



**YOUR
SUPPORT
& HOW IT
WAS USED**



FISCAL YEAR 2022 ANNUAL REPORT

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Cover photo: Direct Relief volunteers deliver hygiene kits and solar-powered lights during a health fair in the community of Las Carmelitas in Ponce, Puerto Rico, alongside partner organization, the Ponce Medical School Foundation. (Xavier Garcia/Direct Relief)



Emergency Medical Backpacks departed Direct Relief's warehouse on March 1, 2022, bound for Lviv, Ukraine. The backpacks, which contain medical essentials for triage care, were requested by Ukraine's Ministry of Health. (Lara Cooper/Direct Relief)



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

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 Direct Relief
GLOBAL DISTRIBUTION CENTER
SPONSORED BY 

Forty-four tons of medical aid bound for Ukraine departed from Direct Relief's warehouse on June 17, 2022. The shipment will travel to Ukraine on the second charter flight donated by FedEx in response to the conflict. (Lara Cooper/Direct Relief)

RICHARD D. GODFREY

1935 - 2021

THIS REPORT is dedicated to former board chair Richard ‘Dick’ Godfrey, whose extraordinary spirit, encouragement, guidance, and humor were a beacon of light for Direct Relief and all those it serves. He had an uncommon generosity, inspiring sense of the possible, and infectious personal kindness—all of which served to better the organization, help those that it serves, and promote the interests of all those who participate in the organization’s mission.

BOARD OF DIRECTORS

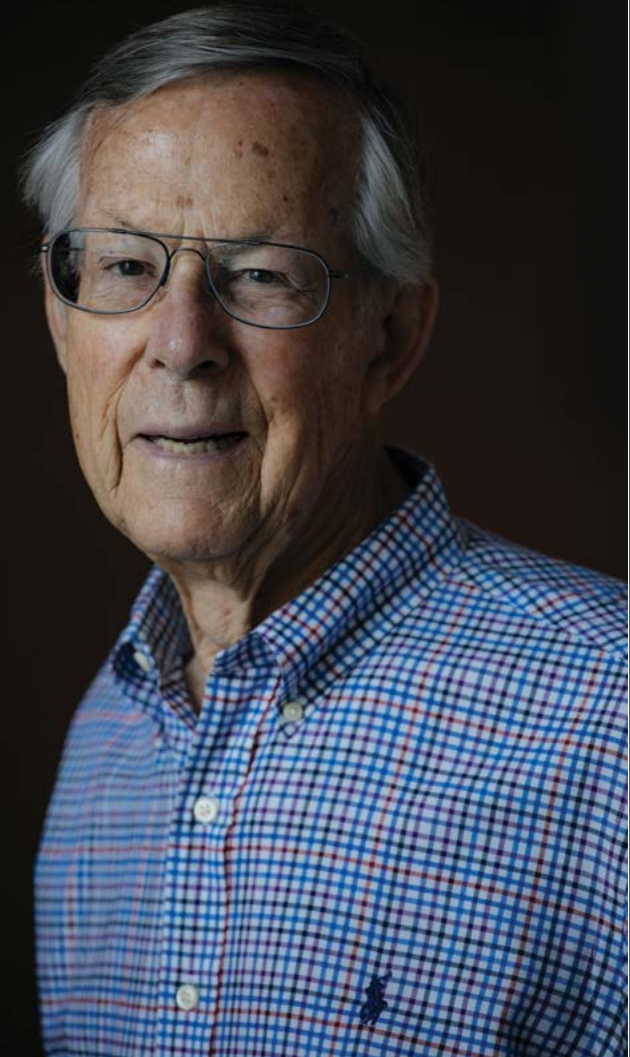
1999; 2003 - 2005; 2007 - 2010

BOARD CHAIR

2000 - 2002

CHAIR EMERITUS

2011 - 2021



A RECORD YEAR OF EXPANDING ACCESS TO **QUALITY** **HEALTHCARE** FOR PEOPLE AROUND THE WORLD

[FISCAL YEAR 2022 IN REVIEW]





Direct Relief facilitated the donation of 3.5 million AstraZeneca Covid-19 vaccine doses from U.S. Govt. to Mexico. The flight took place between Memphis, Tennessee, and Toluca, Mexico, on October 19, 2021.

