

**YOUR
SUPPORT
& HOW IT
WAS USED**



FISCAL YEAR 2024 ANNUAL REPORT

6100 Wallace Becknell Rd, Santa Barbara, CA 93117
T: 805-964-4767 | TOLL-FREE: 800-676-1638
F: 805-681-4838 | DirectRelief.org

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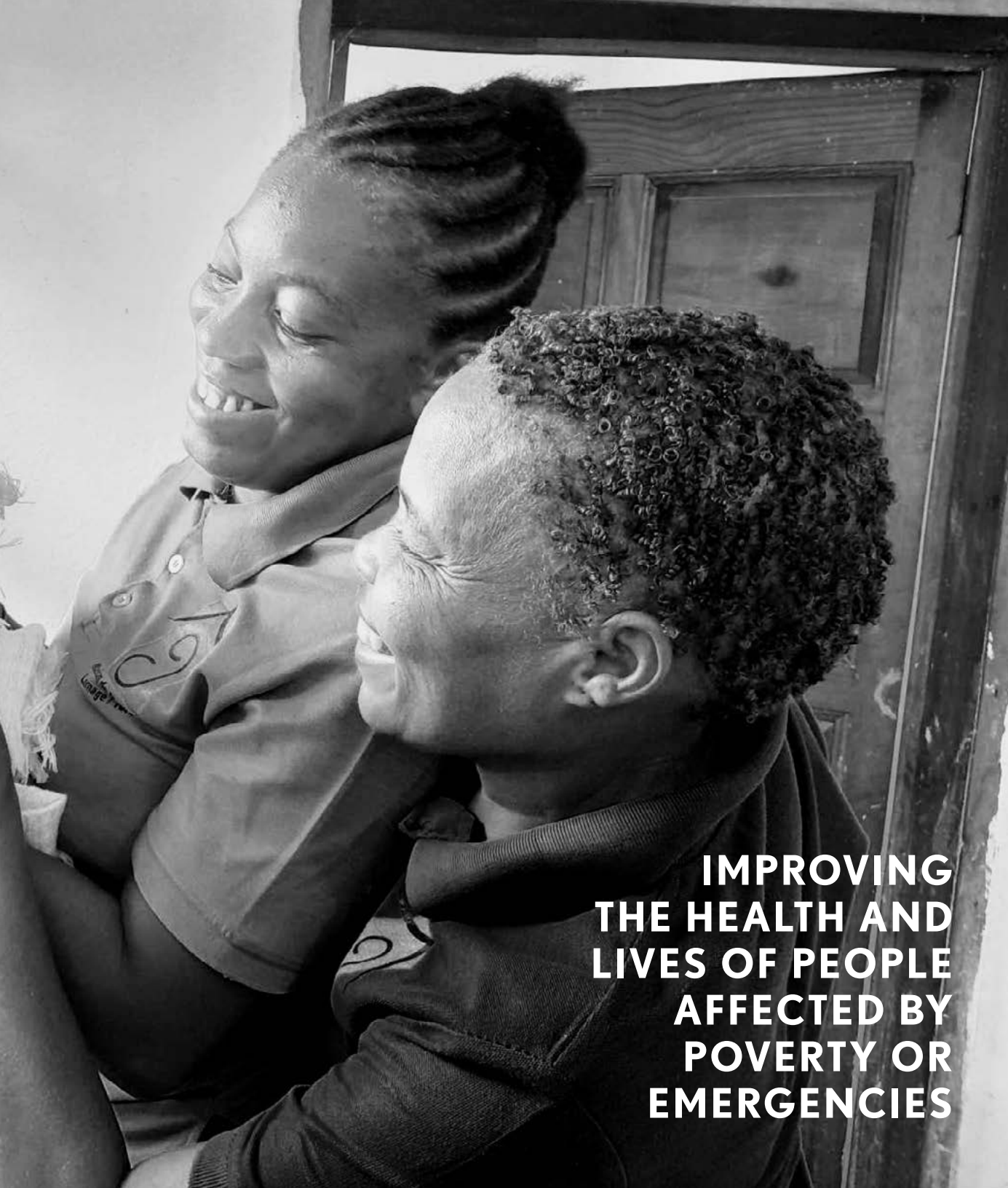
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Cover photo: On May 17, 2024, Direct Relief delivered a 1.5-metric ton shipment to the Guerrero Health Department in Guerrero, Mexico, including 156 field medic packs for firefighters and paramedics, and seven emergency health kits filled with emergency essentials requested after disasters. This aid will bolster the Medical Emergency Regulatory Center, the state's fire department, and the National Forestry Commission brigades. (Photo by Felipe Luna Espinosa for Direct Relief)

In March 2024, Maison de Naissance was one of several partners in Haiti to receive an emergency operating grant to maintain services during a period of significant political unrest and gang violence. The grant helped sustain 24/7 maternity services, providing support for personnel salaries, medical supplies, and fuel during what Maison de Naissance described as the most difficult three months experienced since the clinic's inception in 2004. (Courtesy photo)





**IMPROVING
THE HEALTH AND
LIVES OF PEOPLE
AFFECTED BY
POVERTY OR
EMERGENCIES**

CONTENTS

04

Fiscal Year 2024 in Review

13

How Direct Relief was Funded

18

How Your Support Was Used

27

Financial Statements

30

Corporate Partnerships

34

Strategic Foundation Partnerships

36

Legacy Society

40

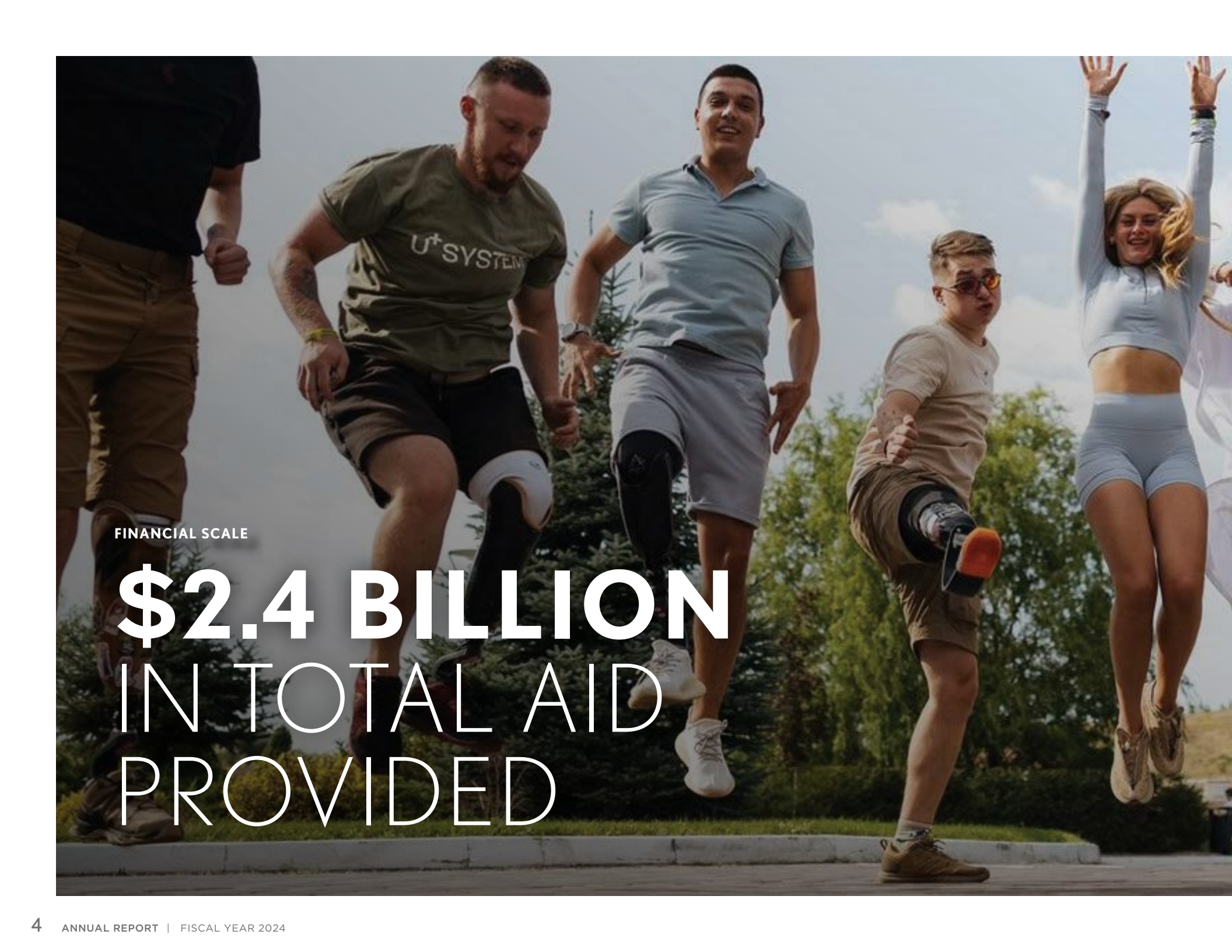
Investors

47

In Memoriam

48

Guiding Principles

A group of young adults are captured in a dynamic, joyful pose outdoors. From left to right: a person in a black shirt and khaki pants is partially visible; a man with a beard and tattoos runs in a green t-shirt with 'U+SYSTEM' on it and black shorts, wearing a white prosthetic right leg; a man in a light blue polo shirt and shorts runs with a white prosthetic right leg; a man in a tan t-shirt and shorts runs with a black and orange prosthetic right leg; and a woman in a light blue crop top and shorts jumps with her arms raised. The background shows green trees and a clear sky.

