

PUBLIC DISCLOSURE COPY

**Application for Extension of Time To File an Exempt Organization  
Return or Excise Taxes Related to Employee Benefit Plans**File a separate application for each return.  
Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.

OMB No. 1545-0047

**Electronic filing (e-file).** You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit [www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits).

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Part I - Identification**

<b>Type or Print</b>  File by the due date for filing your return. See instructions.	Name of exempt organization, employer, or other filer, see instructions.  DIRECT RELIEF	Taxpayer identification number (TIN)  95-1831116
	Number, street, and room or suite no. If a P.O. box, see instructions. 6100 WALLACE BECKNELL ROAD	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SANTA BARBARA, CA 93117	

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name \_\_\_\_\_  
Plan Number \_\_\_\_\_  
Plan Year Ending (MM/DD/YYYY) \_\_\_\_\_

**Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)**

The books are in the care of DIRECT RELIEF, JONATHAN STEINER  
6100 WALLACE BECKNELL ROAD - SANTA BARBARA, CA 93117

Telephone No. 805-964-4767 Fax No. \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 15, 20 25, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
☐ calendar year 20 \_\_\_\_ or  
☒ tax year beginning JUL 1, 20 23, and ending JUN 30, 20 24

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return  
☐ Change in accounting period

<b>3a</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	0.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	0.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2024)

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

Department of the Treasury  
Internal Revenue Service

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.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**2023**

Open to Public Inspection

**A** For the **2023** calendar year, or tax year beginning **JUL 1, 2023** and ending **JUN 30, 2024**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization DIRECT RELIEF  Doing business as  Number and street (or P.O. box if mail is not delivered to street address) Room/suite 6100 WALLACE BECKNELL ROAD  City or town, state or province, country, and ZIP or foreign postal code SANTA BARBARA, CA 93117  <b>F</b> Name and address of principal officer: JONATHAN STEINER SAME AS C ABOVE	<b>D</b> Employer identification number 95-1831116  <b>E</b> Telephone number 805-964-4767  <b>G</b> Gross receipts \$ 2,561,765,493.  <b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions  <b>H(c)</b> Group exemption number
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: WWW.DIRECTRELIEF.ORG		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		<b>L</b> Year of formation: 1948
<b>M</b> State of legal domicile: CA		

**Part I Summary**

<b>Activities &amp; Governance</b>	1	Briefly describe the organization's mission or most significant activities: IMPROVE THE HEALTH AND LIVES OF PEOPLE AFFECTED BY POVERTY OR EMERGENCY SITUATIONS.			
	2	Check this box <input type="checkbox"/> 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)	3	14	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	14	
	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	144	
	6	Total number of volunteers (estimate if necessary)	6	181	
	<b>Revenue</b>	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b		Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
8		Contributions and grants (Part VIII, line 1h)	2,260,445,639.	2,372,144,401.	
9		Program service revenue (Part VIII, line 2g)	0.	0.	
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,317,844.	11,234,987.	
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.	
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,266,763,483.	2,383,379,388.	
<b>Expenses</b>		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,893,689,540.	1,882,818,737.
		14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
		15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	16,966,928.	19,625,220.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.	
	b	Total fundraising expenses (Part IX, column (D), line 25)	3,191,499.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	160,514,759.	463,155,533.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,071,171,227.	2,365,599,490.	
<b>Net Assets or Fund Balances</b>	19	Revenue less expenses. Subtract line 18 from line 12	195,592,256.	17,779,898.	
	20	Total assets (Part X, line 16)	1,170,526,870.	1,186,035,572.	
	21	Total liabilities (Part X, line 26)	33,480,459.	30,043,037.	
	22	Net assets or fund balances. Subtract line 21 from line 20	1,137,046,411.	1,155,992,535.	

**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.

<b>Sign Here</b>	Signature of officer JONATHAN STEINER, VP OF FINANCE/CFO Type or print name and title	Date
<b>Paid Preparer Use Only</b>	Print/Type preparer's name LAUREN A. HAVERLOCK	Preparer's signature LAUREN A. HAVERLOCK
	Date 02/10/25	Check if self-employed <input type="checkbox"/> PTIN P00545829
<b>Preparer Use Only</b>	Firm's name MOSS ADAMS LLP	Firm's EIN 91-0189318
	Firm's address 21700 OXNARD ST. STE 300 WOODLAND HILLS, CA 91367	Phone no. 818-577-1900

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

**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:

IMPROVE THE HEALTH AND LIVES OF PEOPLE AFFECTED BY POVERTY OR  
EMERGENCY SITUATIONS BY MOBILIZING AND PROVIDING ESSENTIAL MEDICAL  
RESOURCES NEEDED FOR THEIR CARE.

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

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

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

If "Yes," describe these changes on Schedule O.

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

**4a** (Code: ) (Expenses \$ 1,489,587,437. including grants of \$ 1,255,704,756. ) (Revenue \$ )  
COMMUNITY HEALTH - DIRECT RELIEF, THROUGH ITS COMMUNITY HEALTH  
INITIATIVES, EQUIPS HEALTH PROFESSIONALS IN LOW-RESOURCE SETTINGS WITH  
THE MEDICAL RESOURCES THEY NEED TO DIAGNOSE, TREAT, AND CARE FOR THEIR  
PATIENTS - REGARDLESS OF ABILITY TO PAY. IN THE FISCAL YEAR 2024,  
DIRECT RELIEF PROVIDED MATERIAL AND FINANCIAL SUPPORT TO MORE THAN  
2,400 COMMUNITY HEALTH PROVIDERS IN 93 COUNTRIES. THIS INCLUDES THE  
U.S., WHERE DIRECT RELIEF OPERATES THE NATION'S LARGEST CHARITABLE  
MEDICINE PROGRAM FOR COMMUNITY HEALTH CENTERS AND NONPROFIT CLINICS IN  
ALL 50 STATES. AS A RESULT OF DIRECT RELIEF'S SUPPORT, ORGANIZATIONS  
AND HEALTH PROVIDERS CAN FOCUS THEIR TIME AND RESOURCES ON EXPANDING  
AND IMPROVING THEIR SERVICES INSTEAD OF PROCURING MEDICINE AND  
SUPPLIES.

**4b** (Code: ) (Expenses \$ 544,982,385. including grants of \$ 338,732,875. ) (Revenue \$ )  
DISASTER RESPONSE - DIRECT RELIEF, THROUGH ITS DISASTER RESPONSE  
PROGRAMS, ADDRESSES THE NEEDS OF VULNERABLE COMMUNITIES BEFORE  
DISASTERS STRIKE BY PRE POSITIONING EMERGENCY MEDICAL MATERIALS WITH  
HEALTHCARE FACILITIES IN AREAS AT RISK FROM NATURAL DISASTERS. WHEN  
DISASTERS OCCUR, DIRECT RELIEF LEVERAGES ITS NETWORK OF HEALTHCARE  
PROVIDERS TO ASSESS IMMEDIATE NEEDS, UNDERSTAND THE SITUATION, AND  
RESPOND QUICKLY AND PRECISELY. DIRECT RELIEF'S EFFORTS ARE ALWAYS  
IN RESPONSE TO SPECIFIC REQUESTS FROM LOCAL PARTNERS AND IN ACCORDANCE  
WITH NATIONAL AND INTERNATIONAL RESPONDERS TO AVOID DUPLICATION OF  
EFFORTS AND PREVENT LOGISTICAL BOTTLENECKS, AND ENSURE THE MOST  
EFFICIENT USE OF RESOURCES.

**4c** (Code: ) (Expenses \$ 316,254,605. including grants of \$ 284,341,595. ) (Revenue \$ )  
DISEASE PREVENTION AND TREATMENT - TO ALLEVIATE THE DISEASE BURDEN IN  
RESOURCE CONSTRAINED COMMUNITIES AROUND THE WORLD, DIRECT RELIEF  
SUPPORTS A GLOBAL NETWORK OF LOCALLY-RUN HEALTH FACILITIES WITH THE  
MEDICINES, MEDICAL SUPPLIES, AND FUNDING. IN THE FISCAL YEAR 2024,  
DIRECT RELIEF PROVIDED HEALTHCARE PARTNERS IN 53 COUNTRIES WITH 68.8  
MILLION COURSES OF MEDICATION TO TREAT CONDITIONS THAT INCLUDE CANCER,  
DIABETES, HIV/AIDS AND RARE DISEASES. DIRECT RELIEF ALSO SUPPORTS  
PROGRAMS TO ADVANCE BREAST CANCER AWARENESS AND EARLY DETECTION, HIV  
PREVENTION AND TESTING AND CERVICAL CANCER SCREENING, AS WELL AS  
COMPREHENSIVE DIABETES PREVENTION AND TREATMENT PROGRAMS THAT INCLUDE  
ASSISTANCE FOR CHILDREN WITH TYPE 1 DIABETES.

**4d** Other program services (Describe on Schedule O.)

(Expenses \$ 3,059,613. including grants of \$ 4,039,511. ) (Revenue \$ )

**4e** Total program service expenses 2,353,884,040.Form **990** (2023)

**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)? <i>If "Yes," complete Schedule A</i>	<b>1</b> X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	<b>2</b> X	
<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? <i>If "Yes," complete Schedule C, Part I</i>	<b>3</b>	X
<b>4</b> <b>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? <i>If "Yes," complete Schedule C, Part II</i>	<b>4</b>	X
<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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	<b>5</b>	X
<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? <i>If "Yes," complete Schedule D, Part I</i>	<b>6</b>	X
<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? <i>If "Yes," complete Schedule D, Part II</i>	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<b>8</b>	X
<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? <i>If "Yes," complete Schedule D, Part IV</i>	<b>9</b>	X
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	<b>10</b> X	
<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? <i>If "Yes," complete Schedule D, Part VI</i>	<b>11a</b> X	
<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? <i>If "Yes," complete Schedule D, Part VII</i>	<b>11b</b>	X
<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? <i>If "Yes," complete Schedule D, Part VIII</i>	<b>11c</b>	X
<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? <i>If "Yes," complete Schedule D, Part IX</i>	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<b>11e</b> X	
<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)? <i>If "Yes," complete Schedule D, Part X</i>	<b>11f</b> X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<b>12a</b>	X
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	<b>12b</b> X	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b> X	
<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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	<b>14b</b> X	
<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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<b>15</b> X	
<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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	<b>16</b>	X
<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? <i>If "Yes," complete Schedule G, Part I. See instructions</i>	<b>17</b>	X
<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? <i>If "Yes," complete Schedule G, Part II</i>	<b>18</b>	X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>	
<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>	<b>21</b> X	

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

	Yes	No
<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> .....	<b>22</b>	X
<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> .....	<b>23</b>	X
<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> .....	<b>24a</b>	X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	<b>24b</b>	
<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>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	<b>24d</b>	
<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> .....	<b>25a</b>	X
<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> .....	<b>25b</b>	X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....	<b>26</b>	X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....	<b>27</b>	X
<b>28</b> Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28a</b>	X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28b</b>	X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> .....	<b>29</b>	X
<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> .....	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....	<b>31</b>	X
<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> .....	<b>32</b>	X
<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> .....	<b>33</b>	X
<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> .....	<b>34</b>	X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	<b>35a</b>	X
<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> .....	<b>35b</b>	X
<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> .....	<b>36</b>	X
<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> .....	<b>37</b>	X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O .....	<b>38</b>	X

**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 .....	<b>1a</b>	60
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....	<b>1b</b>	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? .....	<b>1c</b>	X

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

	Yes	No
<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		
<b>2a</b> 144		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
<b>3b</b>		
<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)?	X	
<b>b</b> If "Yes," enter the name of the foreign country SOUTH AFRICA, MEXICO		
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?		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>5c</b>		
<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?		X
<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>6b</b>		
<b>7 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?		X
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year	7d	
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>7g</b>		
<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>7h</b>		
<b>8 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>8</b>		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?		
<b>9a</b>		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter:		
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	10a	
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11 Section 501(c)(12) organizations.</b> Enter:		
<b>a</b> Gross income from members or shareholders	11a	
<b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a 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	12b	
<b>13 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	13b	
<b>c</b> Enter the amount of reserves on hand	13c	
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
<b>14b</b>		
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X
If "Yes," see the instructions and file Form 4720, Schedule N.		
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		X
If "Yes," complete Form 4720, Schedule O.		
<b>17 Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		
If "Yes," complete Form 6069.		
<b>17</b>		

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

	1a	14	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year ..... 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 on Schedule O.		14		
<b>b</b> Enter the number of voting members included on line 1a, above, who are independent .....	<b>1b</b>	14		
<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>	X
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .....			<b>3</b>	X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .....			<b>4</b>	X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? .....			<b>5</b>	X
<b>6</b> Did the organization have members or stockholders? .....			<b>6</b>	X
<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>	X
<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>	X
<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>	X
<b>b</b> Each committee with authority to act on behalf of the governing body? .....			<b>8b</b>	X
<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 on Schedule O .....			<b>9</b>	X

**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>	X
<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>	X
<b>b</b> Describe on 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>	X
<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>	X
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done .....	<b>12c</b>	X
<b>13</b> Did the organization have a written whistleblower policy? .....	<b>13</b>	X
<b>14</b> Did the organization have a written document retention and destruction policy? .....	<b>14</b>	X
<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>	X
<b>b</b> Other officers or key employees of the organization .....	<b>15b</b>	X
If "Yes" to line 15a or 15b, describe the process on 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>	X
<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**

**17** List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY

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

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

**20** State the name, address, and telephone number of the person who possesses the organization's books and records  
 DIRECT RELIEF, JONATHAN STEINER - 805-964-4767  
 6100 WALLACE BECKNELL ROAD, SANTA BARBARA, CA 93117



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

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

☒**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(1) THOMAS TIGHE CHIEF EXECUTIVE OFFICER	40.00 5.00			X				567,776.	0.	51,561.
(2) DAWN LONG SENIOR VP, COO (THRU 09/23)	40.00 5.00			X				350,619.	0.	19,272.
(3) JONATHAN STEINER VP OF FINANCE, CFO	40.00 5.00			X				326,299.	0.	27,369.
(4) HEATHER BENNETT CHIEF OF STAFF	40.00 0.00				X			297,069.	0.	20,713.
(5) DONALD ROANE - VP, CORPORATION ENGAGEMENT & STRATEGY	40.00 0.00				X			257,982.	0.	50,355.
(6) ADAN GROUMAN DIRECTOR, IT	40.00 0.00				X			249,538.	0.	27,056.
(7) DOUG FROELICH DIRECTOR OF OPERATIONS	40.00 0.00				X			220,964.	0.	32,444.
(8) ZAHRA NAHAR-MOORE - DIRECTOR, LEGAL & REGULATORY AFFAIRS	40.00 0.00				X			226,389.	0.	20,379.
(9) BYRON SCOTT, MD - VICE CHAIR (THRU 01/24)/PRES./COO (AS OF 01/24)	40.00 0.00			X				0.	0.	0.
(10) MARK LINEHAN CHAIR	10.00 1.00	X		X				0.	0.	0.
(11) THOMAS STURGESS TREASURER/COMMITTEE CHAIR	5.00 1.00	X		X				0.	0.	0.
(12) SIRI MARSHALL SECRETARY/COMMITTEE CHAIR	5.00 1.00	X		X				0.	0.	0.
(13) HARRY MCMAHON, ASST TREAS.(THRU 01/24)/V. CHAIR(AS OF 01/24)/COMM CH	5.00 1.00	X		X				0.	0.	0.
(14) ANNALISA PIZZARELLO ASST SECRETARY/COMMITTEE CHAIR	5.00 1.00	X		X				0.	0.	0.
(15) MARY DWYER, PHD COMMITTEE CHAIR	5.00 1.00	X						0.	0.	0.
(16) PAMELA GANN COMMITTEE CHAIR	5.00 1.00	X						0.	0.	0.
(17) JAMES MCGONIGLE COMMITTEE CHAIR	5.00 1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(18) MARK SCHWARTZ COMMITTEE CHAIR	5.00 1.00	X						0.	0.	0.
(19) JAMES SELBERT COMMITTEE CHAIR	5.00 1.00	X						0.	0.	0.
(20) ELIZABETH TORO, MD MPH COMMITTEE CHAIR	5.00 1.00	X						0.	0.	0.
(21) STAYCE D. HARRIS DIRECTOR	2.00 1.00	X						0.	0.	0.
(22) MARLA SALMON, SCD, RN, FAAN DIRECTOR	2.00 1.00	X						0.	0.	0.
(23) LAURIE SIEGEL DIRECTOR	2.00 1.00	X						0.	0.	0.
<b>1b Subtotal</b> .....								2,496,636.	0.	249,149.
<b>c Total from continuation sheets to Part VII, Section A</b> .....								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b> .....								2,496,636.	0.	249,149.

**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

49

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual* .....
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual* .....
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person* .....

	Yes	No
<b>3</b>		X
<b>4</b>	X	
<b>5</b>		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
IRW CONCIERGE SERVICES, LUIS VIGOREAUX AVE NO 1353 PMB 721, GUAYNABO, PUERTO RICO 00	CONTRACT SERVICES	574,400.
AMERICAN MICROGRID SOLUTIONS LLC 7076 EDMOND AVENUE, EASTON, MD 21601	HEALTH SITE ASSESSMENTS	529,242.
PENDULUM SYSTEMS, INC., 300 NEW JERSEY AVENUE, SUITE 900, WASHINGTON, DC 20001	PHARMACEUTICAL SUBSCRIPTION SERVICES	506,250.
SOCIETY OF CRITICAL CARE MEDICINE 500 MIDWAY DRIVE, MOUNT PROSPECT, IL 60056	CONFERENCE SERVICES	339,535.
4 MEDIA, INC., 702 SE 5TH STREET, SUITE 26, BENTONVILLE, AR 72712	PRESS BROADCAST CAMPAIGN	260,500.
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	21	

Form **990** (2023)

**Part VIII Statement of Revenue**

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

☒ X

				(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>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>	3,709,369.				
	<b>e</b> Government grants (contributions) .....	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	2,368,435,032.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 2,298,781,077.				
	<b>h Total.</b> Add lines 1a-1f .....						
<b>Program Service Revenue</b>			<b>Business Code</b>				
	<b>2 a</b> .....						
	<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 .....						
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....			11,566,029.			11,566,029.
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real (ii) Personal				
	<b>b</b> Less: rental expenses ...	<b>6b</b>					
	<b>c</b> Rental income or (loss) .....	<b>6c</b>					
	<b>d</b> Net rental income or (loss) .....						
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities (ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>					
	<b>c</b> Gain or (loss) .....	<b>7c</b>					
	<b>d</b> Net gain or (loss) .....						
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>					
	<b>b</b> Less: direct expenses .....	<b>8b</b>					
	<b>c</b> Net income or (loss) from fundraising events .....						
	<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>					
<b>b</b> Less: direct expenses .....	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
<b>b</b> Less: cost of goods sold .....	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory .....							
<b>Miscellaneous Revenue</b>			<b>Business Code</b>				
	<b>11 a</b> .....						
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....						
<b>12 Total revenue.</b> See instructions .....				2,383,379,388.	0.	0.	11,234,987.

**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

☒ X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	341,417,393.	341,417,393.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....	1,541,401,344.	1,541,401,344.		
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	1,430,043.	426,151.	679,502.	324,390.
<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) .....				
<b>7</b> Other salaries and wages .....	14,364,608.	9,942,473.	3,053,972.	1,368,163.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) .....	752,281.	516,383.	161,723.	74,175.
<b>9</b> Other employee benefits .....	1,978,162.	1,189,699.	612,453.	176,010.
<b>10</b> Payroll taxes .....	1,100,126.	726,578.	256,213.	117,335.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....	199,182.	4,656.	194,526.	
<b>c</b> Accounting .....	144,049.	51,594.	92,430.	25.
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees .....				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	6,929,146.	5,941,861.	738,963.	248,322.
<b>12</b> Advertising and promotion .....	683,013.	524,651.	47,966.	110,396.
<b>13</b> Office expenses .....	221,181.	114,288.	87,171.	19,722.
<b>14</b> Information technology .....	558,608.	374,373.	33,234.	151,001.
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....	1,042,579.	949,050.	66,208.	27,321.
<b>17</b> Travel .....	1,462,430.	1,189,909.	176,113.	96,408.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	1,313,870.	1,115,308.	124,173.	74,389.
<b>20</b> Interest .....				
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	1,281,101.	1,230,578.	30,073.	20,450.
<b>23</b> Insurance .....	1,220,753.	795,489.	253,128.	172,136.
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on 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 ADJ-SEE SCH O	430,794,729.	430,794,729.		
<b>b</b> FREIGHT/TRANSPORTATION	10,881,866.	10,881,866.		
<b>c</b> SUPPLIES	1,333,486.	1,198,726.	93,932.	40,828.
<b>d</b> DUES AND SUBSCRIPTIONS	921,620.	435,614.	336,927.	149,079.
<b>e</b> All other expenses	4,167,920.	2,661,327.	1,485,244.	21,349.
<b>25</b> Total functional expenses. Add lines 1 through 24e	2,365,599,490.	2,353,884,040.	8,523,951.	3,191,499.
<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 X

☒

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	2,884,559.	<b>1</b>	5,630,476.
	<b>2</b> Savings and temporary cash investments .....	60,432,023.	<b>2</b>	34,939,157.
	<b>3</b> Pledges and grants receivable, net .....	15,856,234.	<b>3</b>	14,941,438.
	<b>4</b> Accounts receivable, net .....		<b>4</b>	
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....	125,785.	<b>7</b>	171,226.
	<b>8</b> Inventories for sale or use .....	864,423,207.	<b>8</b>	926,411,374.
	<b>9</b> Prepaid expenses and deferred charges .....	7,371,143.	<b>9</b>	4,008,523.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 51,162,455.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 13,565,054.		
	<b>11</b> Investments - publicly traded securities .....	175,234,593.	<b>11</b>	153,689,474.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	5,470,272.	<b>15</b>	8,646,503.
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	1,170,526,870.	<b>16</b>	1,186,035,572.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	8,326,955.	<b>17</b>	4,739,442.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<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 .....	25,153,504.	<b>25</b>	25,303,595.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	33,480,459.	<b>26</b>	30,043,037.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	971,580,379.	<b>27</b>	1,025,025,988.
	<b>28</b> Net assets with donor restrictions .....	165,466,032.	<b>28</b>	130,966,547.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	1,137,046,411.	<b>32</b>	1,155,992,535.
	<b>33</b> Total liabilities and net assets/fund balances .....	1,170,526,870.	<b>33</b>	1,186,035,572.

Form **990** (2023)

**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>	2,383,379,388.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	2,365,599,490.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	17,779,898.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	1,137,046,411.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-448,576.
<b>6</b>	Donated services and use of facilities	<b>6</b>	1,614,802.
<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 on Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	1,155,992,535.

**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 on 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		X
<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	X	
<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 on Schedule O.	X	
<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 Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____		X
<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 on Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2023)

Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2023

**Open to Public Inspection**

Name of the organization

## DIRECT RELIEF

Employer identification number

95-1831116

<b>Part I</b>	<b>Reason for Public Charity Status.</b> (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).)
  - ☐ 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 **section 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 on 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). \_\_\_\_\_

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		
<b>Total</b>						

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	1998070429.	1926179325.	2216517807.	2260407639.	2372144401.	10773319601.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	1998070429.	1926179325.	2216517807.	2260407639.	2372144401.	10773319601.
<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) .....						5551795845.
<b>6 Public support.</b> Subtract line 5 from line 4.						5221523756.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>7</b> Amounts from line 4 .....	1998070429.	1926179325.	2216517807.	2260407639.	2372144401.	10773319601.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	1,274,067.	56,035.	310,742.	6,317,844.	11,566,029.	19,524,717.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						10792844318.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

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

<b>14</b> Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	48.38	%
<b>15</b> Public support percentage from 2022 Schedule A, Part II, line 14 .....	<b>15</b>	46.97	%
<b>16a 33 1/3% support test - 2023.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....			<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2022.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2023.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2022.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....			<input type="checkbox"/>

Schedule A (Form 990) 2023



**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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 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 2023 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2022 Schedule A, Part III, line 15 .....	<b>16</b>	%

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

<b>17</b> Investment income percentage for <b>2023</b> (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2022</b> Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2023.** 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 - 2022.** 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 box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
<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 Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<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 Part VI when and how the organization made the determination.</i>		
<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 Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<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 Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<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 Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<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>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<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 Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<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 Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<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>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>		

**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 on lines 11b and 11c below, the governing body of a supported organization?		
<b>11a</b>		
<b>b</b> A family member of a person described on line 11a above?		
<b>11b</b>		
<b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<b>1</b>		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
<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)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
<b>1</b>		

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

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

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

	Yes	No
<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 <b>Part VI</b> how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<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? If "Yes," then in <b>Part VI</b> 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.		
<b>2a</b>		
<b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<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? If "Yes" or "No" provide details in <b>Part VI</b> .		
<b>3a</b>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.		
<b>3b</b>		

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

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

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

  

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

  

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2023

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

		Current Year
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>
<b>6</b>	Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2023 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

<b>Section E - Distribution Allocations</b> (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
<b>1</b> Distributable amount for 2023 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2023			
<b>a</b> From 2018			
<b>b</b> From 2019			
<b>c</b> From 2020			
<b>d</b> From 2021			
<b>e</b> From 2022			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2023 distributable amount			
<b>i</b> Carryover from 2018 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2023 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2023 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2024.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2019			
<b>b</b> Excess from 2020			
<b>c</b> Excess from 2021			
<b>d</b> Excess from 2022			
<b>e</b> Excess from 2023			

Schedule A (Form 990) 2023

## 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.)

**Schedule B**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**Attach to Form 990, 990-EZ, or 990-PF.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023**

Name of the organization

DIRECT RELIEF

Employer identification number

95-1831116

Organization type (check one):

**Filers of:****Section:**

Form 990 or 990-EZ

☒ 501(c)( 3 ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.**Special Rules**☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... \$ .....**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

Name of organization	Employer identification number
DIRECT RELIEF	95-1831116

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 425,006,828.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 246,869,491.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 219,362,087.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 208,203,863.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 202,642,015.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 199,661,979.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization	Employer identification number
DIRECT RELIEF	95-1831116

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 93,744,655.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 86,142,655.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 74,066,106.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
10		\$ 71,600,499.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
11		\$ 60,697,957.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
12		\$ 55,429,937.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
DIRECT RELIEF	95-1831116

**Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	PHARMACEUTICALS	\$ 425,006,828.	07/06/23
2	PHARMACEUTICALS	\$ 246,869,491.	07/05/22
3	PHARMACEUTICALS	\$ 219,362,087.	07/14/23
4	PHARMACEUTICALS	\$ 207,811,453.	07/31/23
5	PHARMACEUTICALS, MEDICAL EQUIPMENT	\$ 202,642,015.	07/03/23
6	PHARMACEUTICALS	\$ 198,706,596.	07/14/23

Name of organization	Employer identification number
DIRECT RELIEF	95-1831116

**Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	PHARMACEUTICALS	\$ 93,621,938.	07/06/23
8	PHARMACEUTICALS	\$ 86,116,079.	07/05/23
9	PHARMACEUTICALS	\$ 74,066,106.	08/04/23
10	PHARMACEUTICALS, MEDICAL EQUIPMENT	\$ 71,425,499.	07/03/23
11	PHARMACEUTICALS	\$ 60,615,030.	07/03/23
12	PHARMACEUTICALS	\$ 55,347,421.	07/05/23

Name of organization	Employer identification number
	95-1831116

DIRECT RELIEF

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

Complete if the organization answered "Yes" on Form 990,  
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

Open to Public  
Inspection

Name of the organization

DIRECT RELIEF

Employer identification number

95-1831116

**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 (for example, recreation or education)	<input type="checkbox"/> Preservation of a 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.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included on line 2a .....	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year .....

4 Number of states where property subject to conservation easement is located .....

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year .....

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year .....

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB 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 FASB 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 FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....

b Assets included in Form 990, Part X .....

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2023

**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 make significant use of its collection items (check all that apply).

**a** ☐ Public exhibition

**d** ☐ Loan or exchange program

**b** ☐ Scholarly research

**e** ☐ Other \_\_\_\_\_

**c** ☐ Preservation for future generations

**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:

	Amount
<b>1c</b> Beginning balance	
<b>1d</b> Additions during the year	
<b>1e</b> Distributions during the year	
<b>1f</b> Ending balance	

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	68,976,027.	58,702,139.	62,341,309.	34,600,273.	36,975,634.
<b>b</b> Contributions	4,156,000.	6,882,708.	15,081.	21,313,784.	6,680,042.
<b>c</b> Net investment earnings, gains, and losses	8,333,000.	6,423,506.	-82,761.	10,021,573.	821,558.
<b>d</b> Grants or scholarships	3,709,194.	3,032,326.	3,571,490.	3,208,883.	2,687,197.
<b>e</b> Other expenditures for facilities and programs					6,919,743.
<b>f</b> Administrative expenses				385,438.	270,021.
<b>g</b> End of year balance	77,755,833.	68,976,027.	58,702,139.	62,341,309.	34,600,273.

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

**a** Board designated or quasi-endowment 100 %

**b** Permanent endowment .0000 %

**c** Term endowment .0000 %

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

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

(i) Unrelated organizations? \_\_\_\_\_

(ii) Related organizations? \_\_\_\_\_

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

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

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land		8,705,985.		8,705,985.
<b>b</b> Buildings		32,243,901.	4,790,224.	27,453,677.
<b>c</b> Leasehold improvements				
<b>d</b> Equipment		4,261,386.	3,362,035.	899,351.
<b>e</b> Other		5,951,183.	5,412,795.	538,388.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				37,597,401.

Schedule D (Form 990) 2023

**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) .....		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

**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) .....		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

**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) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, col. (B))	

**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	
(2) OTHER CURRENT LIABILITIES	22,936,472.
(3) ACCRUED PAYROLL EXPENSES	2,367,123.
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B))	25,303,595.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... ☒

Schedule D (Form 990) 2023

**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>	2,387,102,390.
<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>	-448,576.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	4,171,578.
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	3,723,002.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	2,383,379,388.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<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>	0.
<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>	2,383,379,388.

**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>	2,368,159,889.
<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>	2,556,776.
<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>	3,623.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	2,560,399.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	2,365,599,490.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<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>	0.
<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>	2,365,599,490.

**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.

PART V, LINE 4:

BOARD DESIGNATED ENDOWMENT: DIRECT RELIEF FOUNDATION MAINTAINS CUSTODY OF

THE BOARD RESTRICTED INVESTMENT FUND (BRIF), WHICH IS A BOARD DESIGNATED

ENDOWMENT. DIRECT RELIEF FOUNDATION WAS FORMED AS A SUPPORTING

ORGANIZATION OF DIRECT RELIEF. THE FOUNDATION IS ORGANIZED TO OPERATE

SOLELY AND EXCLUSIVELY TO SUPPORT, BENEFIT, OR CARRY OUT THE PURPOSES OF

DIRECT RELIEF. THE PURPOSE OF THE BRIF IS TO PROVIDE A RESERVE FOR CURRENT

AND FUTURE OPERATIONS OF DIRECT RELIEF. THE BRIF ALSO PROVIDES FUNDING TO

PAY FOR ALL OF DIRECT RELIEF'S FUNDRAISING EXPENSES AND SOME MANAGEMENT

AND GENERAL EXPENSES. FOR THE YEAR ENDED JUNE 30, 2024, THE DIRECT RELIEF

FOUNDATION TRUSTEES APPROVED FOR THE BRIF TO PROVIDE FUNDS COVERING ALL OF

DIRECT RELIEF'S FUNDRAISING EXPENSES AS WELL AS 100% OF THE COMPENSATION



**Part XIII** Supplemental Information (continued)

OF THE CEO.

PART X, LINE 2:

THE ORGANIZATION IS EXEMPT FROM TAXES ON INCOME UNDER INTERNAL REVENUE

CODE SECTION 501(C)(3) AND CALIFORNIA REVENUE AND TAXATION CODE 23701D.

THEREFORE, NO AMOUNTS FOR INCOME TAXES ARE REFLECTED IN THE ACCOMPANYING

CONSOLIDATED FINANCIAL STATEMENTS. THE ORGANIZATION HAD INCONSEQUENTIAL

UNRELATED BUSINESS INCOME TAX DURING THE YEAR ENDED JUNE 30, 2024 AND 2023

AND NO TAX PROVISION HAS BEEN MADE IN THE ACCOMPANYING CONSOLIDATED

FINANCIAL STATEMENTS.

THE ORGANIZATION HAD NO UNCERTAIN TAX POSITIONS REQUIRING ACCRUAL AS OF

JUNE 30, 2024 AND 2023.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

OTHER	3,623.
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**SCHEDULE F  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Statement of Activities Outside the United States**

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

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**Open to Public  
Inspection

Name of the organization

Employer identification number

DIRECT RELIEF

95-1831116

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

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... ☒ **Yes** ☐ **No**

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

**3 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 the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
NORTH AMERICA (CANADA AND MEXICO)	1	2	PROGRAM SERVICES	COORDINATION OF MEDICAL SUPPORT TO DOCTORS AND MEDICAL CLINICS IN MEXICO	28,013.
SUB-SAHARAN AFRICA	1	1	PROGRAM SERVICES	COORDINATION OF MEDICAL SUPPORT TO DOCTORS AND MEDICAL CLINICS IN AFRICA	66,020.
SOUTH AMERICA	0	1	PROGRAM SERVICES	COORDINATION OF MEDICAL SUPPORT TO DOCTORS AND MEDICAL CLINICS IN SOUTH AMERICA	21,653.
CENTRAL AMERICA & THE CARIBBEAN	0	1	PROGRAM SERVICES	COORDINATION OF MEDICAL SUPPORT TO DOCTORS AND MEDICAL CLINICS IN THE BAHAMAS	51,967.
SOUTH ASIA	0	3	PROGRAM SERVICES	COORDINATION OF MEDICAL SUPPORT TO DOCTORS AND MEDICAL CLINICS IN INDIA	53,168.
EUROPE	1	7	PROGRAM SERVICES	COORDINATION OF MEDICAL SUPPORT TO DOCTORS AND MEDICAL CLINICS IN THE BALKANS, ESTONIA,	870,034.
EAST ASIA & THE PACIFIC	1	2	PROGRAM SERVICES	COORDINATION OF MEDICAL SUPPORT TO DOCTORS AND MEDICAL CLINICS IN ASEAN REGION	181,510.
RUSSIA AND THE NEWLY INDEPENDENT STATES	0	2	PROGRAM SERVICES	COORDINATION OF MEDICAL SUPPORT TO DOCTORS AND MEDICAL CLINICS IN UKRAINE	181,807.
<b>3 a Subtotal</b> .....	4	19			1,454,172.
<b>b Total from continuation sheets to Part I</b> .....	0	0			1533665318.
<b>c Totals</b> (add lines 3a and 3b) .....	4	19			1535119490.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2023

SEE PART V FOR COLUMN (E) DESCRIPTIONS

**Part I** Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(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	0	0	GRANTMAKING	PROVISION OF PHARMACEUTICALS, MEDICAL EQUIPMENT, AND SUPPLIES	70,631,355.
EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING	PROVISION OF PHARMACEUTICALS, MEDICAL EQUIPMENT, AND SUPPLIES	111,278,465.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	GRANTMAKING	PROVISION OF PHARMACEUTICALS, MEDICAL EQUIPMENT, AND SUPPLIES	9,083,166.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING	PROVISION OF PHARMACEUTICALS, MEDICAL EQUIPMENT, AND SUPPLIES	306,645,277.
RUSSIA AND NEIGHBORING STATES	0	0	GRANTMAKING	PROVISION OF PHARMACEUTICALS, MEDICAL EQUIPMENT, AND SUPPLIES	376,995,923.
SOUTH AMERICA	0	0	GRANTMAKING	PROVISION OF PHARMACEUTICALS, MEDICAL EQUIPMENT, AND SUPPLIES	53,762,205.
SOUTH ASIA	0	0	GRANTMAKING	PROVISION OF PHARMACEUTICALS, MEDICAL EQUIPMENT, AND SUPPLIES	198,948,919.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING	PROVISION OF PHARMACEUTICALS, MEDICAL EQUIPMENT, AND SUPPLIES	386,528,202.
NORTH AMERICA	0	0	GRANTMAKING	PROVISION OF PHARMACEUTICALS, MEDICAL EQUIPMENT, AND SUPPLIES	456,013.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTMAKING		2,680,035.
<b>Totals</b> .....					

**Part I** Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		518,985.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	GRANTMAKING		5,804,232.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING		3,069,201.
NORTH AMERICA	0	0	GRANTMAKING		228,000.
RUSSIA AND NEIGHBORING STATES	0	0	GRANTMAKING		3,457,600.
SOUTH AMERICA	0	0	GRANTMAKING		970,000.
SOUTH ASIA	0	0	GRANTMAKING		1,554,800.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING		241,145.
NORTH AMERICA (CANADA AND MEXICO)	0	0	INVESTMENTS		800,507.
SUB-SAHARAN AFRICA	0	0	INVESTMENTS		11,288.
<b>Totals</b> .....					1533665318.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	HEALTHCARE PROVIDER SUPPORT	830,035.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CARIBBEAN RESILIENCY FUND	540,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CARIBBEAN RESILIENCY FUND	500,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CARIBBEAN RESILIENCY FUND	200,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CARIBBEAN RESILIENCY FUND	150,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CARIBBEAN RESILIENCY FUND	150,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CARIBBEAN RESILIENCY FUND	100,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CARIBBEAN RESILIENCY FUND	50,000.	WIRE	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ..... 339

3 Enter total number of other organizations or entities ..... 155

Schedule F (Form 990) 2023

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	CARIBBEAN RESILIENCY FUND	50,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CARIBBEAN RESILIENCY FUND	50,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CARIBBEAN RESILIENCY FUND	50,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	GENERAL HEALTHCARE PROVIDER SUPPORT	10,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CARIBBEAN RESILIENCY FUND	275,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CARIBBEAN RESILIENCY FUND	200,000.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN		0.		24,508,905.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		7,570,520.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		3,808,302.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN		0.		2,632,039.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		2,477,512.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		2,364,242.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		2,304,060.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		2,224,930.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		2,026,420.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		1,624,399.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		1,460,055.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		1,336,275.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN		0.		1,336,275.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		1,336,275.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		1,193,147.	PHARMACEUTICALS, OTHER	ESTIMATED WHOLESAL PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		876,368.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		857,020.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		828,913.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		812,200.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		812,200.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		581,059.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE



**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN		0.		558,111.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		555,799.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		484,056.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		456,247.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		448,711.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		444,723.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		436,930.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		433,522.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		379,026.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN		0.		365,040.	EQUIPMENT	PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		327,423.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		323,887.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		288,109.	MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		275,740.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		267,255.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		264,897.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		255,175.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		231,843.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN		0.		98,428.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		85,442.	MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		70,927.	EQUIPMENT	PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		65,412.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		63,054.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		54,084.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		49,416.	OTHER, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		46,171.	MEDICAL SUPPLIES, EQUIPMENT	PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		42,703.	MEDICAL SUPPLIES, EQUIPMENT	PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN		0.		40,962.	MEDICAL SUPPLIES, EQUIPMENT	PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		37,590.	MEDICAL SUPPLIES, EQUIPMENT	PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		37,399.	OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		30,578.	EQUIPMENT	PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		26,559.	EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		20,178.	OTHER	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		20,108.	OTHER	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		20,108.	OTHER	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		18,153.	OTHER	ESTIMATED WHOLESALE PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN		0.		12,949.	EQUIPMENT	PURCHASED PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		11,342.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		CENTRAL AMERICA AND THE CARIBBEAN		0.		7,866.	EQUIPMENT	PURCHASED PRICE
		EAST ASIA AND THE PACIFIC	UKRAINE CRISIS RELIEF & RECOVERY	300,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	AUSTRALIA WILDFIRES RELIEF & RECOVERY	218,985.	WIRE	0.		
		EAST ASIA AND THE PACIFIC		0.		79,725,793.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		EAST ASIA AND THE PACIFIC		0.		11,580,200.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		EAST ASIA AND THE PACIFIC		0.		8,737,052.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE
		EAST ASIA AND THE PACIFIC		0.		7,681,503.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		1,028,568.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		EAST ASIA AND THE PACIFIC		0.		1,001,795.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		EAST ASIA AND THE PACIFIC		0.		590,152.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		EAST ASIA AND THE PACIFIC		0.		319,644.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		EAST ASIA AND THE PACIFIC		0.		170,504.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		EAST ASIA AND THE PACIFIC		0.		125,716.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		EAST ASIA AND THE PACIFIC		0.		109,058.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		EAST ASIA AND THE PACIFIC		0.		91,857.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		EAST ASIA AND THE PACIFIC		0.		56,386.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		52,373.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		EAST ASIA AND THE PACIFIC		0.		7,866.	EQUIPMENT	PURCHASED PRICE
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TURKEY/SYRIA EATHQUAKE RELIEF & RECOVERY	782,636.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	GENERAL EMERGENCY PREP & RESPONSE	652,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TURKEY/SYRIA EATHQUAKE RELIEF & RECOVERY	650,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	UKRAINE CRISIS RELIEF & RECOVERY	600,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TURKEY/SYRIA EATHQUAKE RELIEF & RECOVERY	550,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TURKEY/SYRIA EATHQUAKE RELIEF & RECOVERY	515,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TURKEY/SYRIA EATHQUAKE RELIEF & RECOVERY	375,000.	WIRE	0.		