(Photo by Andrea Tejeda for Direct Relief)

FY 2022 MATERIAL ASSISTANCE

\$1,900,000,000

in specifically-requested medicines and medical supplies

444,900,000

in Defined Daily Doses of medicine

6,300

tons of pharmaceuticals, medical supplies, and medical equipment delivered

20,497

deliveries to healthcare providers

97

countries

50

U.S. states

2

U.S. territories



\$2 BILLION IN TOTAL AID PROVIDED

First responders across Puerto Rico were given Direct Relief's Emergency Medical Backpacks to aid in emergency response.
(Courtesy photo)



\$57 MILLION
IN GRANTS
DISTRIBUTED

Dr. Nancy Dao (right), PharmD, Clinical Pharmacy Manager evaluates a patient at the Direct Relief-supported Sharing Our Selves (SOS) in Costa Mesa, California.



“Direct Relief was created out of the ashes of WWII by Europeans who fled. It’s stunning and sad that humanitarian assistance is needed again in the same neighborhood, but it’s consistent with our organization’s roots, initial focus, and longstanding mission.”

- THOMAS TIGHE, DIRECT RELIEF PRESIDENT & CEO

DIRECT RELIEF DEPLOYED
750 TONS OF MEDICAL
AID & **\$14.7 MILLION** IN
FINANCIAL ASSISTANCE
TO UKRAINE

(Oscar Castillo for Direct Relief)

UKRAINE RELIEF

DIRECT RELIEF deployed urgently needed medical aid directly to **Ukraine's Ministry of Health**, with which it has a standing agreement, and to other on-the-ground organizations in Ukraine and throughout the region.

Assistance included trauma kits, cancer drugs, insulin, antidotes used in chemical attacks, and other critical medicines to the Ministry of Health and other healthcare providers.

Direct Relief has also supplied the Ukrainian Ministry of Health with hundreds of field medic packs for first responders working in the field and dealing with injuries, trauma, infections, and other acute medical needs.

1 Forty-four tons of medical aid bound for Ukraine departed from Direct Relief's warehouse on June 17, 2022. The shipment went to Ukraine on the second charter flight donated by FedEx in response to the conflict. (Lara Cooper for Direct Relief)



2 3 Direct Relief supported Project Joint Guardian, an international nonprofit organization made up of firefighters, with a \$50,000 grant to transport first responders to Ukraine and help them purchase needed equipment. The organization also supplied the firefighters with Emergency Medical Backpacks intended for triage care, and shipped equipment to the region on their behalf. (Photo courtesy of Project Joint Guardian)

4 Emergency medical shipments arrive at a hospital located in central Ukraine on March 15, 2022. The shipment went to Ukrainian NGO Charity Fund Modern Village and Town, which distributes medical aid to communities on the frontlines of the conflict. The shipment included field medic backpacks, inhalers, essential medicines, oxygen concentrators, and personal care items for people displaced by the conflict. (Photo courtesy of Charity Fund Modern Village and Town)

DIRECT RELIEF
DELIVERED AID TO **20
OF 24 UKRAINIAN
OBLASTS (REGIONS)**
+ BORDERING
COUNTRIES POLAND &
MOLDOVA

Supported groups distributed aid
to 400 hospitals & clinics

Ministry of Health, Ukraine
Polish Ministry of Health

Fondation Humanitaire
Internationale AICM
Ukraine

Kharkiv City Council

Charity Fund Modern
Village and Town

City Center for
Humanitarian Aid,
Information and Economic
Support

Charity Fund "TAPS"

Ukrainian Association of
Nephrologists Nephrology
Center

Chernivtsi City Charitable
Fund "Myloserdia"

Baranova 27 Village Clinic
Kharkiv Renovation Fund

Kyiv City Center of
Nephrology & Dialysis

Ministry of Health of the
Republic of Moldova

Amosova Hospital

National Cancer Institute
of the Ministry of Health of
Ukraine

Charitable Fund
Humanitarian Hub
"Zhytomyr"

