes for the entire holding period? . . . . .

30a

Yes

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash  
contributions? . . . . .

32a

Yes

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,  
describe in Part II

**Part II** **Supplemental Information.**

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
Form 990, Schedule M, Line 32(b)	To the extent that Americares receives non-cash contributions in the form of donated securities, americares will use its own investment broker to sell those donated securities

**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
AmeriCares Foundation Inc

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2016**

**Open to Public  
Inspection**

**Employer identification number**

06-1008595

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
990 Review Process	Form 990, Part VI, Line 11 The Form 990 was prepared by a nationally renowned accounting firm in conjunction with the organization's financial department The Form 990 is presented to the Audit Committee of the Board of Directors by Management and its external accounting firm, once reviewed and accepted by the Audit Committee, the 990 is distributed to the full Board of Directors for their review and comment Once the Board of Directors has reviewed the Form 990, it is electronically filed with the Internal Revenue Service

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Conflict of Interest Policy	<p>Form 990, Part VI, Line 12 Section 1 Policy A Director or officer shall disclose to the Board of Directors any potential conflicts of interest in connection with proposed actions of the Corporation When any such conflict of interest is relevant to a matter requiring action by the Board of Directors, or a committee thereof, such interested Director or officer shall not vote on the matter Moreover, the interested Director or officer shall retire from the room in which the Board of Directors (or the committee) is meeting and shall not participate in the final deliberation or decision regarding the matter under consideration However, the interested director or officer shall provide the Board of Directors or committee with any and all material information Section 2 Disclosure The minutes of the meeting of the Board of Directors or committee shall reflect that a conflict of interest was disclosed and that the interested Director or officer was not present during the final discussion or vote and did not vote When there is a doubt as to whether a conflict of interest exists, the matter shall be resolved by a vote of the Board of Directors, or the committee, excluding the interested Director or officer concerning whose situation the doubt has arisen Section 3 Review of Policy This policy shall be reviewed annually for the information and guidance of directors, officers and staff members, and any new directors, officers or staff members shall be advised of the policy and furnished a disclosure statement upon undertaking the duties of such office</p>



**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Process for determining compensation	<p>Form 990, Part VI, Line 15 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 participates in the InsideNGO Salary and Benefits Survey This survey provides compensation data for President/CEO/Executive Director level positions, 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</p>

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Public disclosure of documents	Form 990, Part VI, Line 19 The foundation makes its Form 990 available to the public by retaining a copy at its place of business and on its website The Form 990 is likewise published on the internet at <a href="http://www.guidestar.org">www.guidestar.org</a> The organization's financial statements are available on its website and by request The governing documents and conflict of interest policy are not ordinarily made available to the public, but, if requested, will be provided at management's discretion

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part XI, Line 9	Change in Value of Split Interest Agreement -\$130,842

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization  
AmeriCares Foundation Inc

Employer identification number  
06-1008595

Part I

Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II

Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) AmeriCares Free Clinics Inc 88 Hamilton Avenue  Stamford, CT 06902 06-1422741	Health care	CT	501(c)(3)	7	na	Yes	

**Part III Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

**Part V Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .		No
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	Yes	
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .		No
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .	Yes	
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .		No
<b>f</b> Dividends from related organization(s) . . . . .		No
<b>g</b> Sale of assets to related organization(s) . . . . .		No
<b>h</b> Purchase of assets from related organization(s) . . . . .		No
<b>i</b> Exchange of assets with related organization(s) . . . . .		No
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .		No
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .		No
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .		No
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .		No
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .		No
<b>o</b> Sharing of paid employees with related organization(s) . . . . .		No
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .		No
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	Yes	
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .		No
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .		No

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)AMERICARES FREE CLINICS INC	B	1,352,910	fmv (goods)
(2)AMERICARES FREE CLINICS INC	Q	74,946	Cost
(3)AMERICARES FREE CLINICS INC	D	300,000	Loan Guarantee

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

**Part VII**   **Supplemental Information**

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

Return Reference	Explanation
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