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TURKEY/SYRIA EATHQUAKE RELIEF & RECOVERY	330,596.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TURKEY/SYRIA EATHQUAKE RELIEF & RECOVERY	255,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TURKEY/SYRIA EATHQUAKE RELIEF & RECOVERY	210,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	UKRAINE CRISIS RELIEF & RECOVERY	200,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TURKEY/SYRIA EATHQUAKE RELIEF & RECOVERY	175,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	GENERAL DISEASE PREVENTION & TREATMENT	173,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	GENERAL EMERGENCY PREP & RESPONSE	100,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TURKEY/SYRIA EATHQUAKE RELIEF & RECOVERY	100,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	ISRAEL/PALESTINE RELIEF & RECOVERY	50,000.	WIRE	0.		



**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TURKEY/SYRIA EARTHQUAKE RELIEF & RECOVERY	35,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TURKEY/SYRIA EARTHQUAKE RELIEF & RECOVERY	34,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	LONG BONE MALAWI & FISTULA REPAIR PROGRAM	17,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)		0.		3,235,180.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		EUROPE (INCLUDING ICELAND AND GREENLAND)		0.		1,943,113.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		EUROPE (INCLUDING ICELAND AND GREENLAND)		0.		1,431,005.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		EUROPE (INCLUDING ICELAND AND GREENLAND)		0.		1,364,733.	MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		EUROPE (INCLUDING ICELAND AND GREENLAND)		0.		492,292.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		EUROPE (INCLUDING ICELAND AND GREENLAND)		0.		307,292.	MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)		0.		140,391.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		EUROPE (INCLUDING ICELAND AND GREENLAND)		0.		54,145.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		EUROPE (INCLUDING ICELAND AND GREENLAND)		0.		39,973.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		EUROPE (INCLUDING ICELAND AND GREENLAND)		0.		20,226.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		EUROPE (INCLUDING ICELAND AND GREENLAND)		0.		20,001.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		EUROPE (INCLUDING ICELAND AND GREENLAND)		0.		15,214.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		EUROPE (INCLUDING ICELAND AND GREENLAND)		0.		14,393.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA	ISRAEL/PALESTINE RELIEF & RECOVERY	500,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	MOROCCO EARTHQUAKE RELIEF & RECOVERY	311,000.	WIRE	0.		

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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	ISRAEL/PALESTINE RELIEF & RECOVERY	250,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	ISRAEL/PALESTINE RELIEF & RECOVERY	200,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	ISRAEL/PALESTINE RELIEF & RECOVERY	200,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	ISRAEL/PALESTINE RELIEF & RECOVERY	200,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	ISRAEL/PALESTINE RELIEF & RECOVERY	200,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	TURKEY/SYRIA EARTHQUAKE RELIEF & RECOVERY, YEMEN CRISIS	200,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	ISRAEL/PALESTINE RELIEF & RECOVERY	200,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	EMERGENCY PREP & RESPONSE	180,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	ISRAEL/PALESTINE RELIEF & RECOVERY	125,000.	WIRE	0.		

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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	MOROCCO EARTHQUAKE RELIEF & RECOVERY	105,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	ISRAEL/PALESTINE RELIEF & RECOVERY	100,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	LIBYA FLOOD RELIEF & RECOVERY	78,201.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	ISRAEL/PALESTINE RELIEF & RECOVERY	75,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	MOROCCO EARTHQUAKE RELIEF & RECOVERY	70,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	ISRAEL/PALESTINE RELIEF & RECOVERY	50,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	MOROCCO EARTHQUAKE RELIEF & RECOVERY	25,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA	ISRAEL/PALESTINE RELIEF & RECOVERY	70,000.	WIRE	0.		
		MIDDLE EAST AND NORTH AFRICA		0.		84,323,817.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		51,544,397.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		34,818,385.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		26,670,026.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		17,482,979.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		15,492,732.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		12,566,489.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		9,401,158.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		6,623,954.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		6,043,260.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		4,749,091.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		4,596,395.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		4,269,726.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		3,683,421.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		3,219,097.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		3,188,635.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		3,078,511.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		2,971,638.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		2,119,821.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		1,456,052.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		1,197,671.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		1,163,647.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		1,150,808.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		900,352.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		866,510.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		639,126.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		428,957.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		415,384.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		263,374.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		258,949.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		201,915.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		171,754.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		147,322.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		115,344.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		75,184.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		61,864.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		47,185.	EQUIPMENT	PURCHASED PRICE



**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		47,009.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		45,491.	MEDICAL SUPPLIES, EQUIPMENT	PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		40,500.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		37,577.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		34,926.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		23,577.	MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		MIDDLE EAST AND NORTH AFRICA		0.		11,268.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		NORTH AMERICA	MEXICO EMERGENCY PREP AND RESPONSE	228,000.	WIRE	0.		
		NORTH AMERICA		0.		80,799.	MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA		0.		49,406.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		NORTH AMERICA		0.		22,305.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		NORTH AMERICA		0.		14,003.	EQUIPMENT	PURCHASED PRICE
		NORTH AMERICA		0.		12,415.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		NORTH AMERICA		0.		7,252.	EQUIPMENT	PURCHASED PRICE
		NORTH AMERICA (CANADA AND MEXICO)	SUPPORT OF RELATED PARTY ORGANIZATION IN MEXICO	1,556,250.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	UKRAINE CRISIS RELIEF & RECOVERY	1,270,000.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	UKRAINE CRISIS RELIEF & RECOVERY	565,000.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	UKRAINE CRISIS RELIEF & RECOVERY	500,000.	WIRE	0.		

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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 NEIGHBORING STATES	UKRAINE CRISIS RELIEF & RECOVERY	315,000.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	UKRAINE CRISIS RELIEF & RECOVERY	266,000.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	UKRAINE CRISIS RELIEF & RECOVERY	150,000.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	UKRAINE CRISIS RELIEF & RECOVERY	150,000.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	UKRAINE CRISIS RELIEF & RECOVERY	100,000.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	UKRAINE CRISIS RELIEF & RECOVERY	100,000.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	UKRAINE CRISIS RELIEF & RECOVERY	40,000.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES		0.		126,113,776.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		RUSSIA AND NEIGHBORING STATES		0.		48,254,052.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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 NEIGHBORING STATES		0.		47,613,094.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		RUSSIA AND NEIGHBORING STATES		0.		28,464,702.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		RUSSIA AND NEIGHBORING STATES		0.		24,058,427.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		23,533,698.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		RUSSIA AND NEIGHBORING STATES		0.		13,598,994.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		13,428,272.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		11,762,674.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		RUSSIA AND NEIGHBORING STATES		0.		10,790,498.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		7,659,559.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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 NEIGHBORING STATES		0.		5,754,581.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		3,597,537.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		3,273,865.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		1,892,523.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		RUSSIA AND NEIGHBORING STATES		0.		1,887,975.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		1,666,876.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		1,034,282.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		864,681.	EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		RUSSIA AND NEIGHBORING STATES		0.		852,018.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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 NEIGHBORING STATES		0.		814,365.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		210,004.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		130,211.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		38,210.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		33,492.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		12,445.	OTHER	ESTIMATED WHOLESAL PRICE
		RUSSIA AND NEIGHBORING STATES		0.		7,581.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SOUTH AMERICA	COLOMBIA MIGRANT CRISIS RELIEF	850,000.	WIRE	0.		
		SOUTH AMERICA	CHILE WILDFIRES RELIEF & RECOVERY	70,000.	WIRE	0.		

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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	BRAZIL FLOODS RELIEF & RECOVERY	50,000.	WIRE	0.		
		SOUTH AMERICA		0.		11,966,432.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		SOUTH AMERICA		0.		10,994,145.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		SOUTH AMERICA		0.		7,724,522.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SOUTH AMERICA		0.		4,522,928.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		SOUTH AMERICA		0.		4,475,801.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH AMERICA		0.		3,407,870.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SOUTH AMERICA		0.		2,994,218.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE
		SOUTH AMERICA		0.		1,661,293.	EQUIPMENT	ESTIMATED WHOLESALE PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		1,377,464.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH AMERICA		0.		1,284,165.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SOUTH AMERICA		0.		986,850.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH AMERICA		0.		913,561.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SOUTH AMERICA		0.		368,656.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SOUTH AMERICA		0.		348,494.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH AMERICA		0.		260,162.	MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH AMERICA		0.		195,641.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH AMERICA		0.		116,035.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE



**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		60,465.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SOUTH AMERICA		0.		43,691.	EQUIPMENT	PURCHASED PRICE
		SOUTH AMERICA		0.		25,200.	EQUIPMENT	PURCHASED PRICE
		SOUTH AMERICA		0.		14,032.	PHARMACEUTICALS, EQUIPMENT	PURCHASED PRICE
		SOUTH AMERICA		0.		12,372.	OTHER, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SOUTH AMERICA		0.		8,207.	EQUIPMENT	PURCHASED PRICE
		SOUTH ASIA	COVID19 INDIA RELIEF & RECOVERY	650,000.	WIRE	0.		
		SOUTH ASIA	COVID19 INDIA RELIEF & RECOVERY	550,000.	WIRE	0.		
		SOUTH ASIA	GENERAL EMERGENCY PREP & RESPONSE	145,000.	WIRE	0.		

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		SOUTH ASIA	GENERAL EMERGENCY PREP & RESPONSE	130,000.	WIRE	0.		
		SOUTH ASIA	COVID19 INDIA RELIEF & RECOVERY	42,500.	WIRE	0.		
		SOUTH ASIA	FEDEX EMERGENCY SUPPORT FUND	25,000.	WIRE	0.		
		SOUTH ASIA	CHAL FOUNDATION PAKISTAN	10,000.	WIRE	0.		
		SOUTH ASIA		0.		58,368,626.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		17,705,565.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		16,787,925.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		9,593,100.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		8,793,675.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

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		SOUTH ASIA		0.		5,995,688.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		5,995,688.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		5,595,975.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		5,196,263.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		4,087,954.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		4,082,198.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		3,597,413.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		3,199,022.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		3,197,700.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE

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		SOUTH ASIA		0.		2,853,873.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		2,797,988.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		2,797,988.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		2,775,136.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		2,763,761.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		2,483,625.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		2,353,018.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		1,998,563.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		1,433,836.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

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		SOUTH ASIA		0.		1,281,828.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		1,199,138.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		1,199,138.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		1,184,633.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		1,040,259.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		1,024,273.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		945,339.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		832,000.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		831,133.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

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		SOUTH ASIA		0.		811,333.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		805,602.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		733,784.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		564,406.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		525,696.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		516,667.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		488,987.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		483,038.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		414,665.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE

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		SOUTH ASIA		0.		407,658.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		407,658.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		407,415.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		399,713.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		399,693.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		397,081.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		379,772.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		379,575.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		351,090.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

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		SOUTH ASIA		0.		347,666.	PHARMACEUTICALS	ESTIMATED WHOLESale PRICE
		SOUTH ASIA		0.		344,259.	OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESale PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		343,825.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESale PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		301,300.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESale PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		276,217.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESale PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		258,451.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESale PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		244,561.	PHARMACEUTICALS	ESTIMATED WHOLESale PRICE
		SOUTH ASIA		0.		234,839.	PHARMACEUTICALS	ESTIMATED WHOLESale PRICE
		SOUTH ASIA		0.		214,855.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESale PRICE, PURCHASED PRICE



**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		193,611.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		175,419.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		173,653.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		157,312.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		151,516.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		150,059.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		135,775.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		129,987.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		129,493.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		128,397.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		126,698.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		126,173.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		124,236.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		116,498.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		99,302.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		96,277.	EQUIPMENT	PURCHASED PRICE
		SOUTH ASIA		0.		94,799.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		81,754.	EQUIPMENT	PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		80,052.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		78,974.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		63,459.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		63,057.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		57,512.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		57,512.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		49,868.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		43,223.	MEDICAL SUPPLIES, EQUIPMENT	PURCHASED PRICE
		SOUTH ASIA		0.		37,003.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		35,452.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		32,527.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		31,726.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		28,306.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		28,205.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		27,251.	EQUIPMENT	PURCHASED PRICE
		SOUTH ASIA		0.		25,837.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		25,735.	MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		24,182.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		23,455.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		20,320.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		17,929.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		17,164.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		16,625.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		16,625.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		15,861.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		15,500.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SOUTH ASIA		0.		14,274.	EQUIPMENT	PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		13,884.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		12,658.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		11,901.	EQUIPMENT	PURCHASED PRICE
		SOUTH ASIA		0.		11,901.	EQUIPMENT	PURCHASED PRICE
		SOUTH ASIA		0.		11,901.	EQUIPMENT	PURCHASED PRICE
		SOUTH ASIA		0.		9,926.	MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SOUTH ASIA		0.		9,227.	EQUIPMENT	PURCHASED PRICE
		SOUTH ASIA		0.		9,227.	EQUIPMENT	PURCHASED PRICE
		SOUTH ASIA		0.		9,227.	EQUIPMENT	PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		9,227.	EQUIPMENT	PURCHASED PRICE
		SOUTH ASIA		0.		9,227.	EQUIPMENT	PURCHASED PRICE
		SOUTH ASIA		0.		9,227.	EQUIPMENT	PURCHASED PRICE
		SOUTH ASIA		0.		9,227.	EQUIPMENT	PURCHASED PRICE
		SOUTH ASIA		0.		8,537.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		7,089.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA	GENERAL HEALTHCARE PROVIDER SUPPORT	90,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL EMERGENCY PREP & RESPONSE	62,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL EMERGENCY PREP & RESPONSE	34,085.	WIRE	0.		

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<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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	TAKEDA CAP PROGRAM	8,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	SUPPORT OF RELATED PARTY ORGANIZATION IN SOUTH AFRICA	48,650.	WIRE	0.		
		SUB-SAHARAN AFRICA		0.		154,808,016.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		31,212,039.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		21,527,529.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		16,103,597.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		15,478,002.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		12,129,274.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		10,879,393.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE



**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		9,898,719.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		8,832,989.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		8,585,058.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		8,461,542.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		7,779,948.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		7,391,738.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		7,119,876.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		7,084,151.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		5,749,609.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE

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		SUB-SAHARAN AFRICA		0.		4,974,313.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		SUB-SAHARAN AFRICA		0.		4,407,888.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		SUB-SAHARAN AFRICA		0.		3,581,530.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		3,193,804.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE
		SUB-SAHARAN AFRICA		0.		3,135,061.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		2,939,312.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		SUB-SAHARAN AFRICA		0.		2,584,886.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		2,544,390.	PHARMACEUTICALS	ESTIMATED WHOLESALE PRICE
		SUB-SAHARAN AFRICA		0.		2,443,097.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE

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		SUB-SAHARAN AFRICA		0.		2,150,711.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		1,648,274.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		1,502,201.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		1,456,102.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		1,305,371.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		1,245,859.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		1,232,624.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		1,082,308.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		1,069,056.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		922,787.	MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		859,809.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		612,399.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		553,102.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		535,080.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		528,567.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		518,135.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		490,795.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		453,011.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE

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		SUB-SAHARAN AFRICA		0.		427,788.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		424,608.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		390,399.	PHARMACEUTICALS, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		314,797.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		267,971.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		261,008.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		242,738.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		230,514.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		209,236.	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE

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		SUB-SAHARAN AFRICA		0.		179,616.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		163,063.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		150,059.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		145,780.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		138,044.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		115,825.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		97,730.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		82,321.	MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		81,532.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		79,570.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		78,577.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		75,642.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		75,490.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		75,319.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		75,064.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		71,582.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		67,131.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		64,809.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		56,517.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		55,809.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		55,654.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		53,248.	EQUIPMENT	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		51,825.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		50,117.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		47,942.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		47,006.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		44,451.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESAL PRICE



**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		38,547.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESale PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		30,844.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESale PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		29,921.	PHARMACEUTICALS	ESTIMATED WHOLESale PRICE
		SUB-SAHARAN AFRICA		0.		29,410.	PHARMACEUTICALS	ESTIMATED WHOLESale PRICE
		SUB-SAHARAN AFRICA		0.		28,162.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESale PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		26,648.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESale PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		20,483.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESale PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		20,297.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESale PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		19,638.	EQUIPMENT	PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		18,873.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		18,771.	PHARMACEUTICALS	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		15,392.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE
		SUB-SAHARAN AFRICA		0.		15,102.	MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		13,996.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		13,847.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		9,340.	MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		7,205.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESAL PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA		0.		6,546.	EQUIPMENT	PURCHASED PRICE

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

<b>1</b> (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) 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		0.		6,219.	MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE
		SUB-SAHARAN AFRICA		0.		6,066.	MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE
		SUB-SAHARAN AFRICA		0.		5,874.	MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE
		SUB-SAHARAN AFRICA		0.		5,874.	MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE
		SUB-SAHARAN AFRICA		0.		5,173.	EQUIPMENT	ESTIMATED WHOLESALE PRICE
		SUB-SAHARAN AFRICA		0.		164,693.	PHARMACEUTICALS, MEDICAL SUPPLIES	ESTIMATED WHOLESALE PRICE
		SOUTH ASIA		0.		96,633.	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE
		NORTH AMERICA (CANADA AND MEXICO)		0.		8,508.	MEDICAL SUPPLIES, EQUIPMENT	ESTIMATED WHOLESALE PRICE, PURCHASED PRICE
		SUB-SAHARAN AFRICA	GENERAL HEALTHCARE PROVIDER SUPPORT	41,560.	WIRE	0.		

Part III can be duplicated if additional space is needed.

[illegible]

**Part IV Foreign Forms**

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the 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 the Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ..... ☐ Yes ☒ No
- 3** Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the 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 the 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 the 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 the Instructions for Form 5713; don't file with Form 990)* ..... ☒ Yes ☐ No

Schedule F (Form 990) 2023

**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.

PART I, LINE 2:

EXCEPT IN CERTAIN EMERGENCY RESPONSE SITUATIONS WHERE THE TIMELINESS OF

OUR RESPONSE IS PARAMOUNT, GRANT RECIPIENTS SIGN MEMORANDUMS OF

UNDERSTANDING OUTLINING THE RESPONSIBILITIES OF DIRECT RELIEF AND THE

GRANTEE. REPORTING BY THE GRANTEE VARIES BASED ON THE SIZE, SCOPE, AND

TYPE OF PROGRAM, RANGING FROM MONTHLY, QUARTERLY, OR ANNUAL REPORTING,

WITH A FINAL REPORT DUE UPON COMPLETION OF THE PROJECT. DIRECT RELIEF

ALSO HAS THE RIGHT TO AND DOES MAKE SITE VISITS TO GRANTEES TO ENSURE

COMPLIANCE WITH THE PROJECT PROPOSAL; THIS IS ESPECIALLY THE CASE WHEN IT

COMES TO THE MONITORING OF OUR SUPPORT OF GRANTEES IN EMERGENCY RESPONSE

SITUATIONS.

PART I, LINE 3:

THE ORGANIZATION USED ACCRUAL METHOD FOR ACCOUNTING FOR EXPENDITURES

OUTSIDE THE U.S.

PART I, LINE 3, COLUMN (E):

REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: COORDINATION OF MEDICAL

SUPPORT TO DOCTORS AND MEDICAL CLINICS IN THE BALKANS, ESTONIA,

NETHERLANDS, POLAND AND TURKEY

**SCHEDULE I**  
**(Form 990)**

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.**  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

Name of the organization

DIRECT RELIEF

**Employer identification number**

95-1831116

**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.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
1ST CHOICE HEALTHCARE 1300 CREASON ROAD CORNING, AR 72422	71-0715998	501(C)(3)	0.	349,252.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
A PROMISE TO HELP 516 TUSCALOOSA AVENUE SW BIRMINGHAM, AL 35211	47-1137244	501(C)(3)	0.	15,089.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
A+ COUNSELING CENTER AND A+ HEALTH CENTER - 10905 FORT WASHINGTON ROAD - FORT WASHINGTON, MD 20744	59-3812335	501(C)(3)	0.	255,204.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
AAHC DBA HOPE HEALTH PHARMACY 13930 BELLAIRE BOULEVARD HOUSTON, TX 77083	31-1756818	501(C)(3)	0.	244,693.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ABINGTON- JEFFERSON HEALTH THE ABINGTON OB/GYN CENTER - 1200 OLD YORK ROAD - ABINGTON, PA 19001	23-1352152	501(C)(3)	0.	119,758.	PURCHASED PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ACACIA MEDICAL MISSION 1781 E. AMMANN ROAD BULVERDE, TX 78163	90-0401594	501(C)(3)	0.	639,636.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 1,139.

**3** Enter total number of other organizations listed in the line 1 table 6.

**For Paperwork Reduction Act Notice, see the Instructions for Form 990.**

**Schedule I (Form 990) 2023**

SEE PART IV FOR COLUMNS (G) AND (H) DESCRIPTIONS

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACCESS CARROLL 10 DISTILLERY DRIVE, SUITE 200 WESTMINSTER, MD 21157	20-2146701	501(C)(3)	0.	44,011.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ACCESS HEALTH LOUISIANA ST. CHARLES COMMUNITY HEALTH CENTER - 843 MILLING AVENUE - LULING, LA 70070	47-0852944	501(C)(3)	0.	10,272.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ACCESS SUPPORT NETWORK 223 JOHN STREET SALINAS, CA 93901	77-0205717	501(C)(3)	0.	24,369.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ACCESSHEALTH 400 AUSTIN STREET RICHMOND, TX 77469	74-1951476	501(C)(3)	200,000.	0.			CHAS TO PREVENT UNINTENDED PREGNANCY
ADA CAMP 180 AMERICAN DIABETES ASSOCIATION - 210A LOS PINETOS - TORREON, NM 87061	13-1623888	501(C)(3)	0.	12,254.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ADA CAMP COLORADO AMERICAN DIABETES ASSOCIATION - 16565 COUNTY ROAD 162 - NATHROP, CO 81236	13-1623888	501(C)(3)	0.	22,454.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ADA CAMP COURAGE AMERICAN DIABETES ASSOCIATION - 134 CAMP SOLES LANE - ROCKWOOD, PA 15557	13-1623888	501(C)(3)	0.	12,824.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ADA CAMP DISCOVERY AMERICAN DIABETES ASSOCIATION - 3243 E MURDOCK - WICHITA, KS 67208	13-1623888	501(C)(3)	0.	6,726.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ADA CAMP EDI AMERICAN DIABETES ASSOCIATION - 13528 SSR-AA - POTOSI, MO 63664	13-1623888	501(C)(3)	0.	5,732.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ADA CAMP FREEDOM AMERICAN DIABETES ASSOCIATION - 3500 CIVIC CENTER BOULEVARD - PHILADELPHIA, PA 19104	13-1623888	501(C)(3)	0.	5,318.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ADA CAMP GRANADA AMERICAN DIABETES ASSOCIATION - 55 E. MONROE STREET - CHICAGO, IL 60603	13-1623888	501(C)(3)	0.	8,331.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ADA CAMP MAVERICK AMERICAN DIABETES ASSOCIATION - 8000 WEST 78TH STREET SUITE 175 - EDINA, MN 55439	13-1623888	501(C)(3)	0.	13,258.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ADA CAMP MIDICHA AMERICAN DIABETES ASSOCIATION YMCA CAMP COPNECONIC - 10407 NORTH FENTON ROAD - FENTON, MI 48430	13-1623888	501(C)(3)	0.	16,363.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ADA CAMP NEEDLEPOINT AND DAYPOINT AMERICAN DIABETES ASSOCIATION - ADA, 8000 WEST 78TH STREET, SUITE 175 - EDINA, MN 55439	13-1623888	501(C)(3)	0.	10,060.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ADAMS COMPASSIONATE HEALTHCARE 4431 BROOKFIELD CORPORATE DRIVE CHANTILLY, VA 20151	46-1959130	501(C)(3)	0.	48,355.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ADAPT INTEGRATED HEALTH CARE 621 W MADRONE STREET ROSEBURG, OR 97470	93-0611783	501(C)(3)	0.	47,165.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ADVENTHEALTH WATERMAN COMMUNITY CLINIC - 2300 KURT STREET - EUSTIS, FL 32726	59-3140669	501(C)(3)	0.	89,249.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
AFFINIA HEALTHCARE 2524 HADLEY STREET SAINT LOUIS, MO 63016	43-0817642	501(C)(3)	0.	7,948.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AGAPE COMMUNITY HEALTH CENTER, INC 1680 DUNN AVENUE JACKSONVILLE, FL 32218	16-1660966	501(C)(3)	0.	52,650.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
AGAPE HEALTH CLINIC 314 S. MAIN STREET PRATT, KS 67124	90-0682101	501(C)(3)	0.	26,512.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
AGHABY COMPREHENSIVE 349 W. COMPTON BOULEVARD COMPTON, CA 90220	46-2637814	501(C)(3)	0.	50,070.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
AHS FAMILY HEALTH CENTER 2424 W. PETERSON AVENUE CHICAGO, IL 60659	01-0567661	501(C)(3)	150,000.	0.			PFIZER INFECTIOUS DISEASE AWARDS
AIZER HEALTH 49 FOREST ROAD MONROE, NY 10950	13-3595755	501(C)(3)	0.	5,024.	ESTIMATED WHOLESALE PRICE, PURCHASED	OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
AKRON CHILDREN'S HOSPITAL DIABETES CAMP CENTER FOR DIABETES & ENDOCRINOLOGY - 215 W. BOWERY STREET, SUITE 6400 - AKRON, OH	34-0714357	501(C)(3)	0.	13,721.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
AKRON COMMUNITY DEVELOPMENT ASSOCIATION/MINORITY BEHAVIOR HEALT - 1293 COPLEY ROAD - AKRON, OH 44320-2766	34-1965936	501(C)(3)	225,000.	0.			ABBVIE HEALTH EQUITY
ALABAMA FREE CLINIC 212 COURTHOUSE SQUARE BAY MINETTE, AL 36507	63-1247879	501(C)(3)	0.	49,533.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ALABAMA INTERFAITH REFUGEE PARTNERSHIP - P.O. BOX 130632 - BIRMINGHAM, AL 35213	84-3210964	501(C)(3)	60,000.	0.			FUND FOR HEALTH EQUITY

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ALAMEDA COUNTY HEALTH CARE FOR THE HOMELESS - 1404 FRANKLIN STREET NO. 200 - OAKLAND, CA 94612	94-6000501	ALAMEDA COUNTY	0.	15,034.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ALASKA NATIVE HERITAGE CENTER 8800 HERITAGE CENTER DRIVE ANCHORAGE, AK 99504	92-0127531	501(C)(3)	10,000.	0.			GENERAL U.S. EMERGENCY PREP & RESPONSE
ALBEMARLE HOSPITAL FOUNDATION 918 GREENLEAF STREET ELIZABETH CITY, NC 27909	43-2031990	501(C)(3)	0.	185,667.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ALBRECHT FREE CLINIC 908 WASHINGTON STREET WEST BEND, WI 53095	39-1839654	501(C)(3)	0.	49,922.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ALCORN STATE UNIVERSITY FAMILY CLINIC - 15 CAMPUS DRIVE - NATCHEZ, MS 39120	64-0538018	501(C)(3)	0.	77,486.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ALL FOR HEALTH, HEALTH FOR ALL 519 EAST BROADWAY BOULEVARD GLENDALE, CA 91205	95-4773684	501(C)(3)	0.	58,780.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ALL NATIONS HEALTH CENTER 830 W CENTRAL AVENUE MISSOULA, MT 59801	81-0330646	501(C)(3)	0.	73,447.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ALLEN COUNTY COMBINED HEALTH DISTRICT - 219 E MARKET STREET - LIMA, OH 45801	34-6400019	ALLEN COUNTY	0.	14,752.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ALLIANCE MEDICAL CENTER 1381 UNIVERSITY AVENUE HEALDSBURG, CA 95448	94-2308748	501(C)(3)	25,930.	0.			POWER FOR HEALTH-CA

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AMISTAD COMMUNITY HEALTH CENTER 1533 SOUTH BROWNLEE AVENUE CORPUS CHRISTI, TX 78404	20-3008507	501(C)(3)	0.	982,556.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ANDERSON FREE CLINIC 414 N. FANT STREET ANDERSON, SC 29621	57-0787584	501(C)(3)	0.	339,308.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ANN SILVERMAN COMMUNITY HEALTH CLINIC - 595 W. STATE STREET - DOYLESTOWN, PA 18901	23-2892823	501(C)(3)	0.	26,426.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ANNE KASTOR BROOKLYN FREE CLINIC 470A CLARKSON AVENUE BROOKLYN, NY 11203	11-1704590	501(C)(3)	0.	13,424.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ANTLERS FIRST BAPTIST CHURCH FREE CLINIC - 208 NE B STREET - ANTLERS, OK 74523	73-1092316	501(C)(3)	0.	180,246.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
APICHA COMMUNITY HEALTH CENTER 400 BROADWAY NEW YORK, NY 10013	13-3706365	501(C)(3)	0.	56,640.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , OTHER	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
APNI INC. P.O. BOX 21280 SAN JUAN, PR 00928	66-0376145	501(C)(3)	150,000.	0.			ABBVIE PR MEDICALLY FRAGILE POPULATIONS
ARCARE P.O. BOX 497 AUGUSTA, AR 72006	58-1666179	501(C)(3)	0.	5,165.	ESTIMATED WHOLESALE PRICE, PURCHASED	OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ARLINGTON FREE CLINIC PHARMACY 2921 S. 11TH STREET ARLINGTON, VA 22204	54-1671883	501(C)(3)	0.	907,041.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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ARROYO VISTA FAMILY HEALTH CENTER 6000 N. FIGUEROA STREET LOS ANGELES, CA 90042	95-3514918	501(C)(3)	0.	25,062.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ARTHUR NAGEL COMMUNITY CLINIC 1116 12TH STREET NO. 3 BANDERA, TX 78003	77-0697361	501(C)(3)	0.	244,298.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ASIAN HEALTH SERVICES 101 8TH STREET, SUITE 100 OAKLAND, CA 94670	94-2235908	501(C)(3)	374,000.	0.			SAFETY NET SUPPORT, FUND FOR HEALTH EQUITY
ASIAN PACIFIC HEALTH CARE VENTURE, INC - 1530 HILLHURST AVENUE - LOS ANGELES, CA 90027	95-4177752	501(C)(3)	0.	113,525.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ASIAN PACIFIC ISLANDER WELLNES CTR 730 POLK STREET, 4TH FLOOR SAN FRANCISCO, CA 94109	94-3096109	501(C)(3)	200,000.	0.			LILLY HEALTH EQUITY
ASYLUM-SEEKERS SHELTER HEALTH PROGRAM - 4902 PACIFIC HIGHWAY - SAN DIEGO, CA 92110	95-6006144	501(C)(3)	0.	25,171.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ATENAS COMMUNITY HEALTH CENTER (CDT DE MANATI) - CARRETERA NO. 2 50.0 - MANATI, PR 00674	66-0730779	501(C)(3)	0.	35,109.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ATLANTA PUBLIC SCHOOLS 130 TRINITY AVE SE ATLANTA, GA 30303	58-6000134	501(C)(3)	0.	14,400.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
AURORA CHRISTIAN HEALTHCARE 61 S. BROADWAY AURORA, IL 60505	85-1683287	501(C)(3)	0.	23,884.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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AUSTIN PUBLIC HEALTH 15 WALLER STREET, 3RD FLOOR AUSTIN, TX 78702	74-6000085	CITY OF AUSTIN	0.	511,295.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
B&B COMMUNITY IMPACT CENTER 2305 OAK LANE GRAND PRAIRIE, TX 75051	86-3589812	501(C)(3)	0.	49,909.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BABYCAKES AND BRUNCH DBA SHADES OF BLUE PROJECT - 1222 IMPERIAL BEND DRIVE - HOUSTON, TX 77073-6175	47-1005042	501(C)(3)	0.	6,266.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BAPTIST COMMUNITY HEALTH SERVICES 4960 ST. CLAUDE AVENUE NEW ORLEANS, LA 70117	45-3792193	501(C)(3)	125,000.	104,072.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	ABBOTT RESILIENCY, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED
BARNABAS HEALTH SERVICES 1303 JASMINE STREET SUITE 101 FERNANDINA BEACH, FL 32034	59-2920275	501(C)(3)	0.	270,182.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BARRIER ISLANDS FREE MEDICAL CLINIC - 3226 MAYBANK HIGHWAY BUILDING C - JOHNS ISLAND, SC 29455	20-5628911	501(C)(3)	0.	504,587.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BARTZ ALTADONNA COMMUNITY HEALTH CENTER - 43322 GINGHAM AVE - LANCASTER, CA 93535	27-3261289	501(C)(3)	0.	165,409.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BATON ROUGE PRIMARY CARE COLLABORATIVE JEWEL NEWMAN COMMUNITY CENTER - 2013 CENTRAL ROAD, SUITE B - BATON ROUGE, LA	41-2114148	501(C)(3)	0.	61,698.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BEACON CHARITABLE PHARMACY 2525 13TH ST N.W. CANTON, OH 44708-3118	20-0797475	501(C)(3)	0.	272,678.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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BEACON CHRISTIAN COMMUNITY HEALTH CENTER - 2079 FOREST AVENUE - STATEN ISLAND, NY 10303	02-0703686	501(C)(3)	0.	47,555.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BEACON CLINIC FOR HEALTH AND HOPE 248 SENECA STREET HARRISBURG, PA 17110	46-3507570	501(C)(3)	0.	16,920.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BEAUFORT COUNTY SYRINGE EXCHANGE PROGRAM - 1436 HIGHLAND DRIVE - WASHINGTON, NC 27889	56-6001521	BEAUFORT COUNTY	0.	28,640.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BEAUFORT-JASPER HAMPTON COMPREHENSIVE HEALTH SERVICES BJHCHS CHELSEA - 719 OKATIE HIGHWAY - OKATIE, SC 29909	57-0523586	501(C)(3)	0.	15,669.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BEDFORD STUYVESANT FAMILY HEALTH CENTER - 1456 FULTON STREET - BROOKLYN, NY 11216	11-2412205	501(C)(3)	0.	20,744.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BEE BUSY WELLNESS CENTER 8785 WEST BELLFORT STREET HOUSTON, TX 77031	27-0653014	501(C)(3)	0.	209,664.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BELINGTON COMMUNITY MEDICAL SERVICES ASSOCIATION - 70 NORTH STURMER STREET - BELINGTON, WV 26250	23-7310126	501(C)(3)	0.	9,604.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BERGEN VOLUNTEER MEDICAL INITIATIVE - 75 ESSEX STREET, SUITE 100 - HACKENSACK, NJ 07601	20-2633437	501(C)(3)	75,000.	50,911.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	ACCESS TO MENTAL HEALTH CARE AWARDS-TEVA, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BETANCES HEALTH 280 HENRY STREET NEW YORK, NY 10002-4618	13-2697725	501(C)(3)	0.	594,635.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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BETHEL FREE HEALTH CLINIC 1650 CARROL DRIVE BILOXI, MS 39531	26-1794984	501(C)(3)	0.	8,020.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BETHESDA COMMUNITY CLINIC 111 MOUNTAIN BROOK DRIVE CANTON, GA 30115	27-4923001	501(C)(3)	0.	612,429.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BETHESDA FREE HEALTH CLINIC OF DIBERVILLE - 6912 N WASHINGTON AVENUE - OCEAN SPRINGS, MS 39564	27-3534168	501(C)(3)	0.	5,267.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BETHESDA HEALTH CLINIC 409 W. FERGUSON TYLER, TX 75702	26-0036674	501(C)(3)	0.	488,584.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BIBB COUNTY SCHOOL DISTRICT 6400 FORSYTH ROAD MACON, GA 31220	58-6000191	501(C)(3)	0.	6,720.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BLACK RIVER HEALTH SERVICES, INC. DBA BLACK RIVER FAMILY PRACTICE - 301 S. CAMPBELL STREET - BURGAW, NC 28425	23-7356223	501(C)(3)	0.	118,311.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BLACK THISTLE STREET AID 1950 FRANKLIN BLVD NO. 23 EUGENE, OR 97402	86-2144950	501(C)(3)	0.	52,389.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BLAND COUNTY MEDICAL CLINIC, INC 12301 GRAPEFIELD ROAD BASTIAN, VA 24314	54-1074890	501(C)(3)	0.	104,713.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BLUE RIDGE COMMUNITY HEALTH SERVICES, INC. - 2579 CHIMNEY ROCK ROAD - HENDERSONVILLE, NC 28792	56-0794933	501(C)(3)	0.	86,924.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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BOND COMMUNITY HEALTH CENTER YOURX PHARMACY AT BONDCHC - 1720 SOUTH GADSDEN STREET - TALLAHASSEE, FL 32301	59-2426414	501(C)(3)	0.	434,202.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BOONE FREE MEDICAL CLINIC 703 ARDEN STREET BOONE, IA 50036	42-1428706	501(C)(3)	0.	23,148.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BORINQUEN HEALTH CARE CENTER INC. DBA BORINQUEN MEDICAL CENTERS - 3601 FEDERAL HIGHWAY - MIAMI, FL 33137-3795	59-1417397	501(C)(3)	0.	208,925.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BOY SCOUTS OF AMERICA ALOHA COUNCIL - 200 LIHOLIHO ROAD - WAILIKU, HI 96793	22-1576300	501(C)(3)	0.	388,893.	ESTIMATED WHOLESale PRICE, PURCHASED	MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BPSOS - ATLANTA COMMUNITY CLINIC 6107 OAKBROOK PARKWAY NORCROSS, GA 30093	30-0737900	501(C)(3)	0.	42,002.	ESTIMATED WHOLESale PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BRADLEY FREE CLINIC OF ROANOKE VALLEY INC PHARMACY - 1240 THIRD STREET, SW - ROANOKE, VA 24016	23-7380491	501(C)(3)	0.	626,751.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BRAZOS VALLEY COMMUNITY ACTION AGENCY D.B.A HEALTHPOINT - 1500 UNIVERSITY DRIVE E - COLLEGE STATION, TX 77840	74-1715140	501(C)(3)	0.	146,811.	ESTIMATED WHOLESale PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BREAD OF HEALING CLINIC 1821 NORTH 16TH STREET MILWAUKEE, WI 53205	81-0669867	501(C)(3)	0.	436,335.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BRIDGES TO HEALTH 119 SOUTH WASHINGTON STREET MARION, IN 46952	20-5405181	501(C)(3)	0.	169,994.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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BROAD STREET CLINIC FOUNDATION 534 NORTH 35TH STREET MOREHEAD CITY, NC 28557	56-1853604	501(C)(3)	0.	10,272.	ESTIMATED WHOLESALE PRICE	OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BROOKLYN PLAZA MEDICAL CENTER, INC. - 650 FULTON STREET - BROOKLYN, NY 11217	11-2467268	501(C)(3)	0.	7,763.	ESTIMATED WHOLESALE PRICE, PURCHASED	OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BROTHER BILL'S HELPING HAND COMMUNITY CLINIC - 3906 N. WESTMORELAND ROAD - DALLAS, TX 75212	75-6027740	501(C)(3)	0.	514,398.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BROWNSVILLE COMMUNITY HEALTH CENTER - 191 EAST PRICE ROAD - BROWNSVILLE, TX 78521	74-2176836	501(C)(3)	0.	10,272.	ESTIMATED WHOLESALE PRICE	OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
BULLHOOK COMMUNITY HEALTH CENTER INC. - 521 4TH STREET - HAVRE, MT 59501	20-5970239	501(C)(3)	0.	9,337.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
C. W. WILLIAMS COMMUNITY HEALTH CENTER PHARMACY - 5800 OLD PINEVILLE ROAD - CHARLOTTE, NC 28217	56-1262478	501(C)(3)	0.	170,652.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
C.A.R.E. CLINIC 906 COLLEGE AVE, DOOR NO. 1 RED WING, MN 55066	27-0540451	501(C)(3)	0.	109,501.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CABELL-HUNTINGTON HEALTH DEPARTMENT - 703 7TH AVENUE - HUNTINGTON, WV 25701	55-0400653	CABELL COUNTY	0.	964,971.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CABIN CREEK HEALTH SYSTEMS 104 ALEX LANE CHARLESTON, WV 25304	55-0709223	501(C)(3)	0.	1,265,647.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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CABRINI CLINIC 1234 PORTER STREET DETROIT, MI 48226	38-3129349	501(C)(3)	0.	82,827.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CACTUS HEALTH SERVICES, INC. 700 N. MAIN STREET FORT STOCKTON, TX 79735	16-1663081	501(C)(3)	0.	394,184.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAL OES GOVERNOR'S OFFICE OF EMERGENCY SERVICES - 3650 SCHRIEVER AVENUE - MATHER, CA 95655	68-0399208	STATE OF CALIFOR	0.	21,841.	PURCHASED PRICE	EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CALCASIEU MEDICAL RESERVE CORPS 3001 INDUSTRIAL AVENUE LAKE CHARLES, LA 70615	72-6000234	LAKE CHARLES COU	0.	15,468.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMARENA HEALTH 730 N. I STREET MADERA, CA 93637	94-2503904	501(C)(3)	150,000.	0.			FUND FOR HEALTH EQUITY
CAMCARE HEALTH CORPORATION 817 FEDERAL STREET CAMDEN, NJ 08103	22-2192716	501(C)(3)	0.	9,229.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMELBACK FAMILY PLANNING 4141 N 32ND STREET, SUITE 105 PHOENIX, AZ 85018	86-0937180		0.	70,016.	PURCHASED PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMILLUS HEALTH CONCERN 336 NW 5TH STREET MIAMI, FL 33128	65-0063921	501(C)(3)	0.	367,893.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMP ADAM FISHER 8001 M W RICKENBAKER ROAD SUMMERTON, SC 29148	54-2101275	501(C)(3)	0.	13,296.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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CAMP BLUE HAWK UNIVERSITY OF OKLAHOMA HEALTH HAROLD HAMM DIABETES CENTER - 1000 N LINCOLN BOULEVARD - OKLAHOMA CITY, OK	73-6091755	501(C)(3)	0.	14,260.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMP CAREFREE 6340 QUADRANGLE DRIVE CHAPEL HILL, NC 27517	56-1479260	501(C)(3)	0.	55,232.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMP CONRAD-CHINNOCK 4700 JENKS LAKE ROAD, EAST ANGELUS OAKS, CA 92305	95-3897543	501(C)(3)	0.	51,131.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMP FREEDOM SOUTH TEXAS JUVENILE DIABETES ASSOCIATION - 3601 WEST ALBERTA ROAD - EDINBURG, TX 78539	45-3645389	501(C)(3)	0.	6,936.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMP GILBERT 1315 S. CLIFF AVENUE SIOUX FALLS, SD 57105	20-8521374	501(C)(3)	0.	5,272.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMP HERTKO HOLLOW 4200 UNIVERSITY AVENUE SUITE 320 WEST DES MOINES, IA 50266	76-0717999	501(C)(3)	0.	10,399.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMP HIGH HOPES AND CAMP LITTLE OAK - 82 PIXLEY ROAD - CHENANGO FORKS, NY 13746	16-1266169	501(C)(3)	0.	130,039.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMP HO MITA KODA 14040 AUBURN ROAD NEWBURY, OH 44065	82-1212824	501(C)(3)	0.	21,173.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMP HOT SHOTS 8552 CASS STREET STREET NO. 100 OMAHA, NE 68114	46-0511460	501(C)(3)	0.	7,605.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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CAMP JOHN MARC CAMP BRONCHO 2824 SWISS AVENUE DALLAS, TX 75042	75-2051646	501(C)(3)	0.	10,024.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMP KUDZU INC. 8601 DUNWOODY PLACE, SUITE 508 ATLANTA, GA 30350	58-2449646	501(C)(3)	0.	22,808.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMP NEJEDA FOUNDATION CAMP NEJEDA 910 SADDLEBACK ROAD STILLWATER, NJ 07875	22-0019138	501(C)(3)	0.	19,539.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMP POSSIBILITIES FOUNDATION 20930 DUPONT BOULEVARD GEORGETOWN, DE 19947	51-0412903	501(C)(3)	0.	14,375.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMP STIX DIABETES PROGRAMS 11922 S PLAYER DRIVE SPOKANE, WA 99223	91-2077207	501(C)(3)	0.	24,624.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAMP SWEET LIFE 26486 SIOUX TRAIL MADISON LAKE, MN 56063	27-3206536	501(C)(3)	0.	10,271.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAPE FEAR CLINIC, INC 1605 DOCTORS CIRCLE WILMINGTON, NC 28401	56-1984630	501(C)(3)	0.	635,870.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAPE FEAR VALLEY HEALTH KIDS WITH DIABETES CAMP DIXIE - 101 ROBESON STREET, SUITE 410 - FAYETTEVILLE, NC 28301	56-1947017	501(C)(3)	0.	14,936.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAPE VOLUNTEERS IN MEDICINE 423 N ROUTE 9 CAPE MAY COURT HOUSE, NJ 08210	52-2257585	501(C)(3)	75,000.	0.			ACCESS TO MENTAL HEALTH CARE AWARDS-TEVA