Razom for Ukraine

U.S. & Mexico Firefighters
United

Ukraine Association for
Pediatric Endocrinologists

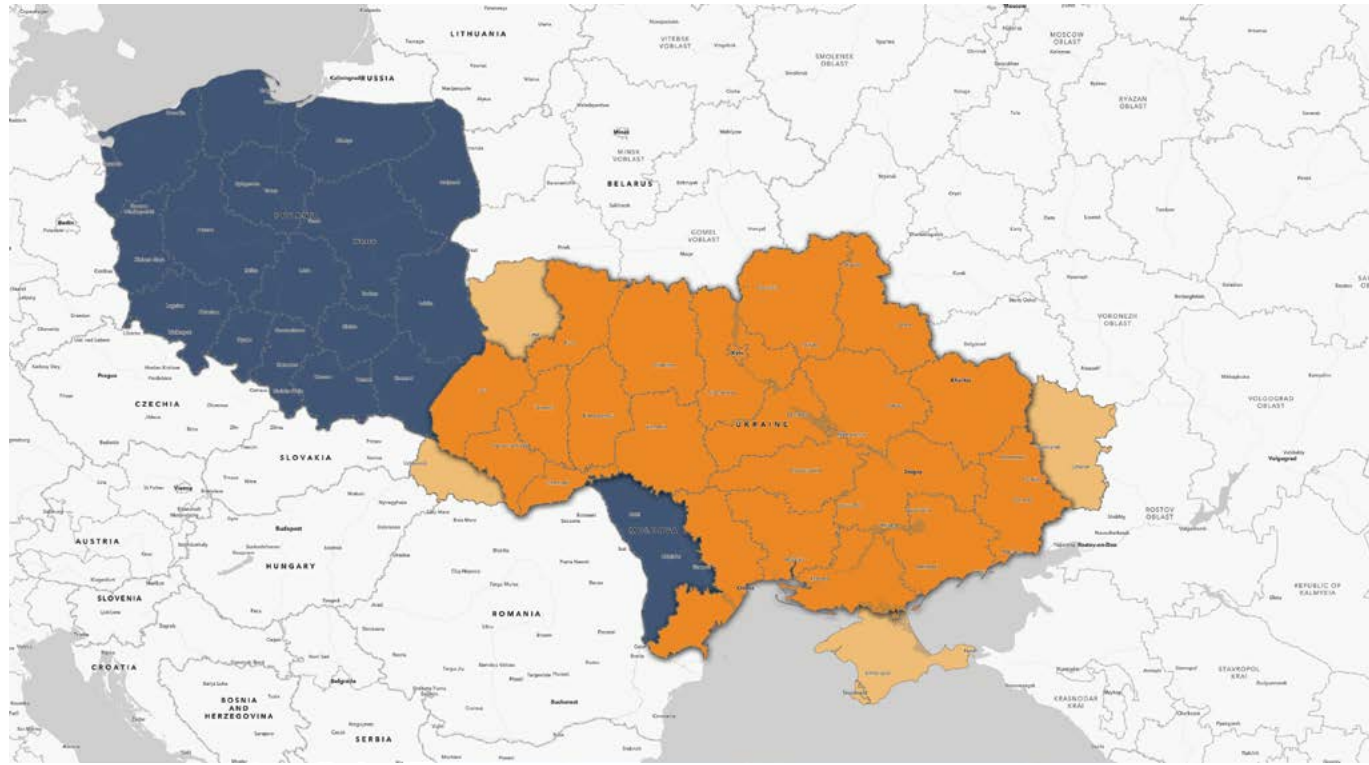
Ukraine Diabetes
Federation

Polski Czerwony Krzyz
Polish Red Cross

Chernivtsi Regional
Charity Foundation
"Viktoriiia"

MN Dobrobut

Reach Out Worldwide



A field hospital, donated by the State of California Office of Emergency Services and transported by Direct Relief, was deployed in eastern Ukraine to support medical needs. Seven such hospitals were transported by Direct Relief, each containing supplies needed to support 50 patients with care. This hospital's deployment was coordinated by TAPS Ukraine. (Photo courtesy of TAPS Ukraine)



IV fluids arrive in central Ukraine to support local hospitals in 2022. (Photo courtesy of Charity Fund Modern Village and Town)



Seventy-six tons of Direct Relief-donated medical aid via FedEx 777 charter plane landed in Warsaw, Poland, on March 27, 2022. The aid was transported to Ukraine. (Photo courtesy of FedEx)

FY 2022 ASSISTANCE TO UKRAINE

\$408,500,000

in specifically-requested medicines and medical supplies

137,900,000

in Defined Daily Doses of medicine

\$14,700,000

in financial assistance

750

tons of pharmaceuticals, medical supplies, and medical equipment delivered

98

emergency shipments

400+

hospitals & clinics

DIRECT RELIEF RECEIVED
\$83 MILLION FOR UKRAINE FROM PEOPLE
 IN **79 COUNTRIES**,
 INCLUDING UKRAINE
 & RUSSIA



IN MEXICO

17 MILLION COVID-19 VACCINE DOSES TO MEXICO



DIRECT RELIEF bolsters access to quality health resources for institutions in Mexico that serve the most vulnerable people in communities. By leveraging support from private individuals, foundations, and corporations, Direct Relief has created a safe and effective ecosystem for charitable giving in Mexico. As the only humanitarian wholesale distributor of pharmaceuticals operating in Mexico that is fully compliant with COFEPRIS regulations, Direct Relief can receive in-country and process internationally donated goods and is positioned to respond to both immediate public health needs and long-term healthcare service needs in underserved communities.