FINANCIAL SCALE

\$2.4 BILLION
IN TOTAL AID
PROVIDED



Since the beginning of the war in Ukraine, supporting rehabilitation and recovery from war injuries, both physical and psychological, has been a core focus of Direct Relief. Here, surgeon Oleksandra Mostepan, fourth from right, of U+ System celebrates with patients and trainee prosthetists. (Courtesy photo)

FY 2024 MATERIAL ASSISTANCE

\$2,400,000,000

in specifically requested medicines and medical supplies

515,190,305

in Defined Daily Doses of medicine

5,823

tons of pharmaceuticals, medical supplies, and medical equipment delivered

26,772

deliveries to healthcare providers

90

countries

50

U.S. states

4

U.S. territories

Mālama I Ke Ola Health Center received a \$1 million grant from Direct Relief to continue and expand vital health services to the community after devastating wildfires broke out in August 2023. (Courtesy photo)

MĀLAMA I KE OLA HEALTH CENTER

FINANCIAL SCALE

\$45.6 MILLION
IN GRANTS
DISTRIBUTED



Kampala, Uganda
(David Uttley for Direct Relief)



Jindires, Syria (Borag Albsha for Syria Relief and Development)



Gaza
(Courtesy of Anera)



Toluca, Mexico
(Marian Carrasquero for Direct Relief)



Atlanta, Georgia
(Sean Collier for Direct Relief)



Hatay, Turkey
(Ali Saltan for Direct Relief)



Summerville, South Carolina
(Courtesy photo)



Flathead Indian Reservation, Montana
(Direct Relief)

515 MILLION DOSES OF MEDICINE DISTRIBUTED

HUMAN SCALE

5,823 TONS OF MEDICAL AID PROVIDED

OPERATIONAL
SCALE



Kampala, Uganda
(David Uttley for Direct Relief)



Culebra, Puerto Rico
(Edgar Cruz for Direct Relief)



St. Lucia, Caribbean
(Courtesy of Office of Eastern Caribbean States)



Hatay, Turkey
(Ali Saltan for Direct Relief)



Kahului, Maui, Hawaii
(Direct Relief)

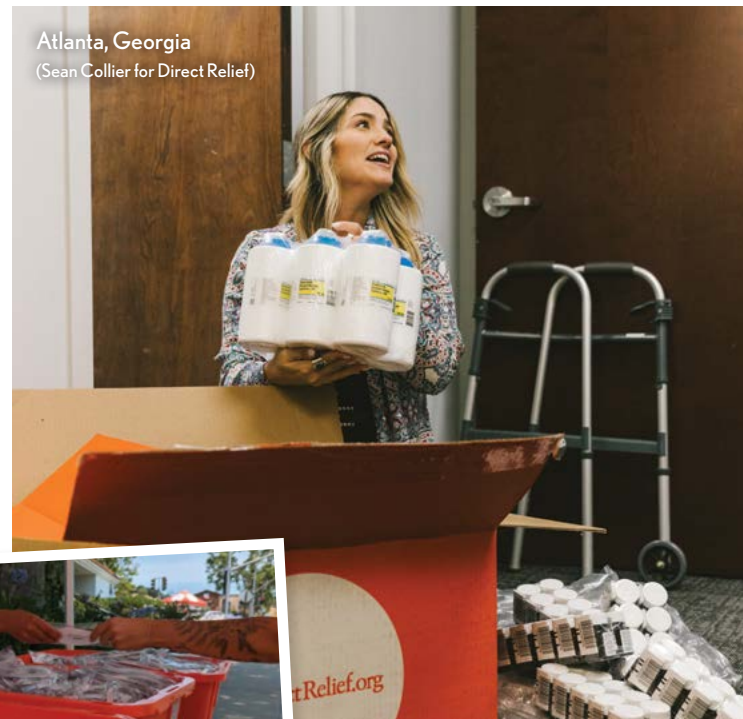




Southern Lebanon
(Courtesy of Anera)



Piedras Negras, Coahuila, Mexico
(Paul Barcena for Direct Relief)



Atlanta, Georgia
(Sean Collier for Direct Relief)



Santa Barbara, California
(Lara Cooper for Direct Relief)



Los Olivos, California
(Direct Relief)




Acapulco, Mexico
(Felipe Luna for Direct Relief)



Guerrero, Mexico
(Felipe Luna Espinosa for Direct Relief)



Butte County, California
(Direct Relief)



GEOGRAPHIC SCALE

90 COUNTRIES, 54 U.S. STATES & TERRITORIES

Patients and medical supplies are often delivered by motorcycle on the road to the Direct Relief-supported Wanale Health Center, Mbale, Uganda. (David Uttley for Direct Relief)

THE LARGEST CHARITABLE MEDICINES PROGRAM IN THE U.S.





Dr. Ali Kanatli, a primary healthcare physician in Narlica, Turkey, with a new Direct Relief emergency medical backpack. (Ali Saltan for Direct Relief)

HOW DIRECT RELIEF WAS FUNDED

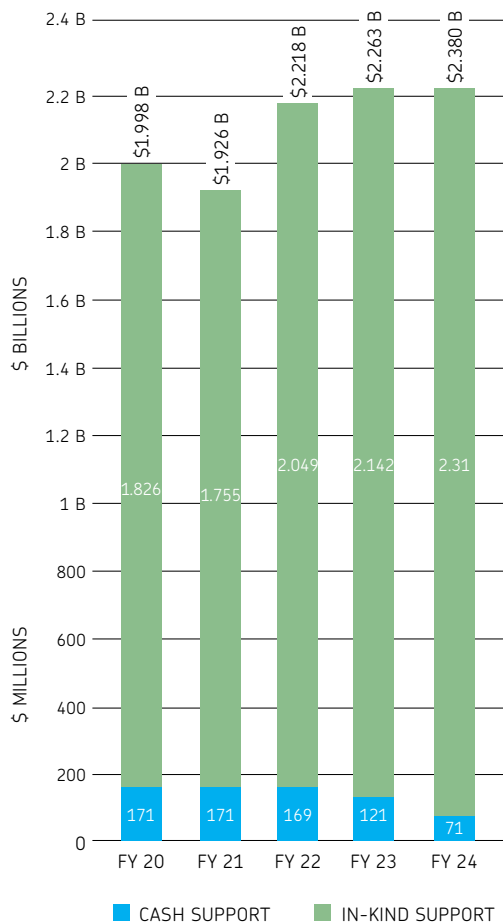
[FY 2024]

Nongovernmental, nonsectarian, and nonprofit, Direct Relief provides assistance to people and communities without regard to factors such as ethnic identity, gender, nationality, political opinion, or religion. Direct Relief relies entirely on private contributions.

In Fiscal Year 2024 (July 1, 2023, through June 30, 2024), individuals, companies, and foundations gave in-kind and cash contributions to Direct Relief. Businesses and organizations provided products and expertise needed and leveraged for humanitarian purposes, and generous cash donations helped keep Direct Relief independent from external interests, maintaining the flexibility of its work. >>



FY 2024 CONTRIBUTED SUPPORT:
\$2.381 B



CASH AND IN-KIND CONTRIBUTIONS

To fulfill its mission and program objectives, Direct Relief has long sought partnerships with, participation of, and contributions of in-kind goods and services from businesses and organizations with particular expertise that is needed and can be leveraged for humanitarian activities. In-kind contributions typically represent more than 90 percent of the organization's total annual revenue and provide other significant benefits.

Direct Relief's core activities revolve around its functional role of medical distributor. The organization was the first nonprofit in the U.S. to obtain the highest accreditation and licensing in all 50 states to distribute Rx medications. Consistent with this role, the majority of in-kind contributions typically include substantial inventories of prescription medications, vaccines, and medical supplies from manufacturers that Direct Relief, in turn, provides at no charge to qualified healthcare organizations for patients who need and cannot afford them and during emergencies.

Other in-kind contributions include extensive transportation and logistics services, a broad array of software applications and technology platforms, and expertise in numerous functional areas inherent in managing a global medical supply chain that must meet stringent regulatory standards, which exist even in emergency situations to which Direct Relief frequently is asked to respond. The longstanding approach of inviting direct support for needed goods and services has benefits far beyond merely receiving donated goods and services. It

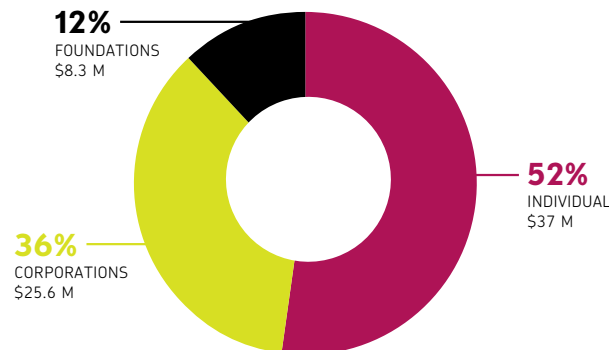
has allowed broader public participation in humanitarian efforts by commercial businesses in many industries and far more and higher quality goods and services than could be achieved by seeking only financial support from the public to purchase them.

In addition, the extensive contribution of goods and services allows financial contributions entrusted to Direct Relief to be leveraged significantly. Direct Relief also seeks and receives cash contributions, which are used to cover internal costs and procure goods and services that cannot be obtained through in-kind donations and are needed to advance the organization's mission.

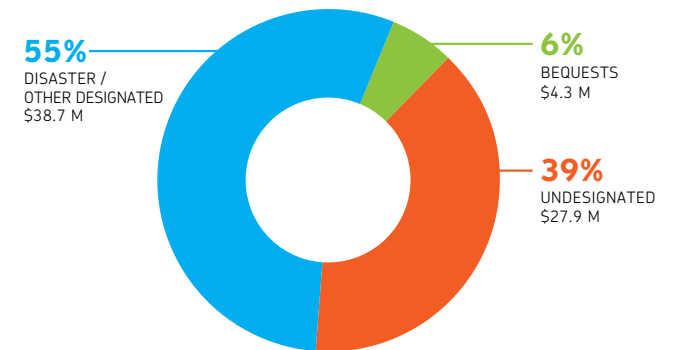
Direct Relief's financial statements must account for both cash and in-kind contributions that are entrusted to the organization to fulfill its humanitarian mission. In Fiscal Year 2024, over 97 percent of its total public support of nearly \$2.4 billion was received in the form of in-kind medical products and certain other donated goods and services (such as transportation services from FedEx, online advertising from Google, etc.).

Merging cash and in-kind contributions in accordance with Generally Accepted Accounting Principles (GAAP) can be confusing to non-accountants. These notes, in addition to the financial statements on page 27, are to assist you in understanding how Direct Relief's program model is financed and works, to explain the state of the organization's financial health, and to inform you of how the money generously donated to Direct Relief in FY 2024 by individuals, businesses, organizations, and **CONT'D** ▶

SOURCES OF CASH REVENUE: \$71 M



CATEGORIES OF CASH SUPPORT: \$71 M



foundations was spent.

Direct Relief's activities are planned and executed on an operating (or cash) budget that is approved by the Board of Directors prior to the onset of the fiscal year. The cash budget is not directly affected by the value of in-kind medical product contributions. Cash support—as distinct from the value of contributed products—is used to pay for the logistics, warehousing, transportation, program oversight, program and administrative staff salaries, purchasing of essential medical products, acquisition of donated medical products, and all other program expenses.