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CAPITAL CITY RESCUE MISSION FREE 259 SOUTH PEARL STREET ALBANY, NY 12202	56-2663290	501(C)(3)	0.	43,386.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAPITOL CITY FAMILY HEALTH CENTER DBA CARESOUTH MEDICAL & DENTAL - 3140 FLORIDA STREET - BATON ROUGE, LA 70806	72-1395500	501(C)(3)	0.	5,965.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CARACOLE, INC. 4138 HAMILTON AVENUE CINCINNATI, OH 45208	31-1210524	501(C)(3)	0.	90,314.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CARBON MEDICAL SERVICE ASSOCIATION INCORPORATED - 331 EAST HIGHWAY 123 - SUNNYSIDE, UT 84539	87-0217443	501(C)(3)	0.	62,378.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CARE BEYOND THE BOULEVARD 3150 FIBERGLASS ROAD KANSAS CITY, KS 66115	83-1122028	501(C)(3)	0.	748,481.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CARE FOR THE HOMELESS 30 EAST 33RD STREET 5TH FLOOR NEW YORK, NY 10016-5337	13-3666994	501(C)(3)	242,606.	5,511.	ESTIMATED WHOLESALE PRICE, PURCHASED	OTHER, EQUIPMENT	PFIZER INFECTIOUS DISEASE AWARDS, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED
CARE HARBOR 18436 HAWTHORNE BOULEVARD TORRANCE, CA 90504	27-2984870	501(C)(3)	0.	21,273.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CARE RESOURCE 3510 BISCAYNE BOULEVARD, 2ND FLOOR MIAMI, FL 33137	59-2564198	501(C)(3)	0.	55,151.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CARES FOR THE UNHOUSED AT THE NAVIGATION CENTER - 18 HANOVER STREET - CHARLESTON, SC 29403	47-3007172	501(C)(3)	0.	5,551.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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CARIDAD CENTER 8645 W. BOYNTON BEACH BOULEVARD BOYNTON BEACH, FL 33472	65-0149423	501(C)(3)	0.	96,435.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CARILION CLINIC DIABETES MANAGEMENT CAMP TOO SWEET - 1030 S. JEFFERSON STREET - ROANOKE, VA 24016	54-0506332	501(C)(3)	0.	12,791.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CARING HEARTS FREE CLINIC OF PATRICK COUNTY - 835 WOODLAND DRIVE, SUITE 101 - STUART, VA 24171	14-1909014	501(C)(3)	0.	6,078.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CAROLINA FAMILY HEALTH CENTERS WILSON COMMUNITY HEALTH CENTER - 303 EAST GREEN STREET - WILSON, NC 27893	58-2079819	501(C)(3)	0.	1,258,375.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , OTHER	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CARROLL COUNTY HEALTH DEPARTMENT 101 WEST MAIN STREET DELPHI, IN 46923	20-0196050	CARROLL COUNTY	0.	127,059.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CASA EL BUEN SAMARITANO 14060 DUBLIN STREET HOUSTON, TX 77085	37-1546805	501(C)(3)	0.	5,258.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CASA RUBEN INC. 1700 ELTON ROAD SUITE 200 SILVER SPRING, MD 20903	26-0340539	501(C)(3)	0.	67,076.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
C-ASSIST FAMILY HEALTH CLINIC 30260 CHERRY HILL ROAD GARDEN CITY, MI 48135	81-3386484	501(C)(3)	200,000.	0.			PFIZER INFECTIOUS DISEASE AWARDS
CATAHOULA PARISH HOSPITAL DISTRICT NO. 2 - 307 CHISUM STREET - SICILY ISLAND, LA 71368	72-0838896	501(C)(3)	0.	23,647.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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CATHERINE'S HEALTH CENTER 1211 LAFAYETTE AVENUE NE GRAND RAPIDS, MI 49505	20-3572418	501(C)(3)	0.	245,331.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CATHOLIC CHARITIES 609 E. HALEY STREET SANTA BARBARA, CA 93103	95-1690973	501(C)(3)	0.	226,997.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CCI HEALTH SERVICES 8665 GEORGIA AVENUE SILVER SPRING, MD 20910	52-0988386	501(C)(3)	0.	298,174.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CENLA MEDICATION ACCESS PROGRAM CMAP - 1101 4TH STREET, SUITE 203 - ALEXANDRIA, LA 71301	02-0751416	501(C)(3)	0.	652,649.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CENTER FOR BLACK WOMEN'S WELLNESS 477 WINDSOR STREET SW SUITE 309 ATLANTA, GA 30312	58-2212203	501(C)(3)	0.	35,898.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CENTER FOR FAMILY HEALTH & EDUCATION HEADQUARTERS - 6609 VAN NUYS BOULEVARD - VAN NUYS, CA 91405	27-0224623	501(C)(3)	0.	1,338,273.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CENTER FOR HAITIAN STUDIES, INC 8260 NE 2ND AVENUE MIAMI, FL 33138	65-0136723	501(C)(3)	0.	12,674.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CENTRAL CITY CONCERN INC 232 NW 6TH AVENUE PORTLAND, OR 97209-3609	93-0728816	501(C)(3)	250,000.	0.			ABBVIE HEALTH EQUITY
CENTRAL LOUISIANA AIDS SUPPORT SERVICES - 1785 JACKSON STREET - ALEXANDRIA, LA 71301	72-1097079	501(C)(3)	0.	87,915.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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CENTRAL MISSOURI DIABETIC CHILDREN'S CAMP HICKORY HILL - 1413 COUNTRYSHIRE DRIVE - COLUMBIA, MO 65202	43-0983917	501(C)(3)	0.	23,630.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CENTRAL MS HEALTH SERVICE, INC. 1134 WINTER STREET JACKSON, MS 39204	64-0426295	501(C)(3)	0.	167,715.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CENTRAL OHIO DIABETES ASSOCIATION LIFECARE ALLIANCE CAMP HAMWI - 1100 DENNISON AVENUE - COLUMBUS, OH 43201	31-6054100	501(C)(3)	0.	14,033.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CENTRE VOLUNTEERS IN MEDICINE 2026 SANDY DRIVE STATE COLLEGE, PA 16803	25-1897969	501(C)(3)	0.	180,012.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CENTRO DE SALUD DE LARES, INC AVENIDA LOS PATRIOTAS CARR NO. 111 LARES, PR 00669	66-0426506	501(C)(3)	0.	157,802.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CENTRO DE SERVICIOS PRIMARIOS DE SA LUD INC - CALLE ANTONIO ALACAZAR NO. 3 - FLORIDA, PR 00650	66-0428922	501(C)(3)	0.	5,906.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CENTRO DE SERVICIOS PRIMARIOS DE SALUD DE PATILLAS, INC. - 99 CALLE GUILLERMO RIEFKOHL STREET - PATILLAS, PR 00723	66-0430826	501(C)(3)	0.	8,453.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CENTRO HISPANO DE EAST TENNESSEE 2455 SUTHERLAND AVENUE KNOXVILLE, TN 37919	20-3415545	501(C)(3)	200,000.	0.			FUND FOR HEALTH EQUITY
CENTRO MEDICO COMMUNITY CLINIC 1303 W SIXTH STREET CORONA, CA 92882	33-0986880	501(C)(3)	0.	16,153.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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CENTRO SALUD FAMILIAR DR. JULIO PALMIERI FERRI, INC. - MORSE STREET NO. 46 VALENTINA CORNER - ARROYO, PR 00714	66-0496484	501(C)(3)	0.	37,295.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CENTRO SAN VICENTE 8061 ALAMEDA AVENUE EL PASO, TX 79915	74-2505561	501(C)(3)	0.	1,140,580.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHADRON COMMUNITY HOSPITAL DBA WESTERN COMMUNITY HEALTH RESOURCES - 300 SHELTON STREET - CHADRON, NE 69337	47-0482234	501(C)(3)	0.	5,393.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHARIS HEALTH CENTER 2620 NORTH MT. JULIET ROAD MT. JULIET, TN 37122	35-2298919	501(C)(3)	0.	639,466.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHARITABLE PHARMACY OF CENTRAL OHIO - 200 EAST LIVINGSTON AVENUE - COLUMBUS, OH 43215	27-0147099	501(C)(3)	0.	1,692,867.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHARITABLE PHARMACY OF HOPE CLINIC OF ROSS COUNTY, INC. - 610 CENTRAL CENTER - CHILLICOTHE, OH 45601	45-2390821	501(C)(3)	0.	161,405.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHATHAM CARES COMMUNITY PHARMACY 127 EAST RALEIGH STREET SILVER CITY, NC 27344	41-2170926	501(C)(3)	0.	62,808.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHERRY STREET SERVICES, INC 100 CHERRY STREET SE GRAND RAPIDS, MI 49503	38-2853534	501(C)(3)	0.	25,594.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHESAPEAKE CARE 2145 S. MILITARY HIGHWAY CHESAPEAKE, VA 23320	54-1642754	501(C)(3)	0.	15,886.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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CHEYENNE HEALTH AND WELLNESS CENTER DBA HEALTHWORKS - 2508 E. FOX FARM ROAD NO. 1B - CHEYENNE, WY 82007	87-0718984	501(C)(3)	0.	250,772.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHEYENNE RIVER YOUTH PROJECT P.O. BOX 410 EAGLE BUTTE, SD 57625	46-0423106	501(C)(3)	200,000.	0.			LILLY HEALTH EQUITY
CHICAGO HISPANIC HEALTH COALITION 1819 W POLK STREET CHICAGO, IL 60612	36-4193052	501(C)(3)	0.	32,596.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHILDREN'S DIABETES CAMP OF CENTRAL TEXAS CAMP BLUEBONNET - 19051 FM 2484 - KILLEEN, TX 76542	90-0137641	501(C)(3)	0.	12,813.	ESTIMATED WHOLESale PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHILDREN'S VILLAGE 2001 18TH STREET SW BIRMINGHAM, AL 35211	63-6061834	501(C)(3)	200,000.	0.			FUND FOR HEALTH EQUITY
CHIPPEWA VALLEY FREE CLINIC 1030 OAK RIDGE DRIVE EAU CLAIRE, WI 54701	39-1840231	501(C)(3)	0.	39,869.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHIRICAHUA COMMUNITY HEALTH CENTERS, - 1205 F AVENUE - DOUGLAS, AZ 85607	86-0814898	501(C)(3)	0.	37,434.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHRIS DUDLEY FOUNDATION CHRIS DUDLEY BASKETBALL CAMP - 7512 LITTLE ROAD SE. - AUMSVILLE, OR 97325	80-0276022	501(C)(3)	0.	9,119.	ESTIMATED WHOLESale PRICE	MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHRIST CLINIC 25722 KINGSLAND BOULEVARD, SUITE 10 KATY, TX 77494	90-0789318	501(C)(3)	0.	140,484.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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CHRIST COMMUNITY HEALTH SERVICES AUGUSTA - 1226 D'ANTIGNAC STREET - AUGUSTA, GA 30901	20-5404353	501(C)(3)	0.	16,034.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHRISTOPHER RURAL HEALTH PLANNING CORPORATION - 4241 HIGHWAY 14 WEST - CHRISTOPHER, IL 62822	37-1041283	501(C)(3)	0.	31,916.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CHURCH HILL MEDICAL MISSION 401 RICHMOND ST. SUITE #107 CHURCH HILL, TN 37642	62-1391365	501(C)(3)	0.	398,258.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CITRUS HEALTH NETWORK, INC. 4175 W 20TH AVENUE HIALEAH, FL 33012	59-1865751	501(C)(3)	408,600.	154,583.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	POWER FOR HEALTH-FL, GA, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED
CITY OF NEW ORLEANS 1300 PERDIDO STREET NEW ORLEANS, LA 70112	72-6000969	CITY OF NEW ORLE	0.	223,034.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CITY OF PORTLAND STD CLINIC 39 FOREST AVENUE PORTLAND, ME 04101	01-6000032	CITY OF PORTLAND	0.	30,222.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CITY ON A HILL MINISTRIES 100 PINE STREET ZEELAND, MI 49464	20-3901260	501(C)(3)	0.	85,074.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CITY SQUARE CLINIC 2835 AL LIPSCOMB WAY DALLAS, TX 75215	75-2332948	501(C)(3)	0.	312,317.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CLACKAMAS FREE CLINIC 19600 MOLALLA AVENUE OREGON CITY, OR 97045	37-1621141	501(C)(3)	0.	33,608.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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CLAIBORNE COUNTY FAMILY HEALTH CENTER - 2045 HIGHWAY 61 NORTH - PORT GIBSON, MS 39150	64-0651149	501(C)(3)	0.	395,640.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CLARIS HEALTH 3737 MARTIN LUTHER KING JR BOULEVAR LYNWOOD, CA 90262	95-4806856	501(C)(3)	0.	10,162.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CLARKSTON COMMUNITY HEALTH CENTER 3700 MARKET STREET, SUITE E1 CLARKSTON, GA 30021	46-1402143	501(C)(3)	0.	23,997.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CLEARWATER FREE CLINIC 1218 COURT STREET CLEARWATER, FL 33756	59-1852871	501(C)(3)	0.	1,464,367.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CLINICA COLORADO 8300 ALCOTT STREET, SUITE 300 WESTMINSTER, CO 80031	27-3794068	501(C)(3)	0.	6,154.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CLINICA ESPERANZA / HOPE CLINIC 60 VALLEY STREET, SUITE 104 PROVIDENCE, RI 02909	26-1714340	501(C)(3)	250,000.	3,629,677.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	PFIZER INFECTIOUS DISEASE AWARDS, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED
CLINICA LATINA 2331 N. HIGH STREET COLUMBUS, OH 43201	20-5260283	501(C)(3)	0.	17,351.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CLINICA MSR. OSCAR A ROMERO 123 S ALVARADO STREET LOS ANGELES, CA 90057	95-3881333	501(C)(3)	0.	305,234.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CLINICA TEPATI 1820 J STREET SACRAMENTO, CA 95811	94-2324682	501(C)(3)	0.	24,626.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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CLINICAS DEL CAMINO REAL, INC. 200 SOUTH WELLS ROAD VENTURA, CA 93004	95-2977147	501(C)(3)	0.	42,798.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COACHELLA VALLEY VOLUNTEERS IN MEDICINE - 82915 AVENUE 48 - INDIO, CA 92201	26-3312826	501(C)(3)	0.	9,148.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COASTAL FAMILY HEALTH CENTER 1025 A DIVISION STREET BILOXI, MS 39530	64-0592416	501(C)(3)	0.	10,272.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COASTAL HEALTH & WELLNESS GALVESTON CTY. HEALTH DISTRICT - 9850 EMMETT F. LOWRY EXPY - TEXAS CITY, TX 77591	74-1665318	GALVESTON COUNTY	0.	17,470.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , OTHER	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COASTAL VOLUNTEERS IN MEDICINE 730 LACEY ROAD FORKED RIVER, NJ 08731	27-3491473	501(C)(3)	0.	31,166.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COLLIER HEALTH SERVICES, INC DBA HEALTHCARE NETWORK - 1454 MADISON AVENUE - IMMOKALEE, FL 34142	59-1741277	501(C)(3)	352,000.	960,683.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	POWER FOR HEALTH-FL, GA, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COLUMBIA COUNTY SCHOOL DISTRICT 4781 HEREFORD FARM ROAD EVANS, GA 30809	58-6000217	501(C)(3)	0.	7,750.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COLUMBIA COUNTY VOLUNTEERS IN MEDICINE CLINIC - 310 EAST THIRD STREET - MIFFLINVILLE, PA 18631	20-5695518	501(C)(3)	0.	478,022.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMONSENSE CHILDBIRTH 213 S DILLARD STREET, SUITE 340 WINTER GARDEN, FL 34787	59-3479821	501(C)(3)	0.	21,630.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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COMMONSHARE INC. 1602 SKIPWITH ROAD NO. 201 HENRICO, VA 23229	84-2490661	501(C)(3)	0.	49,612.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMONWEALTH HEALTHCARE CORPORATION - 1178 HINEMLU' ST GARAPAN - SAIPAN, MP 96950	66-0774364	501(C)(3)	0.	1,361,266.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNIHEALTH SERVICES 518 DURHAM STREET BASTROP, LA 71220	82-0579411	501(C)(3)	0.	23,017.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY ACTION COMMITTEE OF PIKE COUNTY VALLEY VIEW HEALTH CENTERS - 227 VALLEY VIEW DRIVE - WAVERLY, OH 45690	31-0718042	501(C)(3)	0.	6,974.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY ACTION CORPORATION OF SOUTH TEXAS ALICE HEALTH CENTER - 700 FLOURNEY ROAD, SUITE 2A - ALICE, TX 78332	74-1679824	501(C)(3)	0.	10,272.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY CARE CENTER 2135 NEW WALKERTOWN ROAD WINSTON SALEM, NC 27101	58-1403699	501(C)(3)	0.	1,863,118.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY CARE CLINIC 141 HEALTH CENTER DRIVE SUITE B BOONE, NC 28607	20-8607858	501(C)(3)	0.	11,885.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY CARE CLINIC OF DARE PHARMACY - SUITE B - 425 W HEALTH CENTER DRIVE - NAGS HEAD, NC 27959	20-2230717	501(C)(3)	0.	410,361.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY CARE CLINIC OF HIGHLANDS-CASHIERS INC - 52 AUNT DORA DRIVE - HIGHLANDS, NC 28741	65-1251915	501(C)(3)	0.	398,712.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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COMMUNITY CARE CLINIC OF ROWAN COUNTY - 315G MOCKSVILLE AVENUE - SALISBURY, NC 28144	56-1964773	501(C)(3)	0.	474,792.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY CARE MINISTRY 407 ASH STREET WAMEGO, KS 66547	75-2974854	501(C)(3)	0.	12,049.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY CARE RESOURCES INC 15800 PINES BOULEVARD, SUITE 330 PEMBROKE PINES, FL 33027	84-5135219	501(C)(3)	0.	115,758.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY CLINIC OF MAUI, INC. DBA 1881 NANI STREET WAILUKU, HI 96793	99-0303304	501(C)(3)	1,050,000.	0.			HAWAII WILDFIRES
COMMUNITY CLINIC SHELBYVILLE AND BEDFORD CO. - 200 DOVER STREET, SUITE 202 - SHELBYVILLE, TN 37160	34-1974609	501(C)(3)	0.	83,076.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY CLINICAL SERVICES 57 BIRCH STREET, SUITE 201 LEWISTON, ME 04240	01-0409788	501(C)(3)	50,000.	0.			GENERAL U.S. EMERGENCY PREP & RESPONSE
COMMUNITY CONNECTIONS FREE CLINIC 101 E. FOUNTAIN STREET DODGEVILLE, WI 53533	72-1619112	501(C)(3)	0.	111,369.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY FAMILY CLINIC 2100 ALAN STREET IDAHO FALLS, ID 83404	82-0299736	501(C)(3)	0.	227,861.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY FIRST HEALTH CENTERS 555 ST. CLAIR RIVER DRIVE ALGONAC, MI 48001	38-2080825	501(C)(3)	0.	57,550.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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COMMUNITY FREE CLINIC 249 MILL STREET HAGERSTOWN, MD 21740	52-1772594	501(C)(3)	0.	88,131.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY FREE CLINIC 528 A LAKE CONCORD ROAD NE CONCORD, NC 28025	58-2131301	501(C)(3)	0.	25,321.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH & EMERGENCY SERVICES, INC - 13245 KESSLER ROAD - CAIRO, IL 62914	37-1100482	501(C)(3)	0.	357,241.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH AND DENTAL CARE INC - 351 W. SCHUYLKILL ROAD - POTTSTOWN, PA 19465	20-2764402	501(C)(3)	0.	38,567.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH AND SOCIAL SERVICES CENTER - CHASS - 5635 WEST FORT STREET - DETROIT, MI 48209	38-3094394	501(C)(3)	0.	8,801.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH CARE CLINIC 900 N FRANKLIN AVENUE NORMAL, IL 61761	37-1316328	501(C)(3)	0.	40,969.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH CARE SYSTEMS 116 SMITH STREET TENNILLE, GA 31089	58-2001101	501(C)(3)	0.	10,272.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH CENTER IN COWLEY COUNTY, INC. - 221 WEST 8TH AVENUE - WINFIELD, KS 67156	48-0985868	501(C)(3)	0.	35,614.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH CENTER OF CENTRAL WYOMING - 5000 BLACKMORE ROAD - CASPER, WY 82609	83-0326307	501(C)(3)	0.	5,302.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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COMMUNITY HEALTH CENTER OF RICHMOND - 235 PORT RICHMOND AVENUE - STATEN ISLAND, NY 10302	51-0567466	501(C)(3)	0.	16,995.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH CENTER OF WEST PALM BEACH - 5205 GREENWOOD AVENUE - WEST PALM BEACH, FL 33407	26-3611337	501(C)(3)	0.	235,826.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH CENTER S.E. KANSAS - 3011 N. MICHIGAN - PITTSBURG, KS 66762	75-3002264	501(C)(3)	0.	322,023.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH CENTERS OF PINELLAS AT JRC - EVARA HEALTH - 1344 22ND STREET SOUTH - ST. PETERSBURG, FL 33712	59-2097521	501(C)(3)	0.	89,853.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH CENTERS OF SOUTH CENTRAL TEXAS - 1918 CHURCH STREET - GONZALES, TX 78629	74-1548089	501(C)(3)	0.	242,890.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH CENTERS OF THE CENTRAL COAST - 150 TEJAS PLACE - NIPOMO, CA 93444	95-3253302	501(C)(3)	0.	18,685.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH CENTERS, INC. MARY MAHONEY MEMORIAL HEALTH CENTER - 12716 NE 36TH STREET - OKLAHOMA CITY, OK 73084	73-0930123	501(C)(3)	0.	61,415.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH CLINIC 4510 MEDICAL CENTER DRIVE MCKINNEY, TX 75069	20-0637782	501(C)(3)	0.	121,664.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH CLINIC OF BUTLER COUNTY - 103 BONNIE DRIVE - BUTLER, PA 16002	20-4852135	501(C)(3)	0.	171,296.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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COMMUNITY HEALTH CLINIC, INC. 1113 WOODLAND DRIVE ELIZABETHTOWN, KY 42701	30-0042070	501(C)(3)	0.	104,837.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH NET 1202 STATE STREET ERIE, PA 16501	25-1490791	501(C)(3)	0.	212,020.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH NETWORK 218 E. HOUSE STREET ALVIN, TX 77511	41-2273820	501(C)(3)	0.	652,472.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH NORTHWEST FLORIDA 2315 WEST JACKSON STREET PENSACOLA, FL 32505	59-3105246	501(C)(3)	0.	236,303.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH OF EAST TENNESSEE 130 INDEPENDENCE LANE LAFOLETTE, TN 37766	58-1470587	501(C)(3)	0.	1,105,428.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH OF SOUTH FLORIDA 10300 SW 216 STREET MIAMI, FL 33190	59-1372690	501(C)(3)	502,800.	0.			POWER FOR HEALTH-FL, GA
COMMUNITY HEALTH OUTREACH- HEALING HANDS CLINIC - 5126 TIMUQUANA ROAD - JACKSONVILLE, FL 32210	59-3038067	501(C)(3)	0.	57,390.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH PARTNERS 112 WEST LEWIS STREET LIVINGSTON, MT 59047	84-1420492	501(C)(3)	0.	25,779.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTH SERVICES OF UNION COUNTY - 1338-C EAST SUNSET DRIVE - MONROE, NC 28112	46-0495947	501(C)(3)	0.	18,399.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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COMMUNITY HEALTH SYSTEMS, INC. DBA ACCESSHEALTH - 252 RURAL ACRES DRIVE - BECKLEY, WV 25801	55-0490878	501(C)(3)	0.	5,185.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HEALTHCARE NETWORK, INC. 60 MADISON AVENUE FLOOR 5 NEW YORK, NY 10010-1600	13-3083068	501(C)(3)	250,000.	0.			PFIZER INFECTIOUS DISEASE AWARDS
COMMUNITY HEALTHWORX 1543 MCGINNIS STREET ALEXANDRIA, LA 71301	72-1444312	501(C)(3)	0.	94,891.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY HELPING HANDS CLINIC 34- C COURTHOUSE SQUARE CLEVELAND, GA 30528	64-0950194	501(C)(3)	0.	445,146.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY MEDICAL CLINIC OF KERSHAW COUNTY - 110 C EAST DEKALB STREET - CAMDEN, SC 29020	57-1074191	501(C)(3)	0.	27,847.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY MEDICAL WELLNESS 1360 E. ANAHEIM STREET LONG BEACH, CA 90813	45-2424322	501(C)(3)	0.	527,753.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY OF HOPE 4 ATLANTIC STREET SW WASHINGTON, DC 20032	52-1184749	501(C)(3)	0.	398,299.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY OF HOPE FREE HEALTH CLINIC - 306 BUSH STREET - TOLEDO, OH 43604	92-1948217	501(C)(3)	0.	57,034.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY OF HOPE HEALTH SERVICES 4 ATLANTIC STREET, SW WASHINGTON, DC 20032	52-1184749	501(C)(3)	250,000.	0.			PFIZER INFECTIOUS DISEASE AWARDS, FUND FOR HEALTH EQUITY

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COMMUNITY OUTREACH HEALTH CLINIC W180 N8085 TOWN HALL ROAD MENOMONEE FALLS, WI 53051	39-1743056	501(C)(3)	0.	224,125.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY PARTNERS FOR AFFORDABLE HOUSING - 6380 SW CAPITOL HIGHWAY - PORTLAND, OR 97239	93-1155559	501(C)(3)	0.	13,656.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITY VOLUNTEERS IN MEDICINE 300 B LAWRENCE DRIVE WEST CHESTER, PA 19380	23-2944553	501(C)(3)	0.	604,006.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMMUNITYHEALTH 2611 W. CHICAGO AVENUE CHICAGO, IL 60622	36-3831793	501(C)(3)	0.	4,393,109.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMPASSION HEALTH TOLEDO 1638 BROADWAY STREET TOLEDO, OH 43609	47-3197108	501(C)(3)	0.	13,485.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COMPASSIONATE CARE OF SHELBY COUNTY - 124 N. OHIO AVENUE - SIDNEY, OH 45365	20-8479583	501(C)(3)	0.	312,421.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CONCILIO DE SALUD INTEGRAL DE LOIZA, INC - CARR. 187, INTERSECCION 188 - LOIZA, PR 00772	23-7259899	501(C)(3)	0.	17,329.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , OTHER	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CONSEJO RENAL DE PUERTO RICO P.O. BOX 10542 SAN JUAN, PR 00922	66-0408212	501(C)(3)	50,000.	0.			ABBVIE PR MEDICALLY FRAGILE POPULATIONS
COOPERATIVE CHRISTIAN 133 ARBOR STREET HOT SPRINGS, AR 71901	62-1671396	501(C)(3)	0.	30,699.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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CORNELL SCOTT-HILL HEALTH CORPORATION - 400-428 COLUMBUS AVENUE - NEW HAVEN, CT 06519	06-0870990	501(C)(3)	0.	5,688.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CORNERSTONE FAMILY HEALTHCARE 2570 U.S. HIGHWAY 9W CORNWALL, NY 12518	06-1036715	501(C)(3)	0.	12,518.	ESTIMATED WHOLESALE PRICE, PURCHASED	OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CORP DE SERVICIOS MEDICOS PRIMARIOS - CARRETERA PR-2 KM 86.6 - HATILLO, PR 00659	66-0427194	501(C)(3)	25,000.	0.			ABBVIE PR MEDICALLY FRAGILE POPULATIONS
CORPORACION DE SERVICIOS MEDICOS PRIMARIOS Y PREVENCIÓN DE HATILLO, INC. - CARR. NO. 2 KM86.6 INTERIOR, MARGINAL - HATILLO, PR	66-0427194	501(C)(3)	0.	125,683.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CORPORACION EL PUNTO EN LA MONTANA P.O. BOX 30183 SAN JUAN, PR 00929	66-0714669	501(C)(3)	100,000.	0.			PUERTO RICO
CORPORACION LA FONDITA DE JESUS P.O. BOX 19384 SAN JUAN, PR 00910	66-0426787	501(C)(3)	50,000.	0.			HURRICANE FIONA
CORPORACIN LA FONDITA DE JESS 704 CALLE MONSERRATE ESQ. FERNNDEZ SAN JUAN, PR 00907	66-0426787	501(C)(3)	0.	191,712.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CORPORACION SANOS AVE. RAFAEL CORDERO, ESQUINA TROCHE CAGUAS, PR 00725	66-0671421	501(C)(3)	0.	244,640.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COSSMA, INC. PARQUE INDUSTRIAL ANGORA, CARR. 1 K BARRIO BAIROA CAGUAS, PR 00725	66-0434923	501(C)(3)	0.	244,480.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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COSTA SALUD COMMUNITY HEALTH CENTERS RINCEN - CALLE MUNOZ RIVERA NO. 28 - RINCEN, PR 00677	66-0428488	501(C)(3)	0.	7,902.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COUNTY OF MAUI 200 SOUTH HIGH STREET WAILUKU, HI 96793	99-6000618	MAUI COUNTY	0.	22,765.	ESTIMATED WHOLESAL PRICE, PURCHASED	MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COUNTY OF MONTEREY HEALTH DEPARTMENT CLINIC SERVICES - 1441 SHILLINGS PLACE - SALINAS, CA 93901	94-6000524	MONTEREY COUNTY	0.	5,765.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COUNTY OF SANTA CRUZ HEALTH SERVICES AGENCY - HOMELESS PERSONS HEALTH PROJECT - 115A CORAL STREET - SANTA CRUZ, CA 95060	94-6000534	SANTA CRUZ COUNT	0.	13,554.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COVE HOUSE FREE CLINIC 108 EAST HALSTEAD STREET COPPERAS COVE, TX 76522	74-2764062	501(C)(3)	0.	1,040,689.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COVENANT COMMUNITY CARE, INC. 559 W GRAND BOULEVARD DETROIT, MI 48216	38-3533998	501(C)(3)	0.	281,634.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
COWETA SAMARITAN CLINIC 137 JACKSON STREET NEWMAN, GA 30263	80-0518912	501(C)(3)	0.	290,977.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CREEK VALLEY HEALTH CLINIC 20 SOUTH COLVIN STREET COLORADO CITY, AZ 86021	83-3039533	501(C)(3)	0.	5,526.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CRISIS CONTROL MINISTRY 200 E 10TH STREET WINSTON SALEM, NC 27101	23-7348168	501(C)(3)	0.	6,951.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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CROSSINGS COMMUNITY CLINIC NORTH PENN - 10255 N PENNSYLVANIA AVENUE - OKLAHOMA CITY, OK 73120	86-1115863	501(C)(3)	0.	439,249.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CROSS-OVER HEALTHCARE MINISTRY 8600 QUIOCCASIN ROAD RICHMOND, VA 23229	54-1371067	501(C)(3)	0.	273,640.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CROSSROADS CENTER MEDICAL CLINIC 444 VALPARAISO PARKWAY, BUILDING C VALPARAISO, FL 32580	20-5518720	501(C)(3)	0.	21,607.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CROSSROADS CLINIC/VOLUNTEERS IN MEDICINE - 10890 VETERANS MEMORIAL PARKWAY - WENTZVILLE, MO 63367	27-3109107	501(C)(3)	0.	17,772.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CROSSROADS HEALTHCARE CLINIC 100 CENTRAL AVENUE SUITE 173 CHEYENNE, WY 82007	83-0205887	501(C)(3)	0.	44,397.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CROWLEY HOUSE OF HOPE CLINIC 208 N. MAGNOLIA CROWLEY, TX 76036	75-2625043	501(C)(3)	0.	8,560.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CULPEPER WELLNESS FOUNDATION 19002 CROSSROAD PARKWAY CULPEPER, VA 22701	52-1366700	501(C)(3)	0.	17,566.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
CURTIS V COOPER PRIMARY HEALTHCARE, INC - 106 E BROAD STREET - SAVANNAH, GA 31401	58-1136296	501(C)(3)	0.	152,454.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DAP HEALTH 1695 N. SUNRISE WAY PALM SPRINGS, CA 92262	33-0068583	501(C)(3)	0.	87,341.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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DAVID RAINES COMMUNITY HEALTH CENTERS SHREVEPORT PHARMACY - 1625 DAVID RAINES ROAD - SHREVEPORT, LA 71107	58-2000630	501(C)(3)	0.	208,337.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DBA VIRGINIA B. ANDES VOLUNTEER COMMUNITY CLINIC VOLUNTEERS IN MEDICINE ALLIANCE - 21297 OLEAN BOULEVARD UNIT B - PORT CHARLOTTE,	65-0958642	501(C)(3)	0.	226,572.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DELTA HEALTH CENTER 702 MARTIN LUTHER KING MOUND BAYOU, MS 38762	64-0443928	501(C)(3)	250,000.	221,521.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS, PFIZER
DENVER HEALTH & HOSPITAL AUTHORITY 777 BANNOCK STREET DENVER, CO 80204	84-1343242	501(C)(3)	280,000.	0.			LILLY HEALTH EQUITY
DENVER INDIAN HEALTH AND FAMILY SERVICES - 2880 W HOLDEN PL - DENVER, CO 80204	84-0724261	501(C)(3)	0.	52,984.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DESERT STAR INST. FOR FAMILY PLANNING - 5501 NORTH 19TH AVENUE - PHOENIX, AZ 85015	82-1523284	501(C)(3)	0.	17,826.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DETROIT RECOVERY PROJECT 1121 E. MCNICHOLS ROAD DETROIT, MI 48203	43-2078767	501(C)(3)	0.	22,305.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DHHS, PHB, HC, NORTH COAST AIDS PROJECT HUMBOLDT COUNTY PUBLIC HEALTH - 908 7TH STREET - EUREKA, CA 95501	94-6000513	HUMBOLDT COUNTY	0.	30,979.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DIABETES ASSOCIATION OF PIERCE COUNTY PANTHER DAY CAMP - 2423 - 172ND PLACE SE - BOTHELL, WA 98012	91-1192064	501(C)(3)	0.	5,703.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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DIABETES CAMP OF WEST VIRGINIA CAMP KNO-KOMA - 364 PATTESON DRIVE NO. 284 - MORGANTOWN, WV 26505	55-0738182	501(C)(3)	0.	5,373.	ESTIMATED WHOLESALE PRICE	MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DIABETES FOUNDATION OF THE HIGH PLAINS CAMP NEW DAY - 1400 COULTER STREET - AMARILLO, TX 79106	47-1596568	501(C)(3)	0.	10,517.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DIABETES SOLUTIONS OF OKLAHOMA CAMP ENDRES - 3333 NW 63RD STREET - OKLAHOMA CITY, OK 73116	73-1590673	501(C)(3)	0.	11,955.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DIABETES YOUTH FOUNDATION OF INDIANA - 5050 E 211TH STREET - NOBLESVILLE, IN 46062	35-1783933	501(C)(3)	0.	13,494.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DIRECT RELIEF FOUNDATION 6100 WALLACE BECKNELL ROAD SANTA BARBARA, CA 93117	20-5983698	501(C)(3)	4,039,456.	0.			INTERCOMPANY TRANSFER OF FUNDS
DIVERSITY HEALTH CENTER, INC. 213 NORTH MCDONALD STREET LUDOWICI, GA 31316	20-5746618	501(C)(3)	0.	10,272.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DOCTORS CARE 609 W LITTLETON BOULEVARD LITTLETON, CO 80120	84-1150815	501(C)(3)	0.	27,723.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DOCTORS WITHOUT WALLS-SANTA BARBARA STREET MEDICINE - 220 W. CANON PERDIDO STREET - SANTA BARBARA, CA 93101	33-1210731	501(C)(3)	0.	13,187.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DOWNTOWN CLINIC 611 S. 2ND STREET LARAMIE, WY 82070	83-0326354	501(C)(3)	0.	18,527.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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DOWNTOWN EMERGENCY SERVICE CENTER (DESC) - 515 THIRD AVENUE - SEATTLE, WA 98104	91-1275815	501(C)(3)	0.	54,403.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DR. GARY BURNSTEIN COMMUNITY HEALTH CLINIC - 45580 WOODWARD AVENUE - PONTIAC, MI 48341	32-0015321	501(C)(3)	0.	237,124.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DREAM CENTERS WOMEN'S CLINIC 4360 MONTEBELLO DRIVE COLORADO SPRINGS, CO 80918	27-4876080	501(C)(3)	0.	273,031.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DUFFY HEALTH CENTER 94 MAIN STREET HYANNIS, MA 02601	04-3373741	501(C)(3)	0.	6,917.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DUPAGE HEALTH COALITION 511 THORNHILL DRIVE SUITE C CAROL STREAM, IL 60188	36-4448208	501(C)(3)	225,000.	60,345.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	FUND FOR HEALTH EQUITY, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
DYF - BEARSKIN MEADOW CAMP 5167 CLAYTON ROAD SUITE F CONCORD, CA 94521	94-6003673	501(C)(3)	0.	21,233.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
EAST CAROLINA UNIVERSITY PEDIATRIC SPECIALTY CARE CAMP NEEDLES IN THE PINES - 2150 HERBERT COURT - GREENVILLE, NC 27834	23-7138921	501(C)(3)	0.	8,093.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
EAST CENTRAL MS HEALTH CARE, INC. 1490 HIGHWAY 487 SEBASTOPOL, MS 39359	64-0610471	501(C)(3)	0.	117,249.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
EAST GEORGIA HEALTHCARE, INC. 215 NORTH COLEMAN STREET SWAINSBORO, GA 30401	58-2001607	501(C)(3)	0.	5,968.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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EAST HARLEM COUNCIL FOR HUMAN SERVICES, INC. BORIKEN NEIGHBORHOOD HEALTH CENTER - 2265 THIRD AVENUE - NEW YORK, NY	13-6213532	501(C)(3)	150,000.	13,632.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	FUND FOR HEALTH EQUITY, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED
EAST TEXAS COMMUNITY HEALTH SERVICES, INC. - P.O. BOX 632040 - NACOGDOCHES, TX 75963	75-2184369	501(C)(3)	200,000.	0.			CHAS TO PREVENT UNINTENDED PREGNANCY
EAST TEXAS COMMUNITY HEALTH SERVICES, INC. - 1401 S UNIVERSITY DRIVE - NACOGDOCHES, TX 75963	75-2184369	501(C)(3)	0.	6,476.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
EBENEZER MEDICAL OUTREACH 1448 10TH AVENUE, SUITE 100 HUNTINGTON, WV 25701	55-0745033	501(C)(3)	0.	25,619.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
EDWARD M. KENNEDY COMMUNITY HEALTH 115 NORTHEAST CUTOFF, SUITE 200 WORCESTER, MA 01606	04-2513817	501(C)(3)	200,000.	0.			ABBVIE HEALTH EQUITY
EL CENTRO DE CORAZON 7037 CAPITOL STREET, SUITE N100 HOUSTON, TX 77011	76-0442781	501(C)(3)	0.	23,136.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
EL DORADO COMMUNITY HEALTH CENTERS 4212 MISSOURI FLAT ROAD PLACERVILLE, CA 95667	42-1533531	501(C)(3)	0.	40,757.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
EL MILAGRO CLINIC 901 EAST VERMONT AVENUE MCALLEN, TX 78503	74-2784427	501(C)(3)	0.	7,985.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
EL PROYECTO DEL BARRIO 8902 WOODMAN AVENUE ARLETA, CA 91331	95-2662606	501(C)(3)	0.	740,527.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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EL PUNTO EN LA MONTANA, INC. AVE. PINO 2D 33 SAN JUAN, PR 00929	66-0714669	501(C)(3)	0.	109,377.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ELLIS COUNTY COALITION FOR HEALTH OPTION DBA HOPE CLINIC - 411 E. JEFFERSON STREET - WAXAHACHIE, TX 75165	75-2813621	501(C)(3)	0.	96,858.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
EMPOWER U COMMUNITY HEALTH CENTER 7900 NW 27TH AVENUE SUITE E-12 MIAMI, FL 33147	65-0899207	501(C)(3)	250,000.	0.			PFIZER INFECTIOUS DISEASE AWARDS
ERIC B. CHANDLER HEALTH CENTER 277 GEORGE STREET NEW BRUNSWICK, NJ 08901	22-3273811	501(C)(3)	0.	289,081.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ESPERANZA HEALTH CENTERS 1940 S WESTERN AVENUE CHICAGO, IL 60608	32-0115907	501(C)(3)	0.	111,059.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
EUNICE COMMUNITY HEALTH CENTER 450 MOOSA BOULEVARD, SUITE E EUNICE, LA 70535	27-0213992	501(C)(3)	0.	1,101,076.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
EXCELTH, INC. 1515 POYDRAS STREET NEW ORLEANS, LA 70112	72-1193464	501(C)(3)	0.	891,141.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAIR HAVEN COMMUNITY HEALTH CLINIC 374 GRAND AVENUE NEW HAVEN, CT 06513	06-0883545	501(C)(3)	0.	6,255.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAIRVIEW COMMUNITY HEALTH CENTER 225 NATCHEZ TRACE AVENUE BOWLING GREEN, KY 42103	61-1386859	501(C)(3)	0.	605,518.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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FAITH COMMUNITY HEALTH 1232 BRANSON HILLS PARKWAY BRANSON, MO 65616	94-3467834	501(C)(3)	0.	44,920.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAITH FAMILY MEDICAL CLINIC 326 21ST AVENUE NORTH NASHVILLE, TN 37203	62-1816811	501(C)(3)	0.	2,621,434.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAMILIES TOGETHER OF ORANGE COUNTY 661 W. 1ST ST. NO. G TUSTIN, CA 92780	20-0310654	501(C)(3)	0.	94,665.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAMILY CARE HEALTH CENTER 401 HOLLY HILLS AVENUE ST. LOUIS, MO 63111	23-7076112	501(C)(3)	0.	58,620.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAMILY CHRISTIAN HEALTH CENTER 31 W 155TH STREET HARVEY, IL 60426	36-4346917	501(C)(3)	250,000.	0.			PFIZER INFECTIOUS DISEASE AWARDS
FAMILY HEALTH CARE CENTERS OF GREATER LOS ANGELES BELL GARDENS FAMILY MEDICAL CE - 6001 E. WASHINGTON BOULEVARD - COMMERCE,	95-1641454	501(C)(3)	0.	87,286.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAMILY HEALTH CENTER OF CLARK COUNTY DBA FAMILY HEALTH CENTERS OF SOUTHERN INDIA - 1319 DUNCAN AVENUE - JEFFERSONVILLE, IN 47130	35-1842342	501(C)(3)	0.	146,072.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAMILY HEALTH CENTERS P.O. BOX 1340 OKANOGAN, WA 98840	91-1275011	501(C)(3)	0.	5,867.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAMILY HEALTH CENTERS INC 2215 PORTLAND AVENUE LOUISVILLE, KY 40212	61-0716483	501(C)(3)	0.	55,155.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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FAMILY HEALTH CENTERS OF SAN DIEGO 823 GATEWAY CENTER WAY SAN DIEGO, CA 92102-4541	95-2833205	501(C)(3)	225,000.	0.			ABBVIE HEALTH EQUITY
FAMILY HEALTH CENTERS OF SOUTHWEST FLORIDA - 12771 WESTLINKS DRIVE - FORT MYERS, FL 33913	59-1741273	501(C)(3)	0.	46,618.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAMILY HEALTH PARTNERSHIP 401 CONGRESS PARKWAY CRYSTAL LAKE, IL 60014	36-4277029	501(C)(3)	0.	20,616.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAMILY HEALTH SERVICES 260 3RD AVENUE N TWIN FALLS, ID 83301	82-0371093	501(C)(3)	0.	691,092.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAMILY HEALTH SERVICES, INC. 630 N. COTNER BOULEVARD, SUITE 204 LINCOLN, NE 68505	47-0548478	501(C)(3)	0.	11,668.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAMILY HEALTHCARE 25 NORTH 100 EAST ST. GEORGE, UT 84770	35-2163112	501(C)(3)	0.	43,861.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAMILY HEALTHCARE CENTER 301 NP AVENUE FARGO, ND 58102	45-0430628	501(C)(3)	0.	126,020.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAMILY PLANNING COUNCIL OF IOWA 2900 WESTOWN PARKWAY DES MOINES, IA 50266	42-1145646	501(C)(3)	0.	135,446.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FAMILY REACH FOUNDATION 142 BERKELEY STREET, 4TH FLOOR BOSTON, MA 02116	91-2192211	501(C)(3)	150,000.	0.			FUND FOR HEALTH EQUITY

