



**YOUR
SUPPORT
& HOW IT
WAS USED**



FISCAL YEAR 2025 ANNUAL REPORT

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Cover photo: In response to the Los Angeles County wildfires, Direct Relief delivered requested medical supplies on January 14, 2025, to first responders at the emergency staging area at the Rose Bowl in Pasadena, California, including local search and rescue teams from Altadena, Montrose, and Sierra Madre. (Mason Poole/Direct Relief)



Medical aid from Direct Relief is delivered to Oceana Community Health, a free clinic responding to Hurricane Milton-impacted communities in Florida. (Bimarian Films/Direct Relief)

health.org

Empowering health
Empowering

EMERGENCY
MEDICAL
RESPONSE

EMERGENCY
RESPONSE

Direct Relief

Direct Relief

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

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Direct Relief CEO Amy Weaver (in khaki) takes a selfie with breast surgeon Dr. Beatrice Wiafe Addai (in green) and young women attending a breast cancer awareness event in Ejisu, Ghana.
(David Uttley/Direct Relief)

A MESSAGE FROM THE CEO

HEALTH IS OFTEN INVISIBLE to those who have it, yet all-consuming to those who do not. The events of the past year underscored this reality, exposing the fragility of systems stretched by simultaneous crises.

It was a year when climate shocks compounded chronic gaps in care, when conflict drove global displacement to record highs, and when the resources to advance global health sharply contracted.

Against that backdrop, the results of Fiscal Year 2025 reinforced the urgency of Direct Relief's humanitarian mandate: ensuring that care reaches the people who need it most.

In a year of extraordinary need, Direct Relief provided \$2 billion in total aid, including \$68.8 million in funding. This support translated into 311 million defined daily doses of medicine, reaching health providers in 92 countries, all 50 U.S. states, and five U.S. territories.

These numbers matter not as a measure of volume alone, but for what they represent in human terms: patients remaining on insulin, antibiotics arriving before infections spread, oncology drugs reaching pediatric wards, and clinics staying open after storms. They represent health workers having exactly what is needed in the moments that matter most.

None of this happens in isolation. Because Direct Relief is privately funded, this work is collective by design, powered by tens of thousands of generous individuals who donated to help others; pharmaceutical and medical product manufacturers who contributed high-quality medicines and supplies for humanitarian use; logistics and technology partners who made speed and precision possible; and

healthcare organizations on the front lines that translate medicine into care, patient by patient, visit by visit.

These joint efforts earned meaningful recognition when Direct Relief accepted the 2025 Seoul Peace Prize—an honor affirming the shared belief that compassion is best expressed through precision, and that the quality of aid must reflect the dignity of the person receiving it.

I am grateful for the opportunity to help carry this mission forward, and to every partner and supporter whose trust makes Direct Relief's work possible.

I am especially grateful to my predecessor, Thomas Tighe, whose 24 years of extraordinary leadership helped transform Direct Relief into the organization it is today—the world's leading charitable channel for humanitarian medical aid and a critical link between lifesaving medicines and the people who need them most. It is on this foundation that Direct Relief will continue to scale its impact.

The challenges ahead are real, but so is the opportunity for impact—to make healthcare more accessible, determined less by geography or income, and more by our shared commitment to act.

Thank you,



Amy Weaver
Chief Executive Officer



FINANCIAL SCALE

\$2 BILLION
IN TOTAL AID
PROVIDED



Staff at NC MedAssist in Charlotte, North Carolina, stock a new delivery of free medications from Direct Relief. (Direct Relief)

FY 2025 AID TRACKER

\$2,001,654,533
in specifically requested medicines,
medical supplies, medical equipment,
and financial assistance

311,865,693
in Defined Daily Doses of medicine

3,159
tons of pharmaceuticals, medical supplies,
and medical equipment delivered

29,657
deliveries to healthcare providers

92
countries

50
U.S. states

5
U.S. territories

Children create arts and crafts at the İnsan Sağlığı ve Eğitim Vakfı (Human Health and Education Foundation, INSEV) mobile mental health and psychosocial services unit for children in Hatay, Turkey. Direct Relief has supported INSEV with cash grants to further their mission of expanding pediatric health services. (Ali Saltan/Direct Relief)

FINANCIAL SCALE

\$68.8 MILLION
IN GRANTS
DISTRIBUTED



Kampala, Uganda
(David Uttley/Direct Relief)



Chernihiv, Ukraine
(Nick Allen/Direct Relief)



Chocó, Colombia
(Departmental Laboratory of Public Health,
Chocó)



Boone, North Carolina
(Direct Relief)



Villa Nueva, Guatemala
(Bethel Hospital)



Goma,
Democratic Republic of Congo
(Courtesy photo)



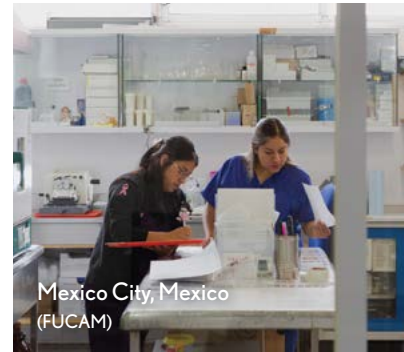
Greenville, Liberia
(F.J. Grante Memorial Hospital)



Fort Meyers, Florida
(Bimarian Films/Direct Relief)



Los Angeles, California
(Mason Poole/Direct Relief)



Mexico City, Mexico
(FUCAM)



Siddhasthali, Nepal
(Courtesy photo)



Shingletown, California
(Bimarian Films/Direct Relief)



Savannah, Georgia
(J.C. Lewis Primary Health Care Center)



West Chester, Pennsylvania
(Direct Relief)

311 MILLION DOSES OF MEDICINE DISTRIBUTED

HUMAN
SCALE

3,159 TONS OF MEDICAL AID PROVIDED

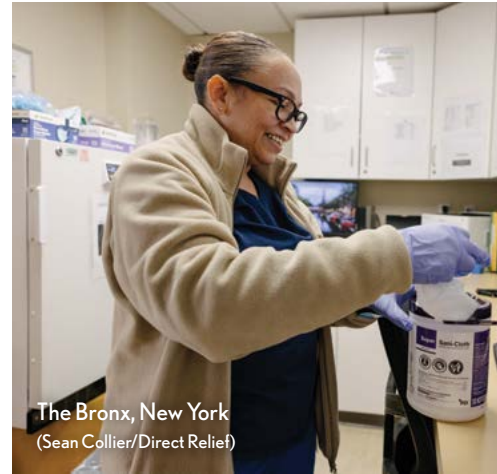
OPERATIONAL SCALE



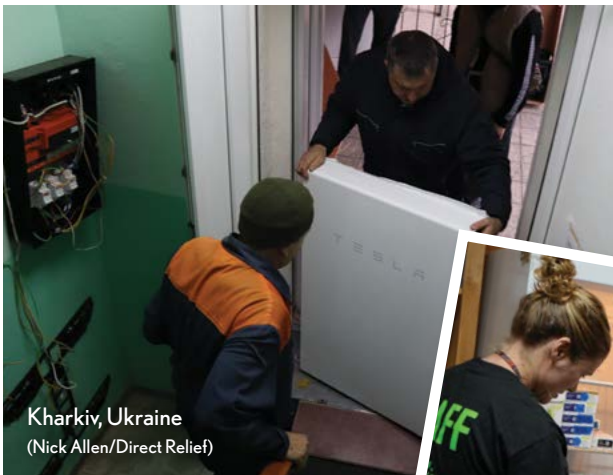
Angoon, Alaska
(Lara Cooper/Direct Relief)



Guatemala City, Guatemala
(Fundación Margarita Valiente)



The Bronx, New York
(Sean Collier/Direct Relief)



Kharkiv, Ukraine
(Nick Allen/Direct Relief)



Boone, North Carolina
(Direct Relief)



Miramonte, California
(Bearskin Meadows Camp)



Gujarat, India
(SEWA)



Budaka, Uganda
(Bulamu Healthcare)



Mexico City, Mexico
(Direct Relief)



Lagos, Nigeria
(U-VOL Foundation)



Malakal, South Sudan
(IOM)



Pasadena, California
(Sean Collier/Direct Relief)



Port-au-Prince, Haiti
(Dalton Foundation)



Los Angeles, California
(Direct Relief)



St. Johns County, Florida
(Sofie Blomst/Direct Relief)



Ventura, California
(Adam Courier/Direct Relief)



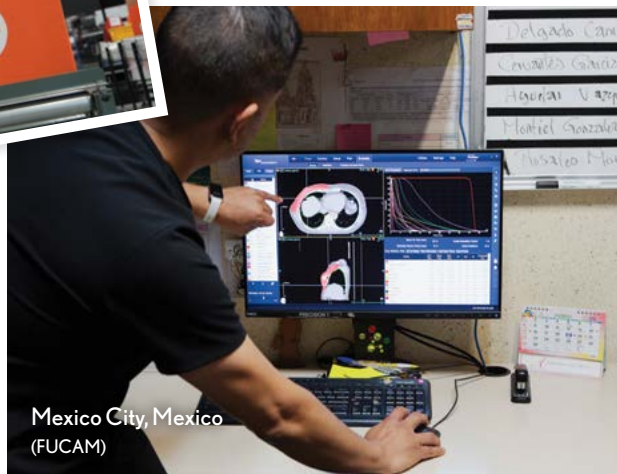
Saint Lucia, Caribbean
(OECS)



Oroville, California
(Ampla Health)



Santa Barbara, California
(Lara Cooper/Direct Relief)



Mexico City, Mexico
(FUCAM)



Santa Barbara, California
(Direct Relief)

A woman wearing a purple sari with intricate patterns is shown from the waist up, leaning forward and using a long wooden pole to work with large piles of white salt crystals. She is wearing yellow bangles on her right wrist. The background is a bright, clear blue sky with some light clouds. The entire image is framed by a thin orange border.

GEOGRAPHIC SCALE

92 COUNTRIES,
50 U.S. STATES &
5 U.S. TERRITORIES

Salt workers in the Gujarati desert, laboring for long hours in weather that can exceed 120 degrees Fahrenheit, are at a high risk of injury, mineral toxicity, and severe heat-related impacts. These workers are represented by the Self-Employed Women's Association of India (SEWA), a Direct Relief partner and advocacy group that participates in extreme heat-related research and offers insurance against heat-related wage loss to its members, among other support measures. Direct Relief has supported SEWA with more than \$2 million in grant funding for emergency response work, climate-related data collection, and more. (SEWA)

THE LARGEST CHARITABLE MEDICINES PROGRAM IN THE U.S.



RESPONDING TO THE HEALTH IMPACTS OF EXTREME WEATHER

EXTREME WEATHER has profound effects on health and wellbeing. As more frequent extreme weather events, such as heatwaves, floods, storms, and wildfires, increase risks of injury, illness, and death, rising sea levels are contaminating groundwater sources and threatening entire island nations.

Beyond these immediate impacts, climate hazards can inflict major disruptions to people's lives, displacing families from their homes and communities, disrupting food and livelihood systems, and limiting access to essential healthcare services. These disruptions often have devastating long-term consequences for health, increasing future morbidity and mortality and

disproportionately burdening those with the fewest resources to adapt.

Though it's difficult to accurately predict the future impacts of extreme weather on health, a recent study by the World Economic Forum predicts that extreme weather could cause an additional 14.5 million deaths and more than \$12 trillion in economic losses by 2050. Further, the study predicts that extreme weather will trigger an additional \$1.1 trillion in healthcare costs during the same period, placing significant strain on already fragile healthcare systems and threatening to exacerbate global health disparities. **CONT'D ▶**

A firefighter battles the Hughes wildfire just north of Los Angeles in January 2025. (Zach Hughes for Direct Relief)

HERE
ARE
4
WAYS
DIRECT RELIEF IS
FACING OFF AGAINST
EXTREME WEATHER >>

1 PROMOTING PREPAREDNESS AMONG LOCAL FIRST RESPONDERS

EVERY YEAR, Direct Relief coordinates with community health centers and charitable clinics in hurricane-prone states and territories, as well as national and regional authorities and healthcare providers across the Caribbean, Central America, and the Pacific, to bolster disaster preparedness and response capacities.

A core component of these efforts is ensuring that community-based clinics, hospitals, and other first responders are equipped with medicines and supplies to treat pressing health needs during disasters. To do this, Direct Relief strategically pre-positions essential medications and supplies with healthcare providers in at-risk regions, thereby ensuring the continuity of care for critically ill and injured patients during demand surges and supply chain disruptions. Direct Relief also pre-positions field medic backpacks with search and rescue teams and mobile health providers to ensure these first responders have first aid essentials required to respond swiftly and effectively during disasters.