TIMING OF REVENUE RECOGNITION & EXPENSES

When taking an annual snapshot at the end of a fiscal year, several factors can distort a realistic picture of Direct Relief's (or any nonprofit organization's) financial health and activities. One is the timing of donations received and the expenditure of those donations, whether in the form of cash or in-kind medical products.

Donations—including those received to conduct specific activities—are recorded as revenue when they are received or promised, even if the activities are to be conducted in a future year. The in-kind product donations are also recorded in inventory upon receipt. Direct Relief's policy is to distribute products at the earliest practicable date, consistent with sound programmatic principles. While the distribution often occurs in the same fiscal year of receipt, it may occur in the following fiscal year. An expense is recorded and inventory is reduced when the products are shipped to partners.

In FY 2024, Direct Relief received more in contributions and earnings than was used to support its partner network and run operations. When the fiscal year ended, the Organization reported an increase in net assets (or net operating "surplus"). In FY 2022, for example, the opposite was true, and the Organization recorded a decrease in net assets (or net operating "deficit").

In FY 2024, Direct Relief received public support and revenue of \$2.3 billion in product donations, and \$71 million in cash donations. The Organization had an unrealized gain (fair market value increase) on investments of \$6 million and \$13.3 million in interest and investment

income. During the same period, Direct Relief incurred program service costs including pharmaceuticals, medical supplies, equipment and related expenses of \$2.4 billion, administrative support services of \$9.5 million and fundraising costs of \$3.4 million. For FY 2024, the change in net assets was a \$28 million net operating "surplus." A fiscal year end net operating "surplus or "deficit" is often due to the timing difference of when public support is received and recorded (current fiscal year) compared to when humanitarian aid or cash is granted (subsequent fiscal years).

POLICY ON DESIGNATED CONTRIBUTIONS

Direct Relief has adopted a strict policy to ensure that 100 percent of all designated contributions for a specific program or emergency response are used only on expenses related to supporting that program or response. This includes earnings that may accrue on restricted contributions. By longstanding internal policy and practice, any such earnings are deemed to retain the same restriction as the contribution. This is not required under GAAP but Direct Relief believes it right and proper to do so and ensures the intended purpose of a donor's restricted fund is honored. Direct Relief has used similar policies for all disaster responses in the last few years, including responses to the crisis in Ukraine, Covid19 pandemic, wildfires in the U.S., and the Turkey/Syria earthquake.

This approach is appropriate for honoring precisely the clear intent of generous donors who responded to these tragedies and to preserve the maximum benefit for the survivors for whose benefit the funds were entrusted to Direct Relief.

VALUATION OF IN-KIND RESOURCES

Direct Relief was the first nonprofit organization in the United States to receive accreditation from the National Association of Boards of Pharmacy as an Accredited Drug Distributor (formerly known as Verified-Accredited Wholesale Distributor or VAWD) licensed to distribute pharmaceutical products in all 50 U.S. states and 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 relevant accounting standards and the spirit and purpose of disclosure, transparency, and accountability to the public.

Direct Relief uses the following methodology in determining the fair market value of in-kind medical donations: U.S. Food and Drug Administration 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 in the RED BOOK™ published by Truven Health Analytics/IBM Watson Health. The RED BOOK® is an industry recognized drug and pricing reference guide for pharmaceuticals in the U.S. Direct Relief uses monthly pricing information available from the RED BOOK™ online service to ensure the most accurate and current valuation of pharmaceuticals donated to the organization.

WAC is the standard used by many U.S. states as the Federal Upper Limit pricing for drugs purchased under the Medicaid program. Alternative methods of valuing a drug donation would result in a higher valuation. For example, the commonly cited Average Wholesale Price (AWP), which is also published in the RED BOOK®, is approximately twenty-five percent higher than WAC for a particular product according to the RED BOOK®. **CONT'D ►**

**HOW
DIRECT RELIEF
WAS FUNDED
FY 2024**



A mother with her baby at the Direct Relief-supported Wanale Health Center, Mbale, Uganda. (David Uttley for Direct Relief)

Direct Relief determined that WAC is the more appropriate measure. Because pricing differences exist for generic and branded products, it is important to note Direct Relief

applies WAC value to each specific product's National Drug Code, which relates to the specific manufacturer and formulation of a drug. This distinction is significant because it reflects, for example, the lower price (and fair market value) of a generic product received through donation, compared to higher-priced branded product.

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 market value of the particular manufacturer's specific formulation. As is the case with FDA-approved formulations, the value relates to the specific product from the specific manufacturer. The sources of such pricing information vary, but relevant information may include the price paid by wholesalers or other third-party buyers, a favorable price negotiated by an organization for a particular drug, or other such reasonable bases. For medical supplies and equipment, the organization determines wholesale value by reviewing the pricing information on the specific item listed for sale in trade publications, through online pricing, and through its own procurement history when purchasing. Such valuations are lower typically than published retail prices.

Different prices for 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 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 pharmaceuticals, 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 other commodities and services beyond pharmaceuticals. In the U.S., for example, 12 ounces of water is free from a public tap but can be several dollars if it comes in a branded bottle.

Similar pricing differences exist for services as well. The outsourcing and off-shoring phenomena reflect that even highly skilled services—surgery, computer programming, research conducted by Ph.Ds.—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. Similarly, if a more expensive branded product is received through donation, its value is registered 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 and most efficient use of resources. Financial contributors benefit also, 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 to get it right.

DIRECT RELIEF FOUNDATION AND THE BOARD-RESTRICTED INVESTMENT FUND

In 1998, Direct Relief's Board of Directors established a Board-Restricted Investment Fund ("BRIF") to help secure the organization's financial future and provide a reserve for future operations. The BRIF, established with assets valued at \$774 thousand, draws resources from Board-designated unrestricted bequests and gifts and returns on portfolio assets.

In October 2006, the Direct Relief Foundation was formed and incorporated in the State of California as a separate, wholly controlled, supporting organization of

Direct Relief. Effective April 1, 2007, assets in the BRIF were transferred to the Foundation. The Foundation's investments are managed by J.P. Morgan, an investment firm under the direction of the Foundation's Investment Committee, which meets quarterly and oversees investment policy and performance.

The Board has adopted investment and spending policies for the BRIF assets that attempt to provide a predictable stream of funding to Direct Relief while seeking to maintain the purchasing power of these assets. Under this policy, as approved by the Trustees of the Foundation, the BRIF assets are invested in a manner that is intended to produce results that provide a reasonable balance between the quest for growth and the need to protect principal. The Foundation expects its BRIF funds, over time, to provide an average rate of return of approximately five percent annually. Actual returns in any given year may vary from this amount.

The Foundation, to satisfy its long-term rate-of-return objectives, relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). The organization targets a diversified asset allocation balanced between equity and fixed income investments to achieve its short-term spending needs as well as long-term objectives within prudent risk constraints.

The Foundation has a policy of appropriating for distribution each year an amount up to five percent of the assets of the BRIF. In some instances, the Board may decide to appropriate an amount greater than its stated policy if it is specifically deemed prudent to do so. The BRIF is authorized to distribute its portfolio assets to pay for Direct Relief's fundraising expenses and the salary of the President and CEO as well as advance emergency relief funding as determined by the President and CEO.

For Fiscal Year 2024, the Foundation Trustees approved a distribution of \$3.7 million to pay for Direct Relief's fundraising expenses and the salary of the President and CEO. Upon a majority vote by the Board, the BRIF may also be utilized to meet other general operational costs and extraordinary capital expenses.

HOW YOUR SUPPORT WAS USED

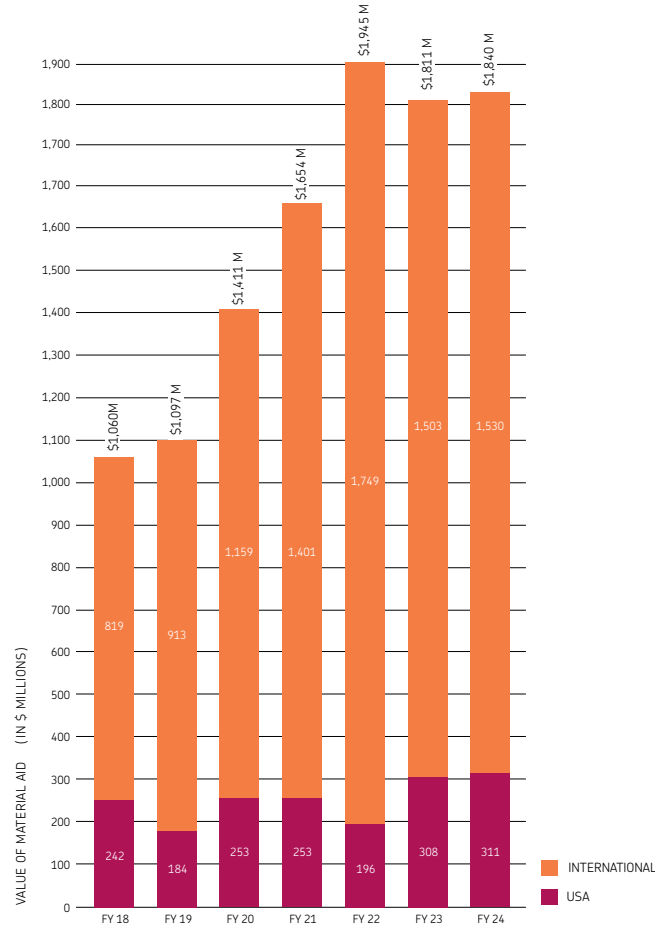
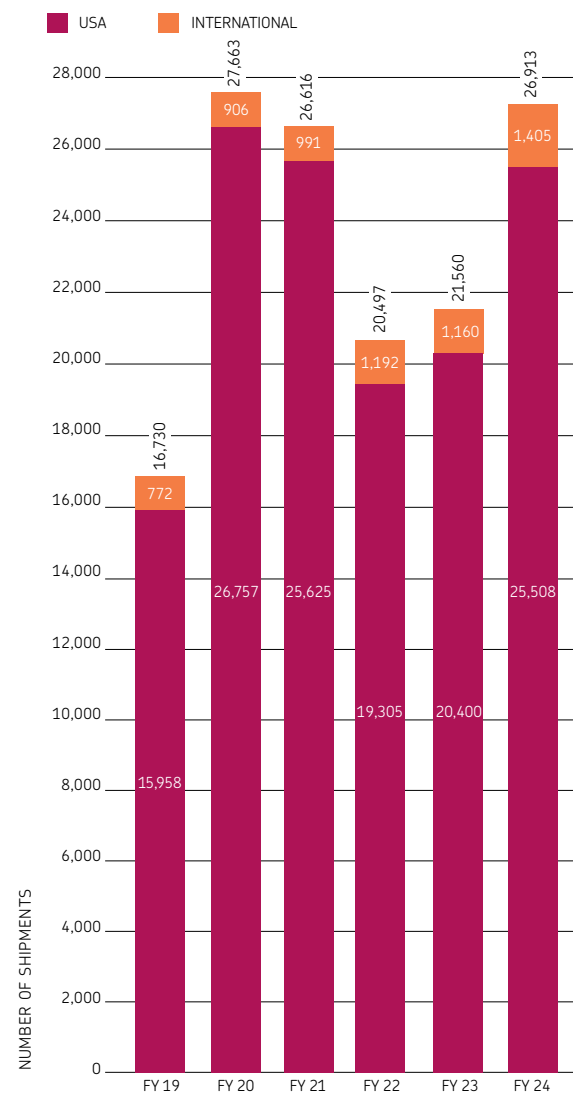
[FY 2024]

Thanks to your participation, Direct Relief helped more people in more places than ever before in its 76-year history in FY 2024.