2.7 million Moderna Covid-19 vaccines arrive in Toluca, Mexico. The donation of vaccines from Moderna to the Government of Mexico was supported by Direct Relief. FedEx provided transportation for the shipment. (Photo by Aintza Udaeta for Direct Relief)

IN FY 2022

9,000,000

units of PPE delivered to 150+ hospitals in Mexico



ONE OF THE LARGEST PRIVATE PROVIDERS OF ASSISTANCE TO MEXICO DURING COVID

Roberto Velasco Álvarez
@r.velasco

Gracias al Gobierno de 🇺🇸, a @DirectRelief, a @FedEx y a todos los equipos de ambos países que participaron para que hoy hayamos recibido más de 10 millones de vacunas como parte de los acuerdos entre el presidente @lopezobrador_ , @POTUS Y @VP.

Translated from Spanish by Google

Thanks to the Government of 🇺🇸 , @DirectRelief , @FedEx and all the teams from both countries that participated so that today we have received more than 10 million vaccines as part of the agreements between the president @lopezobrador_ , @POTUS and @VP .

7:17 AM · Oct 19, 2021

1 In January 2022, Direct Relief facilitated a donation of PPE to the IMSS Foundation in Mexico. Financed with support from the Coca-Cola Foundation, the delivery included 10,809 boxes of gloves and 66,000 N95 masks which arrived at the Instituto Mexicano del Seguro Social, or IMSS, to protect health professionals against Covid-19 as they treat patients. (Courtesy photo) 2 1,500 masks, 500 protective goggles, 20,000 KN95 masks, as well as 4,250 surgical gowns were donated to the Civil Hospital of Guadalajara in Jalisco, Guadalajara by Direct Relief on October 8, 2020. (Photos courtesy of Miguel Osorio Aguilar) 3 Mexican officials, including speaker Roberto Velasco Alvarez, Chief Officer for the North America Unit at the Mexican Secretariat of Foreign Affairs, and Direct Relief’s Eduardo Mendoza were on-hand for the airlift arrival of 3.5 million Astra Zeneca vaccine doses to Mexico. (Courtesy photo) 4 Direct Relief and the Instituto Mexicano del Seguro Social, or IMSS, were honored by the Mexican government in October 2021. (Alan Romo for Direct Relief)

A patient receives care at a Direct Relief Health Fair at Community Las Carmelitas in Puerto Rico in December 2021. (Xavier García/Direct Relief)



Strengthening the cold chain in the Caribbean for emergency preparedness and response

STORM ACTIVITY and poverty continue to grow in frequency and intensity in the Caribbean, with widely distributed humanitarian consequences. Health centers in the region have limited capacity to store medicines that are needed immediately after disasters and through long-term recovery, including insulin, vaccines, and other temperature-sensitive therapies.

These critically needed medicines require specialized cold storage and handling, which is often lacking throughout the region and relies on back-up power that may not exist or a power grid that may be devastated in an increasingly common and powerful event like a hurricane.

Direct Relief has drastically expanded its medical material and cold chain support to health centers around the world in 2021, including the launch of the **CARIBBEAN COLD CHAIN INITIATIVE** to scale up reliable energy and cold chain capacity in the region.

Cold chain pharmaceutical products require precise handling, while in transit and at rest, and are sensitive to variations in temperature (typically kept between 2 and 8 degrees Celsius), humidity, and light. Direct Relief provided insulin in partnership with Life for a Child along with insulin delivery devices, blood glucose monitoring equipment, and testing supplies to meet the needs of 20,000 children in 32 countries in 2021. (Lara Cooper/Direct Relief)

PUERTO RICO: REGIONAL HUB FOR THE CARIBBEAN

400% INCREASE IN DELIVERIES FULFILLED FROM PUERTO RICO

Sent to Haiti, St. Lucia, St. Vincent & The Grenadines, and Dominica



NAVAJO NATION

\$1 MILLION IN COVID GRANTS FOR A VULNERABLE POPULATION DISPROPORTIONALLY AFFECTED BY HEALTH ISSUES AND POVERTY

SINCE THE BEGINNING OF THE PANDEMIC, Direct Relief has provided over \$1 million in financial assistance and over seven tons of medicines and supplies to the Navajo Nation Tribal health system. All Direct Relief donations, whether financial or medical, were made in consultation with Tribal leadership in advance, and directly supported the operations of the Navajo Nation Department of Health, the Fort Defiance Indian Hospital Board, Brigham and Women's Outreach Program with Indian Health Service, and Community Outreach and Patient Empowerment (COPE).