In Fiscal Year 2025, Direct Relief pre-positioned more than 70 hurricane preparedness packs with healthcare providers in the U.S., each of which is intended to sustain health services for as many as 350 patients for one month. Internationally, Direct Relief pre-positioned 20 packs with first responders and healthcare providers in 15 countries worldwide; the packs deployed internationally are sufficient to support

“The medications and supplies included in the hurricane prep packs allow us to respond immediately to urgent needs, such as managing chronic conditions like diabetes and hypertension.”

JENNIFER BUXTON
COO AND CHIEF PHARMACY OFFICER
CAPE FEAR CLINIC, WILMINGTON, NORTH CAROLINA

the critical health needs of as many as 3,000 patients for one month. Direct Relief also dispatched eight emergency health kits and nearly 2,200 field medic backpacks to augment preparedness and emergency response capacity in more than 30 countries globally.

“The medications and supplies included in the hurricane prep packs allow us to respond immediately to urgent needs, such as managing chronic conditions like diabetes and hypertension, treating infections, and addressing life-threatening allergic reactions,” said Jennifer Buxton, Chief Operating Officer and Chief Pharmacy Officer at Cape Fear Clinic in Wilmington, North Carolina. “During hurricanes, access to healthcare is often disrupted, and our clinic becomes a lifeline for the community. These resources ensure continuity of care for our vulnerable populations, minimizing the long-term health impacts of disasters.”



Dr. Youssef Motii of Oceana Community Health provides door-to-door medical care in the hurricane-affected Spanish Lakes neighborhood of Fort Pierce, Florida. (Bimarian Films/Direct Relief)

Los Angeles County
SHERIFF'S DEPARTMENT
SHERIFF'S
INFORMATION BUREAU



2

HARNESSING LOCAL EXPERTISE FOR MORE EFFECTIVE, EQUITABLE RESPONSE, & RECOVERY

WEATHER-DRIVEN DISASTERS such as wildfires pose an escalating threat to the physical and mental health of communities worldwide. As extreme weather and urban expansion contribute to the growing frequency, duration, and severity of these events, communities are increasingly impacted by health risks associated with smoke inhalation and contaminated water supplies, damaged housing and other infrastructure, disrupted services, and prolonged displacements. Some populations, such as children, pregnant women, older adults, and those with chronic health conditions or other vulnerabilities, may experience greater risks of adverse health outcomes during and after disasters.

To address these growing health and humanitarian needs, Direct Relief partners with more than 6,000 health facilities, public health departments, and other nonprofit organizations worldwide, including approximately 2,000 partners in the U.S. and its territories. Trusted and deeply embedded in the communities they serve, these partners are critical to identifying priority needs, mobilizing support networks, and ensuring sustained recovery. [CONT'D ON PG. 18](#) ▶

A member of the Sierra Madre Search and Rescue team (right) examines a Direct Relief field medic backpack provided to bolster the team's response to the January 2025 Los Angeles wildfires. (Mason Poole for Direct Relief)



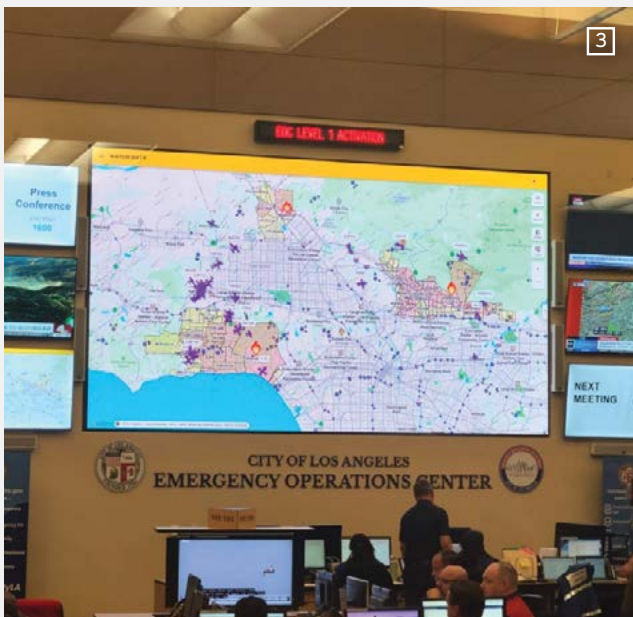
(Zach Hughes for Direct Relief)

A SUSTAINED, COMMUNITY- ANCHORED EFFORT IN RESPONSE TO THE LOS ANGELES WILDFIRES

IN JANUARY 2025, a series of wildfires, fueled by drought conditions and strong Santa Ana winds, ravaged several Los Angeles communities, including in Altadena, Malibu, the Pacific Palisades, and Pasadena. The fires set blaze to more than 55,000 acres across Los Angeles County, killing 31 people and damaging or destroying more than 16,000 homes, businesses, and other structures. For weeks, residents across Los Angeles experienced poor air quality, power loss, and water boil advisories due to the introduction of ash and other contaminants into water delivery systems. The situation prompted the temporary closure of numerous

schools and health facilities and caused widespread job losses and disruptions to other essential services. Some sites, such as the Pasadena clinic of long-term partner AltaMed Health Service—the largest Federally Qualified Health Center in the U.S., with more than 500,000 patients in LA and Orange counties—were lost entirely to the fire.

Direct Relief supplied clinics and mobile teams with critical medical resources, provided long-term financial support for healthcare and mental health services, and strengthened community resilience through targeted interventions. **CONT'D ►**



AS THE FIRST FLAMES IGNITED, and long before the full extent of the losses were known, Direct Relief leveraged its broad network of partners in Los Angeles to rapidly deploy assistance. The aid included medications to emergency evacuation shelters, field medic backpacks to first responders, and more than 140,000 N95 respirators to protect residents and emergency personnel from smoke and airborne hazards.

As local needs shifted from immediate, life-saving assistance to longer-term recovery, Direct Relief worked with local community-based partners to identify needs for mobile medical outreach in fire-affected neighborhoods; school- and community-based mental health services for children, youth, older adults, and other impacted communities; and rental assistance for those facing housing insecurity.

In FY 2025, Direct Relief provided \$7.4 million in financial assistance to 65 community-based organizations working to support local communities in the days, months, and years ahead. The funding included \$1.5 million for school-based crisis counseling, summer enrichment programs for more than 1,000 children in impacted school districts, and other resources to promote wellness and help schools prepare for future disasters. The funding also included more than \$1 million to augment AltaMed’s capacity to provide critical, culturally responsive health services for more than 20,000 older adults, individuals in temporary housing, and existing patients and \$250,000 to the Boys & Girls Club of Malibu for integrated mental health services and long-term recovery support.

Recovery from a disaster of this scale isn’t measured in weeks or months—it’s measured in years. By partnering with organizations deeply rooted in the communities they serve, Direct Relief ensures recovery efforts are responsive to evolving needs and sustainable for as long as recovery takes. ■

1 Direct Relief delivers 3M N95 respirators in Koreatown as part of the response to the Los Angeles Wildfires. (Lara Cooper/Direct Relief); 2 Direct Relief delivers aid to Montebello Family Health Center in east Los Angeles on January 9, 2025. (Sean Collier/Direct Relief); 3 Direct Relief partnered with Watch Duty, an emergency alerting platform, to deliver real-time and lifesaving information during wildfires and other disasters. (Courtesy photo); 4 Direct Relief delivered requested medical supplies on January 14, 2025, to local search and rescue teams including Altadena Search and Rescue, Sierra Madre Search and Rescue, and Montrose Search and Rescue. The aid included field medic backpacks and rehydration solutions to support first responders on the ground in Los Angeles. (Mason Poole/Direct Relief)

FY 2025 LOS ANGELES
WILDFIRES RESPONSE

\$7.4 MILLION IN FINANCIAL ASSISTANCE TO 65 COMMUNITY-BASED ORGANIZATIONS

Amid the devastation caused by wildfires, local organizations with limited resources worked tirelessly to support their communities. Direct Relief provided emergency operating funds alongside critical medicines, medical supplies, and N95 respirators to Dr. Evelyn Wong at Medical Mission Adventures (pictured), and other vital organizations to address urgent health needs while laying the groundwork for long-term recovery in the hardest-hit areas. (Mason Poole/Direct Relief)



Direct Relief delivered requested re-entry kits and N95 respirators to the Los Angeles Fire Department, Los Angeles County Department of Public Health, and the City of Pasadena, to be distributed to community members re-entering their properties. (Sean Collier/Direct Relief)



Re-entry kits provided by Direct Relief contained critical equipment to protect individuals from the harmful toxins found in fire debris. The equipment included gloves, boot covers, disposable coveralls, and more. (Mason Poole/Direct Relief)



THROUGH FY 2025

\$46 MILLION TO SUPPORT
RESILIENT POWER FOR
MORE THAN **1,400**
HEALTHCARE SITES IN
20 COUNTRIES

3

INVESTING IN CLEAN, CLIMATE-RESILIENT HEALTH SYSTEMS

FOR HEALTHCARE PROVIDERS, power disruptions hinder access to electronic health records and use of medical equipment and can compromise the storage of temperature-sensitive medications. These impacts impede the delivery of critical health services, prompting clinic closures that result in significant financial losses and worsened medical conditions, particularly in areas that experience chronic shortages of primary care services.

Direct Relief's Power for Health initiative helps U.S. safety-net health centers and clinics, as well as health facilities around the world, stay operational during outages through solar power and backup battery systems. As of June 30, 2025, the initiative had invested an estimated \$46 million to support resilient power for more than 1,400 healthcare sites in 20 countries, including at 72 U.S. nonprofit clinics and health centers; the investments include approximately \$2.6 million for 13 projects launched in FY 2025 alone. By investing in clean, climate-resilient power systems for the health sector, the initiative seeks to build resilience and promote equitable provision and continuity of care. **CONT'D ▶**

Direct Relief's Puerto Rico team examines the rooftop solar photovoltaic array at Centro de Salud Familiar Dr. Julio Palmieri Ferri in Arroyo, Puerto Rico, which was funded by a Power for Health grant from Direct Relief to provide the health center with resilient back-up power. (Direct Relief)

EXTREME WEATHER



AMID WIDESPREAD POWER OUTAGES, **SOLAR MICROGRIDS** **KEEP CLINICS OPEN**

WHEN HURRICANES HELENE and Milton barreled across Florida, Georgia, North Carolina, and South Carolina in late September and early October 2024, they caused widespread power outages that prompted temporary closures at more than half of safety-net healthcare providers responding to a survey conducted by Direct Relief. The outages also led to nearly 28,000 canceled or delayed patient visits as well as significant loss of temperature-sensitive medicines, limiting access to essential health services for tens of thousands of patients.

Some facilities, such as Goshen Medical Center's location in Tabor City, NC were able to maintain services thanks to a Direct Relief-funded solar and battery microgrid system installed earlier in the year.

"The generous grant funding for solar panel projects provided by Direct Relief ensures that we can maintain operations in rural areas to serve needy populations in a section of the country highly susceptible to hurricanes," said Greg Bounds, Executive Director of Goshen Medical Center.

As a nonprofit healthcare organization, Goshen Medical Center accepts all patients regardless of their ability to pay and offers a discounted sliding fee to those who qualify. The center's two locations manage more than 8,000 patient visits per year. ■



4

STRENGTHENING REGIONAL AND MULTINATIONAL PARTNERSHIPS

TO CONFRONT THE GROWING impacts of extreme weather, Direct Relief is strengthening partnerships with key regional and multinational stakeholders in disaster-prone regions, such as Asia and the Pacific and Latin America and the Caribbean. These collaborations—including with the Association of Southeast Asian Nations (ASEAN) Coordinating Centre for Humanitarian Assistance on Disaster Management (AHA Center), the Organisation of Eastern Caribbean States (OECS), and the Pan American Health Organization (PAHO)—provide critical insights into evolving humanitarian needs and enable the pre-positioning and rapid delivery of medical aid. Together, these partnerships are working to build stronger, more resilient response mechanisms and mitigate the health impacts of climate change. ■

Members of the OECS load Direct Relief field medic backpacks and a Hurricane Preparedness Pack into a helicopter in Saint Lucia, in preparation for transport to St. Vincent and the Grenadines. (Photo courtesy of OECS)

When Hurricane Beryl made landfall as a Category 4 storm over Grenada's Carriacou Island in July 2024, Direct Relief was prepared. Through its partnership with OECS, an intergovernmental organization with 12 member countries and territories in the Eastern Caribbean, Direct Relief was able to rapidly deliver a hurricane preparedness pack, containing medicines and supplies to care for up to 3,000 people for 30 days, and several field medic backpacks within 24 hours of the storm's landfall. By pre-staging the medical supplies at OECS' main warehouse in Saint Lucia in advance of hurricane season, Direct Relief ensured the medicines and supplies urgently needed in Hurricane Beryl's wake were in place and ready for immediate dispatch as soon as conditions allowed. (Photo courtesy of Ministry of Carriacou and Petite Martinique Affairs and Local Government)





“[The medicine] has given me the possibility to live for many more years.”