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FATHER BOB ALLEN CHARITABLE CLINIC 815 THOMPSON AVENUE EL DORADO, AR 71730	71-0236863	501(C)(3)	0.	64,521.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FEED MY SHEEP FREE CHILDREN'S CLINIC - 116 W AVENUE G - TEMPLE, TX 76504	46-3436384	501(C)(3)	0.	207,216.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FEMHEALTH USA INC DBA CARAFEM 1001 CONNECTICUT AVENUE NW WASHINGTON, DC 20036	46-4144274	501(C)(3)	0.	14,340.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FERNCARE FREE CLINIC, INC. 751 E. NINE MILE ROAD FERNDAL, MI 48220	32-0246843	501(C)(3)	0.	21,585.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FETTER HEALTH CARE NETWORK 51 NASSAU STREET CHARLESTON, SC 29403	57-0604703	501(C)(3)	0.	842,993.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FINDLEY FOUNDATION INC DBA FINDLEY MEDICAL CLINIC - 6114 W CAPITOL DRIVE, SUITE 101 - MILWAUKEE, WI 53216	82-3097119	501(C)(3)	0.	1,692,396.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FIRST BAPTIST MEDICAL/DENTAL CLINIC - 1607 CHERRY STREET - VICKSBURG, MS 39181	64-0334158	501(C)(3)	0.	1,123,199.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FIRST CHOICE PRIMARY CARE 400 POPLAR STREET MACON, GA 31201	20-4391090	501(C)(3)	0.	53,798.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FIRST PRESBYTERIAN CHURCH WAUSAU FREE CLINIC - 100 WITHERSPOON STREET - LOUISVILLE, KY 40202	23-6393377	501(C)(3)	0.	151,124.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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FIRST REFUGE MINISTRIES MEDICAL CLINIC - 1701 BROADWAY STREET - DENTON, TX 76201	45-5606427	501(C)(3)	0.	26,684.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FIRST RESPONSE EMERGENCY MEDICAL SERVICES - URB. LOS MAESTROS - SAN JUAN, PR 00923	66-0489666	501(C)(3)	0.	61,750.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FISH RIVER RURAL HEALTH 12 BOLDOC AVENUE - MEDICAL FORT KENT, ME 04743	01-0452749	501(C)(3)	0.	31,545.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FIVE RIVERS HEALTH CENTERS 921 S EDWIN C. MOSES BOULEVARD DAYTON, OH 45417	45-0914398	501(C)(3)	0.	187,095.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FLAGLER COUNTY FREE CLINIC 703 E. MOODY BOULEVARD BUNNELL, FL 32110	20-5036975	501(C)(3)	0.	1,217,141.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FLATHEAD CITY-COUNTY HEALTH DEPARTMENT FLATHEAD FAMILY PLANNING - 1035 1ST AVENUE W - KALISPELL, MT 59901	81-6001361	501(C)(3)	0.	88,402.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FLORIDA DIABETES CAMP 1699 SW 16TH AVENUE, ROOM 2158 GAINESVILLE, FL 32608	23-7098099	501(C)(3)	0.	23,284.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FLORIDA INTERNATIONAL UNIVERSITY HERBERT WERTHEIM COLLEGE OF MEDICINE MOBILE HEA - 11200 SW 8TH STREET AHC 2, 559 - MIAMI, FL	65-0177616		0.	357,398.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FOOD WELL ALLIANCE 970 JEFFERSON STREET NW SUITE 2 ATLANTA, GA 30318	47-4363668	501(C)(3)	200,000.	0.			ABBVIE HEALTH EQUITY

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FOOTHILLS COMMUNITY HEALTH CARE 403 HILLCREST DRIVE EASLEY, SC 29640	26-2735317	501(C)(3)	0.	9,947.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FOOTPRINT PROJECT AR 1964 RAHNCLIFF COURT NO. 22068 EAGAN, MN 55122	82-4976481	501(C)(3)	250,000.	0.			GENERAL U.S. EMERGENCY PREP & RESPONSE
FOREMOST FAMILY HEALTH CENTER 2922-B MARTIN LUTHER KING JR. BOULE DALLAS, TX 75215	75-2098992	501(C)(3)	0.	317,224.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FORSYTH COMMUNITY CLINIC 102 MARY ALICE PARK ROAD, SUITE 803 CUMMING, GA 30040	83-1958197	501(C)(3)	0.	8,358.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FORT BEND FAMILY HEALTH CENTER ACCESSHEALTH - 400 AUSTIN STREET - RICHMOND, TX 77469	74-1951476	501(C)(3)	0.	1,013,488.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FOUNDATION FOR CHILDREN AND YOUTH WITH DIABETES FCYD CAMP UTADA - 1995 WEST 9000 SOUTH - WEST JORDAN, UT 84088	87-0642251	501(C)(3)	0.	125,024.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FOUNDATION FOR RECOVERY 4800 ALPINE PLACE, SUITE 12 LAS VEGAS, NV 89107	20-3380211	501(C)(3)	0.	60,942.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FRANKLIN COUNTY COMMUNITY CARE 506 TEXAS STATE HIGHWAY 37 MOUNT VERNON, TX 75457	35-2593143	501(C)(3)	0.	1,701,078.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FREDERIKSTED HEALTH CARE, INC. 516 STRAND STREET ST. CROIX, VI 00840	66-0586667	501(C)(3)	0.	67,787.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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FREE CLINIC OF FRANKLIN COUNTY BERNARD HEALTHCARE CLINIC PHARMACY - 1171 FRANKLIN STREET - ROCKY MOUNT, VA 24151	54-1634138	501(C)(3)	0.	68,084.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FREE CLINIC OF MERIDIAN, INC. 4707 POPLAR SPRINGS DRIVE MERIDIAN, MS 39305	45-5309446	501(C)(3)	0.	173,746.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FREE CLINIC OF ROCKINGHAM COUNTY 315 S. MAIN STREET REIDSVILLE, NC 27320	56-2003143	501(C)(3)	0.	29,802.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FREE CLINIC OF ROME 3 PROFESSIONAL COURT SW ROME, GA 30165	20-5296305	501(C)(3)	0.	642,010.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FREE CLINIC OF SIMI VALLEY 2003 ROYAL AVENUE SIMI VALLEY, CA 93065	23-7108154	501(C)(3)	0.	207,328.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FREE CLINIC OF THE TWIN COUNTIES 140 LARKSPUR LANE SUITE C GALAX, VA 24333	54-1632194	501(C)(3)	0.	12,852.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FREE CLINICS OF HENDERSON COUNTY 841 CASE STREET HENDERSONVILLE, NC 28792	56-2212024	501(C)(3)	0.	278,180.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FREE CLINICS OF IOWA P.O. BOX 12099 DES MOINES, IA 50312	42-1428706	501(C)(3)	0.	39,241.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FREE MEDICAL CLINIC OF OAK RIDGE, INC. - 116 EAST DIVISION ROAD - OAK RIDGE, TN 37830	90-0715369	501(C)(3)	0.	38,783.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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FREE MEDICAL CLINIC OF THE OZARKS 400 SOUTH SUNSHINE STREET BRANSON, MO 65616	73-1524435	501(C)(3)	0.	882,518.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FRIENDS IN NEED HEALTH CENTER, INC. - 1916 BROOKSIDE DRIVE - KINGSPORT, TN 37660	62-1541637	501(C)(3)	0.	262,251.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FRIENDS OF EDNA'S MATERNITY HOSPITAL - 426 GREENVILLE LANE - HAVERTOWN, PA 19083	41-1964357	501(C)(3)	100,000.	0.			GENERAL HEALTHCARE PROVIDER SUPPORT
FRIENDSHIP MEDICAL CLINIC, INC. 1396 HIGHWAY 544 CONWAY, SC 29526	30-0127648	501(C)(3)	0.	83,215.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FRONTERA HEALTHCARE NETWORK 604 EAKER STREET EDEN, TX 76837	75-2854259	501(C)(3)	0.	5,460.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
FUNDACION CENTRO PEDIATRICO DE DIABETES - 260 CONVENTO STREET - SANTURCE, PR 00912	66-0597488	501(C)(3)	75,000.	0.			BAXTER INNOVATION AWARDS, HURRICANE FIONA
FUNDACION DE NINOS DE PUERTO RICO 253 C. SAN JORGE, SUITE 2A SAN JUAN, PR 00912	66-0531105	501(C)(3)	25,000.	0.			ABBVIE PR MEDICALLY FRAGILE POPULATIONS
FUNDACION MANOS JUNTAS 1145 W INTERSTATE 240 SERVICE ROAD OKLAHOMA CITY, OK 73139	73-1523135	501(C)(3)	0.	283,593.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
G A CARMICHAEL FHC 1668 WEST PEACE STREET CANTON, MS 39046	64-0580940	501(C)(3)	0.	5,675.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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GAIN, INC 712 W 3RD STREET LITTLE ROCK, AR 72201	71-0763418	501(C)(3)	0.	172,818.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GALES CREEK CAMP FOUNDATION 6950 SW HAMPTON STREET TIGARD, OR 97223	93-6010464	501(C)(3)	0.	13,463.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GARDEN OF EDEN HEALTH CENTER CORPORATION - ROAD 141 KM 13.1 VISTA ALEGRE, MAME - JAYUYA, PR 00664	66-0869427	501(C)(3)	0.	240,397.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GENERATIONS FAMILY HEALTH CENTER 40 MANSFIELD AVENUE WILLIMANTIC, CT 06226	22-3158253	501(C)(3)	0.	27,572.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GENESIS COMMUNITY HEALTH 215 W 35TH STREET GARDEN CITY, ID 83714	82-0505073	501(C)(3)	0.	90,041.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GENESIS COMMUNITY HEALTH INC. 639 EAST OCEAN AVENUE BOYNTON BEACH, FL 33435	80-0374741	501(C)(3)	0.	174,608.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GENESIS FAMILY HEALTH 224 N. TAYLOR AVENUE NO. 1 GARDEN CITY, KS 67846	48-1049519	501(C)(3)	0.	57,414.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GENESIS HEALTH SERVICES, INC. 707 7TH STREET W PALMETTO, FL 34221	65-0478868	501(C)(3)	0.	343,596.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GET UP PROJECT DBA HOPE MEDICAL CLINIC - 8101 CAMERON ROAD - AUSTIN, TX 78754	45-4931906	501(C)(3)	0.	113,418.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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GIRLTREK, INC 1800 WYOMING AVENUE WASHINGTON, DC 20009	06-1811886	501(C)(3)	200,000.	0.			LILLY HEALTH EQUITY
GOOD HEALTH CLINIC 91555 OVERSEAS HIGHWAY NO. 2 TAVERNIER, FL 33070	04-3745805	501(C)(3)	0.	292,209.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD NEIGHBOR FREE MEDICAL CLINIC OF BEAUFORT - 974 RIBAUT ROAD - BEAUFORT, SC 29902	26-0335357	501(C)(3)	0.	12,432.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD NEIGHBOR HEALTH CLINIC 70 NORTH MAIN STREET WHITE RIVER JUNCTION, VT 05001	03-0346994	501(C)(3)	0.	11,479.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD NEWS CARE CENTER 7855 SW 104TH STREET MIAMI, FL 33156	59-0914210	501(C)(3)	0.	14,214.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD NEWS CLINICS 810 PINE STREET GAINESVILLE, GA 30501	58-2058853	501(C)(3)	0.	402,044.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD NEWS HEALTH CLINIC 2716 EAST WASHINGTON STREET INDIANAPOLIS, IN 46201	35-0999233	501(C)(3)	0.	19,303.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD SAMARITAN 175 SAMARITAN DRIVE JASPER, GA 30143	58-2576315	501(C)(3)	0.	11,056.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD SAMARITAN CLINIC 1400 S ZERO STREET FORT SMITH, AR 72901	71-0863639	501(C)(3)	0.	923,571.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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GOOD SAMARITAN CLINIC 3880 WATERMELON ROAD, SUITE A TUSCALOOSA, AL 35473	63-1199900	501(C)(3)	0.	143,543.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD SAMARITAN CLINIC 4435 GULF BREEZE PARKWAY GULF BREEZE, FL 32563	59-3690750	501(C)(3)	0.	140,062.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD SAMARITAN CLINIC 136 E. PLYMOUTH AVENUE DELAND, FL 32724	30-0408193	501(C)(3)	0.	14,698.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD SAMARITAN HEALTH CLINIC OF PASCO - 5334 ASPEN STREET - NEW PORT RICHEY, FL 34652	59-3072334	501(C)(3)	0.	149,641.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD SAMARITAN HEALTH DBA WILDFLOWER HEALTHCARE - 268 HERBERT STREET - ST AUGUSTINE, FL 32084	52-2125419	501(C)(3)	0.	114,241.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD SAMARITAN HEALTH SERVICES 1422 E 71ST STREET, SUITE B TULSA, OK 74136	73-1559561	501(C)(3)	0.	233,949.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD SAMARITAN HEALTH SERVICES 420 MAGAZINE STREET TUPELO, MS 38804	58-1986683	501(C)(3)	0.	144,503.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD SAMARITAN PHARMACY 2502 NO. TAMiami TRAIL NOKOMIS, FL 34275	26-2295558	501(C)(3)	0.	67,769.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD SAMARITAN SHELTER ADMINISTRATION - 245 E. INGER DRIVE, NO. 103B - SANTA MARIA, CA 93458	77-0133375	501(C)(3)	0.	25,742.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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GOOD SHEPHERD CLINIC 6392 MURPHY DRIVE MORROW, GA 30260	58-2578581	501(C)(3)	0.	76,284.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GOOD SHEPHERD FREE MEDICAL CLINIC 307 NORTH BROAD STREET CLINTON, SC 29325	57-0996466	501(C)(3)	0.	59,043.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GRACE COMMUNITY HEALTH CENTER 1019 CUMBERLAND FALLS HIGHWAY CORBIN, KY 40701	26-1779437	501(C)(3)	0.	73,712.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GRACE HEALTHCARE SERVICES CORP DBA GRACE PHARMACY - 1329 SW 16TH STREET - GAINESVILLE, FL 32610	81-4300044	501(C)(3)	0.	89,178.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GRACE MEDICAL HOME 1417 E. CONDCORD STREET ORLANDO, FL 32803	26-1817966	501(C)(3)	75,000.	635,996.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS, ACCESS TO
GRACE OUTREACH TO HEALTH 837 EAST WALNUT STREET GRAPEVINE, TX 76051	75-2195702	501(C)(3)	0.	45,866.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GRACELIGHT COMMUNITY HEALTH 4816 EAST 3RD STREET LOS ANGELES, CA 90022	95-3702136	501(C)(3)	0.	20,256.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GRANT PARK CLINIC 1340 BOULEVARD SE ATLANTA, GA 30315	58-1577640	501(C)(3)	0.	86,365.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GRANVILLE VANCE PUBLIC HEALTH GRANVILLE COUNTY HEALTH DEPARTMENT - 1032 COLLEGE STREET - OXFORD, NC 27565	56-1060453	GRANVILLE COUNTY	0.	114,406.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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GRASSROOTS HEALTHCARE FOUNDATION 743 E. TABOR AVE FAIRFIELD, CA 94533	32-0600776	501(C)(3)	0.	169,479.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GREATER GREENWOOD UNITED MINISTRY 1404 EDGEFIELD STREET GREENWOOD, SC 29646	57-1012393	501(C)(3)	0.	20,175.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GREATER HARTFORD HARM REDUCTION COALITION INC. - 28 GRAND STREET - HARTFORD, CT 06106	47-4312705	501(C)(3)	0.	127,727.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GREATER HICKORY COOPERATIVE COMMUNITY HEALTH CENTER - 31 1ST AVENUE SE - HICKORY, NC 28602	56-0934855	501(C)(3)	0.	234,780.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GREATER KILLEEN FREE CLINIC 718 N. 2ND STREET, SUITE A KILLEEN, TX 76541	74-2724725	501(C)(3)	0.	442,172.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GREATER TEXOMA HEALTH CLINIC 900 N. ARMSTRONG DENISON, TX 75020	81-0584983	501(C)(3)	0.	403,409.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GREENE COUNTY HEALTH CARE INCORPORATED - 7 PROFESSIONAL DRIVE - SNOW HILL, NC 28580	56-0992353	501(C)(3)	0.	443,167.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GREENVILLE FREE MEDICAL CLINIC 600 ARLINGTON AVENUE GREENVILLE, SC 29601	57-0855205	501(C)(3)	0.	1,951,353.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
GUADALUPE CLINIC 940 S. ST. FRANCIS WICHITA, KS 67211	20-1285208	501(C)(3)	0.	645,877.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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GULF COAST HEALTH CENTER 2548 MEMORIAL BOULEVARD PORT ARTHUR, TX 77640	76-0289927	501(C)(3)	0.	805,634.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HAMILTON COUNTY HEALTH DEPARTMENT 730 EAST 11TH STREET CHATTANOOGA, TN 37403	62-6000636	HAMILTON COUNTY	0.	58,933.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HAMPTON ROADS COMMUNITY HEALTH CENTER - 1541 HIGH STREET - PORTSMOUTH, VA 23704	54-1626757	501(C)(3)	0.	27,482.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HANCOCK PUBLIC HEALTH 2225 KEITH PARKWAY FINDLAY, OH 45840	34-6400608	HANCOCK COUNTY	0.	90,614.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HAND IN HAND MANO EN MANO 4 MAPLE STREET MILBRIDGE, ME 04658	01-0836208	501(C)(3)	0.	20,191.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HANDS OF HOPE CLINIC 1010 HOSPITAL DRIVE STOCKBRIDGE, GA 30281	42-1591970	501(C)(3)	0.	83,105.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HANDS OF HOPE MEDICAL CLINIC 320 WEST MAPLE STREET YADKINVILLE, NC 27055	27-5569145	501(C)(3)	0.	840,220.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HANNIBAL FREE CLINIC 160 PROGRESS ROAD HANNIBAL, MO 63401	14-1979983	501(C)(3)	0.	16,681.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HARBOR HEALTH SERVICES 735 ATTUCKS LANE HYANNIS, MA 02601	23-7100550	501(C)(3)	0.	92,885.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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HARLEM UNITED COMMUNITY HEALTH CENTER - 169 WEST 133RD STREET - NEW YORK, NY 10030	13-3461695	501(C)(3)	0.	5,629.	ESTIMATED WHOLESALE PRICE, PURCHASED	OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HARM REDUCTION CIRCLE 2960 WARNER AVENUE IRVINE, CA 92606	87-3878214	501(C)(3)	0.	15,101.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HARM REDUCTION OHIO 935 RIVER ROAD SUITE G GRANVILLE, OH 43023	82-5110907	501(C)(3)	0.	158,888.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HARM REDUCTION SERVICES 2800 STOCKTON BOULEVARD SACRAMENTO, CA 95817	68-0300656	501(C)(3)	0.	25,527.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HARMONY HEALTH CLINIC VOLUNTEERS IN MEDICINE - 201 EAST ROOSEVELT ROAD - LITTLE ROCK, AR 72206	20-5691313	501(C)(3)	0.	284,879.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HARNEY COUNTY HEALTH DEPARTMENT 420 NORTH FAIRVIEW AVENUE BURNS, OR 97720	93-6002296	HARNEY COUNTY	0.	96,763.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HASTINGS FAMILY CARE 715 N KANSAS AVE HASTINGS, NE 68901	47-0378779	501(C)(3)	0.	12,879.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HAWAII PRIMARY CARE ASSOCIATION 1003 BISHOP STREET HONOLULU, HI 96813	99-0268275	501(C)(3)	130,000.	0.			SAFETY NET SUPPORT, HAWAII WILDFIRES
HAWAII H.O.M.E. PROJECT 651 ILALO STREET HONOLULU, HI 96813	99-0085260	501(C)(3)	0.	254,639.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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HAWAII HEALTH AND HARM REDUCTION CENTER - 677 ALA MOANA - HONOLULU, HI 96813	99-0284222	501(C)(3)	0.	65,931.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HAWAII STATE DEPARTMENT OF HEALTH 1250 PUNCHBOWL STREET HONOLULU, HI 96813	99-6000449	STATE OF HAWAII	0.	700,703.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEAL THE CITY FREE CLINIC 609 S CAROLINA STREET AMARILLO, TX 79106	46-5694050	501(C)(3)	0.	822,645.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALING BRIDGE CLINC 215 WILLOW BEND ROAD PEACHTREE CITY, GA 30269	26-3555799	501(C)(3)	0.	18,279.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALING COMMUNITY CENTER 3915 CASCADE ROAD ATLANTA, GA 30331	26-3990559	501(C)(3)	0.	296,570.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH ACCESS FOR ALL INC. DBA ANGELES COMMUNITY HEALTH CENTER - 1919 W 7TH STREET - LOS ANGELES, CA 90057	46-2972741	501(C)(3)	0.	597,956.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH ACCESS, INC. 489 WASHINGTON AVENUE CLARKSBURG, WV 26301	55-0715066	501(C)(3)	0.	352,976.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH ALLIANCE FOR THE UNINSURED 3000 UNITED FOUNDERS BOULEVARD OKLAHOMA CITY, OK 73112	26-1789292	501(C)(3)	0.	52,584.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH AND HOPE CLINIC, INC. 1718 EAST OLIVE ROAD PENSACOLA, FL 32514	26-4336638	501(C)(3)	0.	697,334.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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HEALTH BRIGADE 1010 N. THOMPSON STREET RICHMOND, VA 23230	54-0927792	501(C)(3)	0.	247,171.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH CENTER OF SOUTHEAST TEXAS 307 N. WILLIAM BARNETT AVENUE CLEVELAND, TX 77327	56-2508501	501(C)(3)	0.	324,732.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH FOR ALL 3030 EAST 29TH STREET, SUITE 111 BRYAN, TX 77802	74-2624477	501(C)(3)	0.	124,469.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH HELP DBA WHITE HOUSE CLINICS - 1010 MAIN STREET SOUTH - MCKEE, KY 40447	61-0843731	501(C)(3)	0.	16,428.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH MINISTRIES CLINIC PHARMACY 720 MEDICAL CENTER DRIVE NEWTON, KS 67114	48-1091875	501(C)(3)	0.	85,717.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH OUTREACH PREVENTION EDUCATION, INC (H.O.P.E.) - 3540 E 31ST STREET, SUITE 3 - TULSA, OK 74135	73-1537952	501(C)(3)	140,000.	0.			FUND FOR HEALTH EQUITY
HEALTH PARTNERS FREE CLINIC 1300 NORTH COUNTY ROAD 25A TROY, OH 45373	31-1596731	501(C)(3)	0.	783,036.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH PARTNERS OF WESTERN OHIO 441 EAST 8TH STREET LIMA, OH 45804	56-2330309	501(C)(3)	0.	50,498.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH PARTNERSHIP CLINIC 405 S. CLAIREBORNE ROAD OLATHE, KS 66062	48-1115529	501(C)(3)	0.	8,950.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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HEALTH PROMED FOUNDATION, INC. AVE. BORINQUEN B.O OBRERO NO. 2020 SAN JUAN, PR 00916	66-0437924	501(C)(3)	0.	46,805.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH SERVICE ALLIANCE 13193 CENTRAL AVENUE CHINO, CA 91710	13-4257391	501(C)(3)	0.	107,586.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH SERVICES INC. 1845 CHERRY STREET MONTGOMERY, AL 36107	63-0568762	501(C)(3)	0.	428,201.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH SERVICES OF NORTH TEXAS 4401 N. INTERSTATE 35E, SUITE 312 DENTON, TX 76207	75-2252866	501(C)(3)	0.	223,473.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTH WEST - LAVA CLINIC 85 SOUTH 5TH WEST LAVA HOT SPRINGS, ID 83246	82-0324100	501(C)(3)	0.	43,211.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTHCARE CHOICES NY, INC. 6209 16TH AVENUE BROOKLYN, NY 11204	11-3488520	501(C)(3)	0.	6,889.	ESTIMATED WHOLESALE PRICE, PURCHASED	OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTHCARE FOR THE HOMELESS-HOUSTON - 1934 CAROLINE STREET - HOUSTON, TX 77002	76-0647934	501(C)(3)	0.	368,083.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTHFINDERS COLLABORATIVE 1415 TOWN SQUARE LANE FARIBAULT, MN 55021	20-1805262	501(C)(3)	0.	26,220.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTHFIRST NETWORK 216 S 3RD AVENUE WAUSAU, WI 54401	39-1206364	501(C)(3)	0.	37,092.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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HEALTHLINC, INC. 2401 VALLEY DRIVE VALPARAISO, IN 46383	35-2147791	501(C)(3)	0.	137,656.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTHLINK DENTAL CLINIC 444 N. YORK ROAD HATBORO, PA 19040	23-2998708	501(C)(3)	0.	8,413.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTHNET OF ROCK COUNTY, INC. 113 S FRANKLIN STREET JANESVILLE, WI 53548	39-1778804	501(C)(3)	0.	111,701.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTHQUEST 415 E FRANKLIN STREET MONROE, NC 28112	56-2117596	501(C)(3)	0.	63,003.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTHREACH COMMUNITY CLINIC 400 E STATESVILLE AVE, SUITE 300 MOORESVILLE, NC 28115	20-1020941	501(C)(3)	0.	142,394.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTHREACH COMMUNITY HEALTH CENTERS - 10 WATER STREET, SUITE 305 - WATERVILLE, ME 04901	01-6023664	501(C)(3)	0.	115,184.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTHRIGHT 360/HAIGHT ASHBURY FREE CLINIC MISSION STREET - ADMINISTRATION - 1735 MISSION STREET - SAN FRANCISCO, CA 94103	94-6129071	501(C)(3)	0.	31,293.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTHWORKS FOR NORTH VIRGINIA 163 FORT EVANS ROAD LEESBURG, VA 20176	20-2379419	501(C)(3)	0.	7,447.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEALTHY MOTHERS HEALTHY BABIES COAL - 245 N KUKUI STREET, SUITE 102A - HONOLULU, HI 96817	99-0299264	501(C)(3)	550,000.	0.			FUND FOR HEALTH EQUITY, HAWAII WILDFIRES