Medical aid, including PPE and Covid-related supplies, was sent to Navajo Nation Health Command Center at Chinle, Northern Navajo Medical Center, Gallup Indian Medical Center, Tséhootsooí Medical Center at Fort Defiance, United Natives Health Program, the Diné Hatathlie Association, and Navajo Nation schools.

Direct Relief's supporter, Together Rising, made an additional financial contribution of \$365,000 specifically to address the mental health needs of Tribal health care workers and support traditional healing.

¹ Amy Yeung (R) and Chenoa Bah in front of a map of the Navajo Nation. (Photo courtesy of Nate Lemuel / Darklisted Photography) ² Direct Relief CEO Thomas Tighe labels a shipment to Navajo Nation on June 17, 2022. Shipments bound for Navajo Nation departed Direct Relief's distribution center in response to the Haywire and Pipeline Fires. The deliveries included specifically requested N-95 masks, batteries for back-up power and personal care items for those displaced by the fires. (Lara Cooper/Direct Relief)





**800,000 BOTTLES
DELIVERED**

Prenatal vitamins distributed in 36 countries to improve micronutrient deficiency in pregnancy

SUPPORTING MATERNAL & CHILD HEALTH SERVICES

DIRECT RELIEF supports healthcare facilities across the U.S. and around the world to improve access to maternal care for women who are low-income or uninsured and who otherwise would not have access to care.

In the U.S., Direct Relief has launched a number of initiatives to reduce barriers to women accessing family planning services, including access to long-acting reversible contraception.

Internationally, supporting healthcare providers who are working to reduce the burden of maternal and newborn mortality has long been a focus of Direct Relief.

A Direct Relief-supported midwife with her patients in La Libertad, Peru. (Photo by Larry Rodolfo Campos Valeriano for the International Confederation of Midwives)



(Erin Feinblatt for Direct Relief)

**23,489 IUDS
DELIVERED**

To 50 U.S. states, D.C., Puerto Rico, & the U.S. Virgin Islands

MEDICINES360, a mission-driven women's health pharmaceutical nonprofit, provides the hormonal IUD, LILETTA®, free of charge through Direct Relief to clinics that serve the most vulnerable women in the United States, such as uninsured women. Medicines360 established an institutional patient assistance program (IPAP) known as the "IUD Access Partnership," with Direct Relief to provide IUDs to clinics that serve women who cannot obtain the product through private insurance, Medicaid, or other public funding.

The IUD Access Partnership enables increased access to IUDs, a form of long-acting reversible contraceptives (LARCs), which are among the most effective forms of family planning according to the CDC. This is all possible through Direct Relief's scalable program that delivers essential medical resources by working with pharmaceutical manufacturers and local healthcare providers.





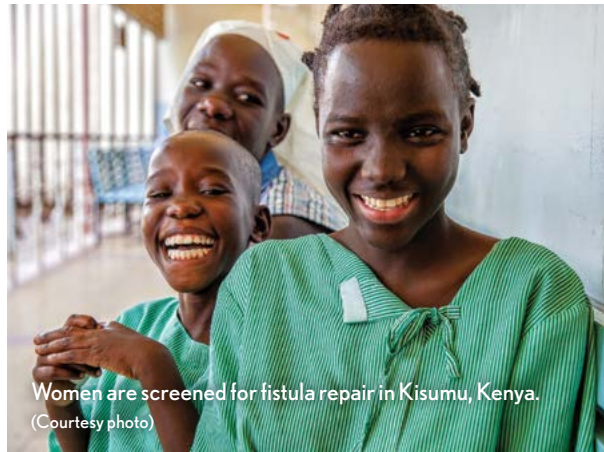
For pregnant patients, iron and other nutrient deficiencies pose a threat. These groups are fighting back.

Through funding from the life sciences company Bayer, as part of The Nutrient Gap Initiative, Direct Relief identified four California health centers working to address micronutrient deficiencies in pregnant patients. Each of these received a \$50,000 grant through dedicated Community Health Awards. The awards are intended to help fund or expand programs that work to improve pregnancy outcomes in medically underserved communities by educating patients or providing nutritional interventions.

At one of those groups, Camarena Health in Madera, CA, staff are developing an interactive program to teach pregnant patients about vital nutrients. Emily Valdez, a registered dietician, explained that some of the health center's patients are unable to read, and many have low health literacy. For that reason, she and her colleagues didn't want to simply give out information sheets about the importance of micronutrients.

"We're not just handing people a handout...but having an interactive education while they're there in the office with our educators," she said. Patients can learn about different micronutrients through sound features, and tap on foods containing high levels of a nutrient like folate. "I sometimes think with our patients less is more - giving them one or two things to take away," Valdez said.