YAROSLAVA KOSHEL
LIVING WITH CYSTIC FIBROSIS IN UKRAINE

CYSTIC FIBROSIS (CF) is a genetic disease that damages the lungs, digestive system, and other organs. Until the development in 2019 of Trikafta, a U.S.-manufactured drug that significantly improves health outcomes for people with CF, it often meant a life that was both short and difficult. Yaroslava takes Trikafta through a CF pilot donation program led by Boston-based pharmaceutical company Vertex, Direct Relief, and three Ukrainian hospitals, including two of the country’s largest children’s hospitals.

(Nick Allen/Direct Relief)

DELIVERING MEDICAL AID **AMID** **CONFLICT**

FOR PEOPLE LIVING THROUGH war and instability, access to healthcare can disappear overnight as hospitals lose power, supply routes collapse, and essential medicines become scarce.

In Fiscal Year 2025, Direct Relief continued delivering lifesaving medicines and medical supplies to civilians living through conflict, instability, and humanitarian crises. Fragile infrastructure and disrupted supply chains made access to care uncertain, requiring persistence, flexibility, and strong partnerships with local healthcare providers. Drawing on more than 75 years of experience, Direct Relief works with frontline organizations to ensure requested medical resources reach patients safely and reliably—even in the most challenging conditions.

IN UKRAINE

DIRECT RELIEF'S RESPONSE to the war in Ukraine has become the largest and most sustained humanitarian effort in the organization's history. Since the conflict began in 2022, the organization has worked with healthcare providers across Ukraine and neighboring countries to ensure continued access to essential care for displaced populations. To date, Direct Relief has provided \$1.8 billion in medical aid and \$54 million in financial assistance, addressing evolving needs including



physical rehabilitation for amputees, treatment for chronic illnesses, pediatric specialty care, rare diseases, and mental health services.

During Fiscal Year 2025, Direct Relief delivered \$535 million in material aid and \$15.6 million in cash assistance to hospitals, clinics, and humanitarian organizations supporting civilians affected by the war. A key partner is the UNBROKEN National Rehabilitation Center in Lviv, which provides comprehensive rehabilitation for people recovering from severe war-related injuries. Before beginning his treatment, Oleh from Bakhmut described the early challenges of recovery, saying, 'At the beginning, it was...I don't know how to describe it.' He added that progress has brought renewed purpose: 'Now it is getting a little easier; I know I must live, work, and build a family.' [CONT'D ▶](#)

A health worker with the Ukrainian NGO Charity Fund Modern Village and Town conducts a health screening for a pediatric patient during a mobile clinic supported by Direct Relief in February, 2025. (Courtesy photo)

FY25 UKRAINE RESPONSE

\$535 MILLION
IN MATERIAL AID &
\$15.6 MILLION IN
CASH ASSISTANCE

SUPPORTING PEOPLE AFFECTED BY THE WAR



1



2



3

ACROSS THE MIDDLE EAST

ESCALATING CONFLICTS across the Middle East during FY 2025 disrupted healthcare access and strained already burdened medical systems. In response to frontline requests, Direct Relief delivered \$193 million in essential medicines and medical supplies to support hospitals, mobile medical units, and emergency operations serving communities affected by violence and displacement. An additional \$5 million in funding supported warehousing, logistics, and medical programs sustaining care for civilians injured in the conflict.

IN SUDAN

WHERE ONGOING CONFLICT in Sudan has sharply reduced access to medical care, Direct Relief provided more than \$23 million in assistance during FY 2025, helping health facilities continue operating amid extreme instability.

IN HAITI

WIDESPREAD VIOLENCE and instability in Haiti continue to strain the healthcare system. Direct Relief delivered more than \$12 million in medical aid to help hospitals and clinics maintain essential services in FY 2025.

Through sustained partnerships, targeted resources, and a long-standing humanitarian commitment, Direct Relief continues working to ensure that people caught in conflict and crisis can access the care they need. ■

1 A woman receives a health examination at a Syrian American Medical Services mobile clinic supported by Direct Relief in Gaza. (Courtesy photo); 2 Healthcare workers with IOM South Sudan inoculate people against cholera in hard-to-reach communities in Mayom County. (Courtesy photo); 3 Medications and supplies provided by Direct Relief are distributed in Haiti by local NGO Hope for Haiti. (Courtesy photo)



The Ohmatdyt Specialized Children's Hospital in Kyiv following missile attack on July 8, 2024. (Vitalii Nosach/Wikimedia Commons)

“The parents are crying when they get the medicine for the first time. The parents say, ‘It was our task to live to this day.’”

NATALIIA SAMONENKO, MD
HEAD OF THE ORPHAN DISEASES DEPARTMENT
AT OHMATDYT NATIONAL SPECIALIZED CHILDREN'S HOSPITAL
IN KYIV, UKRAINE



IMPROVING HEALTH OUTCOMES FOR WOMEN & CHILDREN

DESPITE ADVANCES in research and treatment, pregnancy, childbirth, and the postpartum period remain a perilous time for mothers and babies. Nearly 300,000 women die every year from complications related to pregnancy and delivery, and 2.5 million newborns die within their first month of life.

More than 99 percent of these deaths occur in low- and middle-income countries, primarily due to preventable causes and the lack of access to skilled healthcare providers, such as midwives, who safeguard maternal and infant health before, during, and after childbirth. **CONT'D ▶**

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

SPECIALIZED KITS SUPPORT MATERNAL & NEONATAL HEALTH

IN FISCAL YEAR 2025, Direct Relief helped maternal and newborn care providers around the world deliver safer pregnancies and healthier births. Through specialized medical kits designed for midwives and maternity wards, the organization supported as many as 20,000 pregnancy-related interventions and helped enable up to 70,000 safe births.

Direct Relief distributed 100 perinatal health kits, along with 900 midwife kits—widely regarded as the global standard for midwifery equipment—and 500 replenishment kits to healthcare providers serving mothers and newborns in resource-limited settings.

Developed in collaboration with the International Confederation of Midwives and medical advisors, the perinatal kits include essential medicines, diagnostic tools, and supplies used to treat four of the leading causes of maternal and newborn death: pre-eclampsia and eclampsia, pre-term labor, neonatal infection, and neonatal respiratory distress. The kits also contain medications that help stabilize premature infants so they can be safely transferred to specialized hospitals when advanced care is needed.

A provider at Area 25 Maternity Hospital in Malawi recalled treating a 15-year-old mother who arrived in preterm labor with pre-eclampsia:

“Because of the perinatal kits, we were able to treat her in time to prevent convulsions, and she delivered a healthy baby.” ■

Direct Relief perinatal health kits containing medicine and supplies to treat common pregnancy and post-natal complications arrive at Hope Foundation for Women and Children in Cox’s Bazar, Bangladesh, in April 2025. (Courtesy of Hope Foundation)





ADDRESSING OBSTETRIC FISTULA

OBSTETRIC FISTULA, a severe birth injury caused by prolonged, obstructed labor, remains a devastating threat to women’s health, with thousands of women developing this condition each year. Though preventable with timely medical care, it is estimated that at least one million women in Africa and Asia are living with untreated fistula, resulting in chronic incontinence and significant psychosocial and economic consequences.

To help address this debilitating birth complication, Direct Relief provides fistula repair modules to surgeons throughout Southeast Asia and Sub-Saharan Africa. In FY 2025, Direct Relief delivered 143 modules, sufficient to support 7,150 surgical fistula repairs. ■

An obstetric fistula patient at Aberdeen Women’s Center in Sierra Leone. The center is a recipient of Direct Relief’s fistula repair modules. (Courtesy of Aberdeen Women’s Center)

 **SUPPORTING
FISTULA
SURGERIES
IN ANGOLA**

ANGOLA HAS ONE OF THE HIGHEST fertility rates globally, yet limited access to maternal health services puts women at increased risk of birth complications, such as obstetric fistula. Improving maternal and infant health outcomes has been a national priority for more than two decades. This commitment was strengthened in recent years with the opening of the Hospital Materno Infantil Dr. Manuel Pedro Azancot de Menezes in Angola’s capital city of Luanda. The new maternal and child hospital offers specialized care for women and newborns, including a dedicated 50-bed fistula ward.

At the hospital, Dr. Paolo Parimbelli, a fistula surgeon and Direct Relief partner, performs approximately 500 repair surgeries each year using Direct Relief’s fistula repair modules, helping women impacted by this devastating condition regain their health and dignity and begin to rebuild their lives. ■

U.S. AWARDS & PARTNERSHIPS EXPAND CONTRACEPTIVE ACCESS, MATERNAL CARE

IN FY 2025, Direct Relief awarded more than \$1.3 million from its Fund for Health Equity to partners advancing maternal health outcomes. Funding helped the Southern Birth Justice Network to register its National Black Midwives Alliance, a professional group that represents Black midwives across the U.S., as a 501(c)(3) nonprofit and launch national programming for midwives and doulas. The funding also supported the University of Florida Mobile Outreach Clinic to expand reproductive and postpartum health services via a new perinatal mobile health clinic serving rural communities.

In addition, Direct Relief's existing Community Health Awards, delivered in partnership with Organon, provided a second year of funding to address the drivers of unintended pregnancy. To date, \$1.6 million has been directed to safety-net providers working to improve



equitable access to sexual and reproductive health education and services, including contraception, in Georgia, Ohio, and Texas.

In partnership with Bayer, Organon and Julie Co., Direct Relief supplied \$18.7 million in women's health and contraceptive medications—including IUDs, Nexplanon, NuvaRing, Xaciat, and Julie Emergency Contraception—to safety net partners across the U.S. ■



MATERNAL & CHILD HEALTH CARE IN EMERGENT SETTINGS

MIDWIVES AND OTHER MATERNAL-CHILD health providers play a critical role during crises, from providing prenatal care in refugee camps to delivering safe spaces and mental health and psychosocial support services for children experiencing prolonged stress and trauma.

In FY 2025, Direct Relief provided \$180,000 to support a children's center in Ukraine addressing the mental health and psychosocial support needs of children affected by years of conflict and insecurity. Additionally, 169 midwife kits and 27 re-supply kits were delivered to partners in Syria, where nearly 14 years of war have severely weakened the healthcare system and caused chronic shortages of medical resources. ■



OUR STORIES IN BLACK + WHITE.
REAL VOICES. REAL IMPACT.

THIS EXHIBIT SHARES POWERFUL, PERSONAL STORIES FROM PEOPLE CONNECTED TO DENVER HEALTH WHOSE LIVES HAVE BEEN TOUCHED BY THE OVERDOSE EPIDEMIC.

THESE STORIES ARE PRESENTED IN BLACK AND WHITE TO HONOR THE TRUTH, THE HOPE, AND THE RESILIENCE BEHIND EACH EXPERIENCE.

THIS EXHIBIT WAS CREATED IN PARTNERSHIP WITH THE CENTER FOR ADDICTION MEDICINE (CAM) AND THE CDC FOUNDATION'S OVERDOSE-RESPONSE STRATEGY PROGRAM.

TAKE A MOMENT. BEAR WITNESS. START A CONVERSATION.

A CHANGING LANDSCAPE BRINGS A NEW APPROACH TO OVERDOSE PREVENTION

PROVISIONAL PUBLIC HEALTH DATA indicate drug overdose deaths in the U.S. fell by more than 24 percent from April 2024 to April 2025, dropping from 100,000 deaths to 74,000 deaths, according to the U.S. Centers for Disease Control and Prevention. The drop, part of a sustained decline underway since the summer of 2023, marks a reversal of the sharp upward trend in overdose fatalities during the COVID-19 pandemic.

Experts and advocates have suggested that education, medication-assisted therapies for opioid use disorder, and harm reduction measures—like the growing availability of naloxone, a life-saving medication that can immediately reverse an opioid overdose—all play a role in this hopeful trend. ■

The STEP program at Denver Health has adopted an emerging strategy to improve treatment engagement, especially for BIPOC youth, by partnering clinicians with dogs. The dog's presence in a psychotherapy session can help patients feel more comfortable and improve the treatment alliance. (Courtesy of STEP)

INTEGRATING OVERDOSE TREATMENT INTO ROUTINE OFFERINGS

In 2023, the U.S. Food and Drug Administration approved the first-ever naloxone nasal spray for use without a prescription, marking a major step towards expanding the availability of this life-saving medication. Though naloxone is now widely available in pharmacies, convenience stores, and via online retailers, its high out-of-pocket cost continues to impede equitable access.

In FY 2025, Direct Relief worked to make naloxone readily available at no cost to healthcare providers and community-based organizations throughout its U.S. partner network, integrating the medication into its routine product offerings. The organization now provides regular access to naloxone for community health centers, free & charitable clinics, harm reduction organizations, schools, libraries, and other community-based organizations, ensuring sustained access to this critical overdose antidote. Through these efforts, Direct Relief provided more than 481,000 doses of naloxone during FY 2025.