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HEALTHY MOTHERS HEALTHY BABIES COALITION OF HAWAII - 245 N KUKUI STREET - HONOLULU, HI 96817	99-0299264	501(C)(3)	0.	486,484.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEART OF KANSAS FAMILY HEALTHCARE INC - 1905 19TH STREET - GREAT BEND, KS 67530	48-1165405	501(C)(3)	0.	36,188.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEART OF OHIO FAMILY HEALTH CENTERS - 882 S. HAMILTON ROAD - COLUMBUS, OH 43213	38-3765547	501(C)(3)	200,000.	0.			CHAS TO PREVENT UNINTENDED PREGNANCY
HEARTLAND MEDICAL CLINIC, INC. DBA HEARTLAND COMMUNITY HEALTH CENTER - 1312 WEST 6TH STREET - LAWRENCE, KS 66044	48-1221800	501(C)(3)	0.	131,103.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HELPING HANDS HEALTH AND WELLNESS CENTER - 5100 KARL ROAD - COLUMBUS, OH 43229	20-5937457	501(C)(3)	0.	118,185.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEMOPHILIA FOUNDATION OF NORTHERN CALIFORNIA CAMP HEMOTION - 1155-C ARNOLD DRIVE NO. 236 - MARTINEZ, CA 94553	94-1638703	501(C)(3)	0.	111,619.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HEMOPHILIA TREATMENT CENTER 2401 TERRA CROSSING BOULEVARD, SUIT LOUISVILLE, KY 40245	84-2961011	501(C)(3)	0.	86,565.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HENDERSON BEHAVIORAL HEALTH HILL PROGRAM - 4700 NORTH STATE ROAD 7 - LAUDERDALE LAKES, FL 33319	59-0711167	501(C)(3)	0.	5,384.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HENDERSON HEALTH CENTER 1132 INDUSTRIAL DRIVE HENDERSON, TN 38340	58-1995646	501(C)(3)	0.	749,819.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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HENNEPIN HEALTHCARE SYSTEM 701 PARK AVENUE S MINNEAPOLIS, MN 55415	42-1707837	501(C)(3)	0.	5,760.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HENRY J. AUSTIN HEALTH CENTER, INC. - 321 NORTH WARREN STREET - TRENTON, NJ 08618	22-2682708	501(C)(3)	0.	24,899.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HERMANAS CARMELITAS TERESAS DE SAN JOS (HOGAR TERESA TODA) - CALLE 5A R14 URB, VILLAS DE LOZA - LOZA, PR 00729	66-0488810	501(C)(3)	25,000.	0.			ABBVIE PR MEDICALLY FRAGILE POPULATIONS
HMM HEALTH 8515 GREENVILLE AVENUE SUITE N-108 DALLAS, TX 75243	65-1259379	501(C)(3)	0.	24,476.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HIGHLANDS HEALTH LAUREL HIGHLANDS FREE & CHARITABLE CLINIC - 315 LOCUST STREET - JOHNSTOWN, PA 15901	23-2922409	501(C)(3)	0.	1,099,127.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HILL COUNTRY HEALTH AND WELLNESS CENTER - 29632 HWY 299 EAST - ROUND MOUNTAIN, CA 96084	94-2831597	501(C)(3)	0.	17,268.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HILL COUNTRY MISSION FOR HEALTH 122 COMMERCE AVENUE BOERNE, TX 78006	48-1262832	501(C)(3)	0.	7,510.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HIS HANDS FREE CLINIC 1245 2ND AVENUE SE CEDAR RAPIDS, IA 52403	39-1878606	501(C)(3)	0.	114,693.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HISPANIC COMMUNITY SERVICES, INC. 211 VANDYNE STREET JONESBORO, AR 72401	68-0561016	501(C)(3)	0.	9,794.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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HISPANIC HEALTH COALITION, INC. 2626 S LOOP W SUITE 650R HOUSTON, TX 77054-2654	76-0609180	501(C)(3)	95,000.	0.			FUND FOR HEALTH EQUITY
HIV ALLIANCE 1195 CITY VIEW EUGENE, OR 97402	93-0963546	501(C)(3)	0.	402,968.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HIV/AIDS ALLIANCE FOR REGION TWO 9516 AIRLINE HIGHWAY BATON ROUGE, LA 70815	72-1283359	501(C)(3)	0.	76,356.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HOLLAND FREE HEALTH CLINIC 99 WEST 26TH STREET HOLLAND, MI 49423	30-0072620	501(C)(3)	0.	25,669.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HOMELESS HEALTH CARE LOS ANGELES 512 E 4TH STREET LOS ANGELES, CA 90013	95-4074970	501(C)(3)	0.	78,728.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HOMESTEAD COMMUNITY HEALTH CENTER 151 NW 11 STREET HOMESTEAD, FL 33030	84-2514662	501(C)(3)	0.	17,885.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HOMETOWN HEALTH CENTERS 1044 STATE STREET SCHENECTADY, NY 12307	14-1636222	501(C)(3)	0.	15,064.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HOPE CARE CLINIC 1625 N WENATCHEE AVENUE WENATCHEE, WA 98801	84-3948838	501(C)(3)	0.	9,284.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HOPE CLINIC 518 HARRIET STREET YPSILANTI, MI 48197	38-2469007	501(C)(3)	0.	502,978.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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HOPE CLINIC 203 NORTH STREET BAYBORO, NC 28515	56-2114681	501(C)(3)	0.	259,140.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HOPE CLINIC AND CARE CENTER 1814 APPLETON ROAD MENASHA, WI 54952	47-3031346	501(C)(3)	0.	692,780.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HOPE CLINIC FOR WOMEN 1602 21ST STREET GRANITE CITY, IL 62040	37-1017984		0.	21,922.	PURCHASED PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HOPE CLINIC OF GARLAND INC 800 S. SIXTH STREET, SUITE 100 GARLAND, TX 75040	75-2960314	501(C)(3)	0.	235,211.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HOPE CLINIC OF MCKINNEY 103 E. LAMAR STREET MCKINNEY, TX 75070	81-3813928	501(C)(3)	0.	94,051.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HOPE HEALTH CLINIC 1023 SANIBEL WAY SUITE C LAGRANGE, KY 40031	45-2340606	501(C)(3)	0.	191,527.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HOPE MEDICAL CLINIC 150 BEACH DRIVE DESTIN, FL 32541	26-3811078	501(C)(3)	0.	476,599.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HOPELIGHT MEDICAL CLINIC 1351 COLLYER STREET LONGMONT, CO 80501	46-4657471	501(C)(3)	0.	341,247.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HORIZON HEALTH CARE, INC. ADMINISTRATION - 109 NORTH MAIN STREET - HOWARD, SD 57349	46-0341255	501(C)(3)	0.	583,945.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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HORIZONS HEALTH COASTAL HORIZONS CENTER, INC. - 613 SHIPYARD BOULEVARD - WILMINGTON, NC 28412	56-0950370	501(C)(3)	0.	196,617.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HOUSING WORKS, INC. 57 WILLOUGHBY STREET, FLOOR 2 BROOKLYN, NY 11201	13-3826364	501(C)(3)	250,000.	0.			PFIZER INFECTIOUS DISEASE AWARDS
HOWARD COUNTY PUBLIC SCHOOL SYSTEM 10920 CLARKSVILLE PIKE ELLICOTT CITY, MD 21042	52-0000968	501(C)(3)	0.	12,480.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HUI NO KE OLA PONO 95 MAHALANI STREET WAILUKU, HI 96793	99-0287193	501(C)(3)	1,050,000.	0.			HAWAII WILDFIRES
HUI NO KE OLA PONO 95 MAHALANI STREET WAILUKU, HI 96793	99-0287193	501(C)(3)	0.	101,906.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HUMBOLDT AREA CENTER FOR HARM REDUCTION - 625 11TH STREET - ARCATA, CA 95521	47-2822261	501(C)(3)	0.	57,369.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HYDE COUNTY HEALTH DEPARTMENT 1151 MAIN STREET SWAN QUARTER, NC 27885	56-6000308	HYDE COUNTY	0.	21,148.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
HYNDMAN AREA HEALTH CENTER 104 RAILROAD STREET BEDFORD, PA 15522	25-1343824	501(C)(3)	0.	32,034.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ICNA RELIEF USA PROGRAMS INC DBA SHIFA FREE CLINIC - 668 MARINA DR SUITE A-5 - CHARLESTON, SC 29492	04-3810161	501(C)(3)	0.	871,447.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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IDAHO DIABETES YOUTH PROGRAMS CAMP HODIA - 5439 W KENDALL STREET - BOISE, ID 83706	31-1565651	501(C)(3)	0.	9,043.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
IMPERIAL BEACH COMMUNITY CLINIC 2232 VERUS STREET, SUITE I SAN DIEGO, CA 92154	23-7209592	501(C)(3)	0.	51,423.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
INDIAN AMERICAN MEDICAL ASSOCIATION CHARITABLE FOUNDATION FREE HEALTH CLINIC - 2645 W PETERSON AVENUE - CHICAGO, IL	36-3910201	501(C)(3)	0.	30,111.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
INDIANA FAMILY HEALTH COUNCIL 151 N DELAWARE STREET, SUITE 520 INDIANAPOLIS, IN 46204	35-1373319	501(C)(3)	0.	43,699.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
INHEALTH COMMUNITYFREE CLINIC 109 1/2 E BLUFF STREET BOSCOBEL, WI 53805	33-1170597	501(C)(3)	0.	15,838.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
INICIATIVA COMUNITARIA DE INVESTIGACION, INC. - AVE. QUISQUEYA NO. 61 - HATO REY, PR 00918	66-0483960	501(C)(3)	0.	10,963.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
INLAND BEHAVIORAL HEALTH SERVICES INC. - 1963 NORTH E STREET - SAN BERNARDINO, CA 92405	95-3246624	501(C)(3)	0.	11,560.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
INNIS COMMUNITY HEALTH CENTER, INC 6450 LA HIGHWAY 1 BATCHELOR, LA 70715	72-1505179	501(C)(3)	0.	408,517.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
INTEGRATED HEALTH CARE SYSTEMS 31 W 20TH STREET RIVIERA BEACH, FL 33404	42-1615117	501(C)(3)	0.	66,380.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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INTERCAMBIOS PUERTO RICO INC. NO. 165 CALLE DIEGO ZALDUONDO FAJARDO, PR 00738	66-0731885	501(C)(3)	150,000.	30,825.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	PUERTO RICO, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
IRONBOUND COMMUNITY HEALTH CENTER, INC. - 788 MOUNT PROSPECT AVENUE, FLOOR 2 - NEWARK, NJ 07104	85-0829120	501(C)(3)	0.	7,433.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ISLAND HEALTH & WELLNESS CENTER 481-2 CHOCOLATE HOLE 2D ST. JOHN, VI 00830	66-0852135	501(C)(3)	0.	75,548.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ISLANDS COMMUNITY MEDICAL SERVICES 15 MEDICAL CENTER LOOP VINALHAVEN, ME 04863	01-6012835	501(C)(3)	0.	68,274.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ITHACA HEALTH ALLIANCE 521 WEST SENECA STREET ITHACA, NY 14850	90-0192978	501(C)(3)	0.	10,754.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
IU FORT WAYNE LAFAYETTE STREET FAMILY HEALTH CLINIC - 2700 S LAFAYETTE STREET SUITE 200 - FORT WAYNE, IN 46806	35-6001673	501(C)(3)	0.	170,541.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
J.C. LEWIS HEALTH CARE CENTER 5 MALL ANNEX SAVANNAH, GA 31406	27-0380035	501(C)(3)	0.	222,984.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
JACKSON FREE CLINIC FOR THE HOMELESS (DBA: JACKSON FREE CLINIC) - 925 MARTIN LUTHER KING JR DRIVE - JACKSON, MS 39203	64-0945749	501(C)(3)	0.	415,520.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
JEFFERSON COMPREHENSIVE HEALTH CENTER, INC. - 405 MAIN STREET - FAYETTE, MS 39069	64-0667610	501(C)(3)	0.	1,331,519.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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JEFFERSON PARISH SCHOOLS 822 S. CLEARVIEW PARKWAY HARAHAN, LA 70123	72-6000592	501(C)(3)	0.	18,750.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
JERICO ROAD COMMUNITY HEALTH CENTER - 184 BARTON STREET - BUFFALO, NY 14213	42-1571876	501(C)(3)	0.	73,786.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
JFK GLOBAL PRAYER MINISTRY 9494 SOUTHWEST FREEWAY SUITE 450-R HOUSTON, TX 77074	47-5269630	501(C)(3)	0.	189,791.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
JOHNSON CITY COMMUNITY HEALTH CENTER - 2151 CENTURY LANE - JOHNSON CITY, TN 37604	62-6021046	501(C)(3)	0.	26,607.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
JTP PROFESSIONAL SERVICE CORPORATION - 1409 WILLIOW STREET - MINNEAPOLIS, MN 55403	85-0868142	501(C)(3)	0.	7,946.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
JUDEO CHRISTIAN MINISTRIES, INC. 516 IOWA COLONY ROAD HOLLISTER, MO 65672	87-0732515	501(C)(3)	0.	103,495.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
JWCH INSTITUTE, INC. 5650 JILLSON STREET COMMERCE, CA 90040	95-2289916	501(C)(3)	0.	66,677.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
KACHEMAK BAY FAMILY PLANNING CLINIC - 3959 BEN WALTERS LANE - HOMER, AK 99603	92-0106486	501(C)(3)	0.	19,333.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
KARIS COMMUNITY HEALTH 256 BROAD STREET SW CLEVELAND, TN 37311	47-2204923	501(C)(3)	0.	464,363.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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KATY TRAIL COMMUNITY HEALTH CENTER SEDALIA - 821 WESTWOOD DRIVE - SEDALIA, MO 65301	43-1879853	501(C)(3)	0.	53,970.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
KC CARE HEALTH CENTER 3515 BROADWAY BOULEVARD KANSAS CITY, MO 64111	43-0967292	501(C)(3)	0.	48,925.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
KEE CHA E NAR 230 KLAMATH BOULEVARD, SUITE A KLAMATH, CA 95548	47-4098140	501(C)(3)	250,000.	9,396.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS, ABBVIE HEALTH
KEYSTONE DIABETIC KIDS CAMP CAMP VICTORY - 58 CAMP VICTORY ROAD - MILLVILLE, PA 17846	23-2481065	501(C)(3)	0.	13,150.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
KIDS HEALTH OF FITZGERALD 406 WEST 5TH STREET OCILLA, GA 31774	58-2019024	501(C)(3)	0.	13,225.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
KIM HEALTH CENTER 6209 CHAPMAN HIGHWAY KNOXVILLE, TN 37920	68-0604388	501(C)(3)	0.	58,065.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
KINSTON COMMUNITY HEALTH CENTER 324 N. QUEEN STREET KINSTON, NC 28501	56-1833275	501(C)(3)	0.	392,532.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
KINTEGRA FAMILY MEDICINE - HUDSON 991 W. HUDSON BOULEVARD GASTONIA, NC 28052	58-1958398	501(C)(3)	0.	1,473,722.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
KNOX COUNTY HEALTH CLINIC 22 WHITE STREET SUITE 201 ROCKLAND, ME 04841	01-0528885	501(C)(3)	0.	243,640.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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KNOX COUNTY HEALTH DEPARTMENT 140 DAMERON AVENUE KNOXVILLE, TN 37917	62-6007979	KNOX COUNTY	0.	446,318.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
KOREAN COMMUNITY SERVICES DBA KCS HEALTH CENTER - 7212 ORANGETHORPE AVE. SUITE 9A - BUENA PARK, CA 90621	95-3245254	501(C)(3)	0.	144,145.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
KWANG HE WON HEALTH CENTER 815 S ARDMORE AVE 1ST FLOOR LOS ANGELES, CA 90005	82-4806703	501(C)(3)	0.	63,451.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LA CLINICA 931 CHEVY WAY MEDFORD, OR 97504	94-3096772	501(C)(3)	0.	38,276.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LA CLINICA CRISTIANA 380 WILSON LAKE SHORES MUSCLE SHOALS, AL 35661	20-1624284	501(C)(3)	0.	97,951.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LA COMUNIDAD HISPANA 731 W. CYPRESS STREET KENNETT SQUARE, PA 19348	23-2041915	501(C)(3)	0.	186,668.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LA PLAZITA INSTITUTE 831 ISLETA BOULEVARD SW ALBUQUERQUE, NM 87105	26-2486467	501(C)(3)	200,000.	0.			FUND FOR HEALTH EQUITY
LACKEY CLINIC PHARMACY 1620 OLD WILLIAMSBURG ROAD YORKTOWN, VA 23690	54-1850915	501(C)(3)	0.	41,980.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LAHAI HEALTH 2152 NORTH 122ND STREET SEATTLE, WA 98133	33-1052418	501(C)(3)	0.	41,640.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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LAKE COUNTY FREE CLINIC 462 CHARDON STREET PAINESVILLE, OH 44077	34-1081191	501(C)(3)	0.	895,539.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LAKE NORMAN FREE CLINIC 14230 HUNTERS ROAD HUNTERSVILLE, NC 28078	04-3723062	501(C)(3)	0.	249,395.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LAKE WASHINGTON SCHOOL DISTRICT 16250 NE 74TH STREET REDMOND, WA 98052	91-6001645	501(C)(3)	0.	8,320.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LAKELAND VOLUNTEERS IN MEDICINE 600 W PEACHTREE STREET LAKELAND, FL 33815	52-2351630	501(C)(3)	0.	227,741.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LAKEVIEW CENTER 3686 US-331 DEFUNIAK SPRINGS, FL 32435	59-0737872	501(C)(3)	0.	8,232.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LANAI COMMUNITY HEALTH CENTER 333 SIXTH STREET LANAI, HI 96763	20-2509287	501(C)(3)	0.	18,939.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LANDER FREE MEDICAL CLINIC 860 S. 3RD STREET LANDER, WY 82520	87-3205378	501(C)(3)	0.	59,098.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LASANTE HEALTH CENTER 672 PARKSIDE AVENUE BROOKLYN, NY 11226	46-4149537	501(C)(3)	0.	1,368,181.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LAWRENCE COUNTY SCHOOLS - ALABAMA 14131 MARKET STREET MOULTON, AL 35650	63-6000963	501(C)(3)	0.	5,845.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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LAWTON COMMUNITY HEALTH CENTER 5404 SW LEE BOULEVARD LAWTON, OK 73505	26-0187688	501(C)(3)	0.	5,556.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LEAP 6842 PHELPS ROAD GOLETA, CA 93117	95-3007419	501(C)(3)	0.	7,356.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LEBANON VALLEY VOLUNTEERS IN MEDICINE - 711 SOUTH 8TH STREET - LEBANON, PA 17042	26-3915958	501(C)(3)	0.	214,714.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LEE COUNTY SCHOOLS (MS) 1280 COLLEGE VIEW DRIVE TUPELO, MS 38804	64-6000601	501(C)(3)	0.	6,150.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LEHIGH VALLEY HEALTH NETWORK CAMP RED JACKET - 1243 SOUTH CEDAR CREST BOULEVARD - ALLENTOWN, PA 18103	23-2700908	501(C)(3)	0.	9,111.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LESTONNAC FREE CLINIC 1215 E. CHAPMAN AVENUE ORANGE, CA 92866	95-3499011	501(C)(3)	75,000.	361,981.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	ACCESS TO MENTAL HEALTH CARE AWARDS-TEVA, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME,
LEWIS & CLARK BEHAVIORAL HEALTH SERVICES, INC. - 1028 WALNUT STREET - YANKTON, SD 57078	46-0309601	501(C)(3)	0.	133,477.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LIFECARE ALLIANCE - CENTRAL OHIO DIABETES ASSOCIATION/DIABETES SERVICES - 1699 W. MOUND STREET - COLUMBUS, OH 43223	31-4379494	501(C)(3)	0.	8,716.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LIFECARE FAMILY HEALTH AND DENTAL CENTER - 2725 LINCOLN STREET E - CANTON, OH 44704	34-1708901	501(C)(3)	0.	484,635.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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LIFECYCLES HEALTH SERVICES, INC. 433 NORTH 7TH STREET, FIRST FLOOR CAMDEN, NJ 08102	47-5438771	501(C)(3)	0.	661,292.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LIFELONG MEDICAL CARE WEST BERKELEY - 2031 6TH STREET - BERKELEY, CA 94710	94-2502308	501(C)(3)	0.	82,815.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LIFESPRING COMMUNITY HEALTH 1042 E 3RD STREET, SUITE 300 CHATTANOOGA, TN 37404	27-3856741	501(C)(3)	0.	9,150.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LIGHT OF THE WORLD CLINIC 5333 N. DIXIE HIGHWAY NO. 201 OAKLAND PARK, FL 33334	65-0266070	501(C)(3)	0.	607,013.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LIGHTHOUSE MEDICAL MINISTRIES 2801 S. ROBINSON AVENUE OKLAHOMA CITY, OK 73109	20-0503733	501(C)(3)	0.	82,928.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LINCOLN COUNTY HEALTH & HUMAN SERVICES - 36 SW NYE STREET - NEWPORT, OR 97365	93-6002304	501(C)(3)	0.	96,083.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LIONS HEALTH FOUNDATION OF DISTRICT 4-C-1 - 2911 MONTE BELLO DRIVE - REDDING, CA 96001	94-3233706	501(C)(3)	0.	6,671.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LIRIOS PEDIATRICS 4201 S. CONGRESS, SUITE 202 AUSTIN, TX 78745	87-2567395	501(C)(3)	0.	32,362.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LLOYD F. MOSS FREE CLINIC PHARMACY 1301 SAM PERRY BOULEVARD SUITE 100 FREDERICKSBURG, VA 22401	54-1677934	501(C)(3)	0.	2,101,956.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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LONE STAR COMMUNITY HEALTH CENTER 605 S. CONROE MEDICAL DRIVE CONROE, TX 77304	30-0038860	501(C)(3)	0.	63,411.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LORAIN COUNTY FREE CLINIC 5040 OBERLIN AVENUE LORAIN, OH 44053	34-1506180	501(C)(3)	0.	99,987.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LOS ANGELES CHRISTIAN HEALTH CENTERS - 315 W. 9TH STREET, SUITE 950 - LOS ANGELES, CA 90015	95-4315734	501(C)(3)	0.	25,788.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LOS ANGELES COUNTY OFFICE OF EDUCATION (LACOE) - 9300 IMPERIAL HIGHWAY, EC 297C - DOWNEY, CA 90242	95-6000942	501(C)(3)	0.	5,500.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LOS BARRIOS UNIDOS COMMUNITY CLINIC - 809 SINGLETON BOULEVARD - DALLAS, TX 75212	75-1378664	501(C)(3)	190,000.	264,463.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	FUND FOR HEALTH EQUITY, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED
LOUISIANA HEALTH AND REHAB/ REALITY HOUSE LHRC - 2121 WOODDALE BOULEVARD - BATON ROUGE, LA 70806	72-1476680	501(C)(3)	0.	28,149.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LOVE IN ACTION OF THE TRI-CITIES 326 N FERRY STREET GRAND HAVEN, MI 49417	38-2856482	501(C)(3)	0.	34,845.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LSS HEALTH CENTER AT FAITH MISSION 245 N. GRANT AVENUE COLUMBUS, OH 43215	31-4412586	501(C)(3)	0.	42,006.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
LYON-MARTIN COMMUNITY HEALTH SERVICES - 1735 MISSION STREET - SAN FRANCISCO, CA 94103	86-3008459	501(C)(3)	0.	85,071.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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MA LEAGUE OF COMMUNITY HEALTH 40 COURT STREET, 10TH FLOOR BOSTON, MA 02108	04-2507409	501(C)(3)	249,893.	0.			PFIZER INFECTIOUS DISEASE AWARDS
MABEL WADSWORTH CENTER 700 MOUNT HOPE AVENUE BANGOR, ME 04401	22-2667466	501(C)(3)	0.	36,148.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MACON VOLUNTEER CLINIC 376 ROGERS AVENUE MACON, GA 31204	74-3055376	501(C)(3)	0.	27,719.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MADISON FREE CLINIC 125 N. MAIN STREET MADISON, VA 22727	31-1654015	501(C)(3)	0.	105,308.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MAHEC COMMUNITY PHARMACY AT BILTMORE - 121 HENDERSONVILLE ROAD - ASHEVILLE, NC 28803	56-1071426	501(C)(3)	0.	824,873.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MLAMA I KE OLA HEALTH CENTER 1881 NANI STREET WAILUKU, HI 96732	99-0303304	501(C)(3)	0.	211,076.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MALIHEH FREE CLINIC 941 E 3300 S MILLCREEK, UT 84106	20-2313461	501(C)(3)	0.	9,081.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MALLORY COMMUNITY HEALTH CENTER CLINIC - 17280 HIGHWAY 17 SOUTH - LEXINGTON, MS 39095	64-0829371	501(C)(3)	250,000.	0.			PFIZER INFECTIOUS DISEASE AWARDS
MALTA HOUSE OF CARE 56 FRANKLIN STREET WATERBURY, CT 06706	26-3484648	501(C)(3)	0.	56,709.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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MAMOU HEALTH RESOURCES 1510 NAPOLEON STREET MAMOU, LA 70554	72-0949444	501(C)(3)	0.	21,336.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MANNA MEDICAL CLINIC 120 STREET A, SUITE A PICAYUNE, MS 39466	20-1788094	501(C)(3)	0.	17,244.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MARJORIE WILSON 2717 W. BANNOCK STREET SUITE 100 BOISE, ID 83702	84-2505295	501(C)(3)	0.	261,450.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MARTIN LUTHER KING HEALTH CENTER 865 OLIVE STREET SHREVEPORT, LA 71104	72-1079721	501(C)(3)	0.	399,087.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MARTIN-TYRRELL-WASHINGTON DISTRICT HEALTH - 198 NC HIGHWAY 45 N - PLYMOUTH, NC 27962	56-1066387	MARTIN/TYRRELL/W	0.	27,590.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MARY'S CENTER FOR MATERNAL AND CHILD CARE, INC. - 2333 ONTARIO ROAD NW - WASHINGTON, DC, DC 20009	52-1594116	501(C)(3)	0.	16,527.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MASON AND PARTNERS (MAP) CLINIC 99 TREMONT STREET MANASSAS PARK, VA 20111	54-1603842	501(C)(3)	0.	8,434.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MASSACHUSETTS LEAGUE OF 16 BROOKS STREET WORCESTER, MA 01606	04-2507409	501(C)(3)	0.	10,642.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MATTAWA COMMUNITY MEDICAL CLINIC 210 GOVERNMENT ROAD MATTAWA, WA 99349	91-1499763	501(C)(3)	0.	254,604.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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MATTHEW 25, INC. 413 EAST JEFFERSON BOULEVARD FORT WAYNE, IN 46802	35-1484951	501(C)(3)	0.	1,758,511.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MAUI SEARCH AND RESCUE 355 HUKILIKE STREET KAHULUI, HI 96732	46-4924780	501(C)(3)	150,000.	8,636.	PURCHASED PRICE	EQUIPMENT	HAWAII WILDFIRES, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MAYFLOWER CLINIC 401 E. 1ST ST. N, SUITE 104 WICHITA, KS 67202	27-3298626	501(C)(3)	0.	370,537.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MCR HEALTH 101 RIVERFRONT BOULEVARD, SUITE 710 BRADENTON, FL 34205	59-1773262	501(C)(3)	0.	32,000.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MED CENTRO, INC. 1034 HOSTOS AVENUE PONCE, PR 00716	66-0292961	501(C)(3)	0.	37,193.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MEDICAL ASSOCIATES PLUS 2467 GOLDEN CAMP ROAD AUGUSTA, GA 30906	31-1591242	501(C)(3)	0.	517,019.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MEDICAL MISSION ADVENTURES MEDICAL MISSION ADVENTURES - 134 N. KENWOOD STREET - GLENDALE, CA 91206	04-3661520	501(C)(3)	0.	6,512.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MEDICAL MISSIONS FOR CHRIST 1974 N. BUSINESS ROUTE 5 CAMDENTON, MO 65020	20-3637019	501(C)(3)	0.	65,669.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MEDICAL OUTREACH MINISTRIES 5741 CARMICHAEL PARKWAY MONTGOMERY, AL 36117	63-1204645	501(C)(3)	0.	83,059.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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MEDLINK GEORGIA, INC. 11 CHARLIE MORRIS ROAD COLBERT, GA 30628	58-1394645	501(C)(3)	0.	82,716.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MEL LEAMAN FREE CLINIC OF SMYTH COUNTY - 601 RADIO HILL ROAD - MARION, VA 24354	54-1993876	501(C)(3)	0.	12,710.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MENTAL WELLNESS CENTER 617 GARDEN STREET SANTA BARBARA, CA 93101	95-1962659	501(C)(3)	0.	5,221.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MERCI CLINIC 1315 TATUM DRIVE NEW BERN, NC 28560	56-2034052	501(C)(3)	0.	613,998.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MERCY & TRUTH MEDICAL MISSIONS 721 N 31ST STREET KANSAS CITY, KS 66102	27-1274225	501(C)(3)	0.	41,070.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MERCY CLINIC OF FORT WORTH 775 WEST BOWIE STREET FORT WORTH, TX 76110	45-3841621	501(C)(3)	0.	54,968.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MERCY HEALTH CENTER - PHARMACY FOR PHARMACISTS ONLY - 700 OGLETHORPE AVENUE SUITE C7 - ATHENS, GA 30606	58-2603523	501(C)(3)	0.	57,110.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MERCY HOUSING NORTHWEST 6930 MARTIN LUTHER KING JR. WAY S SEATTLE, WA 98118	91-1546525	501(C)(3)	0.	18,563.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MERCY MEDICAL CLINIC 615 WASHINGTON STREET SHELBYVILLE, KY 40065	61-1211189	501(C)(3)	0.	515,341.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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MERCY MEDICAL CLINIC 300 ARLINGTON DRIVE VIDALIA, GA 30474	27-1107136	501(C)(3)	0.	14,094.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MERCY MEDICAL FREE CLINICS FORMERLY MERCY MEDICINE FREE CLINIC - 500 S. COIT STREET - FLORENCE, SC 29501	31-1693093	501(C)(3)	0.	84,641.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MERCY MEDICAL HEALTH CENTER DBA MERCY - 244 BOND STREET - JONESBORO, LA 71251	82-1011481	501(C)(3)	0.	8,536.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
METROPOLITAN CHARITIES- D/B/A METRO INCLUSIVE HEALTH - 701 94TH AVENUE N - ST PETERSBURG, FL 33702	59-3153947	501(C)(3)	0.	109,277.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MEXICAN AMERICAN OPPORTUNITY FOUND - 401 N GARFIELD AVENUE - MONTEBELLO, CA 90640	95-2594166	501(C)(3)	250,000.	0.			ABBVIE HEALTH EQUITY
MIAMI BEACH COMMUNITY HEALTH CENTER - 11645 BISCAYNE BOULEVARD, SUITE 207 - MIAMI, FL 33181	59-1829984	501(C)(3)	1,550,000.	0.			PFIZER INFECTIOUS DISEASE AWARDS
MIAMI BEACH COMMUNITY HEALTH CENTER - 710 ALTON ROAD - MIAMI BEACH, FL 33139	59-1829984	501(C)(3)	0.	1,486,776.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MIAMI RESCUE MISSION CLINIC 2015 N.W. 1ST AVENUE MIAMI, FL 33127	45-1481860	501(C)(3)	0.	107,448.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MID-DELTA HEALTH SYSTEMS 245 MADISON STREET CLARENDON, AR 72029	71-0638760	501(C)(3)	0.	124,688.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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MIDTOWN HEALTH CENTER, INC. 302 W PHILLIP NORFOLK, NE 68701	47-0833378	501(C)(3)	0.	5,509.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MIGRANT HEALTH CENTER WESTERN REGION, INC. - CALLE RAMON E. BETANCES NO. 491 SUR - MAYAGUEZ, PR 00680	66-0427801	501(C)(3)	0.	32,029.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MIGRANT HEALTH CTR WESTERN REGION P.O. BOX 190 MAYAGUEZ, PR 00681	66-0427801	501(C)(3)	125,000.	0.			ABBOTT RESILIENCY
MILAN PUSKAR HEALTH RIGHT 341 SPRUCE STREET MORGANTOWN, WV 26505	31-1118673	501(C)(3)	0.	182,010.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MILWAUKEE HEALTH SERVICES, INC. 2555 N. MARTIN LUTHER KING DRIVE MILWAUKEE, WI 53212	39-1664109	501(C)(3)	0.	89,298.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MINNESOTA COMMUNITY CARE 380 EAST LAFAYETTE FRONTAGE ROAD ST. PAUL, MN 55107	23-7156236	501(C)(3)	0.	182,044.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MISSION ARLINGTON MEDICAL CLINIC 210 W. SOUTH STREET ARLINGTON, TX 76010	75-2354962	501(C)(3)	0.	1,306,147.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MISSION CITY COMMUNITY NETWORK, INC. - 15206 PARTHENIA STREET - NORTH HILLS, CA 91343	95-4226189	501(C)(3)	0.	275,926.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MISSION HOUSE FREE CLINIC 800 SHETTER AVENUE JACKSONVILLE BEACH, FL 32250	59-3376704	501(C)(3)	0.	16,609.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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MISSION OF MERCY ADMINISTRATION MD/PA CLINICS - 103 WEST MIDDLE STREET - GETTYSBURG, PA 17325	86-0704883	501(C)(3)	0.	917,027.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MOAB FREE HEALTH CLINIC 121 W 200 S, SUITE A MOAB, UT 84532	26-2082745	501(C)(3)	0.	218,554.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MOBILE COUNTY PUBLIC SCHOOL SYSTEM MAGNUM PASS ROAD BUILDING A MOBILE, AL 36618	85-2580433	501(C)(3)	0.	16,000.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MOBILEMED 12320 PARKLAWN DRIVE ROCKVILLE, MD 20852	23-7022588	501(C)(3)	0.	92,658.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MOLOKAI OHANA HEALTH CARE, INC. 30 OKI PLACE KAUNAKAKAI, HI 96748	51-0437659	501(C)(3)	0.	8,349.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MONTANA MIGRANT COUNCIL 3318 THIRD AVENUE N, SUITE 200 BILLINGS, MT 59101	81-0350430	501(C)(3)	0.	44,506.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MORGAN COUNTY MEDICAL CENTER 224 OLD MILL ROAD WARTBURG, TN 37887	62-0913596	501(C)(3)	0.	164,348.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MOROVIS COMMUNITY HEALTH CENTER, INC. - CALLE PATRON NO. 2 AVENUE COROZAL Y PATR - MOROVIS, PR 00687	66-0480948	501(C)(3)	0.	17,102.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MORTON COMPREHENSIVE HEALTH SERVICES - 1334 N LANSING AVENUE - TULSA, OK 74106	73-1177858	501(C)(3)	0.	722,027.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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MOUNTAIN FAMILY COMMUNITY HEALTH CENTER - 1905 BLAKE AVENUE SUITE 101 - GLENWOOD SPRINGS, CO 81601	84-0742145	501(C)(3)	0.	42,263.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MOUNTAIN HOME CHRISTIAN CLINIC 421 WEST WADE AVENUE MOUNTAIN HOME, AR 72653	71-0835511	501(C)(3)	0.	129,113.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MOUNTAIN VALLEYS HEALTH CENTERS 554-850 MEDICAL CENTER DRIVE BIEBER, CA 96009	94-2533006	501(C)(3)	0.	43,927.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MOUNTAINLANDS COMMUNITY 589 SOUTH STATE STREET PROVO, UT 84606	87-0515716	501(C)(3)	0.	125,115.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
M-POWER MINISTRIES 4022 4TH AVENUE SOUTH BIRMINGHAM, AL 35222	31-1639601	501(C)(3)	0.	35,958.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MQVN COMMUNITY DEVELOPMENT CORP DBA NOELA COMMUNITY HEALTH CENTER - 13085 CHEF MENTEUR HIGHWAY - NEW ORLEANS, LA 70129	20-4929600	501(C)(3)	0.	285,889.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MT. ENTERPRISE DBA CROSSROADS FAMILY CARE CENTER - 507 S MARSHALL STREET - HENDERSON, TX 75654	43-2016287	501(C)(3)	0.	594,272.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
MULTI-CULTURAL HEALTH EVALUATION DELIVERY SYSTEMS INC - 2928 PEACH STREET - ERIE, PA 16508-1843	25-1313134	501(C)(3)	95,000.	0.			FUND FOR HEALTH EQUITY
MY NEIGHBOR'S CHARITABLE PHARMACY 1232 BRANSON HILLS PARKWAY, SUITE 1 BRANSON, MO 65616	87-3742175	501(C)(3)	0.	516,444.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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MYALLY HEALTH 4700 SOUTH WASHINGTON STREET GRAND FORKS, ND 58201	45-0342671	501(C)(3)	0.	46,504.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NATIONAL ASSOCIATION OF FREE AND CHARITABLE CLINICS - 1800 DIAGONAL ROAD, SUITE 600 - ALEXANDRIA, VA 22314	56-2273242	501(C)(3)	500,000.	7,913.	ESTIMATED WHOLESALE PRICE	MEDICAL SUPPLIES	SAFETY NET SUPPORT, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED
NATIONAL ASSOCIATION OF HISPANIC NURSES INC - 201 E MAIN STREET, SUITE 810 - LEXINGTON, KY 40507	91-1010677	501(C)(3)	100,000.	0.			FUND FOR HEALTH EQUITY
NATIONAL BLACK NURSES ASSOC 8630 FENTON STREET, SUITE 910 SILVER SPRING, MD 20910	23-7194995	501(C)(3)	280,000.	0.			ABBVIE HEALTH EQUITY
NATIVE ACTION INC. 4805 24TH AVENUE NO. A MISSOULA, MT 59801	81-0450694	501(C)(3)	200,000.	0.			FUND FOR HEALTH EQUITY
NC MEDASSIST 4428 TAGGART CREEK ROAD, SUITE 101 CHARLOTTE, NC 28208	56-2018957	501(C)(3)	0.	21,431,422.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NEAR WEST FREE CLINIC 2120 W WASHINGTON STREET INDIANAPOLIS, IN 46222	84-4269148	501(C)(3)	0.	7,761.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NEIGHBORHOOD FREE HEALTH CLINIC 1520 VERNON STREET STOUGHTON, WI 53589	20-8566062	501(C)(3)	0.	32,336.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NEIGHBORHOOD HEALTH 617 SOUTH 8TH STREET NASHVILLE, TN 37206	62-1032792	501(C)(3)	0.	406,852.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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NEIGHBORHOOD HEALTH 6677 RICHMOND HIGHWAY ALEXANDRIA, VA 22306	54-1849891	501(C)(3)	0.	82,042.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NEIGHBORHOOD HEALTH CLINIC 88 12TH STREET NORTH NAPLES, FL 34102	59-3546884	501(C)(3)	0.	1,129,990.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NEIGHBORHOOD MEDICAL CENTER, INC. 438 WEST BREVARD STREET TALLAHASSEE, FL 32301	23-7422549	501(C)(3)	0.	75,793.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NEOMED CENTER, INC P.O. BOX 1277 GURABO, PR 00778	66-0485440	501(C)(3)	100,000.	0.			ABBVIE PR MOBILE HEALTH
NEOMED CENTER, INC. CARR. 941 SALIDA BO. JAGUAS GURABO, PR 00778	66-0485440	501(C)(3)	0.	37,213.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NETWORK MEDICAL 185 S. PATTERSON AVENUE NO. C SANTA BARBARA, CA 93111	77-0116381	501(C)(3)	0.	5,588.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NEVADA DIABETES ASSOCIATION 115 CASAZZA DRIVE RENO, NV 89502	88-0386000	501(C)(3)	0.	20,388.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NEW COMMUNITY CLINIC 610 N BROADWAY GREEN BAY, WI 54303	39-1200636	501(C)(3)	0.	189,985.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NEW HOPE CLINIC 201 WEST BOILING SPRING ROAD SOUTHPORT, NC 28461	31-1614379	501(C)(3)	0.	45,909.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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NEW HOPE SERVICES INC 725 WALL STREET JEFFERSONVILLE, IN 47130	35-1022158	501(C)(3)	0.	112,541.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NEW SONG HEALTH CENTER DBA BOLINBROOK CHRISTIAN HEALTH CENTER - 151 EAST BRIARCLIFF ROAD - BOLINGBROOK, IL 60440	36-4401468	501(C)(3)	0.	420,493.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NEWHOPE CLINIC 41 S. COURT STREET OWINGSVILLE, KY 40360	61-1363437	501(C)(3)	0.	288,236.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NEXUS RECOVERY CENTER 8733 LA PRADA DRIVE DALLAS, TX 75228	23-7169388	501(C)(3)	0.	53,260.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NHAN HOA COMPREHENSIVE HEALTH CARE 7761 GARDEN GROVE BOULEVARD GARDEN GROVE, CA 92841	33-0477323	501(C)(3)	0.	5,302.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NKY HEALTH DEPARTMENT 8001 VETERANS MEMORIAL DRIVE FLORENCE, KY 41042	61-1008505	STATE OF KENTUCK	0.	192,648.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NO AIDS TASK FORCE 1631 ELYSIAN FIELDS AVENUE NEW ORLEANS, LA 70117	72-1059635	501(C)(3)	0.	292,271.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORTH BY NORTHEAST COMMUNITY HEALTH CENTER - 714 NE ALBERTA STREET - PORTLAND, OR 97211	72-1618287	501(C)(3)	0.	154,474.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORTH CENTRAL EDUCATIONAL SERVICE DISTRICT - 430 OLDS STATION ROAD - WENATCHEE, WA 98801	91-0923400	501(C)(3)	0.	8,250.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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NORTH CENTRAL FAMILY MEDICINE 423 SALUDA STREET ROCK HILL, SC 29370	57-0891008	501(C)(3)	0.	11,700.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORTH CENTRAL NURSING CLINICS, DBA FAMILY HEALTH CLINICS OF BURLINGTON, CARROLL - 901 PRINCE WILLIAM ROAD, SUITE A - DELPHI, IN	26-1553382	501(C)(3)	0.	8,008.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORTH CENTRAL TEXAS COMMUNITY HEALTHCARE CENTER - 200 MARTIN LUTHER KING JR BOULEVARD - WICHITA FALLS, TX 76301	75-2429644	501(C)(3)	0.	123,134.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORTH DALLAS SHARED MINISTRIES FREE MEDICAL CLINIC - 2875 MERRELL ROAD - DALLAS, TX 75229	75-1908563	501(C)(3)	0.	6,256.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORTH FLORIDA MEDICAL CENTERS INC. SUITE 2 2804 REMINGTON GREEN CIRCLE TALLAHASSEE, FL 32308	59-1915144	501(C)(3)	50,000.	0.			GENERAL U.S. EMERGENCY PREP & RESPONSE, HURRICANE IDALIA
NORTH HUDSON COMMUNITY ACTION CORPORATION - ADMINISTRATION - 800 31ST STREET - UNION CITY, NJ 07087	22-1818699	501(C)(3)	0.	415,061.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORTH JEFFERSON COUNTY CLINIC PHARMACY - 1295 PEARL STREET - BEAUMONT, TX 77701	74-6000291		0.	851,624.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORTH MIAMI BEACH MEDICAL CENTER MERCY MOBILE CLINIC - 13899 BISCAYNE BOULEVARD SUITE 132 - NORTH MIAMI BEACH, FL 33181	65-1032266	501(C)(3)	0.	12,191.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORTH ORANGE COUNTY REGIONAL HEALTH COMMUNITY HEALTH CENTER - 1182 N. EUCLID STREET - ANAHEIM, CA 92801	33-0970731	501(C)(3)	0.	33,442.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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NORTHEAST MISSISSIPPI HEALTH CARE, INC. - 12 EAST BRUNSWICK AVENUE - BYHALIA, MS 38611	64-0620763	501(C)(3)	0.	18,369.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORTHERN INDIANA MATERNAL AND CHILD HEALTH NETWORK, INC. - 413 W. MCKINLEY AVENUE SUITE D - MISHAWAKA, IN 46545	20-2402368	501(C)(3)	0.	170,047.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORTHERN NEVADA HOPES CLINIC 580 W. 5TH STREET RENO, NV 89503	86-0865357	501(C)(3)	0.	23,533.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORTHLAND COMMUNITY HEALTH CENTER ADMINISTRATION - 104 N. MAIN STREET - TURTLE LAKE, ND 58575	33-1029318	501(C)(3)	0.	509,214.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORTHWEST COMMUNITY HEALTH CENTER 320 E. 2ND STREET LIBBY, MT 59923	81-0542127	501(C)(3)	0.	15,586.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORTHWEST MICHIGAN HEALTH SERVICES, INC. - 10767 E TRAVERSE HIGHWAY - TRAVERSE CITY, MI 49684	38-1958790	501(C)(3)	0.	680,133.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NORWALK COMMUNITY HEALTH CENTER 120 CONNECTICUT AVENUE NORWALK, CT 06854	06-1436620	501(C)(3)	0.	12,427.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NOVA SCRIPTSCENTRAL INC PHARMACY 6400 ARLINGTON BOULEVARD NO. 120 FALLS CHURCH, VA 22042	65-1275162	501(C)(3)	0.	1,803,047.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
NURSES GLOBAL OUTREACH ICT STREET TEAM - 402 N TOPEKA AVENUE - WICHITA, KS 67202	83-1687039	501(C)(3)	0.	194,764.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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OAK ORCHARD COMMUNITY HEALTH CENTER - 300 WEST AVENUE - BROOKPORT, NY 14420	16-1020913	501(C)(3)	0.	7,763.	ESTIMATED WHOLESALE PRICE, PURCHASED	OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OASIS FREE CLINICS 331 MAINE STREET BRUNSWICK, ME 04011	01-0497587	501(C)(3)	0.	211,325.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OCCUPY MEDICAL 34248 GAROUTTE ROAD COTTAGE GROVE, OR 97424	46-0903989	501(C)(3)	0.	16,312.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OCEANA COMMUNITY HEALTH INC 2828 S SEACREST BOULEVARD, SUITE 20 BOYNTON BEACH, FL 33435	88-1889523	501(C)(3)	0.	146,693.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ODA PRIMARY CARE HEALTH CENTER 74 WALLABOUT AVENUE BROOKLYN, NY 11249	11-2329960	501(C)(3)	0.	1,877,668.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ODU SCHOOL OF NURSING, ODU COMMUNITY CARE - 1881 UNIVERSITY DRIVE, SCHOOL OF NURSING - VIRGINIA BEACH, VA 23453	54-6068198	501(C)(3)	0.	21,693.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ODYSSEY HOUSE COMMUNITY HEALTH CENTER - 1125 N. TONTI STREET - NEW ORLEANS, LA 70119	72-0743677	501(C)(3)	0.	11,707.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OGEMAW HILLS FREE CLINIC 2106 SOUTH GRAY ROAD WEST BRANCH, MI 48661	82-4146805	501(C)(3)	0.	16,326.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OHIO VALLEY HEALTH CENTER 423 SOUTH STREET STEUBENVILLE, OH 43952	20-3924355	501(C)(3)	0.	13,726.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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OLDE TOWNE MEDICAL AND DENTAL CENTER - 5249 OLDE TOWNE ROAD - WILLIAMSBURG, VA 23188	54-1663905	501(C)(3)	0.	60,891.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OLYMPIC PENINSULA COMMUNITY CLINIC 819 GEORGIANA STREET PORT ANGELES, WA 98362	01-0590704	501(C)(3)	0.	440,786.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OMNI FAMILY HEALTH 4900 CALIFORNIA AVENUE BAKERSFIELD, CA 93309	95-3218000	501(C)(3)	0.	159,506.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ON EAGLES WINGS INC, DBA WOVEN HEALTH CLINIC - 1 MEDICAL PARKWAY, SUITE 149 - FARMERS BRANCH, TX 75234	75-2616002	501(C)(3)	0.	85,236.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ONE HEALTH - CAMPUS 305 S 4TH STREET MILES CITY, MT 59301	27-3113428	501(C)(3)	0.	36,663.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ONE LOVE CENTER FOR HEALTH 825 CARLSTON AVENUE OAKLAND, CA 94610	27-3215926	501(C)(3)	0.	133,254.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ONE805 2000 STATE STREET SANTA BARBARA, CA 93105	83-2571437	501(C)(3)	150,000.	0.			GENERAL U.S. EMERGENCY PREP & RESPONSE
ONE80PLACE 35 WALNUT STREET CHARLESTON, SC 29403	57-0789483	501(C)(3)	0.	43,267.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ONEWORLD COMMUNITY HEALTH CENTERS, INC. - 4920 S 30TH STREET, SUITE 103 - OMAHA, NE 68107	47-0548990	501(C)(3)	0.	375,488.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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ON SLOW COMMUNITY OUTREACH DBA CARING COMMUNITY CLINIC - 1 DEWITT STREET - JACKSONVILLE, NC 28540	56-1705813	501(C)(3)	0.	33,609.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OPEN AID ALLIANCE 715 RONAN STREET MISSOULA, MT 59801	36-3652244	501(C)(3)	0.	15,000.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OPEN ARMS CLINIC 109 BIG A ROAD TOCCOA, GA 30577	20-3296577	501(C)(3)	0.	284,929.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OPEN ARMS FREE CLINIC, INC. 205 E COMMERCE STREET ELKHORN, WI 53121	45-4475625	501(C)(3)	0.	24,151.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OPEN ARMS HEALTH CLINIC 3311 LITTLE ROAD ARLINGTON, TX 76016	45-0621201	501(C)(3)	0.	629,907.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OPEN DOOR COMMUNITY HEALTH CENTER 2412 BUHNE STREET EUREKA, CA 95501	95-2671433	501(C)(3)	0.	246,289.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OPEN DOOR HEALTH CENTER 151 NW 11 STREET HOMESTEAD, FL 33030	83-0375996	501(C)(3)	0.	2,045,315.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OPEN DOOR MISSION 2828 NORTH 23RD STREET EAST OMAHA, NE 68110	47-0411375	501(C)(3)	0.	20,089.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OPEN M FREE CLINIC 941 PRINCETON STREET AKRON, OH 44311	34-1046107	501(C)(3)	0.	85,347.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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ORANGE BLOSSOM FAMILY HEALTH CENTER FOR THE HOMELESS - 232 NORTH ORANGE BLOSSOM TRAIL - ORLANDO, FL 32805	59-3185020	501(C)(3)	0.	786,407.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ORANGE COUNTY FREE CLINIC 101 C WOODWARD STREET ORANGE, VA 22960	25-1922019	501(C)(3)	0.	87,778.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OUR HOUSE INC. 173 BOULEVARD NE ATLANTA, GA 30312	58-1743333	501(C)(3)	0.	64,426.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OUTLOOK HEALTH SERVICES 905 EAST FOREST AVENUE MORA, MN 55051	41-1707647	501(C)(3)	0.	25,858.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OUTREACH COMMUNITY HEALTH CENTER, INC - 220 WEST CAPITOL DRIVE - MILWAUKEE, WI 53206	39-1353282	501(C)(3)	0.	185,057.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OUTREACH HEALTH SERVICES, INC. 130 NORTH HIGH STREET SHUBUTA, MS 39360	64-0736857	501(C)(3)	0.	403,811.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OZANAM CHARITABLE PHARMACY 2424 GORDON SMITH MOBILE, AL 36617	72-1386236	501(C)(3)	0.	124,647.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
OZARK TRI-COUNTY HEALTH CARE CONSORTIUM DBA ACCESS FAMILY CARE - 475 NELSON AVENUE - NEOSHO, MO 64850	43-1752799	501(C)(3)	0.	40,935.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PACE COMMUNITY ACTION AGENCY INC 525 N 4TH STREET VINCENNES, IN 47591-1444	35-1120537	501(C)(3)	0.	48,089.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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PALMETTO COMMUNITY HEALTH CARE CENTER - 410 OAKLAND AVENUE - ROCK HILL, SC 29730	26-0754486	501(C)(3)	0.	10,148.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PALMETTO HEALTH COUNCIL, INC. 643 MAIN STREET PALMETTO, GA 30268	58-1307597	501(C)(3)	0.	4,342,363.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PALMS MEDICAL GROUP TRENTON MEDICAL GROUP - 23343 NW CR 236 - HIGH SPRINGS, FL 32643	59-2871302	501(C)(3)	0.	43,389.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PANCARE OF FLORIDA, INC. 403 EAST 11TH STREET PANAMA CITY, FL 32401	91-2189932	501(C)(3)	0.	2,525,014.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PARK STREET HEALTHSHARE, INC. RUTLAND FREE CLINIC - 204 N. MAIN STREET - RUTLAND, VT 05701	83-0427544	501(C)(3)	0.	87,889.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PARKER FAMILY HEALTH CENTER 211 SHREWSBURY AVENUE RED BANK, NJ 07701	22-3619518	501(C)(3)	75,000.	0.			ACCESS TO MENTAL HEALTH CARE AWARDS-TEVA
PARKER FAMILY HEALTH CENTER 211 SHREWSBURY AVENUE RED BANK, NJ 07701	22-3619518	501(C)(3)	0.	45,092.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PARKVIEW OUTREACH COMMUNITY 1205 DR. MARTIN LUTHER KING JR. WAY HAINES CITY, FL 33844	01-0790991	501(C)(3)	0.	401,526.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PARTNERS FOR HEALING 109 W. BLACKWELL STREET TULLAHOMA, TN 37388	62-1834800	501(C)(3)	0.	23,346.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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PARTNERSHIP COMMUNITY HEALTH CENTER - 5471 WATERFORD LANE - APPLETON, WI 54913	20-2090446	501(C)(3)	0.	178,096.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PARTNERSHIP HEALTH CENTER 520 GRIFFIN AVENUE VALDOSTA, GA 31601	58-2405825	501(C)(3)	0.	11,910.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PASADENA HEALTH CENTER 908 SOUTHMORE AVENUE, SUITE 100 PASADENA, TX 77502	20-0462905	501(C)(3)	0.	56,839.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PATHPOINT 315 W. HALEY STREET, SUITE 102 SANTA BARBARA, CA 93101	95-2371668	501(C)(3)	0.	7,746.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PATHSTONE COMMUNITY DEVELOPMENT CORPORATION OF PUERTO RICO - 1235 PASEO LAS MONJITAS, URB LAS MO - PONCE, PR 00730	13-4215024	501(C)(3)	12,000.	0.			HURRICANE FIONA
PATHWAYS' FREE SPECIALTY CLINIC 1200 W. WASHINGTON STREET PETERSBURG, VA 23803	54-1868900	501(C)(3)	0.	9,837.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PAULDING COUNTY SCHOOL DISTRICT 3236 ATLANTA HIGHWAY DALLAS, GA 30132	58-6000299	501(C)(3)	0.	5,760.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PAYSON CHRISTIAN CLINIC 701 S PONDEROSA STREET SUITE D PAYSON, AZ 85541	20-5839315	501(C)(3)	0.	357,025.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PEDIPLACE 502 S OLD ORCHARD SUITE 126 LEWISVILLE, TX 75067	75-2512752	501(C)(3)	0.	157,808.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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PEOPLES CITY MISSION MEDICAL CLINIC - 401 NORTH 2ND STREET - LINCOLN, NE 68508	26-3819766	501(C)(3)	0.	6,231.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PEOPLE'S FAMILY HEALTH SERVICES 102 SOUTH ELM NORTH PLATTE, NE 69101	47-0550611	501(C)(3)	0.	92,331.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PERSON FAMILY MEDICAL CENTER 702 NORTH MAIN STREET ROXBORO, NC 27573	58-1387324	501(C)(3)	0.	8,725.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PHCUP/BIRMINGHAM CLINIC BIRMINGHAM FREE CLINIC - MERCY COMMUNITY CARE BUILDING - PITTSBURGH, PA 15219	23-2919472	501(C)(3)	0.	42,169.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PHOENIX ALLIES FOR COMMUNITY HEALTH - 2902 W CLARENDON - PHOENIX, AZ 85017	46-0650798	501(C)(3)	0.	371,190.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PIEDMONT ACCESS TO HEALTH SERVICES, INC. - 705 MAIN STREET - DANVILLE, VA 24541	54-2026502	501(C)(3)	0.	263,653.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PLAN A HEALTH, INC 700 COLUMBUS AVENUE NEW YORK, NY 10025	83-2144751	501(C)(3)	0.	26,415.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PLAN A HEALTH, INC. 1454 MAIN STREET LOUISE, MS 39097	83-2144751	501(C)(3)	200,000.	0.			CHAS TO PREVENT UNINTENDED PREGNANCY
PLANNED PARENTHOOD CALIFORNIA CENTRAL COAST - 518 GARDEN STREET - SANTA BARBARA, CA 93101	95-2319356	501(C)(3)	0.	91,325.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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PLANNED PARENTHOOD KEYSTONE 610 LOUIS DRIVE SUITE 300 WARMINSTER, PA 18974	23-2450112	501(C)(3)	0.	551,254.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PLANNED PARENTHOOD OF SOUTH, EAST, AND NORTH FLORIDA PEMBROKE PINES - 263 NORTH UNIVERSITY DRIVE - PEMBROKE PINES, FL 33024	59-1391115	501(C)(3)	0.	79,293.	PURCHASED PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PLANNED PARENTHOOD OF SOUTHWEST AND CENTRAL FLORIDA - 2250 EAST EDGEWOOD DRIVE - LAKE LAND, FL 33803	59-1274328	501(C)(3)	0.	18,566.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PLANNED PARENTHOOD OF THE GULF COAST SPRING HEALTH CENTER - 4747 LOUETTA ROAD - SPRING, TX 77388	74-1100163	501(C)(3)	0.	117,228.	PURCHASED PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PLANNED PARENTHOOD SOUTH TEXAS 2140 BABCOCK ROAD SAN ANTONIO, TX 78229	74-1297211	501(C)(3)	0.	28,770.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
POCATELLO FREE CLINIC 1001 N. 7TH AVENUE SUITE 155 POCATELLO, ID 83201	82-0351133	501(C)(3)	0.	603,984.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
POINT WASHINGTON MEDICAL CLINIC 1290 N. CO. HIGHWAY 395 SANTA ROSA BEACH, FL 32459	83-1125021	501(C)(3)	0.	99,140.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PONCE MEDICAL SCHOOL FOUNDATION P.O. BOX 70004 PONCE, PR 00731	66-0379122	501(C)(3)	27,000.	0.			ABBVIE PR MEDICALLY FRAGILE POPULATIONS
PONCE MEDICAL SCHOOL FOUNDATION 388 DR. LUIS F. SALA STREET PONCE, PR 00716	66-0379122	501(C)(3)	0.	51,333.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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POR LOS NUESTROS, INC. 4 AVE. DE DIEGO SAN JUAN, PR 00927	66-0894050	501(C)(3)	0.	39,719.	PURCHASED PRICE	EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PORT MINISTRIES 5013 S HERMITAGE CHICAGO, IL 60609	36-3384385	501(C)(3)	0.	169,960.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PORTLAND STREET MEDICINE 2717 NE BROADWAY STREET PORTLAND, OR 97232	82-4209837	501(C)(3)	0.	19,582.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PREGNANCY HELP CENTER OF FORT WORTH - 7700 CAMP BOWIE BOULEVARD WEST - FORT WORTH, TX 76116	75-2125380	501(C)(3)	0.	24,110.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PREMIER COMMUNITY HEALTHCARE ADMINISTRA - P.O. BOX 232 - DADE CITY, FL 33526	59-1964612	501(C)(3)	378,000.	0.			POWER FOR HEALTH-FL, GA
PREMIER MOBILE HEALTH SERVICES 10676 COLONIAL BOULEVARD FORT MYERS, FL 33913	82-5372657	501(C)(3)	0.	1,691,356.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PRETERM 12000 SHAKER BOULEVARD CLEVELAND, OH 44120	23-7314836	501(C)(3)	0.	95,474.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PRIMARY CARE AT HOME, INC. 400 - 29TH STREET OAKLAND, CA 94609	47-5519154	501(C)(3)	0.	83,240.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PRIMARY CARE MEDICAL SERVICES OF POINCI - 1877 FORTUNE ROAD - KISSIMEE, FL 34744	75-3147007	501(C)(3)	392,000.	0.			POWER FOR HEALTH-NC, SC, FL, VA