A staff member at Family Health Centers of San Diego discusses nutrition with a pregnant patient. (Photo courtesy of Family Health Centers of San Diego)



Women are screened for fistula repair in Kisumu, Kenya. (Courtesy photo)

94 FISTULA REPAIR MODULES DELIVERED

To 16 countries, facilitating 4,700 surgeries

DIRECT RELIEF is committed to expanding the understanding and quality of obstetric fistula repair services for women affected by this devastating and debilitating health issue in low-resource communities around the world. Direct Relief has established partnerships with facilities performing fistula repair surgeries according to best practices and provided a reliable supply of the materials needed to conduct these life-restoring procedures. The Obstetric Fistula Repair Module developed by Direct Relief—and endorsed by the International Federation of Gynecology and Obstetrics (FIGO)—to ensure that surgeons and other healthcare professionals are provided with high-quality, standardized, items necessary to perform fistula repair surgeries.

28,600 SAFE BIRTHS

335 midwife kits & 237 replenishment kits distributed to 13 countries

THE BEST WAY to keep mothers safe is to make sure every birth is accompanied by a trained and equipped professional. Midwives are the first line of assistance, providing high-quality care during routine deliveries, managing basic complications, and recognizing when to refer a mother to emergency obstetric care. But they can only do their work if they have the right tools.

To equip midwives with the resources they need to provide life-saving antenatal, delivery, and postpartum care, Direct Relief developed its midwife kit, which the International Confederation of Midwives has endorsed as a standard for midwives trained to ICM's competency standards.



(Erin Feinblatt for Direct Relief)

THE FUND FOR HEALTH EQUITY

\$20 MILLION DISTRIBUTED IN 100 GRANTS

DIRECT RELIEF'S FUND FOR HEALTH EQUITY was created to increase access to health care and improve health outcomes for marginalized communities.

These communities have long experienced worse health outcomes and are less likely to receive the medical care they need. That's true of people of color, LGBTQ+ individuals, people experiencing homelessness, and others as well. These striking injustices are one of the modern-day effects of a long history of discriminatory practices, policies, and traditions.

Through the Fund for Health Equity, Direct Relief is funding on-the-ground organizations addressing health inequities. These groups have deep ties in the communities they serve and are working to diversify the healthcare workforce, eliminate health disparities, and employ technology to make healthcare more accessible and reliable to their patients. Factors such as education, employment, income, family social support, community safety, air, water, housing, transit, and behaviors all contribute to poor health outcomes and will be addressed by groups receiving funding.

Healthy Mothers Healthy Babies Coalition of Hawaii Midwife Pennie Bumrungsiri weighs a newborn in one of the organization's mobile clinics. The organization will be expanding care services to families and newborns with support from the Fund for Health Equity. (Photo courtesy of Healthy Mothers Healthy Babies Coalition of Hawaii)



IN CENTRAL FLORIDA, A NEW PROGRAM AIMS TO INCREASE HEALTH EQUITY

Shepherd's Hope's Healthy Education Active Lifestyle program will teach a primarily Black and Latino population to successfully manage chronic conditions like diabetes and hypertension

A DIAGNOSIS OF DIABETES can stop someone in their tracks, according to Constance Brown.

"Imagine if you get a diagnosis like diabetes. You can be overwhelmed trying to figure out what your next steps will be, and how to take ownership of your medical care," said Brown, the clinical director at Shepherd's Hope, Inc., the largest free clinic in central Florida. Brown said small lifestyle changes can make a significant difference – and keep patients healthy and out of the emergency room.

Shepherd's Hope, which serves primarily Black and Latino patients, recently announced the launch of a new pilot program, Healthy Education Active Lifestyle (HEAL), designed to address the health needs of individuals with severe chronic illnesses. The program is focused on increasing access to healthy foods while teaching patients how to manage their health better.

A new teaching and commercial kitchen is a major part of the program, along with a community garden and micro-farm. "We see [the teaching kitchen] as both a teaching tool and prescription for health," Brown said.

In addition, the clinic's staff is partnering with area food pantries to develop healthy food for patients in the program, who often experience food insecurity. Clinic staff will offer people enrolled in the program containers for the healthy portioning of tools and glucose strips to support daily diabetes monitoring. Each patient makes a six-to-eight-week commitment to completing the program and is supported and tracked by a case manager to ensure consistent participation.



"We see [the teaching kitchen] as both a teaching tool and prescription for health."

- CONSTANCE BROWN, SHEPHERD'S HOPE CLINICAL DIRECTOR

Direct Relief's Fund for Health Equity is supporting Shepherd's Hope's HEAL program with \$250,000 in funding, designed to help with operating costs and expenses related to the building of the teaching kitchen.