Many U.S. safety net health providers—including organizations supported by Direct Relief—routinely offer medication-assisted therapy for opioid use disorder among their health services, with partners reporting that Direct Relief’s product donations are often the only reliable source of naloxone for the communities they serve.

Evidence shows these treatments, alongside mobile outreach efforts and other community distribution activities, reduce both opioid use and overdose deaths. Despite significant progress, the demand for equitable access to naloxone amid the ongoing opioid overdose

“The donations we receive from Direct Relief are our golden goose in terms of low-barrier naloxone access.”

CTARACOLE, INC.

epidemic continues to outpace supply, and a recent partner survey conducted by Direct Relief identified additional needs for harm reduction supplies, such as syringes and disposal kits, as well as ancillary training and educational resources, to support comprehensive overdose prevention strategies and improve long-term health outcomes. ■





DIRECT RELIEF IS AMONG THE
WORLD'S LARGEST CHARITABLE
PROVIDERS OF DONATED INSULIN

\$72 MILLION WORTH OF INSULIN PROVIDED IN FY 2025

Campers pose for a photo at a Rwanda
Diabetes Association camp for children.
(Courtesy photo)

AFTER A CHILDHOOD SPENT **STRUGGLING WITH DIABETES**, A RWANDAN DOCTOR TEACHES CHILDREN TO **THRIVE WITH THE DIAGNOSIS**

WHEN KIDS WITH TYPE 1 DIABETES come into the clinic in Kigali, Rwanda, where Dr. Aime Manzi works, they often feel hopeless, assuming their lives are over. But Dr. Manzi—who spent years struggling with diabetes as a child before learning to manage the disease, treat others, and advocate for greater awareness and treatment—knows their lives are only beginning.

“Someone who has come...with no hope, and seeing them leave with hope” makes his work fulfilling, he said.

Some of his young patients have been misdiagnosed before, sometimes repeatedly. Some have been rejected by friends or family, or heard parents worry that paying for medication or schooling for a child who will never be cured isn’t worthwhile.

These are all experiences Dr. Manzi knows. The 27-year-old physician confronted each of them during his own childhood.

Today, he works for the Rwanda Diabetes Association (RDA), the organization that supported him with free insulin and monitoring supplies for his own diabetes, taught him the ins and outs of managing his blood sugar, and assured him that his own life was only beginning. It’s also the organization that helped him grow into a dedicated advocate and educator for people with diabetes and their families.

Dr. Manzi is a general physician who works with children with diabetes at RDA’s clinic in Kigali, which cares for about 500 young patients. The RDA serves approximately 1,300 people across Rwanda.

Dr. Manzi loves telling his young patients that he, too, has type 1 diabetes. It’s often the first step of teaching them how much they have to look forward to, and how little the disease will limit them.

For many of them, caring for diabetes would be financially impossible without support. Their family incomes are simply too low to pay for insulin, testing strips, a blood glucose meter, and regular blood panels, as Dr. Manzi’s was during his childhood.



Dr. Aime Manzi demonstrates an insulin injection at a Rwanda Diabetes Association Camp. (Courtesy photo)

Through RDA, they get all of these at no cost. RDA receives insulin from Direct Relief through Life for a Child, an organization that supports young people with diabetes around the world. Life for a Child and Direct Relief have provided diabetes management tools and insulin—generously donated by Eli Lilly—to children in 44 countries. In addition, because insulin must be transported and stored under precise temperatures and conditions, Direct Relief provides cold-chain support to many local partners.

Since 2011, Direct Relief has supported RDA with more than \$10.9 million in material medical aid, including insulin, glucose test strips, and other essential components of diabetes management.

“That’s why I’m a great believer in your work as the people who deliver insulin,” says Dr. Manzi. “Most of [the children] come from poor families...if it wasn’t for this program these people wouldn’t be getting insulin.”

A young patient receives a check-up at Direct Relief supported Shingletown Medical Center in Shingletown, California (Bimarian Films/Direct Relief)



HOW DIRECT RELIEF WAS FUNDED

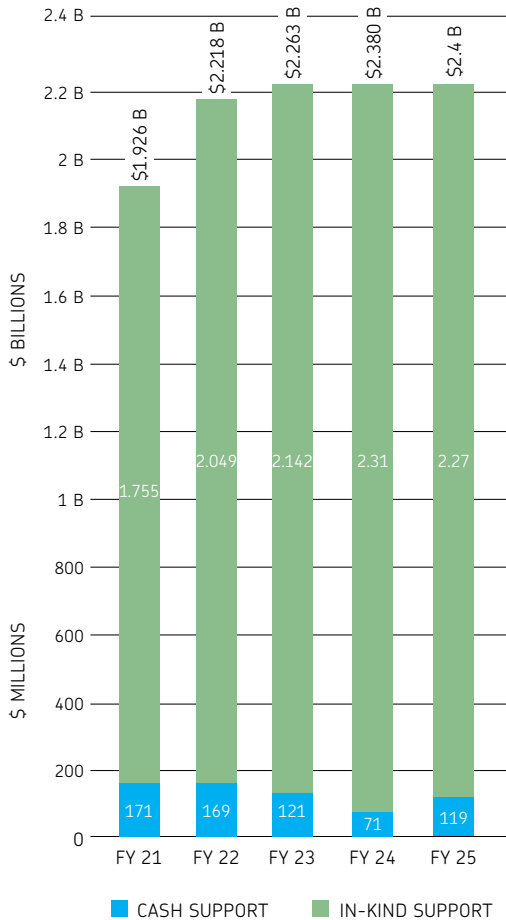
[FY 2025]

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 accepts no government funding and relies entirely on private contributions.

In FY 2025 (July 1, 2024, through June 30, 2025), 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 2025 CONTRIBUTED SUPPORT: \$2.4 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

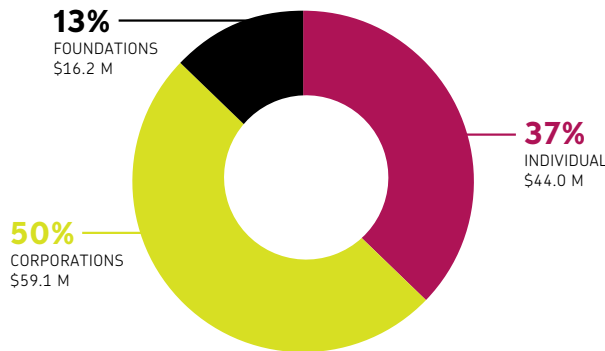
merely receiving donated goods and services. It has allowed broader public participation in humanitarian efforts by commercial businesses in many industries and far more and higher quality goods and services than could be achieved by seeking only financial support from the public to purchase them.

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.

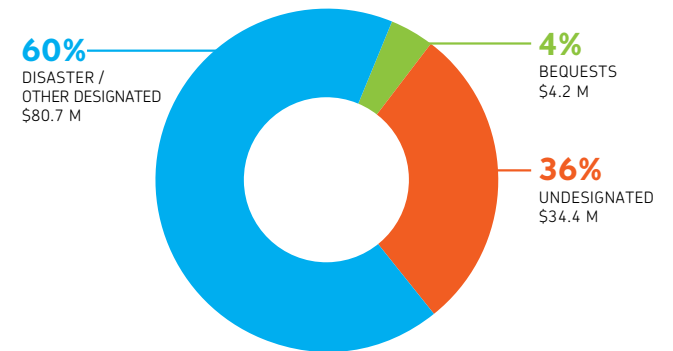
Direct Relief’s financial statements must account for both cash and in-kind contributions that are entrusted to the organization to fulfill its humanitarian mission. In Fiscal Year 2025, over 95 percent of its total public support of nearly \$2.4 billion was received in the form of in-kind medical products 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 47, are to assist 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 **CONT'D** ▶

SOURCES OF CASH REVENUE: \$119.3 M



CATEGORIES OF CASH SUPPORT: \$119.3 M



in FY 2025 by individuals, businesses, organizations, and 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 2025, Direct Relief received more in contributions and earnings than was used to support its partner network and run operations. When the fiscal year ended, Direct Relief reported an increase in net assets (or net operating "surplus"). In FY 2022, for example, the opposite was true, and Direct Relief recorded a decrease in net assets (or net operating "deficit").

In FY 2025, Direct Relief received public support and revenue of \$2.3 billion in product donations and \$119 million in cash donations. Direct Relief had an unrealized gain (fair market value increase) on investments of \$6

million and \$13.8 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 \$2.3 billion, administrative support services of \$12.5 million, and fundraising costs of \$3.5 million. For FY 2025, the change in net assets was a \$102 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 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.

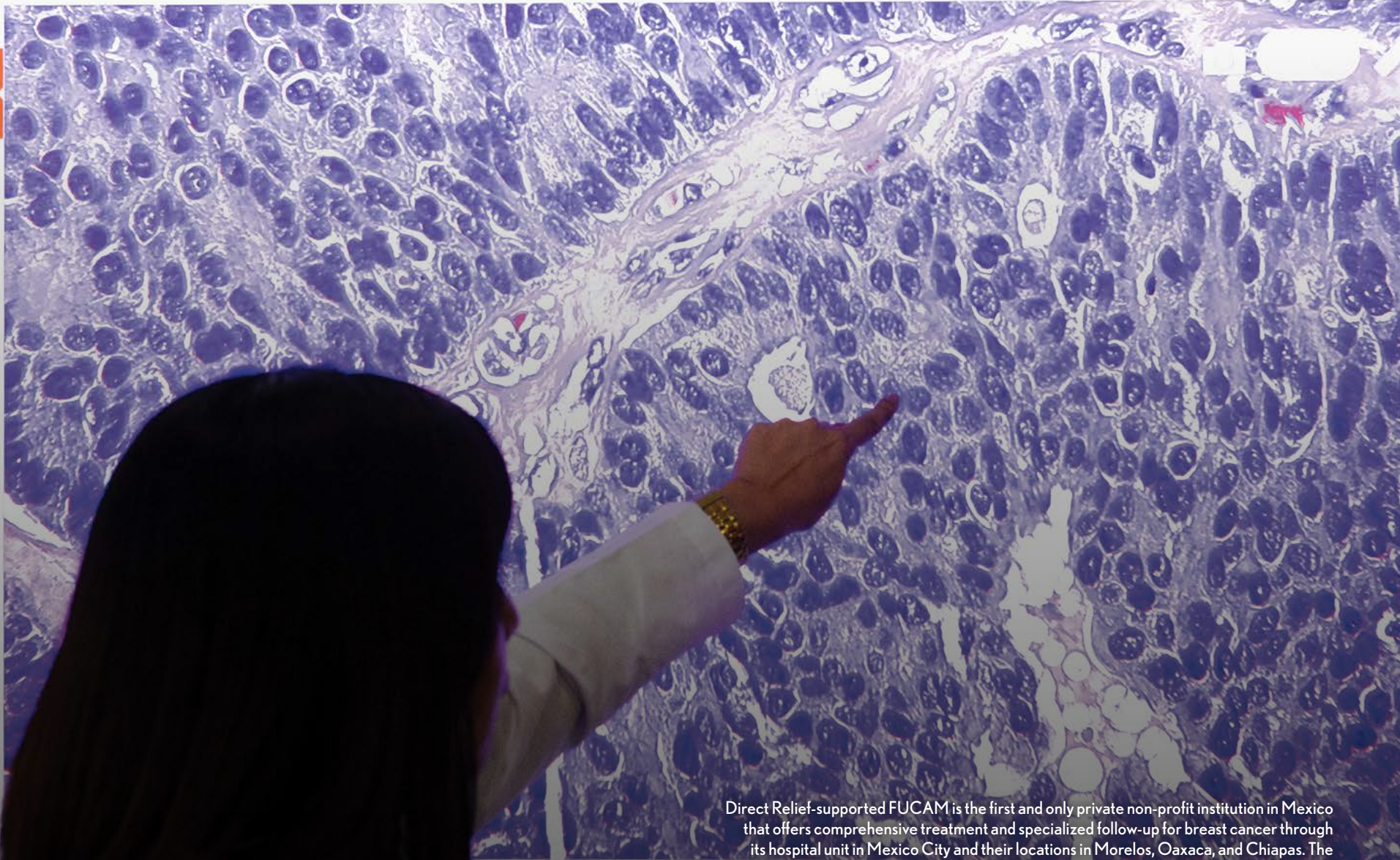
Donations of medicines, medical equipment, and medical supplies have long been an integral part of Direct Relief's humanitarian assistance programs. In assigning a fair market value to the in-kind medical donations received, Direct Relief uses a careful, conservative approach that complies with relevant 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®. 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. **CONT'D ▶**

HOW
DIRECT RELIEF
WAS FUNDED
FY 2025

otic



Direct Relief-supported FUCAM is the first and only private non-profit institution in Mexico that offers comprehensive treatment and specialized follow-up for breast cancer through its hospital unit in Mexico City and their locations in Morelos, Oaxaca, and Chiapas. The institution's goal is to provide timely diagnosis and treatment with an emphasis on the most underserved and marginalized socio-economic groups in Mexico, while raising awareness about the importance of early detection and encouraging the training of specialists in breast radiology, research, and rehabilitation. Breast cancer is the leading cause of cancer-related deaths among women in Mexico. (Photo by Felipe Luna Espinosa for Direct Relief)

**HOW
DIRECT RELIEF
WAS FUNDED
FY 2025**

For non-FDA-approved pharmaceuticals, for example, products manufactured for use in non-U.S. markets, Direct Relief 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, Direct Relief 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 Direct Relief'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. Direct Relief, 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 Direct Relief's financial future and provide a reserve for future operations. The BRIF, established with assets valued at \$774,000, 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 CEO as well as advance emergency relief funding as determined by the CEO.