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PRIMARY CARE MEDICAL SERVICES OF POINCIANA, INC. - 1503 BILL BECK BOULEVARD - KISSIMEE, FL 34744	75-3147007	501(C)(3)	0.	124,221.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PRIMARY HEALTH SERVICES CENTER 2913 BETIN AVENUE MONROE, LA 71201	72-1347028	501(C)(3)	0.	85,630.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PRIMARY HEALTHCARE CENTERS 11 QUARTERMASTER CIRCLE FORT OGLETHORPE, GA 30742	58-1410404	501(C)(3)	0.	31,615.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PROJECT H O P E INC 519 WEST STREET NO. 525 CAMDEN, NJ 08103	20-4133180	501(C)(3)	0.	56,437.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PROJECT HEALTH, INC. D/B/A LANGLEY HEALTH SERVICES - 1425 S. HIGHWAY 301 - SUMTERVILLE, FL 33585	59-1664577	501(C)(3)	35,000.	24,439.	ESTIMATED WHOLESALE PRICE	OTHER, EQUIPMENT	GENERAL U.S. EMERGENCY PREP & RESPONSE, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PROJECT LAZARUS 5368 NC HIGHWAY 16 S MORAVIAN FALLS, NC 28654	56-2087110	501(C)(3)	0.	25,831.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PROJECT VISION HAWAI'I 810 N VINEYARD BOULEVARD HONOLULU, HI 96817	27-2831637	501(C)(3)	250,000.	24,566.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	HAWAII WILDFIRES, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PROTOTYPE HEALTH, INC. 2055 E SOUTHERN AVENUE MESA, AZ 85282	86-0975231	501(C)(3)	0.	115,953.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PROVIDENCE MEDICAL CLINIC OF KINGSFORT - 441 CLAY STREET - KINGSFORT, TN 37660	26-4547646	501(C)(3)	0.	228,584.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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PRYMED MEDICAL CARE, INC. CARRETERA 149, KM. 13.0 CIALES, PR 00638	66-0428120	501(C)(3)	0.	32,600.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PUBLIC HEALTH SEATTLE & KING COUNTY - 401 5TH AVENUE SUITE 1000 - SEATTLE, WA 98104	91-6001327	501(C)(3)	0.	38,270.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PUERTO RICO DEPARTMENT OF HEALTH BO. MONACILLOS SAN JUAN, PR 00921-0619	66-0437470		0.	959,280.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PUERTO RICO EMERGENCY MANAGEMENT BUREAU - CARR 1 KM 24.5, BO. QUEBRADA ARENAS - SAN JUAN, PR 00926	66-0637472	501(C)(3)	0.	51,004.	ESTIMATED WHOLESALE PRICE, PURCHASED	MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
PUERTO RICO SALUD INC 560 AVE CONSTITUCION SAN JUAN, PR 00917	85-3051049	501(C)(3)	0.	98,464.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
RAPHA CLINIC OF WEST GEORGIA 253 HIGHWAY 78 EAST TEMPLE, GA 30179	27-1188932	501(C)(3)	0.	157,939.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
RAPHAEL COMMUNITY FREE CLINIC 1807 WATER STREET KERRVILLE, TX 78028	74-2819628	501(C)(3)	0.	106,244.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
RAPIDES PRIMARY HEALTH CARE CENTER 1217 WILLOW GLEN RIVER ROAD ALEXANDRIA, LA 71302	72-1252422	501(C)(3)	0.	218,227.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
RECOVERY CAFE SODO CLINIC 2101 E YESLER WAY SEATTLE, WA 98122	23-7100868	501(C)(3)	0.	90,722.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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RECOVERY INSTITUTE OF SOUTH CAROLINA DBA "CHALLENGES INC" - 103 CLAIR DRIVE SUITE C - PIEDMONT, SC 29673	84-2776604	501(C)(3)	0.	7,143.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
REDWOODS RURAL HEALTH CENTER INC. 101 WEST COAST ROAD REDWAY, CA 95560	94-2337367	501(C)(3)	0.	204,333.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
REGENTS OF THE UNIVERSITY OF CALIFORNIA AT SAN DIEGO - 9500 GILMAN DRIVE - LA JOLLA, CA 92093	95-6006144	501(C)(3)	0.	141,474.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
RENAE L HOBBS RENAE L HOBBS 19592 STATE HIGHWAY 56 MCMINNVILLE, TN 37110	26-4579813	501(C)(3)	0.	390,354.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
RENEWED HOPE HEALTH CLINIC 894 MARSHALL ALLEGAN, MI 49010	16-1760734	501(C)(3)	0.	9,299.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
RESEARCH EDUCATION & ACCESS FOR COMMUNITY HEALTH - 823 S 6TH STREET - LAS VEGAS, NV 89101-6923	27-4912114	501(C)(3)	300,000.	0.			FUND FOR HEALTH EQUITY
RICHFORD HEALTH CENTER, INC. (NOTCH) - 44 MAIN STREET, SUITE 200 - RICHFORD, VT 05476	03-0215982	501(C)(3)	0.	140,805.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
RICHMOND PUBLIC SCHOOLS 119 W. LEIGH STREET RICHMOND, VA 23220	54-1689909	501(C)(3)	0.	8,000.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
RISING SUNS PHARMACY 16 WEST GREEN DRIVE ATHENS, OH 45701	84-2852530	501(C)(3)	0.	190,910.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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RKM PRIMARY CARE 11990 JACKSON STREET CLINTON, LA 70722	72-1443732	501(C)(3)	0.	11,232.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , OTHER	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ROANE COUNTY FAMILY HEALTH CARE 146 WILLIAMS DRIVE SPENCER, WV 25276	55-0627933	501(C)(3)	0.	261,048.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ROANOKE CHOWAN COMMUNITY HEALTH CENTER - 120 HEALTH CENTER ROAD - AHOSKIE, NC 27910	42-1638714	501(C)(3)	0.	11,606.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ROBESON HEALTH CARE CORPORATION 60 COMMERCE PLAZA PEMBROKE, NC 28372	58-1622664	501(C)(3)	0.	12,289.	ESTIMATED WHOLESALE PRICE, PURCHASED	MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ROCKING HORSE COMMUNITY HEALTH CENTER - 651 SOUTH LIMSTONE STREET - SPRINGFIELD, OH 45505	31-1593544	501(C)(3)	0.	8,686.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ROLETTE COUNTY PUBLIC HEALTH DISTRICT - 114 3RD STREET NE - ROLLA, ND 58367	02-0761623	ROLETTE COUNTY	0.	14,584.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ROMBOOL CHARITABLE PHARMACY 401 S PARSONS AVENUE SUITE C-1 BRANDON, FL 33511	99-1206263	501(C)(3)	0.	13,640.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ROTACARE, INC. 15 FLETCHER AVENUE VALLEY STREAM, NY 11580	11-3135331	501(C)(3)	0.	83,217.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
RURAL HEALTH MEDICAL PROGRAM INC 101 PARK PLACE SELMA, AL 36701	63-0737968	501(C)(3)	0.	78,964.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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RURAL HEALTH MEDICAL PROGRAM, INC. 101 PARK PLACE SELMA, AL 36701	63-0737968	501(C)(3)	250,000.	0.			PFIZER INFECTIOUS DISEASE AWARDS
RURAL MEDICAL SERVICES, INC 207 MURRAY DRIVE NEWPORT, TN 37821	62-1102683	501(C)(3)	0.	337,684.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
RURAL PARISH CLINIC OF THE ARCHDIOCESE OF ST. LOUIS - 20 ARCHBISHOP MAY DRIVE - ST. LOUIS, MO 63119	84-3396327	501(C)(3)	0.	92,885.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SABAN COMMUNITY CLINIC 8405 BEVERLY BOULEVARD LOS ANGELES, CA 90048	95-2539105	501(C)(3)	0.	21,902.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SAC HEALTH SYSTEM 250 S. G STREET SAN BERNARDINO, CA 92410	33-0664371	501(C)(3)	250,000.	0.			PFIZER INFECTIOUS DISEASE AWARDS
SACRAMENTO MEDICAL RESERVE CORPS 3720 DUDLEY BOULEVARD MCCLELLAN, CA 95652	20-0371304	501(C)(3)	0.	5,244.	PURCHASED PRICE	EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SACRED HEART COMMUNITY CLINIC INC 620 ROUND ROCK WEST DRIVE BUILDING ROUND ROCK, TX 78681-5087	27-2901548	501(C)(3)	0.	47,486.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SAFE HARBOR FREE CLINIC 7209 265TH STREET NW STANWOOD, WA 98292	26-3825107	501(C)(3)	0.	9,342.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SAFE HEALTH 1515 GROVE BOULEVARD A AUSTIN, TX 78741	74-2320657	501(C)(3)	0.	6,154.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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SAFER ALTERNATIVES THROUGH NETWORKING & EDUCATION (SANE) - CLINIC SITE - 2211 DEL PASO BOULEVARD - SACRAMENTO, CA 95815	94-3390723	501(C)(3)	0.	202,721.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SAINT JAMES HEALTH, INC. 228 LAFAYETTE STREET NEWARK, NJ 07105	46-5221991	501(C)(3)	0.	9,006.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SALINA FAMILY HEALTHCARE CENTER 651 E. PRESCOTT ROAD SALINA, KS 67401	48-0858197	501(C)(3)	0.	18,889.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SALUD INTEGRAL EN LA MONTAA, INC. CARR 164 BARRIO ACHIOTE SECTOR EL D NARANJITO, PR 00719	66-0329532	501(C)(3)	0.	88,530.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SAMARITAN HEALTH AND WELLNESS CENTER - 643 CAPE CORAL PARKWAY EAST, SUITE B - CAPE CORAL, FL 33904	46-0922358	501(C)(3)	0.	148,932.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SAMARITAN HEALTH CLINIC 303 DACUSVILLE HIGHWAY EASLEY, SC 29640	57-0947115	501(C)(3)	0.	39,921.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SAMARITAN HOUSE 114 FIFTH AVENUE REDWOOD CITY, CA 94063	23-7416272	501(C)(3)	75,000.	0.			ACCESS TO MENTAL HEALTH CARE AWARDS-TEVA
SAMARITAN HOUSE 114 FIFTH STREET REDWOOD CITY, CA 94063	23-7416272	501(C)(3)	0.	50,581.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SAMARITAN REGIONAL HEALTH CLINIC 2150 BESSIE STREET CAPE GIRARDEAU, MO 63701	27-5427837	501(C)(3)	0.	9,036.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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SAMARITANS TOUCH CARE CENTER, INC 2306 HOPE CIRCLE SEBRING, FL 33870	02-0773338	501(C)(3)	0.	1,888,654.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SAN FRANCISCO FREE CLINIC 4900 CALIFORNIA STREET SAN FRANCISCO, CA 94118	94-3186248	501(C)(3)	0.	399,125.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SAN JOSE CLINIC PHARMACY DEPARTMENT - 2615 FANNIN STREET - HOUSTON, TX 77002	76-0373703	501(C)(3)	0.	2,510,902.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SANTA BARBARA COUNTY EXECUTIVE OFFICE - 105 EAST ANAPAMU STREET, SUITE 3 - SANTA BARBARA, CA 93103	95-6002833	SANTA BARBARA CO	0.	657,768.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SANTA BARBARA COUNTY OFFICE OF EDUCATION - 4400 CATHEDRAL OAKS ROAD - SANTA BARBARA, CA 93160	95-6000940	SANTA BARBARA CO	0.	7,826.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SANTA BARBARA NEIGHBORHOOD CLINICS 414 EAST COTA ST 1ST FLOOR SANTA BARBARA, CA 93101	77-0496382	501(C)(3)	200,000.	0.			GENERAL LOCAL PROGRAM SUPPORT
SANTA BARBARA NEIGHBORHOOD CLINICS 414 E. COTA ST. 1ST FLOOR SANTA BARBARA, CA 93101	77-0496382	501(C)(3)	0.	116,623.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SANTA BARBARA UNIFIED SCHOOL DISTRICT - 720 SANTA BARBARA STREET - SANTA BARBARA, CA 93101	30-0690985	SANTA BARBARA CO	0.	19,337.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SANTA CLARA COUNTY BETTER HEALTH PHARMACY - 725 E. SANTA CLARA STREET NO. 202 - SAN JOSE, CA 95112	94-6400533	SANTA BARBARA CO	0.	1,057,185.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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SANTA CRUZ BARRIOS UNIDOS 1817 SOQUEL AVENUE SANTA CRUZ, CA 95062	77-0333450	501(C)(3)	215,000.	0.			FUND FOR HEALTH EQUITY
SARITA LYNNE MINISTRIES 2214 BENTON BOULEVARD KANSAS CITY, MO 64127	68-0507807	501(C)(3)	0.	16,649.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SAVIE HEALTH 1111 E. OCEAN AVENUE SUITE 2 LOMPOC, CA 93436	86-1668790	501(C)(3)	75,000.	86,118.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	ACCESS TO MENTAL HEALTH CARE AWARDS-TEVA, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME,
SAY DETROIT FAMILY HEALTH CLINIC 211 GLENDALE AVENUE HIGHLAND PARK, MI 48203	20-4786626	501(C)(3)	0.	48,988.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SB COUNTY SEARCH & RESCUE, INC 66 S SAN ANTONIO ROAD SANTA BARBARA, CA 93110	95-6193608	501(C)(3)	500,000.	0.			SAFETY NET SUPPORT, SEARCH & RESCUE FUND
SEATTLE INDIAN HEALTH BOARD 611 12TH AVENUE S SEATTLE, WA 98144	91-0869056	501(C)(3)	0.	7,999.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SEMO HEALTH NETWORK SOUTHEAST MISSOURI HEALTH NETWORK - 311 MAIN STREET - NEW MADRID, MO 63869	43-1253101	501(C)(3)	0.	293,477.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SERENITY CARE HEALTH GROUP 515 S. FLOWER STREET 18TH FLOOR LOS ANGELES, CA 90071	27-1882511	501(C)(3)	0.	9,429.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SERVICIOS DE SALUD PRIMARIOS DE BARCELONETA D/B/A ATLANTIC MEDICAL CENTER - CARR. 2 1995 - BARCELONETA, PR 00617	66-0426667	501(C)(3)	0.	5,906.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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SETEBAID SERVICES, INC. 1157 WESTBRANCH HIGHWAY WINFIELD, PA 17889	23-2979076	501(C)(3)	0.	29,656.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SHACKELFORD COUNTY COMMUNITY RESOURCE CENTER - 725 PATE STREET - ALBANY, TX 76430	75-2541970	501(C)(3)	0.	11,825.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SHAKOPEE PUBLIC SCHOOLS 1200 SHAKOPEE TOWN SQUARE SHAKOPEE, MN 55379	41-6003781	501(C)(3)	0.	5,500.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SHARED HARVEST FOUNDATION 10000 WASHINGTON BOULEVARD SUITE 60 CULVER CITY, CA 90232	32-0556686	501(C)(3)	195,000.	0.			FUND FOR HEALTH EQUITY
SHEEP INC. HEALTH CARE CENTER MONROEVILLE ASSEMBLY OF GOD - 11817 FRANKSTOWN ROAD - PENN HILLS, PA 15235	45-5532140	501(C)(3)	0.	22,620.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SHENANDOAH COUNTY FREE CLINIC 124 VALLEY VISTA DRIVE WOODSTOCK, VA 22664	54-2032008	501(C)(3)	0.	14,553.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SHEPHERD'S CLINIC, INC. 2800 KIRK AVENUE BALTIMORE, MD 21218	52-1739001	501(C)(3)	204,000.	32,673.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	PFIZER INFECTIOUS DISEASE AWARDS, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED
SHEPHERD'S HOPE MEDICAL CENTER 2404 S. TYLER STREET LITTLE ROCK, AR 72204	20-8811505	501(C)(3)	0.	91,568.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SHINGLETOWN MEDICAL CENTER 31292 ALPINE MEADOWS ROAD SHINGLETOWN, CA 96088	68-0063054	501(C)(3)	0.	14,936.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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SIERRA HEALTH CENTER - FULLERTON 501 S. BROOKHURST ROAD FULLERTON, CA 92833	95-3447973	501(C)(3)	0.	601,494.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SILOAM HEALTH 820 GALE LANE NASHVILLE, TN 37204	58-1867940	501(C)(3)	0.	79,666.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SINCLAIR HEALTH CLINIC PHARMACY 301 N. CAMERON STREET, SUITE NO. 10 WINCHESTER, VA 22601	54-1373296	501(C)(3)	0.	655,551.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SISTERLOVE, INC. 3709 BAKERS FERRY ROAD SW ATLANTA, GA 30331	58-2016070	501(C)(3)	0.	59,377.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SLO NOOR FOUNDATION A NON-PROFIT CLINIC - 1428 PHILLIPS LANE SUITE 203 - SAN LUIS OBISPO, CA 93401	27-1412176	501(C)(3)	0.	23,024.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SMITH MEDICAL CLINIC, INC 99 BASKERVILL DRIVE PAWLEYS ISLAND, SC 29585	57-0786699	501(C)(3)	0.	5,491.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SMOKY MOUNTAIN HARM REDUCTION 3261 GEORGIA ROAD FRANKLIN, NC 28734	84-3522087	501(C)(3)	0.	164,058.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SNAKE RIVER COMMUNITY CLINIC 215 TENTH STREET LEWISTON, ID 83501	31-1726460	501(C)(3)	0.	126,822.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SOAR WV SOLUTIONS ORIENTED ADDICTION RESPONSE WEST VIRGINIA - 520 KANAWHA BOULEVARD W - CHARLESTON, WV 25302	11-3660992	501(C)(3)	0.	38,016.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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SOCIEDAD AMERICANA CONTRA EL CNCER 566 CALLE CABO ALVERIO URB. LA MERC SAN JUAN, PR 00918	66-0321594	501(C)(3)	75,000.	0.			ABBVIE PR MEDICALLY FRAGILE POPULATIONS
SOCIEDAD PRO HOSPITAL DEL NINO P.O. BOX 2124 SAN JUAN, PR 00922-2124	66-0204707	501(C)(3)	129,000.	0.			ABBVIE PR MEDICALLY FRAGILE POPULATIONS
SOUTH BROWARD COMMUNITY HEALTH SERVICES MEMORIAL HALLANDALE PHARMACY - 1750 E. HALLANDALE BEACH BOULEVARD - HALLANDALE	59-6014973	501(C)(3)	0.	861,558.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SOUTH CENTRAL FAMILY HEALTH CENTER 1109 E. VERNON AVENUE LOS ANGELES, CA 90011	95-3877793	501(C)(3)	0.	6,125.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , OTHER	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SOUTH COUNTY COMMUNITY CLINIC DBA INTERFAITH COMMUNITY CLINIC - 101 PINE MANOR DRIVE - OAK RIDGE NORTH, TX 77385	75-2634623	501(C)(3)	0.	98,751.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SOUTH PLAINS RURAL HEALTH 1000 FM 300, UNIT A LEVELLAND, TX 79336	75-2123252	501(C)(3)	0.	92,279.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SOUTH TEXAS FAMILY PLANNING & HEALTH CORPORATION - 4455 SOUTH PADRE ISLAND DRIVE NO. 29 - CORPUS CHRISTI, TX 78411	74-1728621	501(C)(3)	0.	36,839.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SOUTHEAST COMMUNITY HEALTH SYSTEMS 6351 MAIN STREET ZACHARY, LA 70791	72-1212880	501(C)(3)	0.	626,225.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SOUTHEAST MS RURAL HEALTH INITIATIVE, INC. - 5488 US HIGHWAY 49 - HATTIESBURG, MS 39403	64-0625076	501(C)(3)	0.	1,126,190.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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SOUTHEAST, INC. 16 W. LONG STREET COLUMBUS, OH 43215	31-0940189	501(C)(3)	0.	88,633.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SOUTHEASTERN DIABETES EDUCATION SERVICES CAMP SEALE HARRIS - 500 CHASE PARK SOUTH - BIRMINGHAM, AL 35244	63-1091899	501(C)(3)	0.	15,730.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SOUTHERN BIRTH JUSTICE NETWORK 1835 NE MIAMI GARDENS DRIVE N MIAMI BEACH, FL 33179-5035	61-1565139	501(C)(3)	100,000.	0.			FUND FOR HEALTH EQUITY
SOUTHERN CALIFORNIA CARE COMMUNITY 120 N ASH STREET ESCONDIDO, CA 92027	85-0858493	501(C)(3)	0.	82,866.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SOUTHERN CALIFORNIA MEDICAL CENTER 14550 HAYNES STREET VAN NUYS, CA 91411	26-2602821	501(C)(3)	0.	27,970.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SOUTHLAND INTEGRATED SERVICES, INC. - 9862 CHAPMAN AVENUE - GARDEN GROVE, CA 92841	95-3403526	501(C)(3)	0.	24,223.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SOUTHWESTERN DIABETIC FOUNDATION CAMP SWEENEY - 10687 FM 678 - WHITESBORO, TX 76273	75-6002547	501(C)(3)	0.	90,700.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SPACE COAST VOLUNTEERS IN MEDICINE 2555 JUDGE FRAN JAMIESON WAY VIERA, FL 32940	27-2135914	501(C)(3)	0.	258,398.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SPECIAL EMERGENCY RESCUE GROUP OFICINA MUNICIPAL DE MANEJO DE EMERGENCIAS DE BAY - CARR NO. 5 INTERSECCION 28 JUAN SANCHE -			0.	9,867.	ESTIMATED WHOLESALE PRICE, PURCHASED	OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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SPECTRA HEALTH 212 SOUTH 4TH STREET, SUITE 301 GRAND FORKS, ND 58201	27-0056777	501(C)(3)	0.	35,138.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SPRING BRANCH COMMUNITY HEALTH CENTER WEST HOUSTON CLINIC - 19333 CLAY ROAD - KATY, TX 77449	30-0198705	501(C)(3)	0.	10,272.	ESTIMATED WHOLESALE PRICE	OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SPRINGVALE HEALTH CENTERS 204 S BELLEVUE AVENUE DOVER, OH 44622	34-1135374	501(C)(3)	0.	37,240.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. CLAIR COMMUNITY HEALTH CLINIC 205 EDWIN HOLLADAY PLACE PELL CITY, AL 35125	63-0570609	501(C)(3)	0.	10,342.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. CLARE MEDICAL OUTREACH 1407 YORK ROAD LUTHERVILLE, MD 21093	46-2097818	501(C)(3)	0.	289,985.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. FRANCIS FREE CLINIC FATHER CARR'S PLACE 2B - 1000 N KOELLER STREET - OSHKOSH, WI 54902	39-1334342	501(C)(3)	0.	146,183.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. GABRIEL EASTSIDE COMMUNITY HEALTH CENTER - 5760 MONTICELLO STREET - ST. GABRIEL, LA 70776	72-1241592	501(C)(3)	0.	1,132,899.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. JOHN BOSCO CLINIC 730 NW 34TH STREET MIAMI, FL 33127	65-0435764	501(C)(3)	0.	130,087.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. JOHN'S COMMUNITY CENTER 808 W. 58TH STREET LOS ANGELES, CA 90037	95-4067758	501(C)(3)	0.	39,132.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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ST. JOSEPH SOCIAL WELFARE BOARD 904 S. 10TH, SUITE A ST. JOSEPH, MO 64503	80-0308973	501(C)(3)	0.	1,059,905.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. JOSEPH'S/CANDLER HEALTH SYSTEMS, INC. - 11705 MERCY BOULEVARD - SAVANNAH, GA 31419	58-2288758	501(C)(3)	0.	196,965.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. JUDE NEIGHBORHOOD HEALTH CENTERS - 731 S. HIGHLAND AVENUE - FULLERTON, CA 92832	45-3977605	501(C)(3)	0.	8,268.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. LOUIS PUBLIC SCHOOLS 801 N. 11TH STREET ST LOUIS, MO 63101	43-6003220	501(C)(3)	0.	9,760.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. LUKE COMMUNITY CLINIC 316 N ROYAL AVENUE FRONT ROYAL, VA 22630	54-1801220	501(C)(3)	0.	25,967.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. LUKE'S CLINIC 132 SEYMOUR AVENUE JACKSON, MI 49201	32-0038675	501(C)(3)	0.	77,199.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. LUKE'S FREE MEDICAL CLINIC 162 N DEAN STREET SPARTANBURG, SC 29302	57-0943232	501(C)(3)	0.	77,125.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. MARTIN'S HEALTHCARE, INC 1359 SOUTH RANDOLPH STREET GARRETT, IN 46738	20-8609620	501(C)(3)	0.	17,741.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. MARY'S HEALTH WAGON 233 CHASE STREET, SUITE 100 CLINTWOOD, VA 24228	04-3739083	501(C)(3)	0.	53,044.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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ST. MICHAEL'S MEDICAL CLINIC 426 MULBERRY AVENUE ANNISTON, AL 36201	82-5246184	501(C)(3)	0.	211,776.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. PETERSBURG FREE CLINIC 5501 4TH STREET NORTH ST. PETERSBURG, FL 33703	23-7208280	501(C)(3)	0.	150,342.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. THOMAS CLINIC 600 PAUL HAND BOULEVARD FRANKLIN, IN 46131	35-1449379	501(C)(3)	0.	57,602.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. THOMAS EAST END MEDICAL CENTER 4605 TUTU PARK MALL SUITE 207 CHARLOTTE AMALIE, VI 00802	66-0585077	501(C)(3)	0.	5,609.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. VINCENT DE PAUL CHARITABLE PHARMACY CINCINNATI - 1146 BANK STREET - CINCINNATI, OH 45214	30-0272954	501(C)(3)	0.	3,268,999.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. VINCENT DE PAUL CHARITABLE PHARMACY MADISON - 2033 FISH HATCHERY ROAD - MADISON, WI 53725	39-0824876	501(C)(3)	0.	423,404.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. VINCENT DE PAUL CLINIC 420 W. WATKINS PHOENIX, AZ 85003	86-0096789	501(C)(3)	0.	171,770.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. VINCENT DE PAUL COMMUNITY PHARMACY - 502 GRAMMONT STREET - MONROE, LA 71201	90-0014479	501(C)(3)	0.	285,118.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ST. VINCENT DE PAUL PHARMACY - DALLAS - 5750 PINELAND DRIVE SUITE 280 - DALLAS, TX 75231	26-3273175	501(C)(3)	0.	10,216,296.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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ST. VINCENT'S HOPE CLINIC 2817 POSTOFFICE STREET GALVESTON, TX 77550	61-1619240	501(C)(3)	0.	1,069,681.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
START CORPORATION 235 CIVIC CENTER BOULEVARD HOUMA, LA 70360	58-1687098	501(C)(3)	0.	124,692.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
STAYWELL HEALTH CENTER 80 PHOENIX AVENUE WATERBURY, CT 06702-1516	22-3160873	501(C)(3)	0.	36,819.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
STERLING AREA HEALTH CENTER 725 E STATE STREET STERLING, MI 48659-9548	38-2205859	501(C)(3)	0.	18,883.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
STEVE RUMMLER HOPE NETWORK 2233 UNIVERSITY AVENUE W SUITE 325 ST. PAUL, MN 55114	45-2903444	501(C)(3)	0.	78,359.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
STOP HEROIN NOW 1202 E. LAKE STREET HORICON, WI 53032	46-5576478	501(C)(3)	0.	31,250.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
STREET MEDICINE DETROIT 320 E. CANFIELD STREET SUITE NO. 31 DETROIT, MI 48201	38-3982723	501(C)(3)	0.	104,793.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
STREET OUTREACH TEAMS 8642 WOODWARD AVENUE DETROIT, MI 48202	88-4216333	501(C)(3)	250,000.	0.			PFIZER INFECTIOUS DISEASE AWARDS
STREET OUTREACH TEAMS 631 W FORT STREET DETROIT, MI 48226	33-0875386	501(C)(3)	0.	1,326,165.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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SULZBACHER HEALTH CENTER DOWNTOWN CLINIC - 611 EAST ADAMS STREET - JACKSONVILLE, FL 32202	59-3229898	501(C)(3)	0.	80,316.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
SUNCOAST COMMUNITY HEALTH CENTERS, INC. - 13110 ELK MOUNTAIN DRIVE - RIVERVIEW, FL 33579	59-1741303	501(C)(3)	368,500.	0.			POWER FOR HEALTH-FL, GA
SYMBA CENTER 20601 HWY 18 SUITE 171 APPLE VALLEY, CA 92307	84-3729902	501(C)(3)	300,677.	0.			PFIZER INFECTIOUS DISEASE AWARDS, ACCESS TO MENTAL HEALTH CARE AWARDS-TEVA
SYMBA CENTER 16902 FIRST STREET VICTORVILLE, CA 92395	84-3729902	501(C)(3)	0.	33,539.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TALBERT HOUSE HEALTH CENTER DBA CENTERPOINT HEALTH - 231 NORTH BREIEL BOULEVARD - MIDDLETOWN, OH 45042	46-1068818	501(C)(3)	0.	23,369.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TALBOT HOUSE MINISTRIES DBA GOOD SAMARITAN - 814 N KENTUCKY AVENUE - LAKE LAND, FL 33801	59-2151802	501(C)(3)	75,000.	26,177.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ACCESS TO MENTAL HEALTH CARE AWARDS-TEVA, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME,
TAMPA FAMILY HEALTH CENTER 302 W FLETCHER AVENUE TAMPA, FL 33612	59-2420282	501(C)(3)	0.	831,676.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TANAGER PLACE CAMP TANAGER 500 8TH AVENUE SE CEDAR RAPIDS,, IA 52401	42-0688079	501(C)(3)	0.	8,395.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TANDEM HEALTH SC 1278 NORTH LAFAYETTE DRIVE SUMTER, SC 29150	57-1095992	501(C)(3)	0.	30,570.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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TARZANA TREATMENT CENTER 8330 RESEDA BOULEVARD NORTHRIDGE, CA 91324	94-2219349	501(C)(3)	0.	1,098,160.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TAYLOR STREET PRIMARY CARE CLINIC 1550 TAYLOR STREET DETROIT, MI 48206	38-2486995	501(C)(3)	0.	16,477.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TAYLORS FREE MEDICAL CLINIC 400 W. MAIN STREET TAYLORS, SC 29687	20-1715911	501(C)(3)	0.	13,121.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TEEN HEALTH CENTER, INC. 4115 AVENUE O GALVESTON, TX 77550	76-0163235	501(C)(3)	0.	35,032.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TELL EVERY AMAZING LADY 533 16TH STREET BROOKLYN, NY 11215	26-4417161	501(C)(3)	200,000.	0.			FUND FOR HEALTH EQUITY
TEMPLE COMMUNITY FREE CLINIC, INC. 1508 W AVENUE J TEMPLE, TX 76504	74-2634500	501(C)(3)	0.	170,586.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TENDER CARE COMMUNITY CLINIC INC. 7862 FIRESTONE BOULEVARD DOWNEY, CA 90241	81-2610616	501(C)(3)	0.	308,690.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TEXAS INTERNATIONAL INSTITUTE OF HEALTH PROFESSIONS DBA VCARE CLINICS - 8121 BROADWAY STREET - HOUSTON, TX 77061	46-1267820	501(C)(3)	0.	79,353.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TEXAS LIONS CAMP 4100 SAN ANTONIO HIGHWAY KERVILLE, TX 78028	74-1189679	501(C)(3)	0.	104,832.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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TEXAS NATIVE HEALTH 1283 RECORD CROSSING ROAD DALLAS, TX 75235	23-7156945	501(C)(3)	0.	846,815.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THAT NEIGHBORHOOD FREE HEALTH CLINIC (TNFHC) - 306 BUSH STREET - TOLEDO, OH 43604	27-1052744	501(C)(3)	0.	7,543.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE AGAPE CLINIC 4104 JUNIUS STREET DALLAS, TX 75246	14-1847977	501(C)(3)	0.	8,337,103.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE ATHENS NURSES CLINIC 240 NORTH AVENUE ATHENS, GA 30601	58-2490925	501(C)(3)	0.	5,191.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE BARTON CENTER FOR DIABETES EDUCATION INC - 50 ENNIS ROAD - NORTH OXFORD, MA 01537	22-2701822	501(C)(3)	0.	58,654.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE BERKELEY FREE CLINIC 2339 DURANT AVENUE BERKELEY, CA 94704	94-1697002	501(C)(3)	0.	30,034.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE BREVARD HEALTH ALLIANCE INC. 2120 SARNO ROAD MELBOURNE, FL 32935	90-0068515	501(C)(3)	0.	20,518.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE CHILDREN'S CLINIC 701 EAST 28TH STREET LONG BEACH, CA 90806	95-1643332	501(C)(3)	0.	23,993.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE CONCILIO 650 FORT WORTH AVENUE, SUITE 250 DALLAS, TX 75208	75-1770140	501(C)(3)	200,000.	0.			FUND FOR HEALTH EQUITY