While media focus over the past two years has been on the direct health impacts of Covid-19 infections, chronic health issues were prevalent in communities of color even before the pandemic. The two aren't disconnected, either – national data shows that Black and brown people with chronic illnesses were more likely to be seriously affected by Covid-19.

That's why there's a sense of urgency in launching HEAL, which is expected to be fully operational in 2022 – because treating diabetes, obesity, and high blood pressure is a significant part of the comprehensive health services that Shepherd's Hope provides. Nearly 70% of Shepherd's Hope patients are Black or Latino, and many have health conditions that put them at high risk for heart disease and stroke. According to CEO Pam Gould, one in four people living in the area the clinic serves don't have health insurance, "due to job loss, financial hardship, or unforeseen crisis."

To complicate matters, "many of our patients have a real fear of

institutional care," Brown said.

The fears are complicated by a large population of undocumented individuals and families with limited resources and medical care access. "Shepherd's Hope works to get and keep them in care," Brown explained. "We don't ask the tough questions that might keep them away from getting the support they need."

The HEAL program will address the systemic lack of healthy food and education programs in the area and will be a significant part of Shepherd's Hope's continuum of care.

While programs like HEAL are becoming more common, they're a remarkable achievement at free and charitable clinics, which rely on volunteers and operate on skeletal budgets. "Many of our volunteer doctors are retired, and others come in and see patients before or after they go to their own practices," Brown said. The clinic has also tapped into the services of interns and medical students. Shepherd's Hope's four locations have case managers, a medical records department, and a lab.

Shepherd's Hope staff members check in with patients outside a clinic. (Photo courtesy of Shepherd's Hope)



HERE
ARE
3
WAYS
DIRECT RELIEF IS
STRENGTHENING
COMMUNITY HEALTH >>

MORE THAN MEDICINE

FOR YEARS, health workers have shared with Direct Relief that strengthening health systems in their communities requires more than medicine. Direct Relief has broadened its offerings to healthcare facilities to include infrastructure, storage, and operational improvements.

When Hurricane Fiona struck Puerto Rico, solar power and battery storage installed in recent years at 8 health centers, 33 community wells, and 2 solar laundries in partnership with Direct Relief remained functional throughout the island-wide blackout. (Courtesy photo)

1 POWER FOR HEALTH

WITHOUT POWER, critical health services can't be provided – lifesaving medicines go bad, electronic health records can't be accessed, essential medical equipment can't be powered, and vital community health facilities serving the most vulnerable shut down.

In response to the demand by health centers and clinics for resilient power solutions, Direct Relief launched Power for Health. The program strengthens renewable and reliable energy sources among clinics vulnerable to disasters. Withstanding storm impacts and other power shutoff ensures uninterrupted operations during emergencies and power outages.

In Fiscal Year 2022, Direct Relief-funded solar and backup battery installations were launched at 21 health-care facilities in California, Louisiana, and North Carolina.

It's another example of Direct Relief filling systemic gaps in health care by addressing sustainability issues including climate change while advancing health equity in medically vulnerable communities.



Bosque Modelo trainees receive instruction at a solar installation site in Puerto Rico. (Photo courtesy of Solar Responders)



2 EXPANDING COLD STORAGE

MEDICINES SUCH AS INSULIN, vaccines, and cancer therapies are temperature sensitive. Many nonprofit healthcare organizations are extremely limited in the cold storage capacity needed to receive and manage these supplies vital to providing lifesaving care.

Direct Relief has grown its cold chain capacity in recent years, increasing its ability to provide temperature-sensitive medications to healthcare providers globally. A dependable and secure cold chain is an increasingly important part of medical logistics and represents an increasing share of anticipated production among partner pharmaceutical companies.

In Fiscal Year 2022, Direct Relief shipped \$650 million worth of medical material aid in cold chain deliveries.

❏ Cold-chain medical aid bound for western Kentucky in the wake of tornadoes in December 2021. The aid included insulin, TDAP vaccines, antibiotics, vitamins and other items requested by ARcare, a federally qualified health center using the supplies to care for displaced people in Mayfield, Kentucky. The organization received an earlier shipment from Direct Relief for use in a mobile health unit providing health services at a shelter housing 75 people. With much of the area still lacking power, Direct Relief was also able to ship portable solar generators to Second Christian Church in Mayfield that was acting as a donation distribution point for the town. (Lara Cooper/Direct Relief) ❏ Oxygen from Direct Relief being put to use in Nepal’s Dhulikhel Hospital. (Photo courtesy of Dhulikhel Hospital) ❏ Oxygen concentrators at Direct Relief’s California headquarters for delivery to Covid-19 impacted areas across the globe. (Lara Cooper/Direct Relief)

3 BOLSTERING OXYGEN SUPPLY

IN COMMUNITIES AROUND THE WORLD, surges during the Covid-19 pandemic highlighted gaps in access to medical-grade oxygen at local healthcare facilities serving the most vulnerable people. Over the past two years, Direct Relief has ramped up its efforts to work with healthcare facilities and nonprofits to address these needs.