For Fiscal Year 2025, the Foundation Trustees approved a distribution of \$5 million to pay for Direct Relief's fundraising expenses and the salary of the CEO. Upon a majority vote by the Board, the BRIF may also be utilized to meet other general operational costs and extraordinary capital expenses. ■

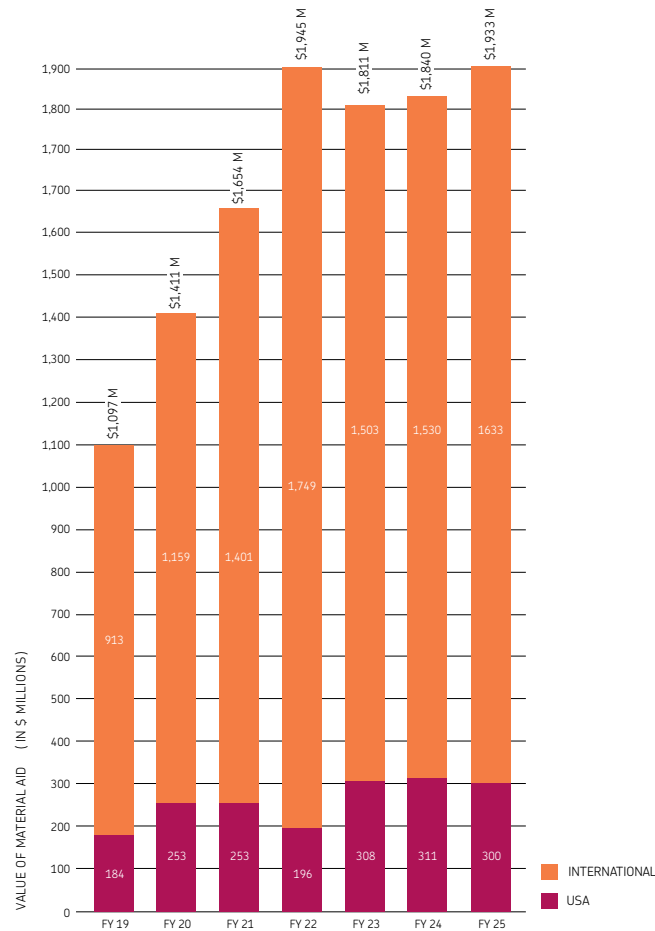
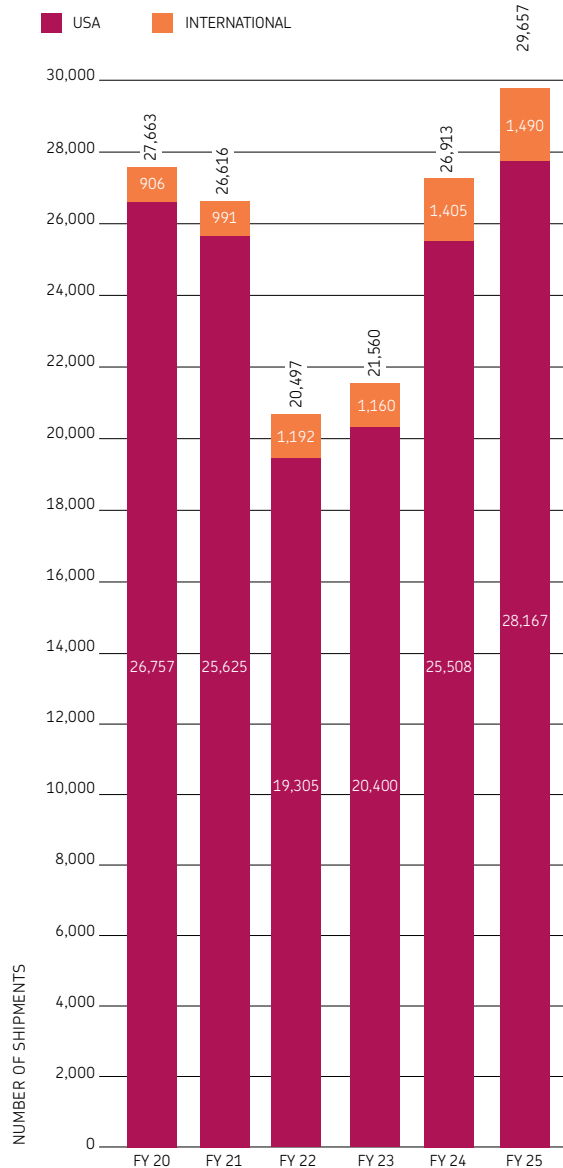
HOW YOUR SUPPORT WAS USED

[FY 2025]

Thanks to your participation, Direct Relief helped more people in more places than ever before in its 77-year history in FY 2025. Direct Relief received \$2.4 billion in support from the public with no funding from government sources. Direct Relief provided \$2 billion in assistance around the world (including \$68.8 million in financial assistance). >>

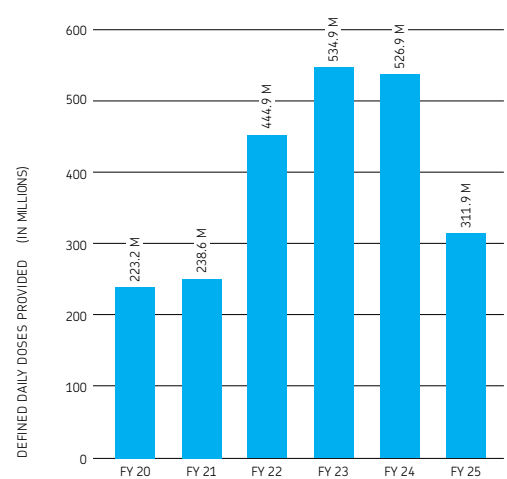
MATERIAL ASSISTANCE

Advancing its mission to improve the health and lives of people affected by poverty or emergencies, Direct Relief delivered 29,657 shipments of humanitarian material aid in FY 2025 to 92 countries and all 50 U.S. states and 5 U.S. territories.



The medical aid contained in these shipments was sufficient to provide **311.9 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 **\$1.9 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.



Diabetes management medications from Direct Relief arrived in Mykolaiv, Ukraine, in June 2025 to support medical care in the region. The therapies were distributed by Charity Fund Yevgen Pyvovarov. (@charityfund_pyvovarov)

FINANCIAL ASSISTANCE

In addition to providing more essential medical material resources than ever before, Direct Relief furnished \$68.8 million in critically needed funding in FY 2025 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 (\$19.7 million), Los Angeles County Wildfires (\$7.4 million), Hurricane Helene (\$4.5 million), Turkey/Syria Earthquake (\$3.3 million), Israel/Palestine Conflict (\$1.2 million), Hurricane Milton (\$1.2 million), and the Hawaii Wildfires (\$612,000).

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 \$2.3 billion in humanitarian assistance Direct Relief provided in FY 2025 across the U.S. and around the world was undertaken by a staff which, as of June 30, 2025, comprised 161 positions (159 full-time, 2 part-time). Measured on a full-time equivalent (FTE) basis, the total staffing over the course of the year was 160.1. 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.

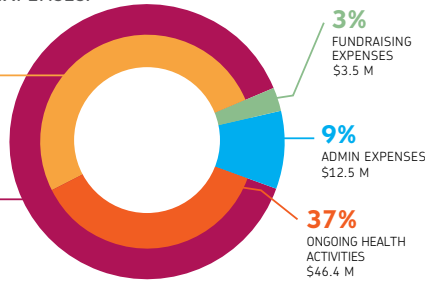
The CEO's compensation is paid from funds provided by Direct Relief Foundation. This compensation is allocated 50 percent to administration and 50 percent to fundraising.

TOTAL CASH EXPENSES

TOTAL CASH EXPENSES: \$125.9 M

51% DISASTER RESPONSE \$63.6 M

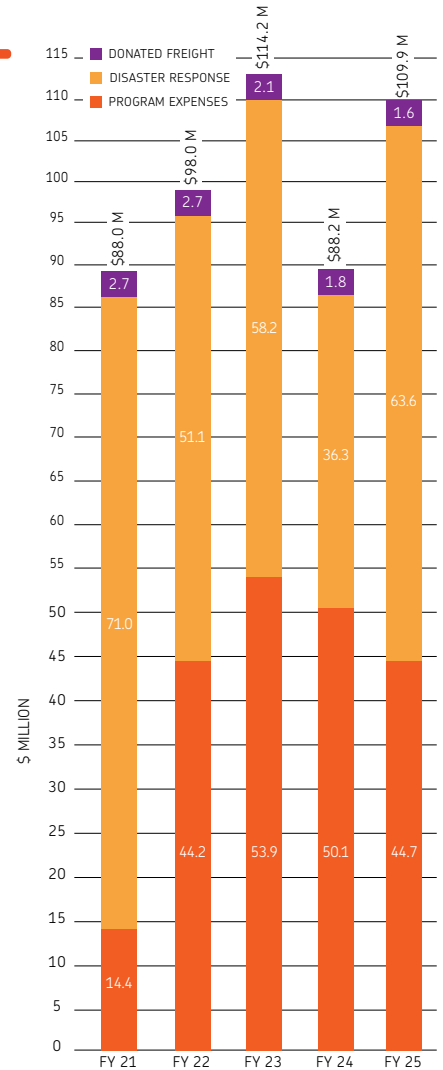
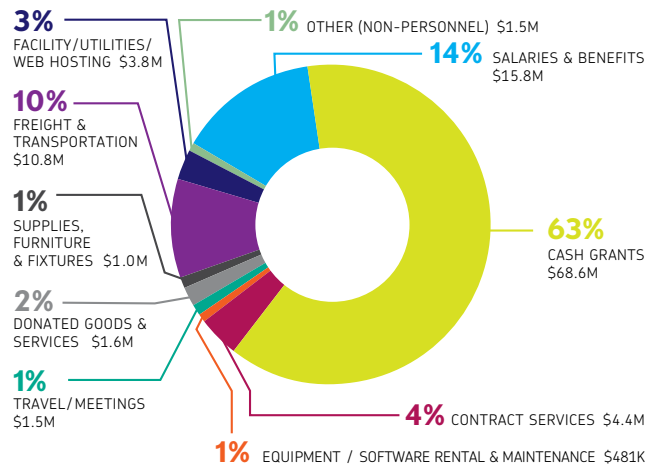
88% PROGRAM EXPENSES \$110.0 M



PROGRAM EXPENSES

To implement its humanitarian programs (\$1.9 billion in medical material aid), Direct Relief spent \$40.9 million (excluding \$68.8 million in cash grants) in FY 2025, \$16 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 100 full-time and 1 part-time employees engaged in programmatic functions.

PROGRAM EXPENSES BY FUNCTION: \$109.9 M



PROGRAM EXPENSES ALSO INCLUDE >>

- ▶ Ocean/air freight and trucking for outbound shipments to partners, in-country transportation, and inbound product donations (\$12.4 million total, of which \$1.7 million was donated)
- ▶ Travel for oversight and evaluation (\$1.5 million); contract services (\$4.4 million); packing materials and supplies (\$1.3 million); and disposal costs for expired pharmaceuticals (\$563,000)
- ▶ A pro-rata portion of other allocable costs (see page 45)



In response to the Los Angeles wildfires, on January 16, 2025, Direct Relief delivered requested re-entry kits and N95 masks to the Los Angeles Fire Department, Los Angeles County Department of Public Health, and the City of Pasadena, to be distributed to community members re-entering their properties. Re-entry kits contain critical equipment to protect individuals from the harmful toxins found in fire debris. The equipment includes gloves, boot covers, disposable coverall, and more. (Sean Collier/Direct Relief)

FUNDRAISING EXPENSES

Direct Relief's FY 2025 fundraising expenses totaled \$3.5 million, of which \$146,000 (or 4 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 34. FY 2025 cash expenditures for fundraising totaled \$3.3 million, which were paid by the Direct Relief Foundation, not from donors' contributions, as explained on page 37. The majority of these cash expenditures, \$2.4 million or 71 percent of the total \$3.3 million, were used to pay the salaries, related benefits, and payroll taxes for 13 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.