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THE DAMIEN CENTER 26 N. ARSENAL AVENUE INDIANAPOLIS, IN 46201	35-1711878	501(C)(3)	0.	83,637.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE DIABETES FAMILY CONNECTION 6325 FALLS OF NEUSE ROAD, SUITE 35- RALEIGH, NC 27615	82-5369641	501(C)(3)	0.	17,380.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE FAMILY HEALTH CLINIC OF CARROLL COUNTY - 901 PRINCE WILLIAM ROAD, SUITE A - DELPHI, IN 46923	35-6002041	501(C)(3)	0.	254,572.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE FAMILY PLACE 2241 BUTLER STREET DALLAS, TX 75235	75-1590896	501(C)(3)	0.	114,324.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE FLOATING HOSPITAL 41-40 27TH STREET LONG ISLAND CITY, NY 11101	13-1624169	501(C)(3)	0.	631,623.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE FREE MEDICAL CLINIC 1875 HARDEN STREET COLUMBIA, SC 29204	57-0779279	501(C)(3)	0.	547,525.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE GOOD SHEPHERD MEDICAL & DENTAL CLINIC - 207 SOUTH 11TH AVENUE - LAUREL, MS 39440	64-0838202	501(C)(3)	0.	111,242.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE GREAT PHYSICIAN'S PHARMACY CLINIC - 1914 BUSINESS HIGHWAY 70 - DURANT, OK 74701	73-0768828	501(C)(3)	0.	47,360.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE HALEY CENTER 603 6TH STREET NW WINTER HAVEN, FL 33881	59-0766974	501(C)(3)	0.	238,476.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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THE HEALTH HUT 310 WEST MISSISSIPPI AVENUE RUSTON, LA 71270	27-3764078	501(C)(3)	0.	1,145,186.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE HEARTS AND HANDS CLINIC, INC. 127 NORTH COLLEGE STREET STATESBORO, GA 30458	26-4597700	501(C)(3)	0.	28,665.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE INSTITUTE FOR FAMILY HEALTH 2006 MADISON AVENUE NEW YORK, NY 10035	13-3273402	501(C)(3)	0.	11,823.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE LUKE CLINIC 9615 MAIN STREET WHITMORE LAKE, MI 48843	81-2779813	501(C)(3)	0.	82,010.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE MAVEN PROJECT P.O. BOX 7378 SAN FRANCISCO, CA 94120-7378	46-5370676	501(C)(3)	500,000.	0.			SAFETY NET SUPPORT, FY24 INITIATIVE- MAVEN PROJECT
THE NALOXONE PROJECT 742 JOSEPH CIRCLE GOLDEN, CO 80403	88-0883760	501(C)(3)	0.	312,893.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE NEIGHBORHOOD CHRISTIAN CLINIC 1929 W. FILLMORE PHOENIX, AZ 85009	86-0839580	501(C)(3)	0.	288,195.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE NIGHT MINISTRY 1735 NORTH ASHLAND AVENUE CHICAGO, IL 60622	36-3145764	501(C)(3)	200,000.	50,136.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	FUND FOR HEALTH EQUITY, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED
THE NORTHERN NECK MIDDLESEX FREE HEALTH CLINIC INC - 51 WILLIAM B GRAHAM COURT - KILMARNOCK, VA 22482	54-1679279	501(C)(3)	0.	50,272.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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THE PAINTED TURTLE 17000 ELIZABETH LAKE ROAD LAKE HUGHES, CA 93532	95-4612481	501(C)(3)	0.	79,151.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE PALMETTO PALACE 6265 DORCHESTER ROAD NORTH CHARLEST - NORTH CHARLESTON, SC 29418	20-4940283	501(C)(3)	0.	80,183.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE PEOPLE'S HEALTH CLINIC 650 ROUND VALLEY DRIVE PARK CITY, UT 84060	87-0638042	501(C)(3)	0.	164,596.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE PIC PLACE 87 MERCHANT DRIVE MONTROSE, CO 81401	47-0891200	501(C)(3)	0.	753,175.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE SHALOM PROJECT MEDICAL CLINIC 639 S. GREEN STREET WINSTON-SALEM, NC 27101	20-2136431	501(C)(3)	0.	249,746.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE TEXAS INTERNATIONAL INSTITUTE OF HEALTH PROFESSIONS - 8121 BROADWAY STREET NO. 103 - HOUSTON, TX 77061	46-1267820	501(C)(3)	80,000.	0.			FUND FOR HEALTH EQUITY
THE URBAN CLINIC OF ATLANTA 777 CLEVELAND AVENUE SW ATLANTA, GA 30315	27-0000606	501(C)(3)	0.	72,647.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE WAY FREE MEDICAL CLINIC, INC. 479 HOUSTON STREET GREEN COVE SPRINGS, FL 32043	76-0828154	501(C)(3)	0.	136,826.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
THE WELLNESS PLAN PHARMACY 2888 W GRAND BOULEVARD DETROIT, MI 48202	38-2008890	501(C)(3)	0.	64,503.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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THE WRIGHT CENTER FOR COMMUNITY HEALTH - 5 SOUTH WASHINGTON AVENUE - JERMYN, PA 18433	23-2772504	501(C)(3)	0.	70,658.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TOMAGWA HEALTHCARE MINISTRIES 455 SCHOOL STREET SUITE 30 TOMBALL, TX 77375	76-0280324	501(C)(3)	0.	190,698.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TOTAL LIFESTYLE CHANGE, INC. 177 N. MAIN STREET JONESBORO, GA 30236	91-2151937	501(C)(3)	0.	16,350.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TRAVERSE HEALTH CLINIC 1719 S GARFIELD AVENUE TRAVERSE CITY, MI 49686	30-0224028	501(C)(3)	0.	56,254.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TREASURE COAST COMMUNITY HEALTH FELLSMERE - 12196 COUNTY ROAD 512 - FELLSMERE, FL 32948	59-3219191	501(C)(3)	332,000.	397,097.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	POWER FOR HEALTH-FL, GA, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED
TREE OF LIFE HEALTHCARE 808 21ST STREET COLUMBUS, GA 31904	30-0791060	501(C)(3)	0.	1,215,547.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TRI CITY HEALTH PARTNERSHIP 318 WALNUT STREET ST. CHARLES, IL 60174	36-4475369	501(C)(3)	0.	187,429.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TRIANGLE AREA NETWORK 1495 N 7TH STREET BEAUMONT, TX 77702	76-0226835	501(C)(3)	0.	688,155.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TRI-AREA COMMUNITY HEALTH 14168 DANVILLE PIKE LAUREL FORK, VA 24352	54-1112330	501(C)(3)	0.	34,427.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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TRI-COUNTY COMMUNITY HEALTH COUNCIL, INC. DBA COMMWELL HEALTH - 6114 HWY 301 SOUTH - FOUR OAKS, NC 27524	58-1319204	501(C)(3)	0.	64,445.	ESTIMATED WHOLESale PRICE	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TRIDENT MINISTRIES INTERNATIONAL 9942 S WESTERN AVENUE CHICAGO, IL 60643	82-4618349	501(C)(3)	0.	126,639.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TRINITY FREE CLINIC 1045 WEST 146TH STREET, SUITE B CARMEL, IN 46032	35-2120420	501(C)(3)	0.	82,739.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TROUP CARES 301 MEDICAL DRIVE SUITE 501 LAGRANGE, GA 30240	20-8176300	501(C)(3)	0.	201,030.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TRUECARE 150 VALPREDA ROAD SAN MARCOS, CA 92069	95-2847102	501(C)(3)	0.	11,836.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TRUST WOMEN 5107 E. KELLOG DRIVE WICHITA, KS 67218	27-3246473	501(C)(3)	0.	275,235.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TRYSTERO/NEW ORLEANS HARM REDUCTION - 4557 N RAMPART STREET - NEW ORLEANS, LA 70117	91-1435394	501(C)(3)	0.	19,223.	ESTIMATED WHOLESale PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TULAKES CLINIC 6789 NW 39TH EXP BETHANY, OK 73008	73-0643163	501(C)(3)	0.	1,058,896.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
TWO RIVERS HEALTH CLINIC 711 ZITTEROUR DRIVE RINCON, GA 31326	47-5240165	501(C)(3)	0.	46,549.	ESTIMATED WHOLESale PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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TYLER FAMILY CIRCLE OF CARE 523 S. FANNIN AVENUE TYLER, TX 75702	45-2578435	501(C)(3)	0.	147,319.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UBI CARITA HEALTH MINISTRIES 4450 HIGHLAND AVENUE BEAUMONT, TX 77705	76-0558225	501(C)(3)	35,000.	100,632.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	TEXAS STORMS RECOVERY, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED
UBUNTU BLACK FAMILY WELLNESS COLLECTIVE - 2611 GOVERNOR PRINTZ BOULEVARD - WILMINGTON, DE 19802	84-4234815	501(C)(3)	0.	289,688.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UCSD STUDENT-RUN FREE CLINIC PROJECT - 9500 GILMAN DRIVE NO. 0696 - LA JOLLA, CA 92093	95-2872494	501(C)(3)	0.	86,185.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UF MOBILE OUTREACH CLINIC 1249 CENTER DRIVE GAINESVILLE, FL 32610	59-0974739	501(C)(3)	0.	240,766.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UHP HEALTH 12605 EAST FREEWAY HOUSTON, TX 77015	61-1757254	501(C)(3)	0.	82,154.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UMC FREE CLINIC 700 NW 183RD STREET MIAMI, FL 33169	85-0504960	501(C)(3)	0.	681,181.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UMMA COMMUNITY CLINIC 711 WEST FLORENCE AVENUE LOS ANGELES, CA 90044	95-4666712	501(C)(3)	0.	8,788.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UNC HEALTH SPECIALTY & HOME DELIVERY PHARMACY FORMERLY UNC HEALTHCARE - 3411 PAGE ROAD - MORRISVILLE, NC 27560	56-2206970	STATE OF NORTH C	0.	2,619,596.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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UNICARE COMMUNITY HEALTH CENTER 437 NORTH EUCLID AVENUE ONTARIO, CA 91762	95-4746420	501(C)(3)	0.	63,953.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UNION COMMUNITY HEALTH CENTER 260 EAST 188TH STREET BRONX, NY 10458	13-4074478	501(C)(3)	0.	11,258.	ESTIMATED WHOLESALE PRICE, PURCHASED	OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UNION COUNTY DEPARTMENT OF HUMAN SERVICES DIVISION OF PUBLIC HEALTH - 2330 CONCORD AVENUE - MONROE, NC 28110	56-6000345	UNION COUNTY	0.	49,585.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UNION GOSPEL MISSION SHELTER CLINICS - 3211 IRVING BOULEVARD - DALLAS, TX 75247	75-6003612	501(C)(3)	0.	323,859.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UNITED AMERICAN INDIAN INVOLVEMENT 1453 W. TEMPLE STREET LOS ANGELES, CA 90026-5648	95-2917933	501(C)(3)	0.	10,875.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UNITED COMMUNITY FOUNDATION 9494 SOUTHWEST FREEWAY 450A HOUSTON, TX 77074	83-4524775	501(C)(3)	39,750.	15,955.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	HOUSTON STORMS RECOVERY, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED
UNITED HEALTH CENTERS 650 ZEDIKER AVENUE PARLIER, CA 93648	94-1732538	501(C)(3)	577,000.	0.			POWER FOR HEALTH-CA
UNITED MEDICAL AND SOCIAL SERVICES 2921 S ORLANDO DRIVE SANFORD, FL 32773	84-1850758	501(C)(3)	0.	41,185.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UNITY HEALTH ON MAIN 505C NORTH MAIN STREET GREENVILLE, SC 29601	81-1080067	501(C)(3)	0.	86,751.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

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UNITY SHOPPE 1209 STATE STREET SANTA BARBARA, CA 93101	77-0391064	501(C)(3)	0.	61,126.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UNIVERSAL COMMUNITY HEALTH CENTER 1005 E. WASHINGTON BOULEVARD NO. A LOS ANGELES, CA 90021	27-0600887	501(C)(3)	0.	26,546.	ESTIMATED WHOLESALE PRICE, PURCHASED	OTHER, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UNIVERSITY COMMUNITY HEALTH SERVICES D.B.A. CONNECTUS HEALTH - 601 BENTON AVENUE - NASHVILLE, TN 37204	62-1438461	501(C)(3)	0.	163,872.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UNIVERSITY HEALTH - TRUMAN MEDICAL CENTER - 2301 HOLMES STREET - KANSAS CITY, MO 64108	44-0661018	501(C)(3)	0.	1,111,945.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UNIVERSITY OF ARIZONA MOBILE HEALTH PROGRAM - 655 N ALVERNON WAY SUITE 228 - TUCSON, AZ 85711	74-2652689	501(C)(3)	0.	170,251.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UNIVERSITY OF COLORADO HEMOPHILIA AND THROMBOSIS CENTER MILE HIGH HEMOPHILIA SUM - 13199 EAST MONTVIEW BOULEVARD - AURORA, CO	84-6000555	501(C)(3)	0.	177,594.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UNIVERSITY OF FLORIDA FOUNDATION, INC. FOR THE BENEFIT OF UNIVERSITY - 1938 WEST UNIVERSITY AVENUE - GAINESVILLE, FL 32603	59-0974739	501(C)(3)	1,275,000.	0.			FUND FOR HEALTH EQUITY, ACCESS TO MENTAL HEALTH CARE AWARDS-TEVA
UNIVERSITY OF MIAMI PEDIATRIC MOBILE CLINIC - 1601 NW 12TH AVENUE - MIAMI, FL 33136	59-0624458	501(C)(3)	0.	170,853.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UNIVERSITY OF TEXAS FOUNDATION 500 WEST UNIVERSITY AVENUE EL PASO, TX 79968	74-6000813	501(C)(3)	280,000.	0.			ABBVIE HEALTH EQUITY

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UPHAM'S COMMUNITY CARE HEALTH CENTER (UPHAM'S CORNER HEALTH CENTER) - 415 COLUMBIA ROAD - BOSTON, MA 02125	23-7211732	501(C)(3)	0.	144,654.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UPPER VALLEY COMMUNITY HEALTH SERVICES INC - 322 E 1ST N - SAINT ANTHONY, ID 83445	82-0527562	501(C)(3)	0.	20,565.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
URBAN HEALTH PLAN, INC. 1065 SOUTHERN BOULEVARD BRONX, NY 10459	23-7360305	501(C)(3)	250,000.	278,571.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, OTHER, MEDICAL SUPPLIES,	PFIZER INFECTIOUS DISEASE AWARDS, FUND FOR HEALTH EQUITY, SUPPORT TO US CLINICS & HEALTH CENTERS
URBAN MINISTRIES OF WAKE COUNTY 1390 CAPITAL BOULEVARD RALEIGH, NC 27603	58-1422700	501(C)(3)	0.	12,236.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
USC UPSTATE HEALTH SERVICES 800 UNIVERSITY WAY SPARTANBURG, SC 29303	57-6001153	501(C)(3)	0.	9,901.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UTAH CENTER FOR BLEEDING AND CLOTTING DISORDERS AT PRIMARY CHILDREN'S HOSPITAL - 100 N MARIO CAPECCHI DRIVE - SALT LAKE CITY,	94-2854057	501(C)(3)	0.	48,081.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
UTAH PARTNERS FOR HEALTH DBA MID-VALLEY HEALTH CLINIC - 9103 SOUTH 1300 W NO. 102 - WEST JORDAN, UT 84088	27-0021804	501(C)(3)	0.	357,925.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VALLEY COMMUNITY HEALTHCARE 6801 COLDWATER CYN AVE NORTH HOLLYWOOD, CA 91605	23-7050082	501(C)(3)	0.	108,084.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VECINOS, INC. 3971 LITTLE SAVANNAH ROAD CULLOWHEE, NC 28723	57-1192063	501(C)(3)	200,000.	21,856.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	ABBVIE HEALTH EQUITY, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED

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VENICE FAMILY CLINIC. 604 ROSE AVENUE VENICE, CA 90291	95-2769432	501(C)(3)	0.	30,733.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VERNON J. HARRIS EAST END CHC DBA CAPITAL AREA HEALTH NETWORK - 2025 E. MAIN STREET - RICHMOND, VA 23223	54-1884190	501(C)(3)	0.	38,862.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VIA CARE CHRONIC DISEASE MANAGEMENT CLINIC - 615 SOUTH ATLANTIC BOULEVARD - LOS ANGELES, CA 90022	80-0699156	501(C)(3)	0.	60,532.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VIBRANCE HEALTH 101 AVENUE F NORTH BAY CITY, TX 77414	20-0537948	501(C)(3)	0.	14,398.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VIDA MOBILE CLINIC 10718 WHITE OAK AVENUE, UNIT 6 GRANADA HILLS, CA 91344	81-4209248	501(C)(3)	0.	18,948.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VIDA SENIOR CENTERS 1842 CALVERT STREET, NW WASHINGTON, DC 20009	23-7161537	501(C)(3)	200,000.	0.			FUND FOR HEALTH EQUITY
VIEQUES EN RESCATE INC. P.O. BOX 202 VIEQUES, PR 00765-0202	66-0809135	501(C)(3)	50,000.	0.			ABBVIE PR MEDICALLY FRAGILE POPULATIONS
VINEYARD MEDICAL CLINIC 6250 W. PEORIA AVENUE GLENDALE, AZ 85302	46-0468188	501(C)(3)	0.	22,601.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VIP COMMUNITY SERVICES INC. 770 EAST 176TH STREET BRONX, NY 10460	13-3224700	501(C)(3)	0.	44,949.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRGINIA GARCIA MEMORIAL FOUNDATION - 3305 NW ALOCLEK DRIVE - HILLSBORO, OR 97124	91-2077840	501(C)(3)	95,000.	0.			FUND FOR HEALTH EQUITY
VIRGINIA HARM REDUCTION COALITION 350 ALBEMARLE AVENUE SW ROANOKE, VA 24016	83-2479145	501(C)(3)	0.	66,965.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VIRGINIA UNITED INC. DBA PAGE FREE CLINIC - 250 MEMORIAL DRIVE SUITE C - LURAY, VA 22835	27-1421176	501(C)(3)	0.	15,044.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VISITING NURSE ASSOCIATION OF CENTRAL JERSEY COMMUNITY HEALTH CENTER, INC. - 1301 MAIN STREET - ASBURY PARK, NJ 07712	22-3321236	501(C)(3)	0.	5,387.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VOCES COALICION DE INMUNIZACION Y PROMOCION DE LA SALUD - AVE LOPATEGUI NO. 9 QC PLAZA BUILDING, - GUAYNABO, PR 00969	66-0798610	501(C)(3)	0.	49,390.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VOLUNTEER HEALTHCARE CLINIC 4215 MEDICAL PARKWAY AUSTIN, TX 78756	74-6082464	501(C)(3)	0.	14,378.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VOLUNTEERS IN MEDICINE 1239 W SAN ANTONIO STREET NEW BRAUNFELS, TX 78130	26-2221231	501(C)(3)	0.	179,090.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VOLUNTEERS IN MEDICINE 190 N PENNSYLVANIA AVENUE, WILKES-BARR - WILKES-BARRE, PA 18702	20-3531527	501(C)(3)	0.	18,876.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VOLUNTEERS IN MEDICINE CLINIC 417 SE BALBOA AVENUE STUART, FL 34994	65-1115793	501(C)(3)	0.	507,317.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VOLUNTEERS IN MEDICINE CLINIC 2260 MARCOLA ROAD SPRINGFIELD, OR 97477	93-1276816	501(C)(3)	0.	71,139.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VOLUNTEERS IN MEDICINE CLINIC OF THE CASCADES - 2300 NE NEFF ROAD - BEND, OR 97701	93-1327847	501(C)(3)	0.	392,790.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VOLUNTEERS IN MEDICINE DBA CLINIC BY THE BAY - 4877 MISSION STREET - SAN FRANCISCO, CA 94112	26-2593712	501(C)(3)	0.	8,497.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VOLUNTEERS IN MEDICINE HILTON HEAD ISLAND - 15 NORTHRIDGE DRIVE - HILTON HEAD ISLAND, SC 29926	57-0959206	501(C)(3)	0.	2,731,323.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VOLUNTEERS IN MEDICINE OF JACKSONVILLE - 3728 PHILIPS HIGHWAY SUITE 34 - JACKSONVILLE, FL 32207	75-3002172	501(C)(3)	0.	360,511.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VOLUNTEERS IN MEDICINE OF SOUTH JERSEY - 423 N ROUTE 9 - CAPE MAY COURT HOUSE, NJ 08210	52-2257585	501(C)(3)	0.	125,297.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
VOLUNTEERS IN MEDICINE OF SOUTHERN NEVADA - 1240 NORTH MARTIN LUTHER KING BOULEVARD - LAS VEGAS, NV 89106	39-2072453	501(C)(3)	0.	233,491.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WAIANAE DISTRICT COMPREHENSIVE HEALTH AND HOSPITAL BOARD DBA WAIANAE COAST COMPR - 86-260 FARRINGTON HIGHWAY - WAIANAE, HI	99-0148164	501(C)(3)	0.	22,654.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , OTHER	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WASATCH HOMELESS HEALTH CARE DBA FOURTH STREET CLINIC - 409 WEST 400 SOUTH - SALT LAKE CITY, UT 84101	87-0569356	501(C)(3)	0.	86,601.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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WASHINGTON STATE DEPARTMENT OF HEALTH - 111 ISRAEL ROAD SE - TUMWATER, WA 98501	91-1444603	501(C)(3)	0.	330,022.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WATCH HEALTHCARE PROGRAM 2700 WAYNE MEMORIAL DRIVE GOLDSBORO, NC 27534	58-1881912	501(C)(3)	0.	189,138.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WAUKESHA FREE CLINIC 237 WISCONSIN AVENUE WAUKESHA, WI 53186	39-1273248	501(C)(3)	0.	98,448.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WE HEALTH CLINIC, P.A. 32 E 1ST STREET, SUITE 300 DULUTH, MN 55802	41-1444270	501(C)(3)	0.	47,217.	ESTIMATED WHOLESAL PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WELCOMEHEALTH 1100 NORTH WOOSLEY AVENUE FAYETTEVILLE, AR 72703	58-1691790	501(C)(3)	0.	49,335.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WELLNESS AND STRESS CLINIC OF MEMPHIS - 3885 TCHULAHOMA ROAD - MEMPHIS, TN 38118	31-1672935	501(C)(3)	0.	599,981.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WELLNESS POINTE 1011 E. WHALEY STREET LONGVIEW, TX 75601	75-2723993	501(C)(3)	0.	1,560,789.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WELLSPRING HEALTH ACCESS 918 E 2ND CASPER, WY 82601	87-1195144	501(C)(3)	0.	77,371.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WELVISTA 121 GREYSTONE BOULEVARD COLUMBIA, SC 29210	56-2034627	501(C)(3)	0.	40,661,169.	ESTIMATED WHOLESAL PRICE, PURCHASED	PHARMACEUTICALS, MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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WESLEY COMMUNITY HEALTH CENTERS 1300 SOUTH 10TH STREET PHOENIX, AZ 85034	86-0133770	501(C)(3)	0.	166,874.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WEST CECIL HEALTH CENTER, INC. 49 ROCK SPRINGS ROAD CONOWINGO, MD 21918	20-5860113	501(C)(3)	0.	26,565.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WEST HAWAII COMMUNITY HEALTH CENTER, INC. (DBA HAWAII ISLAND COMMUNITY HEALTH CE - 75-5751 KUAKINI HIGHWAY - KAILUA KONA, HI	20-0495394	501(C)(3)	0.	25,421.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES,	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WEST VIRGINIA HEALTH RIGHT 1520 EAST WASHINGTON STREET CHARLESTON, WV 25311	31-1066881	501(C)(3)	0.	357,570.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WESTCHESTER COMMUNITY HEALTH CENTER - 107 WEST FOURTH STREET - MOUNT VERNON, NY 10550	13-3315508	501(C)(3)	0.	12,518.	ESTIMATED WHOLESALE PRICE, PURCHASED	OTHER, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WESTERN MARYLAND HEALTH CARE CORPORATION / DBA MOUNTAIN LAUREL MEDICAL CENTER - 1027 MEMORIAL DRIVE - OAKLAND, MD 21550	23-7300642	501(C)(3)	0.	48,906.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WESTERN OKLAHOMA FAMILY CARE CENTER - 609 WEST AVE. E - ELK CITY, OK 73644	26-1284785	501(C)(3)	0.	57,175.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WESTERN SIERRA MEDICAL CLINIC 844 OLD TUNNEL ROAD GRASS VALLEY, CA 95945	94-2279011	501(C)(3)	0.	545,512.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WESTERN TIDEWATER FREE CLINIC, INC. - 2019 MEADE PARKWAY - SUFFOLK, VA 23434	26-3302837	501(C)(3)	0.	37,265.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , OTHER, MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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WESTMINSTER FREE CLINIC 2673 SAN MIGUEL CIRCLE THOUSAND OAKS, CA 91360	77-0563241	501(C)(3)	75,000.	131,577.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	ACCESS TO MENTAL HEALTH CARE AWARDS-TEVA, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME,
WESTSIDE FAMILY HEALTH CENTER 1711 OCEAN PARK BOULEVARD SANTA MONICA, CA 90405	95-2931931	501(C)(3)	0.	19,179.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WHATLEY HEALTH SERVICES, INC. 2731 M. L. KING, JR. BOULEVARD TUSCALOOSA, AL 35401	63-0727781	501(C)(3)	0.	142,169.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WHEELING HEALTH RIGHT 61-29TH STREET WHEELING, WV 26003	31-1149085	501(C)(3)	0.	164,435.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WHITE BIRD NEST 341 E.12TH AVENUE EUGENE, OR 97401	93-0585814	501(C)(3)	0.	21,874.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WHOLE FAMILY HEALTH CENTER 981 37TH PLACE VERO BEACH, FL 32960	65-0715258	501(C)(3)	0.	126,531.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WILKES RECOVERY WILKES HARM REDUCTION - 232 JEFFERSON STREET - NORTH WILKESBORO, NC 28659	81-1600840	501(C)(3)	0.	48,112.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WILL COUNTY COMMUNITY HEALTH CENTER - 1106 NEAL AVENUE - JOLIET, IL 60433	36-3971168	501(C)(3)	0.	27,162.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES, EQUIPMENT	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WILL GRUNDY MEDICAL CLINIC 213 E CASS STREET JOLIET, IL 60432	36-3492306	501(C)(3)	0.	159,849.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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WILLING HELPERS MEDICAL INC. 4186 MILL STREET SUITE A COVINGTON, GA 30014	56-2602392	501(C)(3)	0.	494,917.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
WINDHAM SOUTHEAST SCHOOL DISTRICT BUHS - 131 FAIRGROUND ROAD - BRATTLEBORO, VT 05301	83-4348396	501(C)(3)	0.	6,000.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
YAKIMA NEIGHBORHOOD HEALTH SERVICES - 12 SOUTH 8TH STREET - YAKIMA, WA 98901	91-0928817	501(C)(3)	0.	12,394.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
YAKIMA SCHOOL DISTRICT 331 NORTH FIRST STREET YAKIMA, WA 98901	91-6001550	501(C)(3)	0.	6,000.	ESTIMATED WHOLESALE PRICE	PHARMACEUTICALS	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS
ZUFALL HEALTH CENTER DOVER 18 WEST BLACKWELL DOVER, NJ 07801	22-3125397	501(C)(3)	0.	260,167.	ESTIMATED WHOLESALE PRICE, PURCHASED	PHARMACEUTICALS , MEDICAL SUPPLIES	SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

Schedule I (Form 990)

**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 noncash assistance

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

PART I, LINE 2:

EXCEPT IN CERTAIN EMERGENCY RESPONSE SITUATIONS WHERE THE TIMELINESS OF OUR

RESPONSE IS PARAMOUNT, GRANT RECIPIENTS SIGN MEMORANDUMS OF UNDERSTANDING

OUTLINING THE RESPONSIBILITIES OF DIRECT RELIEF AND THE GRANTEE. REPORTING

BY THE GRANTEE VARIES BASED ON THE SIZE, SCOPE, AND TYPE OF PROGRAM,

RANGING FROM MONTHLY, QUARTERLY, OR ANNUAL REPORTING, WITH A FINAL REPORT

DUE UPON COMPLETION OF THE PROJECT. DIRECT RELIEF ALSO HAS THE RIGHT TO AND

DOES MAKE SITE VISITS TO GRANTEES TO ENSURE COMPLIANCE WITH THE PROJECT

PROPOSAL; THIS IS ESPECIALLY THE CASE WHEN IT COMES TO THE MONITORING OF

**Part IV** Supplemental Information

OUR SUPPORT OF GRANTEES IN EMERGENCY RESPONSE SITUATIONS.

PART II, LINE 1, COLUMNS (G) AND (H):

NAME OF ORGANIZATION OR GOVERNMENT: BAPTIST COMMUNITY HEALTH SERVICES

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL  
SUPPLIES, EQUIPMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: ABBOTT RESILIENCY, SUPPORT TO US

CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: BERGEN VOLUNTEER MEDICAL INITIATIVE

(H) PURPOSE OF GRANT OR ASSISTANCE: ACCESS TO MENTAL HEALTH CARE

AWARDS-TEVA, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME,  
UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: BETANCES HEALTH

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL  
SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

BOND COMMUNITY HEALTH CENTER YOURX PHARMACY AT BONDCHC

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL  
SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: CAPE FEAR CLINIC, INC

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL  
SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: CARE FOR THE HOMELESS



**Part IV** Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: PFIZER INFECTIOUS DISEASE AWARDS,  
SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: CENTRO SAN VICENTE

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL  
SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: CITRUS HEALTH NETWORK, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: POWER FOR HEALTH-FL, GA, SUPPORT TO  
US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: CLINICA ESPERANZA / HOPE CLINIC

(H) PURPOSE OF GRANT OR ASSISTANCE: PFIZER INFECTIOUS DISEASE AWARDS,  
SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT:

COLLIER HEALTH SERVICES, INC DBA HEALTHCARE NETWORK

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL  
SUPPLIES, EQUIPMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: POWER FOR HEALTH-FL, GA, SUPPORT TO  
US CLINICS & HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT:

COMMUNITY HEALTH CENTERS OF SOUTH CENTRAL TEXAS

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL  
SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

**Part IV** Supplemental Information

COMMUNITY HEALTH CENTERS OF THE CENTRAL COAST

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY HEALTH NORTHWEST FLORIDA

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

CORPORACION DE SERVICIOS MEDICOS PRIMARIOS Y PREVENCION DE HATILLO, INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: CORPORACIN LA FONDITA DE JESS

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: CORPORACION SANOS

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

DBA VIRGINIA B. ANDES VOLUNTEER COMMUNITY CLINIC VOLUNTEERS IN MEDICINE ALLI

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: DELTA HEALTH CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT TO US CLINICS &amp; HEALTH

**Part IV** Supplemental Information

CENTERS FOR LOW-INCOME, UNINSURED PATIENTS, PFIZER INFECTIOUS DISEASE

AWARDS

NAME OF ORGANIZATION OR GOVERNMENT: DUPAGE HEALTH COALITION

(H) PURPOSE OF GRANT OR ASSISTANCE: FUND FOR HEALTH EQUITY, SUPPORT TO

US CLINICS &amp; HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT:

EAST HARLEM COUNCIL FOR HUMAN SERVICES, INC. BORIKEN NEIGHBORHOOD HEALTH CEN

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: FUND FOR HEALTH EQUITY, SUPPORT TO

US CLINICS &amp; HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: EL PUNTO EN LA MONTANA, INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: ESPERANZA HEALTH CENTERS

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: EXCELTH, INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: FAMILIES TOGETHER OF ORANGE COUNTY

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

**Part IV** Supplemental Information

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

FAMILY HEALTH CARE CENTERS OF GREATER LOS ANGELES BELL GARDENS FAMILY MEDICA

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: FETTER HEALTH CARE NETWORK

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

GARDEN OF EDEN HEALTH CENTER CORPORATION

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: GRACE MEDICAL HOME

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT TO US CLINICS &amp; HEALTH

CENTERS FOR LOW-INCOME, UNINSURED PATIENTS, ACCESS TO MENTAL HEALTH CARE

AWARDS-TEVA

NAME OF ORGANIZATION OR GOVERNMENT: GULF COAST HEALTH CENTER

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: HAWAII STATE DEPARTMENT OF HEALTH

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: HEALTH AND HOPE CLINIC, INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: HEALTH PROMED FOUNDATION, INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

HEALTHY MOTHERS HEALTHY BABIES COALITION OF HAWAII

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: HOMETOWN HEALTH CENTERS

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: IMPERIAL BEACH COMMUNITY CLINIC

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: INTERCAMBIOS PUERTO RICO INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: JERICHO ROAD COMMUNITY HEALTH CENTER

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

**Part IV** Supplemental Information

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: JWCH INSTITUTE, INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: KEE CHA E NAR

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT TO US CLINICS &amp; HEALTH

CENTERS FOR LOW-INCOME, UNINSURED PATIENTS, ABBVIE HEALTH EQUITY

NAME OF ORGANIZATION OR GOVERNMENT: LESTONNAC FREE CLINIC

(H) PURPOSE OF GRANT OR ASSISTANCE: ACCESS TO MENTAL HEALTH CARE

AWARDS-TEVA, SUPPORT TO US CLINICS &amp; HEALTH CENTERS FOR LOW-INCOME,

UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: LONE STAR COMMUNITY HEALTH CENTER

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: LOS ANGELES CHRISTIAN HEALTH CENTERS

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: LOS BARRIOS UNIDOS COMMUNITY CLINIC

(H) PURPOSE OF GRANT OR ASSISTANCE: FUND FOR HEALTH EQUITY, SUPPORT TO

US CLINICS &amp; HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: MLAMA I KE OLA HEALTH CENTER

**Part IV** Supplemental Information

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: MARTIN LUTHER KING HEALTH CENTER

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: MIAMI BEACH COMMUNITY HEALTH CENTER

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: MOLOKAI OHANA HEALTH CARE, INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

MQVN COMMUNITY DEVELOPMENT CORP DBA NOELA COMMUNITY HEALTH CENTER

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

NATIONAL ASSOCIATION OF FREE AND CHARITABLE CLINICS

(H) PURPOSE OF GRANT OR ASSISTANCE: SAFETY NET SUPPORT, SUPPORT TO US

CLINICS &amp; HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: NO AIDS TASK FORCE

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

NORTH HUDSON COMMUNITY ACTION CORPORATION - ADMINISTRATION

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

NORTH JEFFERSON COUNTY CLINIC PHARMACY

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: PANCARE OF FLORIDA, INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

PARK STREET HEALTHSHARE, INC. RUTLAND FREE CLINIC

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: PONCE MEDICAL SCHOOL FOUNDATION

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

PROJECT HEALTH, INC. D/B/A LANGLEY HEALTH SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: GENERAL U.S. EMERGENCY PREP &amp;

RESPONSE, SUPPORT TO US CLINICS &amp; HEALTH CENTERS FOR LOW-INCOME,



**Part IV** Supplemental Information

UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: PRYMED MEDICAL CARE, INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL  
SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

ROANOKE CHOWAN COMMUNITY HEALTH CENTER

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL  
SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: SAN JOSE CLINIC PHARMACY DEPARTMENT

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL  
SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: SANTA BARBARA COUNTY EXECUTIVE OFFICE

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL  
SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: SANTA BARBARA NEIGHBORHOOD CLINICS

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL  
SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: SAVIE HEALTH

(H) PURPOSE OF GRANT OR ASSISTANCE: ACCESS TO MENTAL HEALTH CARE

AWARDS-TEVA, SUPPORT TO US CLINICS &amp; HEALTH CENTERS FOR LOW-INCOME,

UNINSURED PATIENTS

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: SHEPHERD'S CLINIC, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: PFIZER INFECTIOUS DISEASE AWARDS,

SUPPORT TO US CLINICS &amp; HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: SOUTHEAST COMMUNITY HEALTH SYSTEMS

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

SOUTHEAST MS RURAL HEALTH INITIATIVE, INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

ST. GABRIEL EASTSIDE COMMUNITY HEALTH CENTER

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

TALBOT HOUSE MINISTRIES DBA GOOD SAMARITAN

(H) PURPOSE OF GRANT OR ASSISTANCE: ACCESS TO MENTAL HEALTH CARE

AWARDS-TEVA, SUPPORT TO US CLINICS &amp; HEALTH CENTERS FOR LOW-INCOME,

UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: TAMPA FAMILY HEALTH CENTER

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: TANDEM HEALTH SC

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: THE INSTITUTE FOR FAMILY HEALTH

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: THE NIGHT MINISTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: FUND FOR HEALTH EQUITY, SUPPORT TO

US CLINICS &amp; HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT:

TREASURE COAST COMMUNITY HEALTH FELLSMERE

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: POWER FOR HEALTH-FL, GA, SUPPORT TO

US CLINICS &amp; HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: TRIANGLE AREA NETWORK

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: UBI CARITA HEALTH MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: TEXAS STORMS RECOVERY, SUPPORT TO US

CLINICS &amp; HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: UNITED COMMUNITY FOUNDATION

**Part IV** Supplemental Information

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: HOUSTON STORMS RECOVERY, SUPPORT TO

US CLINICS &amp; HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: URBAN HEALTH PLAN, INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: PFIZER INFECTIOUS DISEASE AWARDS,

FUND FOR HEALTH EQUITY, SUPPORT TO US CLINICS &amp; HEALTH CENTERS FOR

LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: VECINOS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: ABBVIE HEALTH EQUITY, SUPPORT TO US

CLINICS &amp; HEALTH CENTERS FOR LOW-INCOME, UNINSURED PATIENTS

NAME OF ORGANIZATION OR GOVERNMENT: VIBRANCE HEALTH

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: VIP COMMUNITY SERVICES INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

VOLUNTEERS IN MEDICINE HILTON HEAD ISLAND

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL

SUPPLIES, EQUIPMENT

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

WEST HAWAII COMMUNITY HEALTH CENTER, INC. (DBA HAWAII ISLAND COMMUNITY HEALT

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PHARMACEUTICALS, OTHER, MEDICAL  
SUPPLIES, EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT: WESTMINSTER FREE CLINIC

(H) PURPOSE OF GRANT OR ASSISTANCE: ACCESS TO MENTAL HEALTH CARE

AWARDS-TEVA, SUPPORT TO US CLINICS & HEALTH CENTERS FOR LOW-INCOME,  
UNINSURED PATIENTS

**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.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

Open to Public  
Inspection

Name of the organization

DIRECT RELIEF

Employer identification number

95-1831116

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee          | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? .....
- c** 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.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

Yes No

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2023

**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 aren't 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 and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) THOMAS TIGHE	(i)	567,776.	0.	0.	19,800.	31,761.	619,337.	0.
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DAWN LONG	(i)	350,619.	0.	0.	12,053.	7,219.	369,891.	0.
SENIOR VP, COO (THRU 09/23)	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JONATHAN STEINER	(i)	326,299.	0.	0.	18,337.	9,032.	353,668.	0.
VP OF FINANCE, CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) HEATHER BENNETT	(i)	297,069.	0.	0.	12,100.	8,613.	317,782.	0.
CHIEF OF STAFF	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) DONALD ROANE - VP,	(i)	257,982.	0.	0.	14,140.	36,215.	308,337.	0.
CORPORATION ENGAGEMENT & STRATEGY	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) ADAN GROUMAN	(i)	249,538.	0.	0.	13,654.	13,402.	276,594.	0.
DIRECTOR, IT	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) DOUG FROELICH	(i)	220,964.	0.	0.	13,453.	18,991.	253,408.	0.
DIRECTOR OF OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) ZAHRA NAHAR-MOORE - DIRECTOR,	(i)	226,389.	0.	0.	6,723.	13,656.	246,768.	0.
LEGAL & REGULATORY AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

OMB No. 1545-0047

**2023**

Open to Public  
Inspection

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

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

DIRECT RELIEF

Employer identification number

95-1831116

**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	112	743,837.	FMV
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	2,553	2,298,037,240.	EST. WHOLESALE VALUE
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ( ..... )				
26 Other ( ..... )				
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 V, Donee Acknowledgement .....