The organization received \$2.38 billion in public support and provided \$2.4 billion in assistance around the world (including \$45.6 million in financial assistance. >>

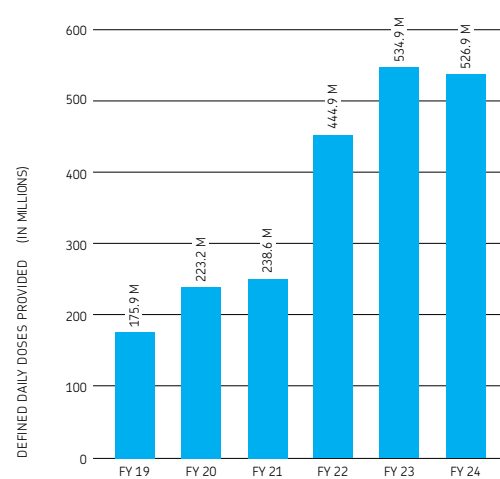
MATERIAL ASSISTANCE

Advancing its mission to improve the health and lives of people affected by poverty or emergencies, Direct Relief delivered 26,913 shipments of humanitarian material aid in FY 2024 to 94 countries and all 50 U.S. states and 5 U.S. territories.



The medical aid contained in these shipments was sufficient to provide **526.9 million Defined Daily Doses** (DDD) for people who may have otherwise lacked access to quality medications.

The **3,200** tons (over 6.4 million pounds) of pharmaceuticals, medical supplies, and medical equipment that were furnished to local health providers had a combined wholesale value of **\$1.8 billion**.



DDD is a measure of drug utilization developed by the World Health Organization (WHO) and maintained by the WHO Collaborating Center for Drug Statistics methodology at the University of Norway in Oslo. Direct Relief uses this as a measure of pharmaceutical aid provided.



Healthy Mothers Healthy Babies Coalition of Hawai'i visits Royal Lahaina Hotel, one of many sites used as temporary housing for displaced residents of Lāhainā after the Maui wildfires in August 2023. Direct Relief supported the coalition with medicines, supplies, and financial assistance. (Courtesy photo)

FINANCIAL ASSISTANCE

In addition to providing more essential medical material resources than ever before, Direct Relief furnished \$45.6 million in critically needed funding in FY 2024 to support the efforts of locally-run, non-governmental health facilities in the U.S. and internationally as they responded to crises, rebuilt damaged facilities, trained frontline health workers, and extended care to more patients.

Grant recipients included community-based groups responding to or recovering from emergencies, including the crisis in Ukraine (\$4.6m), Turkey/Syria Earthquake (\$4.1m), Hawaii Wildfires (\$3.1m), Israel/Palestine Conflict (\$1.5m), the Covid19 Pandemic (\$1.3m), the Columbia Migrant Crisis (\$850k), and Morocco Earthquake (\$654k).

Additional funding supported the innovative care and treatment programs of community health centers, free clinics, and charitable pharmacies in the U.S., and the on-going efforts of numerous other partners to address the chronic health needs of vulnerable people in their communities.

STAFFING & EXECUTIVE COMPENSATION

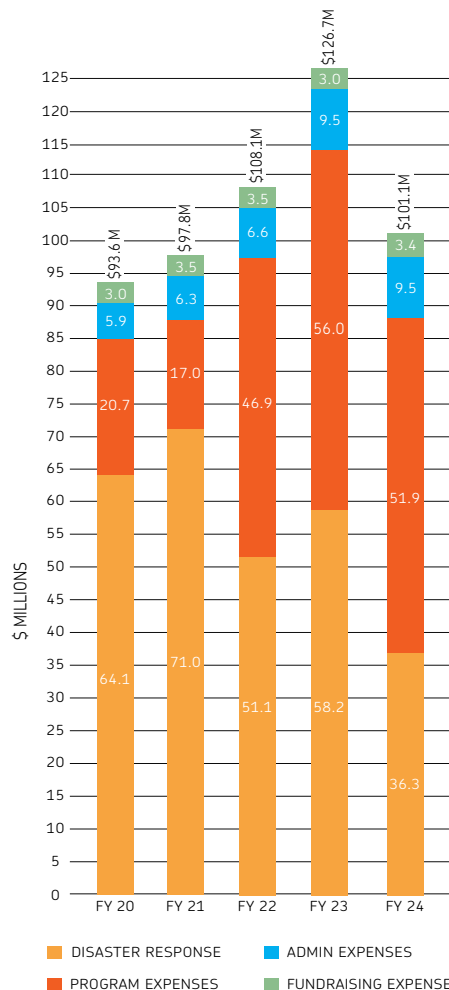
The \$2.4 billion in humanitarian assistance Direct Relief provided in FY 2024 across the U.S. and around the world was undertaken by a staff which, as of June 30, 2024, comprised 138 positions (136 full-time, 2 part-time). Measured on a full-time equivalent (FTE) basis, the total staffing over the course of the year was 137.1. This figure is derived by dividing the total hours worked by 2,080, the number of work hours of a full-time employee in one year. Two persons each working half-time, for example, would count as one FTE.

In general, staff functions relate to three basic business functions: programmatic activity, fundraising, and general administration. The following sections describe the financial cost Direct Relief's activities and how resources are spent to provide assistance to people in need throughout the world.

The President and CEO's compensation is paid from funds provided by Direct Relief Foundation. His compensation is allocated 50 percent to administration and 50 percent to fundraising

TOTAL CASH EXPENSES

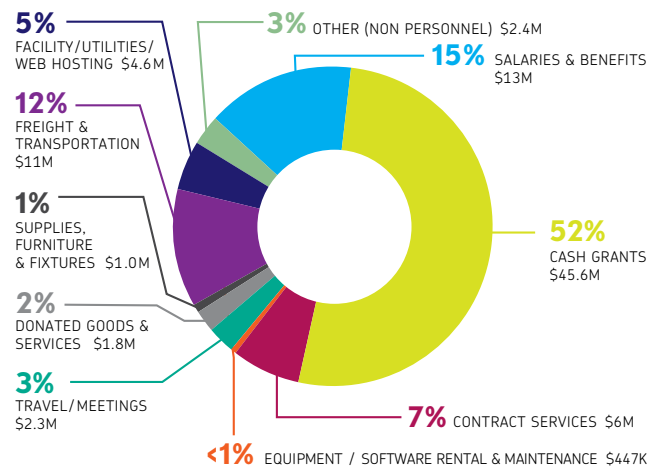
TOTAL CASH EXPENSES:
\$101.1M



PROGRAM EXPENSES

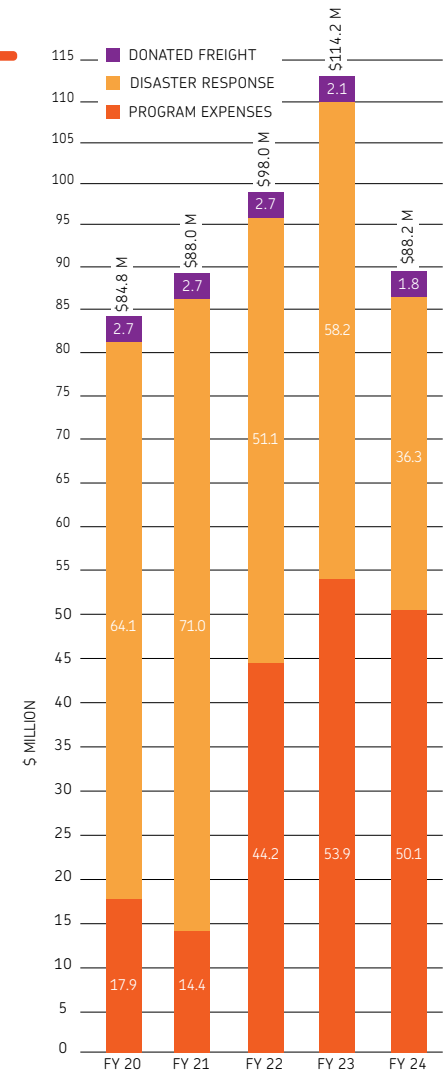
To implement its humanitarian programs (\$1.8 billion in medical material aid), Direct Relief spent \$60.9 million (excluding \$45.6 million in cash grants) in FY 2024, \$13 million of which paid for salaries, related benefits (health, dental, long-term disability insurance, and retirement-plan matching contributions), and mandatory employer paid taxes (Social Security, Medicare, workers' compensation, and state unemployment insurance) for 85 full-time and 1 part-time employees engaged in programmatic functions.