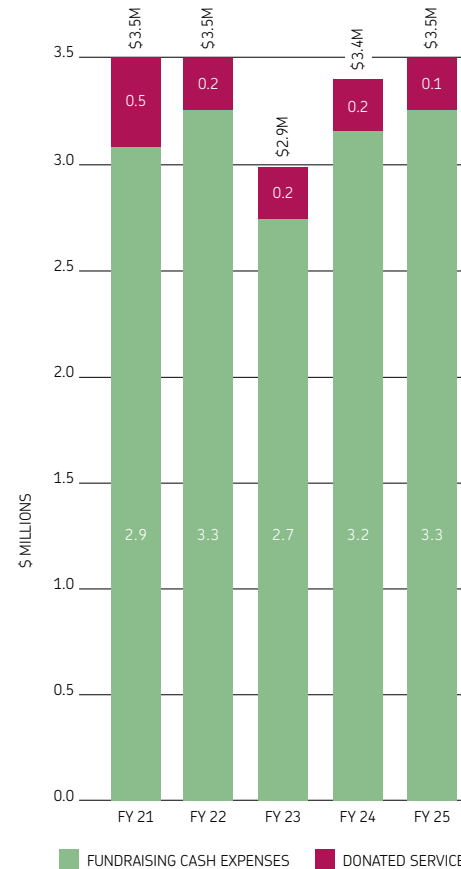
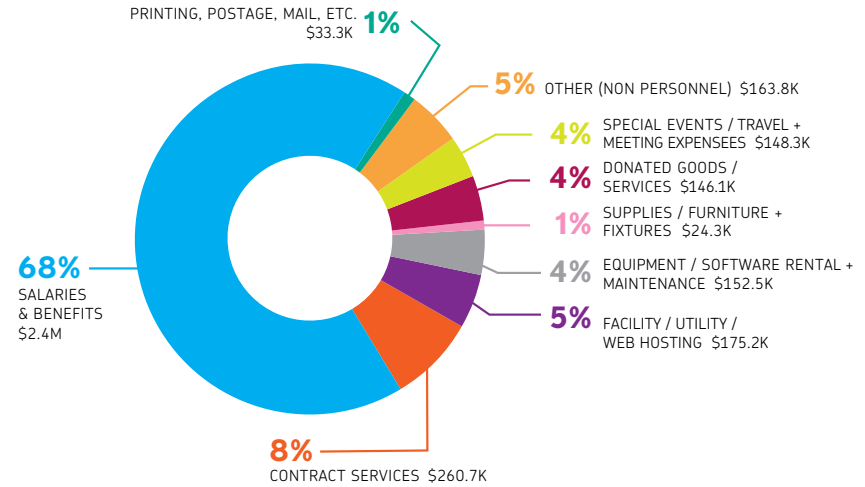
Direct Relief's longstanding emphasis on efficiency extends to its fundraising efforts. Although not paid with donor funds, Direct Relief notes for comparative purposes that its total fundraising expenses for FY 2025 of \$3.5 million (which includes noncash expenditures) equals 2.91 percent of the \$119.3 million in cash support the organization received; cash expenditures for fundraising of \$3.3 million equals 2.79 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 95 percent of the \$2.4 billion in total revenue received by Direct Relief in FY 2025. 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 2.79 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 2025.

FUNDRAISING EXPENSES BY FUNCTION: \$3.5 M



FUNDRAISING EXPENSES ALSO INCLUDE >>

- ▶ \$24,000 in supplies and furniture in support of the fundraising staff
- ▶ \$33,000 for the production, printing, and mailing of the annual report, tax-receipt letters to contributors, fundraising solicitations, and informational materials
- ▶ \$38,000 in advertising and marketing costs
- ▶ \$260,000 in contract services
- ▶ A pro-rata portion of other allocable costs (see page 45)



Direct Relief helped fund Santa Barbara County's purchase of a new Firehawk helicopter. With the rare ability to operate at night, the Firehawk was critical to fire suppression efforts on the Lake Fire outside Los Olivos, California. (Bimarian Films/Direct Relief)

MANAGEMENT & GENERAL EXPENSES

Direct Relief spent \$12.5 million on administration in FY 2025. Administration expenses are those that relate to financial and human resource management, information technology, communications, public relations, and general office management. A total of \$6.2 million was for salaries, related benefits, and taxes for 46 full-time employees engaged in administration and financial management.

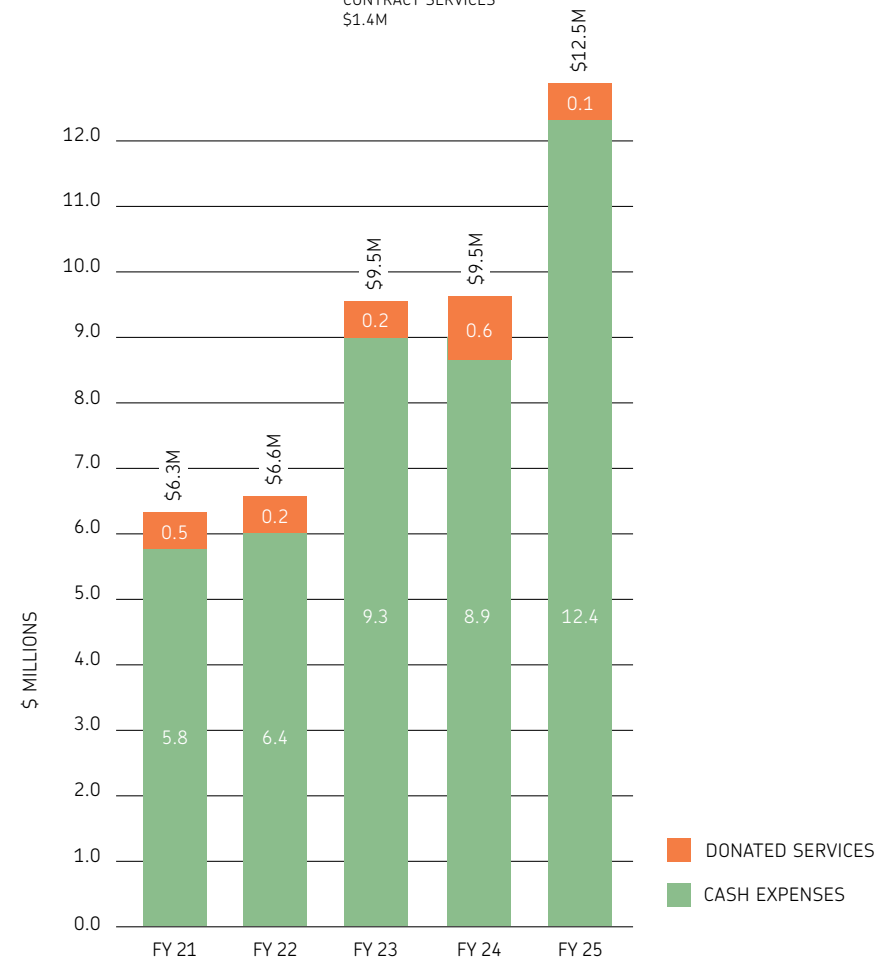
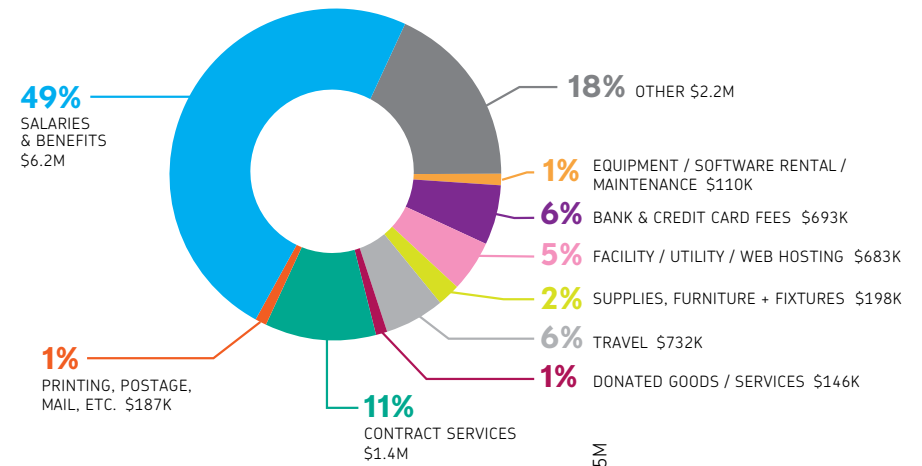
MANAGEMENT & GENERAL EXPENSES ALSO INCLUDE >>

- ▶ \$28,000 in taxes, licenses, and permits (Direct Relief is registered as an exempt organization in each U.S. state requiring such registration)
- ▶ \$86,000 in accounting fees for the annual CPA audit, payroll processing and reporting, and other financial services
- ▶ \$349,000 in legal fees
- ▶ \$351,000 in press releases and online advertising
- ▶ \$693,000 in credit card and banking fees
- ▶ \$732,000 for travel, meetings and conferences
- ▶ \$1.4 million in contract services (\$146,000 of which were donated services)
- ▶ 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 include 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: \$12.5M





Mental health needs are a priority for people recovering from the devastating earthquake in Turkey, and Direct Relief is supporting local organizations focused on those areas. The Direct Relief-supported World Human Relief opened a trauma prevention center, which has a home-like atmosphere for trauma survivors. (Ali Saltan/Direct Relief)

COMBINED STATEMENT OF FINANCIAL POSITION

For the fiscal year ended
June 30, 2025 with summarized
totals for FY 2024. Amounts are
presented in the thousands.

	FY 2025						FY 2024	
	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	\$ 108,899,972	\$ 262,112	\$ 110,089	\$ 11,590	\$ -	\$ -	\$ 109,283,762	\$ 42,679
Investments	78,376,379	96,503,677	-	-	-	-	174,880,056	237,749
Contributions and other receivables, net	40,407,810	3,378,303	-	-	-	(10,005,967)	33,780,145	18,592
Inventories, net	1,025,043,255	-	816,735	-	-	-	1,025,859,990	926,647
Prepaid expenses	2,567,042	-	10,812	-	-	-	2,577,854	4,009
Property and equipment, net	1,111,736	-	35,309	-	35,483,769	-	36,630,814	37,650
Investment in subsidiary	41,816,861	-	-	-	-	(41,816,861)	(0)	-
Other assets	400,068	-	-	-	-	-	400,068	331
Total assets	\$1,298,623,121	\$100,144,092	\$ 972,945	\$ 11,590	\$ 35,483,769	\$ (51,822,828)	\$ 1,383,412,689	\$ 1,267,657
LIABILITIES								
Accounts payable	\$ 6,551,610	\$ -	\$ -	\$ -	\$ 10	\$ -	\$ 6,551,620	\$ 4,740
Accrued liabilities	36,795,079	9,528,699	20,346	-	-	(10,005,967)	36,338,157	25,207
Long-term debt	671,408	-	-	-	-	-	671,408	-
Total liabilities	44,018,097	9,528,699	20,346	-	10	(10,005,967)	43,561,185	29,947
NET ASSETS								
Without donor restrictions	1,133,770,127	87,522,811	842,510	11,590	35,483,759	(41,816,861)	1,215,813,936	1,103,050
With donor restrictions	120,834,897	3,092,582	110,089	-	-	-	124,037,568	134,660
Total net assets	1,254,605,024	90,615,393	952,599	11,590	35,483,759	(41,816,861)	1,339,851,504	1,237,710
Total liabilities and net assets	\$1,298,623,121	\$ 100,144,092	\$ 972,945	\$ 11,590	\$ 35,483,769	\$ (51,822,828)	\$1,383,412,689	\$ 1,267,657

* 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, 2025 with summarized totals for FY 2024. Amounts are presented in the thousands.