29

0

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 3 years from the date of the initial contribution, and which isn't required to be used for  
exempt purposes for the entire holding period? .....

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash  
contributions? .....

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,  
describe in Part II.

	Yes	No
30a		X
31	X	
32a		X
33		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2023

**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.

SCHEDULE M, PART I, COLUMN (B):

THE TOTALS REPORTED IN COLUMN (B) REPRESENT THE TOTAL NUMBER OF

CONTRIBUTIONS RECEIVED FOR EACH CATEGORY DURING THE FISCAL YEAR ENDED

JUNE 30, 2024.

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023**

Open to Public  
Inspection

Name of the organization

DIRECT RELIEF

Employer identification number

95-1831116

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

DIRECT RELIEF HAS AN INTERNAL POLICY TO TRANSFER ALL BOARD-DESIGNATED

UNRESTRICTED REQUESTS AND GIFTS TO THE BOARD RESTRICTED INVESTMENT FUND

(BRIF) HELD BY DIRECT RELIEF FOUNDATION. THE PURPOSE OF THE BRIF IS TO

PROVIDE A RESERVE FOR FUTURE OPERATIONS.

EXPENSES \$ 3,059,613. INCLUDING GRANTS OF \$ 4,039,511. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 1A:

THE EXECUTIVE COMMITTEE CONSISTS OF THE OFFICERS OF THE BOARD OF DIRECTORS

AND OTHER SUCH DIRECTORS AS DESIGNATED BY THE BOARD. THE EXECUTIVE

COMMITTEE HAS THE AUTHORITY OF THE BOARD EXCEPT FOR CERTAIN ACTS THAT ARE

RESERVED FOR THE FULL BOARD:

A. TAKE ANY FINAL ACTION ON ANY MATTER THAT, UNDER THE CALIFORNIA NONPROFIT

PUBLIC BENEFIT CORPORATION LAW, ALSO REQUIRES APPROVAL OF ALL OR A MAJORITY

OF THE DIRECTORS;

B. FILL VACANCIES ON THE BOARD OR ON ANY COMMITTEE THAT HAS THE AUTHORITY

OF THE BOARD;

C. ESTABLISH OR FIX COMPENSATION, IF ANY, OF THE DIRECTORS FOR SERVING ON

THE BOARD OR ON ANY COMMITTEE;

D. AMEND OR REPEAL THESE BYLAWS OR ADOPT NEW BYLAWS;

E. AMEND OR REPEAL ANY RESOLUTION OF THE BOARD THAT BY ITS EXPRESS TERMS IS

NOT SO AMENDABLE OR REPEALABLE;

F. CREATE ANY OTHER COMMITTEES OF THE BOARD OR APPOINT THE MEMBERS OF

COMMITTEES OF THE BOARD;

G. APPROVE ANY SELF-DEALING TRANSACTION, EXCEPT AS PROVIDED IN SECTION

5233(D)(3) OF THE CALIFORNIA CORPORATIONS CODE (AND SET FORTH IN SECTION

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization DIRECT RELIEF	Employer identification number 95-1831116
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5.17 ABOVE).

FORM 990, PART VI, SECTION A, LINE 4:

THE ORGANIZATION FILED AMENDED BYLAWS TO ENACT THE FOLLOWING CHANGES:

- CONTENT TO CLARIFY COMMITTEE MEMBERSHIP HAS BEEN ADDED TO SECTION 6.1.

- THE INVESTMENT COMMITTEE HAS BEEN ADDED AS A COMMITTEE OF THE BOARD AT

SECTION 6.6.

- ARTICLE VII HAS BEEN MODIFIED THROUGHOUT TO SEPARATELY IDENTIFY THE ROLES

OF PRESIDENT AND CHIEF EXECUTIVE OFFICER.

- SECTION 7.1 HAS BEEN MODIFIED TO ADD CHIEF OPERATING OFFICER AS A DEFINED

OFFICER ROLE AND TO CLARIFY WHICH OFFICER POSITIONS ARE ELECTED BOARD ROLES

AND WHICH ARE EXECUTIVE STAFF ROLES ELIGIBLE (BY BOARD RESOLUTION) TO SERVE

ON THE BOARD IN AN EX-OFFICIO, NON-VOTING CAPACITY.

- SECTION 5.7 IN ARTICLE V NOW ALLOWS FOR MORE FLEXIBILITY REGARDING THE

BOARD'S ANNUAL MEETING DATE IN JUNE.

FORM 990, PART VI, SECTION B, LINE 11B:

DIRECT RELIEF'S CHIEF FINANCIAL OFFICER DISTRIBUTES A COPY OF THE FINAL

VERSION OF THE FORM 990 TO ALL CURRENT BOARD MEMBERS, REQUESTING THEY

REVIEW THE FORM 990 PRIOR TO FILING. THE BOARD MEMBERS ARE ASKED TO REVIEW

AND ARE GIVEN AN OPPORTUNITY TO RAISE ISSUES AND REQUEST CLARIFICATIONS, IF

ANY. ONCE THIS PROCESS IS COMPLETE AND BOARD APPROVAL IS OBTAINED, THE FORM

990 IS FILED. DOCUMENTATION OF THE DISTRIBUTION TO THE BOARD, AS WELL AS

THE BOARD MEMBERS' RESPONSES AND QUESTIONS, IF ANY, ARE MAINTAINED BY THE

CHIEF FINANCIAL OFFICER.

FORM 990, PART VI, SECTION B, LINE 12C:

WITHIN THIRTY (30) DAYS OF THE BEGINNING OF EACH FISCAL YEAR, ALL

Name of the organization DIRECT RELIEF	Employer identification number 95-1831116
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DIRECTORS, OFFICERS AND BOARD COMMITTEE MEMBERS MUST COMPLETE A DISCLOSURE

FORM REGARDING POSSIBLE CONFLICTS OF INTEREST. DISCLOSURE IS ALSO REQUIRED

OF A DIRECTOR, OFFICER, EMPLOYEE AND BOARD COMMITTEE MEMBER AT ANY TIME

WHEN THE INTEREST OF SUCH PERSON (OR MEMBER OF HIS OR HER FAMILY) COULD

AFFECT THE ACTIVITIES, PROPERTY, EMPLOYEES, OR SERVICES OF DIRECT RELIEF,

OR INVOLVES ANY POTENTIAL CONFLICT OF INTEREST AS MORE SPECIFICALLY DEFINED

IN DIRECT RELIEF'S CONFLICT OF INTEREST POLICY. WHEN A DIRECTOR, OFFICER,

BOARD COMMITTEE MEMBER OR EMPLOYEE HAS A CONFLICT OF INTEREST OR POTENTIAL

CONFLICT OF INTEREST IN A PROPOSED TRANSACTION, THAT INDIVIDUAL SHALL

RECUSE HIMSELF OR HERSELF (I.E., LEAVE THE ROOM), AND SHALL NOT PARTICIPATE

IN THE DELIBERATION ON THE MERITS OF THE PROPOSAL OR THE VOTE. IN ALL

CASES, THE EXISTENCE AND NATURE OF THE RELATIONSHIP OR THE CONFLICT OF

INTEREST DISCLOSED, THE INTERESTED PERSON'S RECUSAL, AND THE VOTE OF THE

OTHER DIRECTORS IS REFLECTED IN THE MINUTES OF THE MEETING OF THE BOARD OR

APPLICABLE BOARD OR OTHER COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 15:

THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS OVERSEES ALL

COMPENSATION MATTERS ON BEHALF OF THE BOARD OF DIRECTORS. THE COMPENSATION

COMMITTEE REVIEWS COMPENSATION BENCHMARKING ANALYSIS AND MAKES

RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE REGARDING COMPENSATION PAID TO

EXECUTIVE STAFF (CEO, COO, CFO) AND OTHER KEY STAFF POSITIONS AS THEY MAY

DETERMINE ARE APPROPRIATE. THE BENCHMARKING REVIEW INCLUDES A COMPARATIVE

ANALYSIS OF COMPENSATION PAID BY DIRECT RELIEF TO COMPENSATION PAID BY

LOCAL, SECTOR, AND NATIONAL NONPROFIT ORGANIZATIONS AS WELL AS LOCAL

FOR-PROFIT ENTITIES. DECISIONS REGARDING EXECUTIVE STAFF COMPENSATION ARE

THE SOLE RESPONSIBILITY OF THE BOARD OF DIRECTORS. NO MEMBER OF THE STAFF,

INCLUDING THE CHIEF EXECUTIVE OFFICER, THE CHIEF OPERATING OFFICER, OR THE

Name of the organization	Employer identification number
DIRECT RELIEF	95-1831116

CHIEF FINANCIAL OFFICER, IS A MEMBER OF THE BOARD OF DIRECTORS, AND THE

BOARD OF DIRECTORS MAY NOT DELEGATE THE AUTHORITY TO SET EXECUTIVE

COMPENSATION TO A MEMBER OF THE EXECUTIVE STAFF. COMPENSATION OF THE CHIEF

EXECUTIVE OFFICER, CHIEF OPERATING OFFICER, AND THE CHIEF FINANCIAL OFFICER

WAS LAST REVIEWED BY THE COMPENSATION COMMITTEE AND THE EXECUTIVE COMMITTEE

OF THE BOARD OF DIRECTORS IN OCTOBER 2023.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL,AK,AR,CA,CO,CT,FL,GA,HI,IL,KS,KY,ME,MD,MA,MI,MN,MS,NV,NH,NJ,NM,NY,NC,ND

OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI

FORM 990, PART VI, SECTION C, LINE 19:

DIRECT RELIEF MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,

WHISTLEBLOWER POLICY, COMPENSATION POLICY, DONATION POLICY, FINANCIAL

STATEMENTS, AND FORM 990 (THE LATTER TWO GOING BACK TO FISCAL YEAR 2000 AND

2001 RESPECTIVELY) AVAILABLE TO THE PUBLIC ON ITS WEBSITE.

FORM 990, PART VII, SECTION A, LINE 1(A) AND SCHEDULE J, PART II:

THE COMPENSATION REPORTED IS FOR THE CALENDAR YEAR 2023, IN LINE WITH

THE FORM 990 REQUIREMENTS OF REPORTING COMPENSATION PAID OR EARNED FOR

THE CALENDAR YEAR ENDING WITH OR WITHIN THE ORGANIZATION'S TAX YEAR.

STAFF COMPENSATION IS GOVERNED BY ORGANIZATIONAL POLICY, AVAILABLE FOR

REFERENCE ON OUR WEBSITE AT

([HTTPS://WWW.DIRECTRELIEF.ORG/ABOUT/FINANCE/COMPENSATION/](https://www.directrelief.org/about/finance/compensation/))

EXECUTIVE STAFF (CEO, COO, CFO) COMPENSATION IS DETERMINED SOLELY BY

THE BOARD OF DIRECTORS. 100% OF THE CEO'S COMPENSATION WAS PAID FROM

Name of the organization	Employer identification number
DIRECT RELIEF	95-1831116

FUNDS PROVIDED BY THE DIRECT RELIEF FOUNDATION.

FORM 990, PART VIII, LINE 1G - VALUATION OF IN-KIND RESOURCES:

DIRECT RELIEF IS THE ONLY NONPROFIT HUMANITARIAN AID ORGANIZATION IN THE UNITED STATES LICENSED TO DISTRIBUTE PHARMACEUTICAL PRODUCTS IN ALL 50 U.S. STATES, AS WELL AS THE FIRST AND ONLY NONPROFIT HUMANITARIAN AID ORGANIZATION IN THE U.S. TO BE DESIGNATED AS A VERIFIED-ACCREDITED WHOLESALE DISTRIBUTOR BY THE NATIONAL ASSOCIATION OF BOARDS OF PHARMACY. DIRECT RELIEF IS AMONG THE LARGEST-VOLUME PROVIDERS OF MEDICAL DONATIONS TO ITS PARTNERS WORLDWIDE. DIRECT RELIEF'S PROGRAMS INVOLVE A WIDE RANGE OF FUNCTIONS, SEVERAL OF WHICH REQUIRE SPECIALIZED EXPERTISE AND LICENSING. AMONG THESE FUNCTIONS ARE IDENTIFYING KEY LOCAL PROVIDERS OF HEALTH SERVICES IN SUCH AREAS; WORKING TO IDENTIFY THE UNMET NEEDS OF PEOPLE IN THE AREAS; MOBILIZING ESSENTIAL MEDICINES, SUPPLIES, AND EQUIPMENT THAT ARE REQUESTED AND APPROPRIATE FOR THE CIRCUMSTANCES; AND MANAGING THE MANY DETAILS INHERENT IN STORING, TRANSPORTING, AND DISTRIBUTING SUCH GOODS TO THE PARTNER ORGANIZATIONS IN THE MOST EFFICIENT MANNER POSSIBLE.

WHEN DIRECT RELIEF RECEIVES AN IN-KIND DONATION, ACCOUNTING STANDARDS REQUIRE A "FAIR MARKET VALUE" TO BE ASSIGNED TO THE DONATION. DONATIONS OF MEDICINES, MEDICAL EQUIPMENT, AND MEDICAL SUPPLIES HAVE LONG BEEN AN INTEGRAL PART OF DIRECT RELIEF'S HUMANITARIAN ASSISTANCE PROGRAMS. IN ASSIGNING A FAIR MARKET VALUE TO THE IN-KIND MEDICAL DONATIONS RECEIVED, DIRECT RELIEF USES A CAREFUL, CONSERVATIVE APPROACH THAT COMPLIES WITH THE RELEVANT ACCOUNTING STANDARDS, AND THE SPIRIT AND PURPOSE OF DISCLOSURE, TRANSPARENCY, AND ACCOUNTABILITY TO THE PUBLIC.

Name of the organization DIRECT RELIEF	Employer identification number 95-1831116
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SPECIFICALLY, DIRECT RELIEF USES THE FOLLOWING METHODOLOGY IN

DETERMINING THE FAIR MARKET VALUE OF IN-KIND MEDICAL DONATIONS:

CONTRIBUTIONS OF U.S. FOOD AND DRUG ADMINISTRATION (FDA)-APPROVED

PHARMACEUTICALS, BRANDED AND GENERIC, ARE RECORDED AT ESTIMATED

WHOLESALE VALUE, WHICH APPROXIMATES FAIR VALUE, ON THE DATE RECEIVED,

BASED ON THE WHOLESALE ACQUISITION COST (WAC) AS PUBLISHED IN THE

TRUVEN HEALTH ANALYTICS REDBOOK, AN INDUSTRY-RECOGNIZED DRUG AND

PRICING REFERENCE GUIDE FOR PHARMACEUTICALS IN THE UNITED STATES.

THE ORGANIZATION USES MONTHLY PRICING INFORMATION AVAILABLE FROM THE

REDBOOK ONLINE SERVICE PROVIDED BY TRUVEN HEALTH ANALYTICS, AN IBM

WATSON HEALTH COMPANY. WAC IS THE STANDARD USED BY MANY U.S. STATES AS

THE FEDERAL UPPER LIMIT PRICING FOR DRUGS PURCHASED UNDER THE MEDICAID

PROGRAM. IF THE WHOLESALE VALUE IS NOT AVAILABLE IN THE ONLINE REDBOOK

SOURCE, THE WHOLESALE VALUE OF THE CONTRIBUTION IS BASED ON OTHER

APPROPRIATE INTERNET PRICING SOURCES. FOR NON-FDA-APPROVED

PHARMACEUTICALS, FOR EXAMPLE, PRODUCTS MANUFACTURED FOR USE IN NON-U.S.

MARKETS, THE ORGANIZATION USES INDEPENDENT PRICING GUIDES TO DETERMINE

THE FAIR VALUE OF THE PARTICULAR MANUFACTURER'S SPECIFIC FORMULATION.

THE SOURCES OF SUCH PRICING INFORMATION VARY, BUT RELEVANT INFORMATION

MAY INCLUDE THE PRICE PAID BY WHOLESALERS OR OTHER THIRD-PARTY BUYERS,

A PRICE NEGOTIATED BY AN ORGANIZATION (SUCH AS THE CLINTON HEALTH

ACCESS INITIATIVE) FOR A PARTICULAR DRUG, OR OTHER SUCH REASONABLE

BASIS. FOR PHARMACEUTICAL DONATIONS FROM EUROPEAN MANUFACTURERS (NOT

COMMERCIALY SALEABLE IN THE U.S.), DIRECT RELIEF APPLIES A DISCOUNT TO

THE REDBOOK WAC FOR BRANDED PRODUCTS AND NO DISCOUNT IS APPLIED TO

GENERIC PHARMACEUTICALS.



Name of the organization	Employer identification number
DIRECT RELIEF	95-1831116

CONTRIBUTIONS OF MEDICAL EQUIPMENT AND SUPPLIES ARE ALSO RECORDED AT  
ESTIMATED WHOLESALE VALUE BASED UPON APPROPRIATE PRICING INFORMATION ON  
THE SPECIFIC ITEM LISTED FOR SALE IN TRADE PUBLICATIONS, THROUGH ONLINE  
INTERNET PRICING GUIDES, AND THROUGH ITS OWN PROCUREMENT HISTORY WHEN  
PURCHASING. SUCH VALUATIONS TYPICALLY ARE SUBSTANTIALLY LOWER THAN  
PUBLISHED RETAIL PRICES. THE ORGANIZATION VERIFIES THE REASONABLENESS  
OF THIS DISCOUNTING METHODOLOGY ON AN ANNUAL BASIS. CONTRIBUTED  
MATERIALS, PROVIDED TO THE ORGANIZATION'S PARTNERS AROUND THE WORLD,  
ARE RECORDED AS AN EXPENSE AT THE SAME FAIR VALUE AS THEY WERE  
RECOGNIZED UPON RECEIPT AS REVENUE.

DIFFERENT PRICES OF SIMILAR PRODUCTS OR SERVICES IN DIFFERENT  
GEOGRAPHIC AREAS CAN CAUSE CONFUSION. THE SPECIFICS OF DIRECT RELIEF'S  
VALUATION METHODOLOGY ARE NOTED HERE IN RECOGNITION OF THE CONFUSION  
THAT CAN ARISE WITH REGARD TO THE VALUE OF CONTRIBUTED GOODS AND  
SERVICES.

ONE SOURCE OF CONFUSION STEMS FROM THE SIGNIFICANT PRICING (AND  
THEREFORE VALUATION) DIFFERENCES THAT EXIST IN DIFFERENT PARTS OF THE  
WORLD FOR SIMILAR PRODUCTS. WITH REGARD TO PHARMACEUTICAL PRODUCTS,  
SIGNIFICANT DIFFERENCES EXIST BETWEEN A BRANDED DRUG AND A GENERIC  
EQUIVALENT FORMULATION EVEN WITHIN THE SAME MARKET, INCLUDING THE U.S.  
BECAUSE DIRECT RELIEF OPERATES ON A GLOBAL SCALE, SUCH DIFFERENCES MUST  
BE CONSIDERED AND REFLECTED IN THE ACCOUNTING AND REPORTING OF  
CONTRIBUTIONS.

OF COURSE, SIMILAR PRICING AND VALUATION DIFFERENCES ALSO EXIST FOR

Name of the organization	Employer identification number
DIRECT RELIEF	95-1831116

OTHER COMMODITIES AND SERVICES BEYOND PHARMACEUTICALS. IN THE U.S., FOR

EXAMPLE, THE COMMODITY OF WATER MAY BE THE EASIEST EXAMPLE, SINCE THE

PRICE THAT IS PAID FOR THE SAME COMPOUND, H<sub>2</sub>O, RANGES FROM FREE IN A

PUBLIC TAP TO SEVERAL DOLLARS FOR A "BRANDED" EQUIVALENT BOTTLED

QUANTITY IN A HOTEL ROOM. BUT SIMILAR PRICING DIFFERENCES EXIST FOR

SERVICES AS WELL. THE OUTSOURCING AND OFF-SHORE PHENOMENA REFLECT

THAT EVEN HIGHLY SKILLED SERVICES - SURGERY, COMPUTER PROGRAMMING,

RESEARCH CONDUCTED BY PH.D.S - ARE DONE AT VASTLY DIFFERENT PRICES IN

DIFFERENT COUNTRIES. DIRECT RELIEF'S INTERNAL PROCESSES, INFORMATION

SYSTEMS, AND PUBLIC DISCLOSURES ENSURE THAT THESE DISTINCTIONS ARE

CLEARLY DOCUMENTED AND THAT THE ORGANIZATION'S FINANCIAL REPORTING

PRECISELY AND ACCURATELY REFLECTS THE FAIR MARKET VALUE OF THE SPECIFIC

ITEMS RECEIVED THROUGH DONATION.

IF A LOW-COST GENERIC MEDICATION IS RECEIVED THROUGH DONATION, ITS

VALUE IS PROPERLY RECORDED AS THAT OF THE GENERIC MEDICATION. IF A MORE

EXPENSIVE BRANDED PRODUCT IS RECEIVED THROUGH DONATION, ITS VALUE IS

SIMILARLY PROPERLY RECORDED AS THAT OF A BRANDED PRODUCT.

AS NOTED ABOVE, DIRECT RELIEF HAS LONG SOUGHT THE CONTRIBUTION OF

NEEDED GOODS AND SERVICES TO USE FOR HUMANITARIAN PURPOSES BECAUSE OF

THE EFFICIENCIES AND OTHER BENEFITS THAT RESULT. THE ORGANIZATION AND,

MORE IMPORTANTLY, THE PEOPLE IT SERVES, BENEFIT FROM THE LOWEST-COST,

MOST EFFICIENT USE OF RESOURCES. SO TOO DO FINANCIAL CONTRIBUTORS,

SINCE THEIR FINANCIAL CONTRIBUTIONS ARE NOT BEING USED TO PURCHASE

GOODS OR SERVICES THAT CAN BE OBTAINED DIRECTLY THROUGH DONATIONS.

THEREFORE, WHEN IT COMES TO ACCOUNTING FOR, DOCUMENTING, AND REPORTING

ANY CONTRIBUTIONS, IT IS VERY IMPORTANT THAT WE GET IT RIGHT.

Name of the organization

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A STRONG INCENTIVE EXISTS TO USE HIGHER VALUATION SOURCES, SUCH AS

RETAIL PRICES, OR USE BRANDED PRODUCT VALUES FOR GENERIC DONATIONS.

HOWEVER, WE BELIEVE THAT A CONSERVATIVE APPROACH PROVIDES THE MOST

ACCURATE, EASY-TO-UNDERSTAND BASIS AND IS BEST TO INSTILL PUBLIC

CONFIDENCE IN OUR FINANCIAL REPORTING.

FORM 990, PART IX, LINE 24A:

THE \$430,794,729 INVENTORY ADJUSTMENT WAS DUE TO THE REQUIRED

DESTRUCTION OF EXPIRED DONATED PRODUCT.

FORM 990, PART X, LINE 15, OTHER ASSETS:

DIRECT RELIEF ACCRUES THE AMOUNTS RECEIVABLE FROM DIRECT RELIEF

FOUNDATION ON AN ANNUAL BASIS. THE BALANCE DUE AS OF JUNE 30, 2024

CONSISTS OF THE FOLLOWING:

PRIOR YEAR APPROVED TRANSFERS (A) 808,103

CURRENT YEAR APPROVED TRANSFERS 3,709,194

ACTUAL TRANSFERS TAKEN (135,674)

TOTAL AMOUNT RECEIVABLE AS OF JUNE 30, 2024: \$4,381,623

(A) APPROVED TRANSFERS THAT ARE NOT TAKEN BY THE END OF EACH FISCAL

YEAR ARE CARRIED FORWARD TO BE TAKEN IN FUTURE YEARS.

SCHEDULE B, PART II, COLUMN (D):

95-1831116

FORM DOES NOT ALLOW FOR A DATE RANGE.

**SCHEDULE R**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

Name of the organization

DIRECT RELIEF

Employer identification number

95-1831116

**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
DR PROPERTY 1, LLC - 81-3303673 6100 WALLACE BECKNELL ROAD SANTA BARBARA, CA 93117 DIRECT RELIEF PUERTO RICO PMB 721 1353 AVE LUIS VIGOREAUX PUERTO RICO 00966	OPERATES SOLELY AND EXCLUSIVELY FOR THE BENEFIT OF DIRECT RELIEF HUMANITARIAN	CALIFORNIA PUERTO RICO	0. 0.	36,331,904. 0.	DIRECT RELIEF DIRECT RELIEF

**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
DIRECT RELIEF FOUNDATION - 20-5983698 6100 WALLACE BECKNELL ROAD SANTA BARBARA, CA 93117	OPERATES SOLELY AND EXCLUSIVELY FOR THE BENEFIT OF DIRECT RELIEF	CALIFORNIA	501(C)(3)	LINE 12A, I	DIRECT RELIEF	X	
DIRECT RELIEF INTERNATIONAL SOUTH AFRICA 52 CORLETT DRIVE WANDERERS OFFICE PARK ILLOVO, JOHANNESBURG, SOUTH AFRICA 2196	COORDINATION OF MEDICAL SUPPORT TO AFRICAN DOCTORS AND MEDICAL CLINICS	SOUTH AFRICA			DIRECT RELIEF	X	
DIRECT RELIEF MEXICO AV. PASEO DE LA REFORMA 300 - PISO 9 CUAUHTEMOC, DISTRITO FEDERAL, MEXICO 6600	COORDINATION OF MEDICAL SUPPORT TO MEXICAN DOCTORS AND MEDICAL CLINICS	MEXICO			DIRECT RELIEF	X	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2023



**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.

	Yes	No
<b>1</b> 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?		
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....	<b>1a</b>	X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	<b>1b</b>	X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	<b>1c</b>	X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....	<b>1d</b>	X
<b>e</b> Loans or loan guarantees by related organization(s) .....	<b>1e</b>	X
<b>f</b> Dividends from related organization(s) .....	<b>1f</b>	X
<b>g</b> Sale of assets to related organization(s) .....	<b>1g</b>	X
<b>h</b> Purchase of assets from related organization(s) .....	<b>1h</b>	X
<b>i</b> Exchange of assets with related organization(s) .....	<b>1i</b>	X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....	<b>1j</b>	X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....	<b>1k</b>	X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	<b>1l</b>	X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....	<b>1m</b>	X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	<b>1n</b>	X
<b>o</b> Sharing of paid employees with related organization(s) .....	<b>1o</b>	X
<b>p</b> Reimbursement paid to related organization(s) for expenses .....	<b>1p</b>	X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....	<b>1q</b>	X
<b>r</b> Other transfer of cash or property to related organization(s) .....	<b>1r</b>	X
<b>s</b> Other transfer of cash or property from related organization(s) .....	<b>1s</b>	X
<b>2</b> 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) DIRECT RELIEF MEXICO - SEE PART VII	B	1,556,250.	CASH VALUE
(2) DIRECT RELIEF FOUNDATION - SEE PART VII	B	4,039,456.	CASH VALUE
(3) DIRECT RELIEF FOUNDATION - SEE PART VII	C	3,709,194.	CASH VALUE
(4)			
(5)			
(6)			

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.

SCHEDULE R, PART V, LINE 2A (1):

THE AMOUNT REPORTED REPRESENTS GRANTS TO DIRECT RELIEF MEXICO, A MEXICO  
CORPORATION THAT IS 100% OWNED BY DIRECT RELIEF. THE TOTAL TRANSFERS TO  
DIRECT RELIEF MEXICO FOR THE YEAR ENDED JUNE 30, 2024 WERE \$1,556,250.

SCHEDULE R, PART V, LINE 2A (2):

100% OF BEQUESTS, IRREVOCABLE TRUSTS, INSURANCE POLICIES, ANNUITIES,  
ETC. ARE TRANSFERRED TO DIRECT RELIEF FOUNDATION, UNLESS OTHERWISE  
SPECIFIED BY THE DONOR. ADDITIONALLY, AT THE END OF EACH FISCAL YEAR,  
DIRECT RELIEF MAY ALSO TRANSFER TO THE DIRECT RELIEF FOUNDATION ANY  
SURPLUS THAT MAY RESULT FROM OPERATIONS OF THAT FISCAL YEAR.

SCHEDULE R, PART V, LINE 2A (3):

FOR THE YEAR ENDED JUNE 30, 2024, THE TRUSTEES OF DIRECT RELIEF  
FOUNDATION APPROVED TO PROVIDE FUNDS TO DIRECT RELIEF TO COVER ALL OF  
DIRECT RELIEF'S FUNDRAISING EXPENSES AS WELL AS 100% OF THE  
COMPENSATION OF THE CEO.

DIRECT RELIEF ACCRUES THE AMOUNTS RECEIVABLE FROM THE FOUNDATION ON AN  
ANNUAL BASIS. THE BALANCE DUE AS OF JUNE 30, 2024 CONSISTS OF THE  
FOLLOWING:

PRIOR YEAR APPROVED TRANSFERS (A) 808,103

CURRENT YEAR APPROVED TRANSFERS 3,709,194

ACTUAL TRANSFERS TAKEN (135,674)

TOTAL AMOUNT RECEIVABLE AS OF JUNE 30, 2024 \$4,381,623

**Part VII** Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

(A) APPROVED TRANSFERS THAT ARE NOT TAKEN BY THE END OF EACH YEAR ARE

CARRIED FORWARD TO BE TAKEN IN FUTURE YEARS.

Area for supplemental information with horizontal lines.

**Application for Extension of Time To File an Exempt Organization  
Return or Excise Taxes Related to Employee Benefit Plans**File a separate application for each return.  
Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.

OMB No. 1545-0047

**Electronic filing (e-file).** You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit [www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits).

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Part I - Identification**

<b>Type or Print</b>  File by the due date for filing your return. See instructions.	Name of exempt organization, employer, or other filer, see instructions.  DIRECT RELIEF	Taxpayer identification number (TIN)  95-1831116
	Number, street, and room or suite no. If a P.O. box, see instructions. 6100 WALLACE BECKNELL ROAD	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SANTA BARBARA, CA 93117	

Enter the Return Code for the return that this application is for (file a separate application for each return) 07

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name \_\_\_\_\_  
Plan Number \_\_\_\_\_  
Plan Year Ending (MM/DD/YYYY) \_\_\_\_\_

**Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)**

The books are in the care of DIRECT RELIEF, JONATHAN STEINER  
6100 WALLACE BECKNELL ROAD - SANTA BARBARA, CA 93117

Telephone No. 805-964-4767 Fax No. \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 15, 20 25, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
☐ calendar year 20 \_\_\_\_ or  
☒ tax year beginning JUL 1, 20 23, and ending JUN 30, 20 24

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return  
☐ Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c <b>Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2024)

**Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

OMB No. 1545-0047

**2023**

For calendar year 2023 or other tax year beginning JUL 1, 2023, and ending JUN 30, 2024

Department of the Treasury  
Internal Revenue ServiceGo to [www.irs.gov/Form990T](https://www.irs.gov/Form990T) for instructions and the latest information.  
Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).Open to Public Inspection for  
501(c)(3) Organizations Only

<b>A</b> <input type="checkbox"/> Check box if address changed.	<b>Print or Type</b>	Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.)  DIRECT RELIEF  Number, street, and room or suite no. If a P.O. box, see instructions. 6100 WALLACE BECKNELL ROAD  City or town, state or province, country, and ZIP or foreign postal code SANTA BARBARA, CA 93117	<b>D</b> Employer identification number  95-1831116
<b>B</b> Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) <input type="checkbox"/> 529A			<b>E</b> Group exemption number (see instructions)
<b>C</b> Book value of all assets at end of year ..... 1,186,035,572.			<b>F</b> <input type="checkbox"/> Check box if an amended return.
<b>G</b> Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust <input type="checkbox"/> State college/university <input type="checkbox"/> 6417(d)(1)(A) Applicable entity			
<b>H</b> Check if filing only to claim <input type="checkbox"/> Credit from Form 8941 <input type="checkbox"/> Refund shown on Form 2439 <input type="checkbox"/> Elective payment amount from Form 3800			
<b>I</b> Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation <input type="checkbox"/>			
<b>J</b> Enter the number of attached Schedules A (Form 990-T) .....			
<b>K</b> During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," enter the name and identifying number of the parent corporation			
<b>L</b> The books are in care of DIRECT RELIEF, JONATHAN STEINER Telephone number 805-964-4767			

**Part I Total Unrelated Business Taxable Income**

1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) ...	1	0.
2 Reserved .....	2	
3 Add lines 1 and 2 .....	3	
4 Charitable contributions (see instructions for limitation rules) .....	4	0.
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 .....	5	
6 Deduction for net operating loss. See instructions .....	6	0.
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 .....	7	
8 Specific deduction (generally \$1,000, but see instructions for exceptions) .....	8	1,000.
9 <b>Trusts.</b> Section 199A deduction. See instructions .....	9	
10 <b>Total deductions.</b> Add lines 8 and 9 .....	10	1,000.
11 <b>Unrelated business taxable income.</b> Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero .....	11	0.

**Part II Tax Computation**

1 <b>Organizations taxable as corporations.</b> Multiply Part I, line 11 by 21% (0.21) .....	1	0.
2 <b>Trusts taxable at trust rates.</b> See instructions for tax computation. Income tax on the amount on Part I, line 11, from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) .....	2	
3 <b>Proxy tax.</b> See instructions .....	3	
4 Other tax amounts. See instructions .....	4	
5 Alternative minimum tax .....	5	
6 <b>Tax on noncompliant facility income.</b> See instructions .....	6	
7 <b>Total.</b> Add lines 3 through 6 to line 1 or 2, whichever applies .....	7	0.

**Part III Tax and Payments**

1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) .....	1a	1b	1c	1d	1e	1f
b Other credits (see instructions) .....						
c General business credit. Attach Form 3800 (see instructions) .....						
d Credit for prior-year minimum tax (attach Form 8801 or 8827) .....						
e <b>Total credits.</b> Add lines 1a through 1d .....						
2 Subtract line 1e from Part II, line 7 .....	2					0.
3a Amount due from Form 4255 .....	3a					
b Amount due from Form 8611 .....	3b					
c Amount due from Form 8697 .....	3c					
d Amount due from Form 8866 .....	3d					
e Other amounts due (see instructions) .....	3e					
f <b>Total amounts due.</b> Add lines 3a through 3e .....	3f					0.
4 <b>Total tax.</b> Add lines 2 and 3f (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here .....	4					0.
5 Current net 965 tax liability paid from Form 965-A, Part II, column (k) .....	5					0.

**Part III Tax and Payments** (continued)

<b>6 a</b>	Payments: Preceding year's overpayment credited to the current year .....	<b>6a</b>		
<b>b</b>	Current year's estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/> .....	<b>6b</b>		
<b>c</b>	Tax deposited with Form 8868 .....	<b>6c</b>		
<b>d</b>	Foreign organizations: Tax paid or withheld at source (see instructions) .....	<b>6d</b>		
<b>e</b>	Backup withholding (see instructions) .....	<b>6e</b>		
<b>f</b>	Credit for small employer health insurance premiums (attach Form 8941) .....	<b>6f</b>		
<b>g</b>	Elective payment election amount from Form 3800 .....	<b>6g</b>		
<b>h</b>	Payment from Form 2439 .....	<b>6h</b>		
<b>i</b>	Credit from Form 4136 .....	<b>6i</b>		
<b>j</b>	Other (see instructions) .....	<b>6j</b>		
<b>7</b>	<b>Total payments.</b> Add lines 6a through 6j .....	<b>7</b>		
<b>8</b>	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/> .....	<b>8</b>		
<b>9</b>	<b>Tax due.</b> If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed .....	<b>9</b>		
<b>10</b>	<b>Overpayment.</b> If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid .....	<b>10</b>		
<b>11</b>	Enter the amount of line 10 you want: <b>Credited to 2024 estimated tax</b> <b>Refunded</b> .....	<b>11</b>		

**Part IV Statements Regarding Certain Activities and Other Information** (see instructions)

<b>1</b>	At any time during the 2023 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here <u>SEE STATEMENT 2</u>	<b>Yes</b>	<b>No</b>
		X	
<b>2</b>	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? ..... If "Yes," see instructions for other forms the organization may have to file.		X
<b>3</b>	Enter the amount of tax-exempt interest received or accrued during the tax year ..... \$ .....		
<b>4</b>	Enter available pre-2018 NOL carryovers here \$ <u>2,138.</u> Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
<b>5</b>	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
	Business Activity Code		
	Available post-2017 NOL carryover		
	\$ .....		
	\$ .....		
	\$ .....		
	\$ .....		
<b>6 a</b>	Reserved for future use .....		
<b>b</b>	Reserved for future use .....		

**Part V Supplemental Information**

Provide any additional information. See instructions.

<b>Sign Here</b>	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 taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Date	VP OF FINANCE/CFO	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed
	LAUREN A. HAVERLOCK	LAUREN A. HAVERLOCK	02/10/25	PTIN P00545829
	Firm's name MOSS ADAMS LLP	Firm's EIN 91-0189318		
	21700 OXNARD ST. STE 300			
	Firm's address WOODLAND HILLS, CA 91367		Phone no. 818-577-1900	

Form 990-T (2023)

FORM 990-T		PRE-2018 NET OPERATING LOSS DEDUCTION		STATEMENT 1
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/18	2,138.	0.	2,138.	2,138.
NOL CARRYOVER AVAILABLE THIS YEAR			2,138.	2,138.

FORM 990-T	NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST	STATEMENT 2
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NAME OF COUNTRY

SOUTH AFRICA

MEXICO