PROGRAM EXPENSES BY FUNCTION: \$88.2 M



PROGRAM EXPENSES ALSO INCLUDE >>

- ▶ Ocean/air freight and trucking for outbound shipments to partners, in-country transportation and inbound product donations (\$12.7 million total, of which \$1.8 million was donated)
- ▶ Travel for oversight and evaluation (\$2.3 million); contract services (\$6 million); packing materials and supplies (\$1 million) and disposal costs for expired pharmaceuticals (\$906 thousand)
- ▶ The value of expired products disposed of (\$131.3 million)
- ▶ A pro-rata portion of other allocable costs (see page 35)





Mayor of Sunflower, Mississippi, Desiree Norwood, left, and Plan A Health's nurse practitioner Meta Anderson, with Plan A Health's mobile medical unit, supported by Direct Relief. (Olivia Lewis for Direct Relief)

FUNDRAISING EXPENSES

Direct Relief's FY 2024 fundraising expenses totaled \$3.4 million, of which \$197,000 (or 6 percent) was the value of donated goods and services (such as donated advertising from Google) that were noncash expenditures. Such donated goods and services of an equal amount are also reported as revenue, as explained on page 14. FY 2024 cash expenditures for fundraising totaled \$3.2 million, which were paid by the Direct Relief Foundation—not from donors' contributions—as explained on page 17. The majority of these cash expenditures, \$2.1 million or 65 percent of the total \$3.2 million, were used to pay the salaries, related benefits, and payroll taxes for 11 full-time and 1 part-time employees. The other cash expenditures for fundraising activities are detailed in the list and chart below by type of activity, amount, and percentage of total expenditures for fundraising.

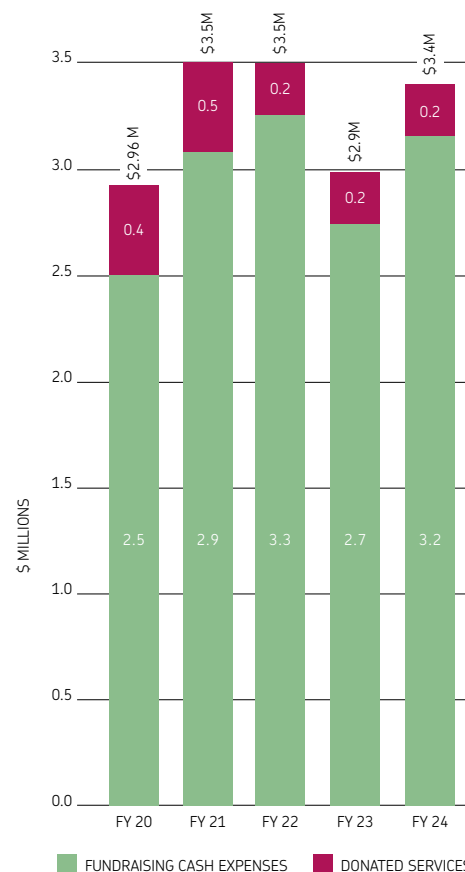
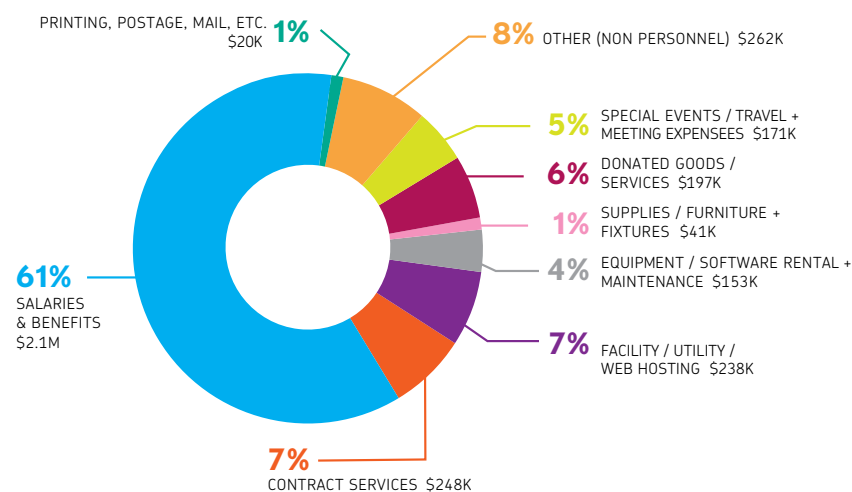
Direct Relief's longstanding emphasis on efficiency extends to its fundraising efforts. Although not paid with donor funds, Direct Relief notes for comparative purposes that its total fundraising expenses for FY 2024 of \$3.4 million (which includes noncash expenditures) equals 4.78 percent of the \$70.9 million in cash support the organization received; cash expenditures for fundraising of \$3.2 million equals 4.47 percent of cash received.

Direct Relief believes that this ratio of cash expended on fundraising to charitable cash donations received is the most appropriate measure to consider because it is most common and allows for a fair comparison with other charitable organizations that rely on charitable support.

Also, unlike Direct Relief, most charitable organizations do not receive the majority of their contributions in the form of noncash donations, which represented 97 percent of the \$2.4 billion in total revenue received by Direct Relief in FY 2024. Presenting fundraising expenses as a percentage of total revenue that includes extensive in-kind contributions provides a misleading picture of how much of its or its donors' money is being spent on fundraising.

In Direct Relief's case, the already exceptionally low ratio of 4.47 percent of cash received being devoted to fundraising would become statistically zero (less than two-tenths of one percent) with the inclusion of the substantial amount of in-kind contributions reflected in the total \$2.4 billion revenue figure for FY 2024.

FUNDRAISING EXPENSES BY FUNCTION: \$3.4M



FUNDRAISING EXPENSES ALSO INCLUDE >>

- ▶ \$20 thousand for the production, printing, and mailing of the annual report, tax-receipt letters to contributors, fundraising solicitations, and informational materials
- ▶ \$110 thousand in advertising and marketing costs
- ▶ \$445 thousand in contract services (\$237 thousand in donated services)
- ▶ \$196 thousand in supplies and furniture in support of the fundraising staff
- ▶ A pro-rata portion of other allocable costs (see page 25)

Direct Relief's Eduardo Mendoza inspects a delivery of a 50-bed hospital kit donated by the State of California to the State of Guerrero, Mexico. This kit, transported over 2,000 miles by road, aided in Hurricane Otis recovery efforts. The modularized hospital kit empowers Guerrero's Regulatory Center for Medical Emergencies (CRUM) to respond swiftly to various crises and assist neighboring states when needed. (Felipe Luna Espinosa for Direct Relief)



MANAGEMENT & GENERAL EXPENSES

Direct Relief spent \$9.5 million on administration in FY 2024. Administration expenses are those that relate to financial and human resource management, information technology, communications, public relations, and general office management. A total of \$4.8 million was for salaries, related benefits, and taxes for 41 full-time employees engaged in administration and financial management.

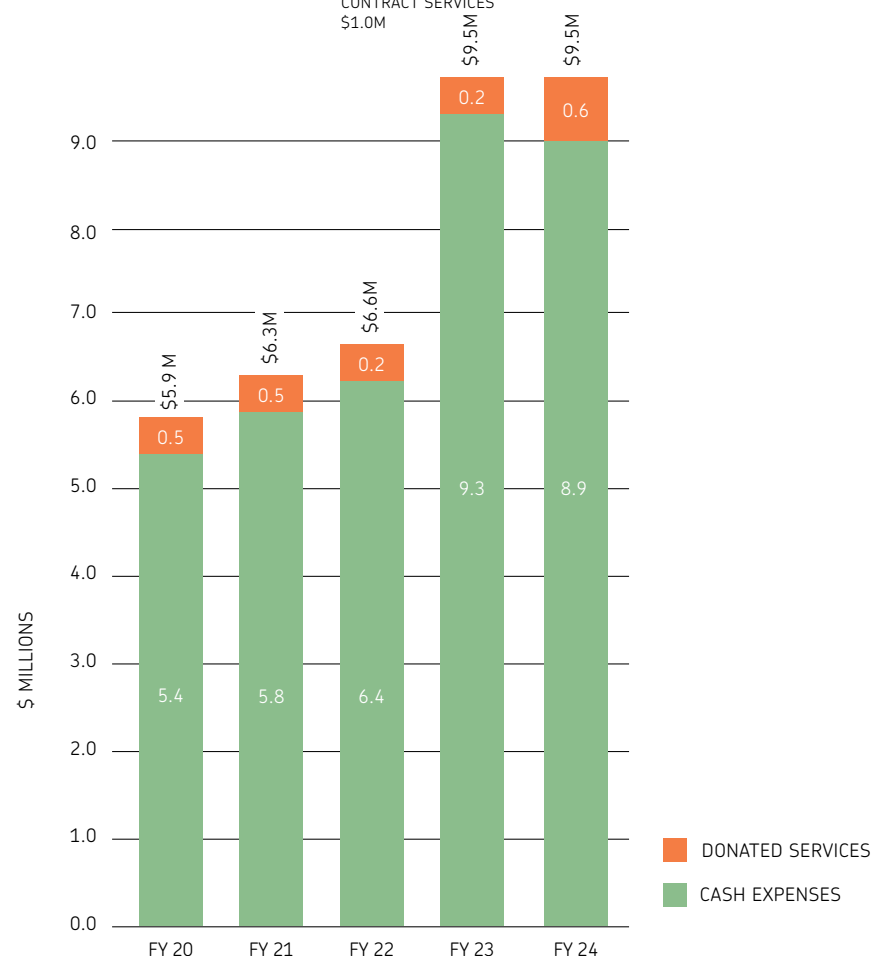
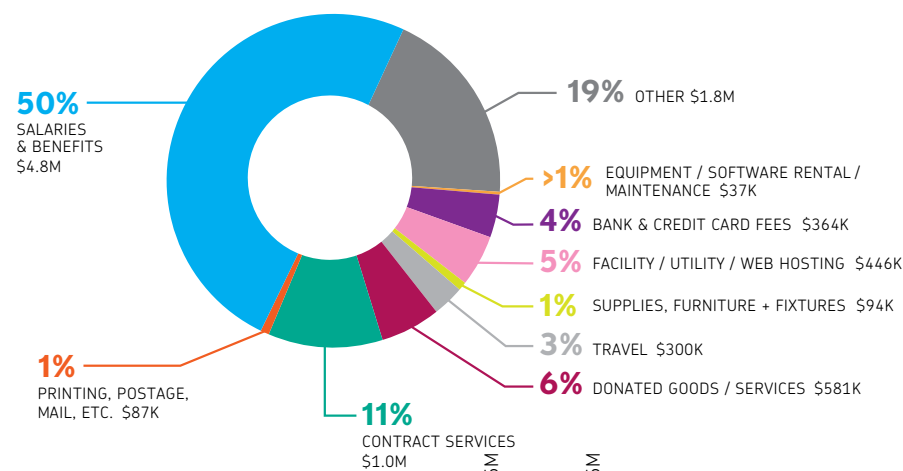
MANAGEMENT & GENERAL EXPENSES ALSO INCLUDE >>

- ▶ \$364 thousand in credit card and banking fees
- ▶ \$300 thousand for travel, meetings and conferences
- ▶ \$1.2 million in contract services (\$197 thousand of which were donated services)
- ▶ \$157 thousand in accounting fees for the annual CPA audit, payroll processing and reporting, and other financial services
- ▶ \$206 thousand in legal fees
- ▶ \$48 thousand in press releases and online advertising
- ▶ \$21 thousand in taxes, licenses, and permits (Direct Relief is registered as an exempt organization in each U.S. state requiring such registration)
- ▶ A pro-rata portion of other allocable costs (see below)

OTHER ALLOCABLE COSTS

Direct Relief owns and operates a 155,000-square-foot warehouse facility that serves as its headquarters. Costs to maintain this facility includes interest on a line of credit, depreciation, utilities, insurance, maintenance, and supplies. These costs are allocated based on the square footage devoted to respective functions (e.g., fundraising expenses described earlier include the proportional share of these costs associated with the space occupied by fundraising staff). The cost of information technology services is primarily related to the activities of the respective functions described above. These costs are allocated based on the headcount devoted to the respective functions.