	FY 2025						FY 2024	
	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	\$ 48,268,788	\$ 4,346,123	\$ 461,750	\$ 64,116	\$ -	\$ (9,825,381)	\$ 43,315,396	\$ 30,007
Contributions designated for quasi-endowment	-	-	-	-	-	-	-	4,861
Business and foundation grants	73,032,186	-	10,273	-	-	-	73,042,459	33,435
Workplace giving campaigns	2,899,014	-	-	-	-	-	2,899,014	2,592
Special events	-	-	-	-	-	-	-	-
Total public support from cash + securities	124,199,988	4,346,123	472,023	64,116	-	(9,825,381)	119,256,869	70,895
From contributed goods and services:								
Pharmaceuticals, medical supplies and equipment	2,265,194,032	-	4,772,907	-	-	-	2,269,966,939	2,305,922
Contributed freight	1,698,465	-	-	-	-	-	1,698,465	3,778
Contributed goods - other	284,716	-	-	-	-	-	284,716	393
Professional services received	-	-	-	-	-	-	-	-
Total from contributed goods and services	2,267,177,213	-	4,772,907	-	-	-	2,271,950,120	2,310,093
Total public support	2,391,377,201	4,346,123	5,244,930	64,116	-	(9,825,381)	2,391,206,989	2,380,988
REVENUE								
Investment income	8,484,163	1,677,763	-	-	-	-	10,161,926	14,409
Realized gain on sale of investments	1,120,459	2,506,990	2,046	-	-	-	3,629,495	(1,103)
Unrealized (loss) gain on investments	240,303	6,169,465	-	-	-	-	6,409,768	5,839
Realized gain on other assets	-	-	-	-	-	-	-	-
Total revenue	9,844,925	10,354,218	2,046	-	-	-	20,201,189	19,145
Net assets released from restrictions	-	-	-	-	-	-	-	-
Total public support and revenue	2,401,222,126	14,700,341	5,246,976	64,116	-	(9,825,381)	2,411,408,178	2,400,133
PROGRAM SERVICES								
Program related expenses	2,292,411,958	4,963,620	4,812,505	71,504	848,136	(9,825,381)	2,293,282,342	2,359,258
SUPPORTING SERVICES:								
Administration	12,208,520	28,877	282,383	-	-	-	12,519,780	9,483
Fundraising	3,471,511	-	-	-	-	-	3,471,511	3,389
Total supporting services	15,680,031	28,877	282,383	-	-	-	15,991,291	12,872
Total expenses	2,308,091,989	4,992,497	5,094,888	71,504	848,136	(9,825,381)	2,309,273,633	2,372,130
Change in net assets	93,130,137	9,707,844	152,088	(7,388)	(848,136)	(0)	102,134,545	28,003

COMBINED STATEMENT OF FUNCTIONAL EXPENSES

For the fiscal year ended June 30, 2025
with summarized totals for FY 2024.
Amounts are presented in the thousands.

	FY 2025			FY 2025		FY 2025	FY 2024
	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							
Salaries	3,285,177	9,634,301	\$ 12,919,478	4,927,417	1,902,725	\$ 19,749,620	\$ 15,869
Payroll taxes	234,259	620,070	854,329	311,702	139,102	1,305,133	1,137
Employee benefits	552,966	1,426,481	1,979,447	927,751	325,710	3,232,908	2,846
Total compensation and related benefits	4,072,402	11,680,852	15,753,254	6,166,870	2,367,537	24,287,661	19,852
OTHER EXPENSES							
Pharmaceuticals, medical equipment and supplies distributed - donated	296,794,094	1,621,562,655	1,918,356,749	-	-	1,918,356,749	1,818,972
Pharmaceuticals, medical equipment and supplies distributed - procured	3,002,991	11,540,082	14,543,073	-	-	14,543,073	21,245
Inventory adjustment (expired pharmaceuticals)	52,595,136	197,862,976	250,458,113	-	-	250,458,113	430,795
Grants and stipends	37,482,269	31,272,441	68,754,710	-	-	68,754,710	45,576
Accounting and legal fees	3,475	35,004	38,479	534,791	232	573,502	437
Advertising	76,322	287,118	363,440	350,486	37,933	751,859	682
Bank charges	-	7,863	7,863	693,049	-	700,912	364
Contract services	2,831,847	1,552,474	4,384,321	1,407,085	260,680	6,052,086	7,226
Contributed services	-	-	-	146,060	146,060	292,120	394
Contributed freight	346,178	1,302,288	1,648,465	-	-	1,648,465	2,163
Disposal costs (expired pharmaceuticals)	115,962	446,981	562,943	-	-	562,943	906
Dues and subscriptions	139,273	201,942	341,215	558,536	123,392	1,023,143	921
Duplicating and printing	14,726	47,141	61,867	27,821	27,971	117,659	114
Equipment and software maintenance	101,692	345,070	446,761	80,717	143,402	670,880	559
Equipment rental	7,793	26,707	34,500	28,961	9,056	72,518	78
Freight and transportation	2,799,558	7,959,508	10,759,066	-	-	10,759,066	10,883
Insurance	254,547	448,795	703,341	275,296	99,574	1,078,212	1,221
Interest	-	-	-	-	-	-	-
Meetings, conferences, special events	316,897	159,934	476,831	542,610	78,938	1,098,380	1,335
Miscellaneous	2,186	5,704	7,890	649,157	559	657,607	1,070
Postage and mailing services	12,632	32,929	45,561	158,912	5,326	209,799	119
Rent and other occupancy	98,024	342,088	440,112	176,706	4,690	621,508	797
Storage and Logistics (contract warehousing)	902	652,855	653,757	-	-	653,757	978
Supplies	520,277	783,333	1,303,610	198,174	24,251	1,526,034	1,330
Taxes, licenses, and fees	22,464	71,840	94,304	27,831	355	122,490	239
Training and education	4,504	11,404	15,908	75,559	1,301	92,769	84
Travel and automobile	264,925	792,140	1,057,065	189,001	69,349	1,315,415	1,540
Utilities and telephone	84,509	274,401	358,910	25,176	9,437	393,523	410
Web hosting	155,691	259,308	414,998	202,624	59,828	677,450	548
Total expenses before depreciation	402,121,276	1,889,965,832	2,292,087,108	12,515,422	3,469,873	2,308,072,403	2,370,838
Depreciation and amortization	250,246	944,988	1,195,234	4,356	1,639	1,201,229	1,292
Total functional expenses June 30, 2025	\$ 402,371,521	\$ 1,890,910,820	\$ 2,293,282,341	\$ 12,519,778	\$ 3,471,512	\$ 2,309,273,632	
Total functional expenses June 30, 2024	\$ 410,577,000	\$ 1,948,681,000	\$ 2,359,258,000	\$ 9,483,000	\$ 3,389,000		\$ 2,372,130,000

CORPORATE PARTNERSHIPS

MATERIAL DONATIONS AND IN-KIND SUPPORT

[FY 2025]

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	Boehringer Ingelheim	Johnson & Johnson	Procter & Gamble
Abbott	Carlsbad Technology	Kaleo	Row Pharma
AbbVie	Cipla	Kenvue	Sandoz
Abell Marketing Group	Coherus Bioscience	Labatec	Sanofi
Alcon	Dynavax	Liquid IV	Seqirus
Amgen	Edwards Lifesciences	Lupin Pharmaceuticals	Solventum
Amneal Pharmaceuticals	Eli Lilly & Company	Medicines360	Takeda Pharmaceuticals
Amphastar Pharmaceuticals	Embecta	Mediclo	TemptraMed
Apotex	Emergent BioSolutions	Medline Industries	Teva Pharmaceuticals
Ascensia	Genentech	Merck & Co.	Tom's of Maine
Asofarma	Genexa	Moderna	Trifecta Pharmaceuticals
Astellas Pharma	Genomma Lab Internacional	MSD	Trividia Health
AstraZeneca	Golden State Medical Supply	Novartis Farmacéutica	Unilever
Barebones Living	Grifols	Novo Nordisk	Unite to Light
Baxter International	GSK	Nutrawise	Vertex
Bayer	Haleon	Organon	Westminster Pharmaceuticals
Becton Dickinson	Henry Schein	Owen Mumford	Viartis
Beta Bionics	Hikma Pharmaceuticals	Padagis	Xeris Pharmaceuticals
Biogen	Indivior	Perrigo Pharmaceuticals	Zydus Pharmaceuticals
Biocon Biologics	Ingenus Pharmaceuticals	Pfizer	

CORPORATE DONORS PROVIDING NON-MEDICAL PRODUCTS, SERVICES, CONSULTING OR CAMPAIGNS

Academy Awards (Oscars)	FedEx	Meta	SAP
Accenture	Flexport	Microsoft	Santa Barbara International Film Festival
Activision	Google	OilStop	SNAP
Complex LA	Grammy Awards	Procter & Gamble	GAP Inc.
Corporate Traffic	Humble Bundle	Qlik	TikTok
Creative Artists Agency	Kuehne+Nagel	Rare Beauty by Selena Gomez	Vera Bradley (Pura Vida)
Dotdash Meredith (People Magazine)	Los Angeles Clippers	Recording Academy / MusiCares	
Ezoic	McDonald's	Riot Games	



Direct Relief staff deliver medical aid to AltaMed health center in Pasadena, California, in February 2025. The health center had one of its locations destroyed in the Eaton Fire, and deployed a mobile unit to provide patient care to the community. (Bimarian Films/Direct Relief)

FY 2025 CORPORATE INVESTORS Contributors to Direct Relief from July 1, 2024, to June 30, 2025

COMPANIES PROVIDING CASH SUPPORT

\$2,500,000

Amgen Foundation
Pfizer Foundation

\$1,000,000

AbbVie Foundation
Activision Blizzard
Amgen Inc.
Eli Lilly and Company
FedEx
Teva Pharmaceuticals USA

\$500,000

Abbott Fund
Baxter International Foundation
BD
Biogen Idec Foundation
Cencora
Deckers Brands
Humble Bundle
The LIV Group
Organon
Pfizer
Takeda Pharmaceuticals North
America
United Health Foundation

\$250,000

Anonymous (1)
Adobe Foundation
BMO
Elevance Health Foundation /
Elevance Health CARES

Facepunch Studios
The Holland America Line
Foundation
McDonald's Corporation
Merck & Co.
Pilot Boy Productions
Riot Games
Sanofi US Foundation
Snap
TikTok
Unilever UK Central Resources Ltd.
Vanguard Charitable
Walgreens
Yardi Systems

\$100,000

Anonymous (1)
3M
Angeion Group
BD Foundation
Bristol Myers Squibb
Cigna Group
Citizens Financial Group
CVS Health Foundation
Dodge & Cox
Edison International
GE Health Foundation
Genentech
Give Lively Foundation
Goldman Sachs Group
Hologic
Kenvue
Lemonade
Meta
NBA Cares
Northern Trust

Novartis
O'Melveny & Myers, LLP
Paramount Pictures
Parker-Hannifin Corporation
PwC
Unilever-Vaseline
Vertex Foundation
VGW
Viatrix
Wescom Credit Union

\$50,000

Arch Capital Group
Bank of America
Forerunner Ventures
Gap Inc.
Genmab
Haleon
Henry Schein
Jazz Pharmaceuticals
Moncler
Motorola Solutions Foundation
Ono Hawaiian BBQ
Rare Beauty
Solventum
StepStone Group
Transamerica
Weil, Gotshal & Manges LLP
Workday Foundation

\$25,000

Anonymous (1)
ACBL Charity Foundation
Akin Gump Strauss Hauer & Feld,
LLP

Applavin Corp
Armanino Foundation
AstraZeneca
Banc of California
Best Best & Krieger LLP
Duly Health and Care Charitable
Fund
Empyrean Capital Partners, LP
Evercore
FitOn
Grifols USA
Integra LifeSciences Corporation
J. L. Durland Company
Maravai Lifesciences
The Morrison & Foerster
Foundation
Northern Trust Company
Oilstop Drive Thru Oil Change
Pura Vida (Vera Bradley)
Sonos
Sony Corporation of America
Starker Forests
Sullivan & Cromwell LLP
Tencent America
Thrive Causemetics
Zapier

\$10,000

Anonymous (1)
AbbVie
American Society of Nephrology
Ana Luisa Jewelry
Andersen Tax
Beauty 21 Cosmetics
Bundle of Holding, LLC
Capital Power (US Holdings)

The Chartis Group LLC
Consumer Technology Association
Curbstone Financial Management
Corporation
Cydcor LLC
Dexcom
ElmTree Funds
Everence
Fess Parker Winery & Vineyard
Love, Tito's
Google
Houghton Chemical Corporation
Intuitive
Lifeplus Foundation
The Medline Foundation
Microsoft Corporation
Millerknoll
Morgan Stanley & Co.
MSC Industrial Supply
Nasdaq
Partner Engineering and Science
Patagonia.com
Penumbra, Inc.
PRICH Biotech Corp.
Raymond James Charitable
Endowment Fund
Reiter Affiliated Companies
Spirent Communications
Tom's of Maine
Universal Music Group
Vinson & Elkins L.L.P.
Vyuh Inc.
W. Bradley Electric
The Wonderful Company
Zimmer Biomet Foundation
Zoom Video Communications

STRATEGIC FOUNDATION PARTNERSHIPS

[FY 2025]

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

44 North Foundation, Inc.
The Aall Foundation
The Adrian Family Foundation
The Ahlsten Foundation
The American Gift Fund
AMG Foundation
The Annenberg Foundation
Micky and Madeleine Arison Family Foundation
The Arvey Foundation
Astellas USA Foundation
Ayco Charitable Foundation
The Ayudar Foundation
The George and Dorothy Babare Family Foundation
The Barba Family Foundation
Bender West Foundation
Biella Foundation
Big G Charitable Foundation
Robert and Joan Blackman Family Foundation
Bluebird Legacy, Inc.
The Boston Foundation
David W. Buck Family Foundation, Inc.
Kim and Andrew D. Busch Family Foundation
Calligan Family Foundation
Johnny Carson Foundation
Chicago Community Trust
Cole-Crone Family Foundation, Inc.
The Community Foundation for Greater Atlanta, Inc.
Cooper Family Foundation
Crown Family Philanthropies
Roy R. and Laurie M. Cummins Fund of The Oregon Community Foundation
D'Augustine Foundation
The Denver Foundation
Dingman Family Foundation
Roy and Patricia Disney Family Foundation
Susan Lynde Duval Phipps Foundation
The Echlin Foundation
The Erie Community Foundation
Farvue Foundation, Inc.
First Dollar Foundation
Mary Alice Fortin Foundation, Inc.
Fredman Family Foundation
The Giles Family Foundation
The Goodman Family Foundation
Greater Horizons
The Green Foundation
The Haddock Stanton Foundation
The Hailey Family Foundation
The Handlery Foundation
The Harrison Foundation
The Harvey Hubbell Foundation
Head Family Charitable Foundation
Health Carousel Foundation
The Hearst Foundations
The Hexberg Family Foundation
Hickey Family Foundation
Hilltop Foundation
Conrad N. Hilton Foundation
Hodder Family Foundation
Holdfast Collective
The Ilsababy Foundation
Ingram Family Foundation
Irfan Foundation
Jadetree Foundation
Jerome Foundation
George Frederick Jewett Foundation East
Grace Jones Richardson Testamentary Trust
The Kauffmann Family Foundation
Kay Family Foundation
W. M. Keck Foundation
The Kind World Foundation
Kinnie Family Foundation
Kirsh Philanthropies
Levin Family Foundation, Inc.
The Linden Family Foundation
The Liu 1992 Family Trust
The Longhill Charitable Foundation, Inc.
The Luminescence Foundation, Inc.
The Helen and Rita Lurie Foundation
Manitou Fund
The Page and Otto Marx Jr. Foundation
Steven and Laura Mayer Family Foundation
Keith and Mary Kay McCaw Family Foundation
Methodist Health System Foundation, Inc.
The Miami Foundation
Mirapaul Foundation
The Cynthia and George Mitchell Foundation
MKM Foundation
Mr. Owl Foundation
Spencer Murfey Family Foundation
Cecile H. Murphy Charitable Foundation
MusiCares
Napa Valley Community Foundation
Neupert Family Foundation
Norman Raab Foundation
The Overall Family Foundation
Pacer Foundation
The Ralph M. Parsons Foundation
Point of View Foundation
Anthony and Jeanne Pritzker Family Foundation
Providence Foundation
Raintree Foundation
Anita B. & Howard S. Richmond Foundation, Inc.
RJA Foundation
Rock Paper Scissors Foundation
The Rose Hills Foundation
Rosenbaum Family Foundation
Jack Rudin Family Foundation
The R. J. Salerno Foundation
Santa Barbara Vintners Foundation
The Santreece Foundation
Savusavu Community Foundation
Ethel Josephine Scantland Foundation, Inc.
The Scoob Trust Foundation
Scott Family Fund
Adam R. Scripps Foundation
The Daphne Seybolt Culpeper Foundation, Inc.
Shaker Family Charitable Foundation
Shoresh Foundation
SKL Family Foundation
The Skoll Foundation
John F. Smiekel Foundation
Smith Family Legacy Foundation
Sojourner Fund
The Solstice Foundation, Inc.
Spur Community Foundation
Steinmetz Foundation
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[FY 2025]

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Healthcare providers at St. Charles Hospital and Maternity in Nigeria completed the pilot phase of the ValueHer Initiative, hosted by the U-VOL Foundation and supported with Midwife Kits from Direct Relief. Professional healthcare training entailed intensive hands-on training sessions in advanced maternal and neonatal care. (U-VOL Foundation)

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Diva, a Belgian Malinois, trains with her handler, Cory Baldwin, at the National Disaster Search Dog Foundation training center. Dogs and handlers trained at the foundation are a critical part of disaster response and have deployed all over the world. Direct Relief provided the National Search Dog Foundation with \$25,000 to support its work to strengthen California's disaster readiness by training new search dogs and handlers to locate survivors and respond effectively to emergencies. (SDF)



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[FY 2025]

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(David Uttley/Direct Relief)



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Vincent Chen	The Faust Family Charitable Fund	Mohamed Hafez	Robert Lane Kauffmann	Grace Marroquin



Through its Power for Health initiative, Direct Relief provided 12 Tesla Powerwalls (158 kWh storage) to Diabetes Youth Families - Bearskin Meadows Camp, located in the Sequoia Mountains in California. The system serves as backup power for the entire camp, including the kitchen and medical cabin. DYF serves more than 1,500 individuals annually (children and teens with diabetes, siblings, parents and guardians) through resident camps and recreation programs. (DYF, BMC)

Siri and Bob Marshall	Yoshinori and Akiko Nagase	Ms. Lois M. Rozet	The Stern Family Foundation	Dieter and Jennifer Vandenbussche
James Massie	Ken and Molly Nealson	David and Anne Rubin	Jennifer Stevenson	Dr. and Mrs. Dan Vapnek
Matthew and Tami Matias	Neupert Family Foundation	David Rubin and Sara G. Rubin	Larry and Cherie Stolzenburg	Vonnie J. Varner
Lucia Teresa Mauer	Mark and Jo Ann Newell Fund	Charitable Remainder Unitrust	Ms. Jill A. Stone and Mr. Kurt Hogleund	Andy Vella / Vella Family Fund
George and Diane Mauser	Mr. and Mrs. Steve Newman / Steven and Lenore Newman Family Foundation	Ralph G. Ryan	Judith and Jerry Stone	Arjun Vishwanath
The Maxwell-Troxell Family Foundation	Newman Family Fund	Jane and Ricci Saeger	Katherine Stookey	Volentine Family Foundation
Steven and Laura Mayer Family Foundation	Phuong Nguyen	Charlotte Sakai	John R. Stratton MD and Carolyn Webster-Stratton	Kreszenz Wagner
The McAuliffe Family Charitable Fund	The Ochoa Family Fund	Peter Salanki	Nanette Straw	Jeanne Marie Wallace MD
Mr. and Mrs. Bruce McBroom, Jr.	Peggy Odendahl	The R. J. Salerno Foundation	Street Family Foundation	Samuel and Sue Wallick
Pamela McCabe	John Ogunkey	Jeffrey and Maryam Salon	Thomas L. Strickland	Mr. and Mrs. Paul F. Walter
Martha McClatchey	William Okerlund	Bhagwant S. Samyal	Thomas and Heather Sturgess	Francis Wang
Michael McDonald	K&E Oliver Family Fund	The Sanchini/Tobey Charitable Donations Fund	Suggs Family Foundation	Philip Wang
Patricia McDonnell	Mr. and Mrs. Ronald L. Olson / Ronald & Jane Olson Foundation	The Santreze Foundation	Ian Sullivan	Victor and Brooke Wang
Doneen and Charles McDowell	Rev. Andrew Zitelli Orange County Bible Fellowship	Saraswat Giving Fund	John Sweet	The Warburg Pincus Foundation
Thomas McDowell	Ms. Gail Osherenko and Oran Young	Ethel Josephine Scantland Foundation, Inc.	Marc and Pauline Sylvain	Mitch Ward
Mr. James J. McGonigle / The McGonigle Family Charitable Fund	Ross Osterman and Jennifer Sauer	Dodie M. Schadeck	Stephanie Szakal Charitable Account	Stephen R. Ward Charitable Fund
Hilary McIntyre	The Overall Family Foundation	Mark Scher	Rita Taggart and Keith Taggart	Leo and Sydelle Ward Foundation
Mr. and Mrs. Leo J. McIntyre	Pacer Foundation	Will Schlegel	Alan Tam	Michael Waski
Arnold McKinnon	Alana Pallister	Neal Schmidt and Adrienne Meisler	Donald B. Tanklage and Carole F. Tanklage Foundation	Alan Tam
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Harry and Jacqueline McMahan / The Jacqueline and Harry McMahan Family Fund	Ross Parke	Mr. and Mrs. Howard Schneider	Laura J. Techentin	Rodney Webb
Eric McPherson	Mr. and Mrs. Walter Parkes	Ms. Alice Schroder	Mr. and Mrs. Thomas Tella II	The Webb Family Charitable Trust
Tim and Lacy Metcalfe	Robert Pattay	Julia Schuchard	Terumo BCT Charitable Giving Fund	Margery and James Weekes
The Miami Foundation	Marion G. Peters and Eric Brown	Edwin Self	Craig and Gayle Teuscher	Mr. Karl J. Weis and Mrs. Kristen V. Klingbeil-Weis
Christian Miles	Ms. Elisabeth H. Phillips	Terry J. Seng	Charlize Theron	Elizabeth M. Wells
Miller Hammond Charitable Fund	Janice A. Casazza-Piatak	The Daphne Seybolt Culpeper Foundation, Inc.	Thigpen Hill Family Fund	Samantha Weston
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Ryan Mitchell	Rachel Pollock	Suzanne and Frank Shaw	Grace Thomas	Paul White
The Cynthia and George Mitchell Foundation	Proverbs 3 9 Fund	Brenda Shellenbeger	Arlen and Margit Thomason	White Family Charitable Fund
Mr. and Mrs. Sanjit K. Mitra	Providence Foundation	Shepard Family Charitable Fund	Cheng Tian	Paul and Nivia Whyano
Simon Mochon	Aleksandra Radakovic	James H. Sherman	Donald and Denise Timmons Fund	John and Lacey Williams
Jessica Mondia	John Rahn / The Rahn Family Charitable Fund	Cynthia Shevel	George Timms, Jr.	Mr. and Mrs. Stephen R. Wilson
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W. Thomas Morgan III and Rebecca Alexander	Dale Reiger and Teri Jo Summer-Reiger	Benjamin Singer	Quoc Ton	Ms. Marianne Witte
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Ms. Sondra Morrill	John and Pamela Revette	Mr. and Mrs. Corey R. Smith	The Trailviews Foundation	Rod C. Wood
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Mr. Dave Mowery	Mr. and Mrs. Charlie Rikel	Smith Family Legacy Foundation	Dr. Jitendra K. Trivedi and Mrs. Nivedita Trivedi	Martha Wright
Mr. Owl Foundation	Carol Ritter	Matthew Socha	Johnny Tsai	Mr. and Mrs. George S. Writer, Jr. / The Writer Family Foundation
Brian Mueller	RJA Foundation	Jennifer Sohn	The Terry & Linda Tuck Foundation	Margaret L. Wrobel
Gerald Mullinax	Hayden Robinson	Sojourner Fund	The Turpin Family Charitable Foundation	Alan and Irene Wurtzel
Mr. Larry Mullinax	Jeffrey and Wendy Robinson	Mr. Van Spaulding	Sue E. Sperger	XCZ Fund
Spencer Murfey Family Foundation	Joe and Maggy Robinson	Sue E. Sperger	Spur Community Foundation	Qing P. Xiu
Arunachalam Murugan	The Rodriguez Family Fund	Matthew Socha	Sondra Stallard	The William Zimmerman Foundation
Ms. Jane Nadeau	Rothschild Family Fund	Jennifer Sohn	Suzanne Steinkamp	Barbara Zotz
		Sojourner Fund	Steinmetz Foundation	Mr. Bob Zuckerman
		Mr. Van Spaulding	Mark Sten	
		Sue E. Sperger	Eunice M. Stephens	
		Spur Community Foundation		
		Sondra Stallard		
		Suzanne Steinkamp		
		Steinmetz Foundation		
		Mark Sten		
		Eunice M. Stephens		



Direct Relief's Dr. Hande Arpat Çakır visits a physiotherapist at the newly built Hatay Medical Chamber Mobile Physiotherapy Clinic. Rehabilitation continues to be a top health priority in Turkey after the 2023 earthquake, and the Hatay Medical Chamber has opened a mobile physiotherapy unit in Hatay, the only free clinic with such services locally. Direct Relief is supporting these efforts with financial aid. (Ali Saltan/Direct Relief)

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.

William S. Burtness

Manuel L. Carlos

Charles C. Fenzi

Tara Holbrook

Rita Moya

GUIDING PRINCIPLES

SERVE PEOPLE

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.