MANAGEMENT + GENERAL EXPENSES BY FUNCTION: \$9.5M





Representatives of the Haiti Health Network inspect a new delivery of free medicines and medical supplies from Direct Relief. (Courtesy photo)

COMBINED STATEMENT OF FINANCIAL POSITION

For the fiscal year ended
June 30, 2024 with summarized
totals for FY 2023. Amounts are
presented in the thousands.

	FY 2024							FY 2023	
	Direct Relief	Direct Relief Foundation	Direct Relief Mexico*	Direct Relief South Africa**	Direct Relief Property 1, LLC	Inter-Organization Transaction Eliminations	Consolidated Total	Consolidated Total	
\$ IN THOUSANDS									
ASSETS									
Cash and cash equivalents	\$ 40,570	\$ 1,557	\$ 542	\$ 11	-	-	\$ 42,680	\$ 64,078	
Investments	153,689	84,060	-	-	-	-	237,749	248,526	
Contributions and other receivables, net	23,431	3,281	-	-	-	(8)	26,704	18,800	
Inventories, net	926,411	-	236	-	-	-	926,647	864,587	
Prepaid expenses	4,009	-	-	-	-	-	4,009	7,371	
Property and equipment, net	1,265	-	53	-	36,332	-	37,650	38,729	
Investment in subsidiary	41,817	-	-	-	-	(42)	41,775	-	
Other assets	328	-	3	-	-	-	331	329	
Total assets	\$ 1,191,521	\$ 88,898	\$ 834	\$ 11	\$ 36,332	\$ (50)	\$ 1,317,546	\$ 1,242,419	
LIABILITIES									
Accounts payable	\$ 4,739	-	-	-	\$ 0	-	\$ 4,739	\$ 8,327	
Accrued liabilities	25,304	7,991	34	-	-	(8)	33,320	24,385	
Long-term debt	-	-	-	-	-	-	-	-	
Total liabilities	30,043	7,991	34	-	0	(8)	38,059	32,712	
NET ASSETS									
Without donor restrictions	1,030,511	77,757	258	11	36,332	(42)	1,144,827	1,040,700	
With donor restrictions	130,967	3,151	542	-	-	-	134,660	169,008	
Total net assets	1,161,478	80,908	801	11	36,332	(42)	1,279,487	1,209,708	
Total liabilities and net assets	\$ 1,191,521	\$ 88,898	\$ 834	\$ 11	\$ 36,332	\$ (50)	\$ 1,317,546	\$ 1,242,420	

* Direct Relief Mexico is a wholly owned subsidiary of Direct Relief and commenced operations in Mexico on August 1, 2014.
Direct Relief-Mexico was registered in Mexico as a public benefit corporation in July 2014.

** Direct Relief-South Africa is a wholly owned subsidiary of Direct Relief and commenced operations in the Republic of South Africa on July 1, 2009.
Direct Relief South Africa was registered in South Africa as a public benefit corporation in October 2007.

COMBINED STATEMENT OF ACTIVITIES

For the fiscal year ended June 30, 2024 with summarized totals for FY 2023. Amounts are presented in the thousands.

	FY 2024						FY 2023	
	Direct Relief	Direct Relief Foundation	Direct Relief Mexico*	Direct Relief South Africa**	Direct Relief Property 1, LLC	Inter-Organization Transaction Eliminations	Consolidated Total	Consolidated Total
\$ IN THOUSANDS								
PUBLIC SUPPORT AND REVENUE								
In cash and securities:								
Contributions	\$ 38,080	\$ 3,947	\$ 1,557	\$ 49	-	\$ (9,354)	\$ 34,279	\$ 43,942
Contributions designated for quasi-endowment	-	589	-	-	-	-	589	\$ 43,942
Business and foundation grants	33,435	-	-	-	-	-	33,435	70,982
Workplace giving campaigns	2,592	-	-	-	-	-	2,592	5,940
Special events	-	-	-	-	-	-	-	-
Total public support from cash + securities	74,107	4,536	1,557	49	-	(9,354)	70,895	120,864
From contributed goods and services:								
Pharmaceuticals, medical supplies and equipment	2,298,037	-	7,885	-	-	-	2,305,922	2,139,412
Contributed freight	3,778	-	-	-	-	-	3,778	2,074
Contributed goods - other	-	-	-	-	-	-	-	3
Professional services received	393	-	-	-	-	-	393	474
Total from contributed goods and services	2,302,209	-	7,885	-	-	-	2,310,094	2,141,963
Total public support	2,376,316	4,536	9,442	49	-	(9,354)	2,380,989	2,262,827
REVENUE								
Investment income	11,566	2,829	9	-	-	-	14,404	8,166
Realized gain on sale of investments	(331)	(772)	-	-	-	-	(1,103)	1,507
Unrealized (loss) gain on investments	(449)	6,288	-	-	-	-	5,839	3,024
Realized gain on other assets	-	-	-	-	-	-	-	-
Total revenue	10,786	8,344	9	-	-	-	19,140	12,697
Net assets released from restrictions	-	-	-	-	-	-	-	-
Total public support and revenue	2,387,102	12,881	9,450	49	-	(9,354)	2,400,128	2,275,524
PROGRAM SERVICES								
Program related expenses	2,354,857	3,709	9,192	48	802	(9,354)	2,359,255	2,056,810
SUPPORTING SERVICES:								
Administration	9,081	310	61	0	31	-	9,483	9,548
Fundraising	3,368	1	-	-	20	-	3,389	2,950
Total supporting services	12,449	310	61	0	52	-	12,872	12,498
Total expenses	2,367,306	4,020	9,253	49	854	(9,354)	2,372,127	2,069,307
Change in net assets	19,796	8,861	197	(0)	(854)	-	28,001	206,217

COMBINED STATEMENT OF FUNCTIONAL EXPENSES

For the fiscal year ended June 30, 2024
with summarized totals for FY 2023.
Amounts are presented in the thousands.

	FY 2024			FY 2024		FY 2024	FY 2023
	PROGRAM SERVICES: Pharmaceuticals, Medical Supplies, Equipment & Related Expenses			SUPPORTING SERVICES		TOTAL PROGRAM & SUPPORTING SERVICES	TOTAL PROGRAM & SUPPORTING SERVICES
	USA	International	Total	Administration	Fundraising		
	\$ IN THOUSANDS						
COMPENSATION AND RELATED BENEFITS							
Cash and cash equivalents	\$ 2,418	\$ 8,105	\$ 10,522	\$ 3,681	\$ 1,665	\$ 15,868	\$ 13,761
Investments	169	596	765	256	117	1,138	996
Contributions and other receivables, net	406	1,327	1,732	835	278	2,845	2,393
Total compensation and related benefits	2,993	10,027	13,019	4,772	2,060	19,852	17,149
OTHER EXPENSES							
Pharmaceuticals, medical equipment and supplies distributed - donated	307,731	1,511,241	1,818,973	0	0	1,818,973	1,802,703
Pharmaceuticals, medical equipment and supplies distributed - procured	2,788	18,457	21,245	-	-		8,600
Inventory adjustment (expired pharmaceuticals)	61,459	369,336	430,795	-	-	21,245	131,324
Accounting and legal fees	26,859	18,717	45,575	-	-	430,795	506
Advertising	12	63	75	-	-	45,575	773
Bank charges	76	448	525	362	0	438	563
Contract services	-	-	-	48	110	683	7,085
Contributed services	2,266	3,692	5,957	364	-	364	474
Contributed freight	254	1,525	1,779	1,020	248	7,226	2,074
Contributed goods	-	-	-	384	-	2,163	-
Disposal costs (expired pharmaceuticals)	120	786	906	197	197	393	658
Dues and subscriptions	168	267	436	-	-	906	659
Duplicating and printing	39	26	65	337	149	922	107
Equipment and software maintenance	75	300	374	35	14	114	624
Equipment rental	12	61	73	33	151	559	144
Freight and transportation	3,231	7,729	10,960	3	2	78	11,224
Grants and stipends	222	574	795	(77)	0	10,883	77,094
Insurance	888	249	1,138	253	172	1,221	901
Interest	51	81	132	124	74	1,336	16
Meetings, conferences, special events	36	25	61	937	1	1,070	522
Miscellaneous	96	645	741	52	6	119	582
Outside computer services	49	929	978	44	12	796	-
Postage and mailing services	256	939	1,195	-	-	978	63
Rent and other occupancy	152	66	218	94	41	1,330	456
Supplies, furniture and fixtures	1	6	7	21	0	239	1,178
Taxes, licenses and fees	372	819	1,190	77	0	84	133
Training and education	61	308	370	253	96	1,540	76
Travel and automobile	130	307	437	23	15	408	1,347
Utilities and telephone	34	351	385	93	18	547	420
Web hosting	116	359	475	87	22	584	584
Total expenses before depreciation	407,402	1,937,596	2,344,998	4,677	1,308	2,350,983	2,050,888
Depreciation and amortization	180	1,057	1,238	34	21	1,292	1,270
Total functional expenses June 30, 2024	\$ 410,575	\$ 1,948,681	\$ 2,359,255	\$ 9,483	\$ 3,389	\$ 2,372,127	\$ 2,069,307
Total functional expenses June 30, 2023	362,333	1,694,477	2,056,810	9,548	2,950		

CORPORATE PARTNERSHIPS

MATERIAL DONATIONS AND IN-KIND SUPPORT

[FY 2024]

To fulfill its mission, Direct Relief has long sought partnerships with businesses and organizations with particular expertise that is needed and can be leveraged for humanitarian purposes. This approach has led to 200+ healthcare manufacturers and other corporations, in sectors ranging from technology to transportation, providing in-kind contributions in the form of needed goods (primarily medical products) and services that would otherwise have to be purchased. >>

MANUFACTURERS & DISTRIBUTORS PROVIDING MEDICAL MATERIAL DONATIONS

3M	Biogen	Haleon	Novo Nordisk
Abbott	Bionime	Henry Schein	Organon
AbbVie	Bioseal	Hikma	Owen Mumford
Accord Healthcare	Boehringer Ingelheim	Ingenus Pharmaceuticals	Philips Healthcare
Ajanta Pharma USA	Carlsbad Technology	Jaguar Health	Pfizer
Alvogen	Chartwell Pharmaceuticals	Johnson & Johnson	Sandoz
Amgen	Corza Medical	Kaleo	Sanofi
Amneal Pharmaceuticals	Curae Pharma	Kenvue	Seqirus
Amphastar Pharmaceuticals	Edwards Lifesciences	Kirk Humanitarian	Servier
Apotex	Eli Lilly & Company	LifeScan	Sol-Millennium Medical Group
Arcutis	Embecta	Liquid IV	Takeda Pharmaceuticals
Ascensia	Emergent BioSolutions	L'Oreal	Teva Pharmaceuticals
Asofarma S.A.	Encube	McKesson Medical-Surgical	Trifecta Pharmaceuticals
Astellas	Exergen	Medicines360	Trividia Health
AstraZeneca	Galderma	Medline Industries	Unilever
Baxter International	Genentech	Merck & Co. / MSD	Unite to Light
Bayer	Genexa	Merck Group	Vertex
BD	Genomma Lab Internacional	Moderna	Viartis
Belmora	Grifols	Nikkiso America	Xeris Pharmaceuticals
Biocon	GSMS	Novartis Farmacéutica, S.A.	Zydus Pharmaceuticals

A team of Direct Relief-supported doctors conducts free medical examinations of children in the Kirovohrada region of Ukraine on March 27, 2024.
(Courtesy of Charity Fund Modern Village and Town)



FY 2024 CORPORATE INVESTORS Contributors to Direct Relief from July 1, 2023, to June 30, 2024

COMPANIES PROVIDING CASH SUPPORT

\$2,500,000

AbbVie Foundation
Eli Lilly and Company

\$1,000,000

Haleon
Moderna Therapeutics
Takeda Pharmaceuticals North America
Walmart Foundation

\$500,000

Amgen Foundation
Baxter International Foundation
Biogen Idec Foundation
Bungie Foundation
Discovery Land Company Foundation
Give Lively Foundation
Humble Bundle
The LIV Group Inc
Merck & Co.
Organon
United Health Foundation

\$250,000

Abbott Fund
Adobe Foundation
BD Foundation
Comcast NBCUniversal
The Holland America Line Foundation
Kenvue
KPMG U.S. Foundation
Life For A Child USA
McKesson Foundation

Unilever
Unilever-Vaseline
Vertex Pharmaceuticals

\$100,000

Anonymous (1)
3M
AmerisourceBergen Foundation
BMO
Boehringer Ingelheim Cares Foundation
The Bristol-Myers Squibb Company
Cencora
CVS Health Foundation
Diabetes NSW
Dow Inc.
Edison International
Elevance Health CARES
Elevance Health Foundation
FedEx
Lemonade
Motorola Solutions Foundation
Quest Diagnostics Foundation
RWJBarnabas Health
Sanofi US Foundation
Viatis
Yardi Systems

\$50,000

Anonymous (1)
Bundle of Holding, LLC
Dodge & Cox
GE Health Foundation
Global Impact
Intel Foundation
NBA Cares

The P&G Fund
Pura Vida
Tencent America
Teva Pharmaceuticals USA
UKG
Vertex Foundation
Workday Foundation

\$25,000 +

AbbVie
Bayer Healthcare
Curbstone Financial Management Corporation
Cytiva
Deckers Brands
Fandiem
GlobalGiving
Integra LifeSciences Corporation
Intuit
J. L. Durland Company
Jazz Pharmaceuticals
Logitech
Medicines360
The Morrison & Foerster Foundation
O'Melveny & Myers, LLP
Opal Restaurant & Bar
Princess Cruises Community Foundation
S&P Global Foundation
Sonos
Sony Corporation of America
Starker Forests, Inc.
TE Connectivity
Zimmer Biomet Foundation

\$10,000 +

Anonymous (3)
AEGIS Insurance Services
American Society of Nephrology
Analytics8 LLC
BD
Beauty 21 Cosmetics
Carnival Cruise Line
Catalent Pharma Solutions
Collette
Confluent.Org
ElmTree Funds
First Street Leather
Genentech
Gladstone Gallery
Google
Henry Schein, Inc.
Johnson & Johnson
Juniper Networks
Karl Storz Imaging
Love, Tito's
McDowell Hetherington LLP
MSC Industrial Supply
Novo Nordisk
Paramount Pictures
Partner Engineering and Science
Patagonia.com
Pfizer, Inc.
Qlik Technologies
Rakuten
Santa Barbara Home Improvement Center
Tantrum Collectibles
Two Sigma Investments LLC
Wolfspeed, Inc.
Zoom Video Communications

STRATEGIC FOUNDATION PARTNERSHIPS

[FY 2024]

Direct Relief was able to respond to unprecedented humanitarian needs this fiscal year due in part to coordinated efforts with these leading foundations that share commitments to improve health and lives across the U.S. and around the world. >>

STRATEGIC FOUNDATION PARTNERSHIPS

The Aall Foundation
The Adrian Family Foundation
All Within My Hands
Anita B. & Howard S. Richmond
Foundation Inc.
Anthony & Jeanne Pritzker Family
Foundation
The Barba Family Foundation
Beast Philanthropy
Biella Foundation
Bluebird Legacy, Inc.
Clermont Foundation
Cole-Crone Family Foundation, Inc.
Conrad N. Hilton Foundation
Crown Family Philanthropies
The Cynthia and George Mitchell
Foundation
The Daphne Seybolt Culpeper
Foundation, Inc.
D'Augustine Foundation
Discovery Land Company Foundation
The Echlin Foundation
Ethel Josephine Scantland Foundation,
Inc.
Farvue Foundation, Inc.

First Dollar Foundation
The Florence and Laurence Spungen
Family Foundation
Fredman Family Foundation
George & Dorothy Babare Family
Foundation
Grace Jones Richardson Testamentary
Trust
Gratis Foundation
Haddock Stanton Foundation
The Hailey Family Foundation
The Harrison Foundation
Head Family Charitable Foundation
The Helen and Rita Lurie Foundation
The Hexberg Family Foundation
Hilltop Foundation
The Ilsababy Foundation
Ingram Family Foundation
Irfan Foundation
Jack Rudin Family Foundation
Jerome Foundation
John F. Smiekel Foundation
Johnny Carson Foundation
Joseph S and Diane H Charitable Trust
The Kauffmann Family Foundation

Kay Family Foundation
Keith & Mary Kay McCaw Family
Foundation
Kirsh Philanthropies
The Linden Family Foundation
The Longhill Charitable Foundation,
Inc.
Manitou Fund
The Mark and Anla Cheng Kingdon
Foundation
Mary Alice Fortin Foundation, Inc.
Milton and Fannie Brown Family
Foundation
MKM Foundation
Mr. Owl Foundation
Neupert Family Foundation
Nevonen Family Foundation
Northern Lights Family Foundation
The Page and Otto Marx, Jr.
Foundation
Point of View Foundation
Raintree Foundation
The Ralph M. Parsons Foundation
Riordan Family Foundation
RJA Foundation

Rock Paper Scissors Foundation
Schoellkopf Family Foundation
The Scoob Trust Foundation
Scott Family Fund
Shoresh Foundation
SKL Family Foundation
Spencer Murfey Family Foundation
Steinmetz Foundation
Steven and Laura Mayer Family
Foundation
T&J Meyer Family Foundation
TIF Foundation Fund
Tillson Memorial Trust
Tres Chicas
Walter J. and Holly O. Thomson
Foundation
Walters Family Foundation
The Wasily Family Foundation
Webb Foundation
The Wenden Foundation
William H. Kearns Foundation
Zegar Family Foundation

LEGACY SOCIETY

[FY 2024]

The Legacy Society exclusively recognizes those caring individuals who have included Direct Relief in their estate plans. Their commitment and dedication are shining examples of generosity that will help Direct Relief continue its efforts to improve the health and lives of people affected by poverty or emergency situations by mobilizing and providing essential medical resources needed for their care. >>

LEGACY SOCIETY

Anonymous (46)
 Dotsy and Jack Adams
 George M. Adams
 Peter and Rebecca Adams
 Jane H. Alexander
 Michael T. Alexander
 Robert and Debra Allian
 John Ambrose
 Ms. Rose A. Ament
 Marilyn E. Amling
 Jane Anderson
 Jerar and Nancy Andon
 George and Cynthia Anner
 Romuald and Barbara R. Anthony
 Shirley Appleton
 Rhea Applewhite
 Dr. Steven W. Arle and Mrs. Kathleen B. Arle
 Dr. and Mrs. Gilbert L. Ashor
 Ms. Judith Babcock
 Bitsy Becton Bacon
 Miriam and William Bailey
 Jane E. Ballard
 Virginia Barnes
 Barbara J. Barr
 Stephen Barrett
 Tom Beck
 Marie Bednar
 Michael Behles
 Charles H. Bell
 Harry Bennett III
 Laurie M. Berg
 William L. Berry
 Virginia B. Bertram
 Elizabeth Bertuccelli Family
 Merle Betz, Jr.
 Barbara Beynon
 Leslie Sweem Bhutani
 D. Craig Bigelow
 Marian E. Bilvar
 Mr. Joseph F. Bleckel
 Terence M. R. Bluge
 Patricia Boardman
 Deborah Borucki
 Lester E. Bower, Jr.
 Stephen M. and Susan C. Boysen
 Hannah Bradley
 Mr. and Ms. Phillip Brant
 Jayne Brechwald and Gary Elkins
 Martin Breslauer
 Mr. and Mrs. Herbert Brody
 Mrs. Helen J. Brown
 Barbara Bruhn
 Kathy Brunkhurst
 Scott A. Bruss
 George E. Buker
 Gilbert Buker
 Elizabeth Bulasko

Marguerite Bulf
 Don Bullick
 Robert A. and Lynn T. Burtness
 William S. Burtness
 Andrew and Elizabeth Butcher
 H. L. Caldwell
 Caron Caligor
 Patricia Campagna
 Mr. Marvin Campbell
 Dr. Andrea K. Capachietti
 Ms. Carol Carson
 Teresa Carter
 Cathy Cash
 Charlotte Castalde
 Dolores J. Cathcart and Robert S. Cathcart
 June M. Celmayster
 Richard Certo
 Ms. Patricia J. Clancy
 Suzanne Cloutier
 James R. Cohn
 Liz and Jeff Conover
 Steven L. Conrad
 Laurie Converse
 Louise Cortright
 Harriet M. Crews
 The Crosby Fund
 Marjorie B. Cullman
 Robert and Yvonne Culp
 Roy R. and Laurie M. Cummins Fund of The Oregon Community Foundation
 C. D.
 Lawrence W. Dam
 Margaret E. Davis
 Gwen Dawson
 Peter M. Dearden
 Rick Decent
 Richard Delgado
 Elaine P. Detwiler
 H. Guy Di Stefano
 Bobbi and Paul Didier
 Dr. Wilton A. Doane
 Mr. Philip M. Dorrington
 Kerry P. Doyle
 Nancy Beth Dring
 Lalitha Duddey
 Mary Dunn
 Louis K. Dupre
 Fran Durocher
 Mr. Thomas C. Dwyer
 Barbara Echeverria
 Grant C. Ehrlich
 Paul and Madelaine Einbinder
 Ted Ewing in honor of his wife, Angelica Ewing
 Elsie Feibes
 Florence Feiler
 Dr. Julie M. Feinsilver

Leo Feist
 Howard C. Fenton
 Peggy and Gary Finefrock
 Stephen Finn
 June Breton Fisher
 Julia Flynn
 Kee Flynn
 Harvey Foo
 Mr. Gregg L. Foster
 Ray Freeze and Carol Georgopoulos
 Sharon Rae Frick
 Mario J. Frosali
 Eva Fuchs
 Georgia Lee Funsten
 Mildred K. Fusco
 Lee and Elizabeth Gabler
 Hannah Monica Gallagher
 Pamela Gann and David Hardee
 Sandra K. Garcia
 Mrs. Pearl Garcia-Baker
 June Gaudy
 Catherine Giacona
 Leonard Gibler
 Edward R. and Inez Gilkeson
 Bruce Glad
 Linda and Fred Gluck
 Dick and Kate Godfrey
 Joe Godwin in Honor of Les Gliessman
 Bambi Good
 Cathleen and Leonard Grabowski
 David A. Gray
 Walter Gray
 Barbara and Jon Greenleaf
 Nic and Gwen Guddal
 Ms. Pamela Gunther
 Kathleen A. Haberkern
 Leanne Phillips Halfman
 Sarah M. Hall
 Susan Hames
 Carroll Francis Hamill MD
 Lorraine Hansen
 Pat and Jim Hansen
 Linda M. Hanson
 Sonia Harris
 Margaret S. Hart
 Michael Hartly
 Ed and Mary Harvey
 Frederick and Jane Harvey
 Mrs. Raye Haskell
 Thomas Newlin Hastings and Elizabeth Caldwell Hastings
 Betty and Stan Hatch
 Ursula Heintz
 Robert and Shauna Hirsch
 Dorothy S. Hitchcock
 Gerhart Hoffmeister
 Sibyl Wilma Holder
 Joan Howard

Michael W. Huber and Caroline Parker Huber
 Terrence Joseph Hughes
 Dorothy Humiston
 Sheila D. Hurst
 Margaret Hutchings
 Wendell Ing
 Mr. and Mrs. Donald Jackson
 Virginia E. James
 Rosalind Jarrett Sepulveda and Lamar Sepulveda
 Virginia E. Jarvis
 Mrs. Christine Jent
 Ellen and Peter Johnson
 Pat and Dick Johnson
 Stephen Johnson
 Ms. Beverly A. Jones
 Judith Jones
 Laurene Kaizawa
 Kristine Karlin
 Louis Karpf
 Jay Kaufman
 Mr. and Mrs. Herbert Kendall
 Dale E. Kern
 Dr. Laurence P. Kerrigan
 Mr. and Mrs. Hong Kim
 Randall Kinder
 Mrs. Marvel Kirby
 Eddythe Kirchmaier
 Mr. John Kline
 Wendy Klodt
 Mr. and Mrs. John A. Knox-Johnston
 John Michael Koelsch
 Richard L. Koman
 Patricia Ann Koza
 Jason Kravitz
 Mr. Alan Kushner
 Miss Cornelia J. Kyle
 Anette La Hough
 Jeff Lanahan and David Walters
 Dorothy Largay and Wayne Rosing
 Eleanor Larson
 Mr. Chris Le Blanc
 Shirley and Seymour Lehrer
 Gene Leisch
 Jay Lensch
 Barbara Levi
 Daniel Liff
 Kenneth R. Loh
 Barbara Jeanne Lotz
 Lawrence Lu
 Yvonne C. Lucassen
 Evelyn C. Lund
 Mr. John A. Magnuson and Mrs. Dorothy MacCulloch
 Mary C. MacEwan
 Robert MacLean
 Angela Magazu

Margaret Magera
 Marilyn and Frank Magid
 Elaine V. Maloney
 Laurie A. Marine
 Glenda Martin
 Audrey E. Martinson
 Martone Family
 Alixe Reed Mattingly
 Kathleen Mayes
 Gail H. Maynard
 Kathleen and Bruce McBroom
 Harry and Jacquie McMahon
 Jacqueline and Jay McMahan
 Ms. Estelle Meadoff
 Linda Melsted
 Michael Mendelson and Ann Marx
 Nancy Merle
 Doreen Miao
 Diane Migliori
 Mr. and Mrs. Frank B. Miles
 Winifred and Earl Miller
 Christopher Minot
 Patricia McNulty Mitchell
 Charles J. and Esther R. Mlynec
 Victoria E. Monroe
 Keith Whiting Moore
 Velma Morrell
 Sondra Morrill
 Helga Morris
 Regis J. Morris
 J. Vincent Moskaitis
 Shari Moss
 Rita Moya
 Robert E. and Helene S. Mussbach
 Mr. Robert Nakasone
 Dorothy and Graham Nash
 Pandora Nash-Karner
 Ms. Nancy Wallace Nelson
 Leo P. Niemiec
 Roland Ninomiya
 Christopher Nitkin
 Ms. Juel Ann North
 Angeline M. O'Meara
 Mr. Michael P. O'Neill and Mrs. Sarah M. O'Neill
 James Orr
 Dr. Sidney R. Ottman
 Elissa Pagnani
 Harold A. Parma
 William J. Partridge
 John Wesley Paschall, Jr.
 Joe Pearlman
 Jody and Don Petersen
 Elisabeth Phillips
 John W. Pierick
 Yolanda Piziali
 Martin and Lillian Platsko
 Steve Poritzky and Beverly Starr



Direct Relief delivered emergency medical backpacks, hygiene kits, and N95 masks as requested by Butte County Public Health, Butte County Search and Rescue, Ampla Health, and Shingletown Medical Center in California. (Direct Relief)

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A doctor examines a young patient during mobile health outreach in Gaza in January 2024. The mobile clinics are designed to provide a comprehensive range of medical services, including general healthcare, gynecology, dermatology, pediatrics, internal medicine, and psychological support. The health outreach was run by longtime Direct Relief-partner Anera, which reported that essential medical services were delivered to 4,859 individuals. Direct Relief supported these efforts with medications and supplies, as well as financial support. (Courtesy of Anera)



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[FY 2024]

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Direct Relief staff and volunteers conduct medical outreach at a health fair in Culebra, Puerto Rico, in March 2024. The island, located off the coast of Puerto Rico's mainland, has limited access to medical care. (Edgar Cruz for Direct Relief)

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A physician with Medical Impact provides care to a mother and baby during a mobile clinic in rural Guerrero, Mexico. The area was severely flooded with downed trees, structural damage and piles of mud and debris. Direct Relief provided the organization with medicines and supplies, as well as financial support. (Felipe Luna for Direct Relief)

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A healthcare worker at Mālama I Ke Ola health center provides services to a young patient. The health center received a \$1 million grant from Direct Relief to continue and expand vital health services to the community after devastating wildfires broke out in August 2023. (Courtesy photo)

IN MEMORIAM

For their extraordinary generosity, personal kindness, passionate guidance, and bountiful energy, and for their dedication to the health and welfare of people everywhere. They will be greatly missed.

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Improve the health of people living in high-need areas by strengthening fragile health systems and increasing access to quality health care.

LIFT FROM THE BOTTOM, PULL FROM THE TOP

Focus on serving the most medically underserved communities in the U.S. and abroad, working with the world's leading companies, greatest thinkers, and best institutions.

BUILD UPON WHAT EXISTS

Identify, qualify, and support existing healthcare providers over the long-term and serve as a catalyst for other resources.

REMOVE BARRIERS

Create transparent, reliable, and cost-effective channels to enable medically underserved communities access to essential medical resources (particularly medicines, supplies, and equipment).

PLAY TO STRENGTHS, PARTNER FOR OTHER NEEDS

Engage in activities that address a compelling need and align with our core competencies and areas of excellence. Ally with an expanded network of strategic partners who are working on related causes and complementary interventions to leverage resources.

ENSURE VALUE FOR MONEY

Generate efficiencies, leverage resources, and maximize health improvement for people with every dollar spent. Maintain modest fundraising and administrative expenses.

BE A GOOD PARTNER & ADVOCATE

Give credit where due, listen carefully, and respect those served and those contributing resources.

RESPOND FAST WHILE LOOKING AHEAD

Support the immediate needs of survivors by working with local partners best situated to assess, respond, and prepare for the long-term recovery.

DO NOT DISCRIMINATE

Deliver aid without regard to race, ethnicity, political or religious affiliation, gender, sexual orientation, or ability to pay.

AIM HIGH

Combine the best of business, technology, and public policy approaches for the benefit of people in need.