In Fiscal Year 2022, Direct Relief distributed 34,678 oxygen concentrators to healthcare providers in 63 countries. Direct Relief also committed \$16.2 million to procure oxygen concentrators and will build or repair seven oxygen generation plants in India, Nepal, Dominica, Syria, Indonesia, and Madagascar.



Medical aid departs for Haiti from Direct Relief's warehouse on Oct. 25, 2021. (Lara Cooper/Direct Relief)

HOW DIRECT RELIEF WAS FUNDED

[FY 2022]

Nongovernmental, nonsectarian, and not-for-profit, Direct Relief provides assistance to people and communities without regard to politics, religious beliefs, or ethnic identities. Direct Relief relies entirely on private contributions.

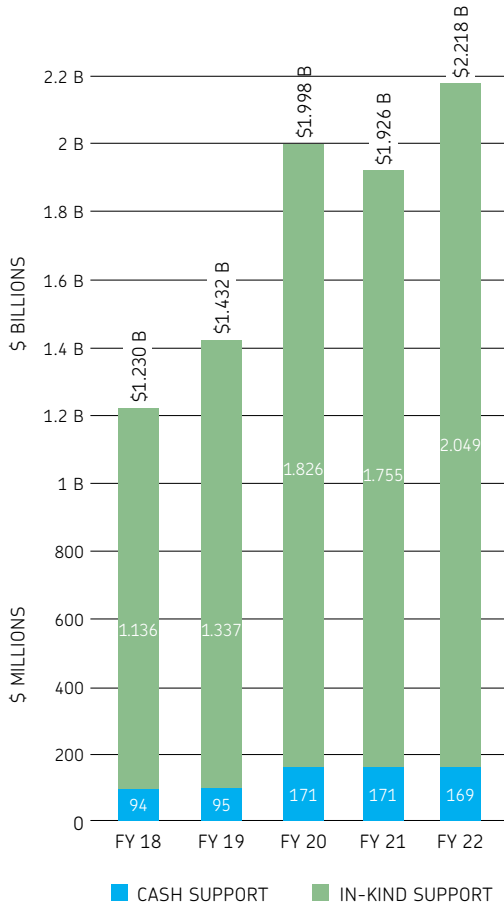
In Fiscal Year 2022 (July 1, 2021, through June 30, 2022), individuals, companies, and foundations gave in-kind and cash contributions to Direct Relief. Businesses and organizations provided products and expertise needed and leveraged for humanitarian purposes, and generous cash donations helped keep Direct Relief independent from external interests, maintaining the flexibility of its work. >>

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



FY 2022 CONTRIBUTED SUPPORT: \$2.218B



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 also entail other significant benefits.

Direct Relief's core activities involve the functional role of medical distributor and was the first nonprofit organization 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 specific functional areas inherent in managing a global medical supply chain that must meet stringent regulatory standard, which exist even in emergency situations to which Direct Relief frequently is asked to respond and does.

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 both 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 for financial contributions entrusted to Direct Relief to be leveraged significantly.

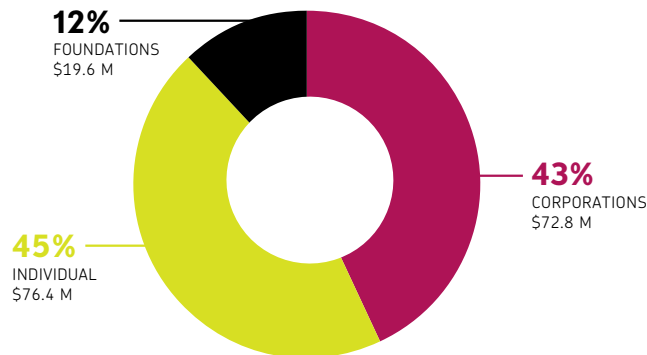
Direct Relief also seeks and receives cash contributions, which are used to cover internal costs and for goods and services that cannot be obtained through in-kind donations and are needed to advance the organization's mission.

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 2022, over 92 percent of its total public support of over \$2.2 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, and donated data analytics software from Qlik).

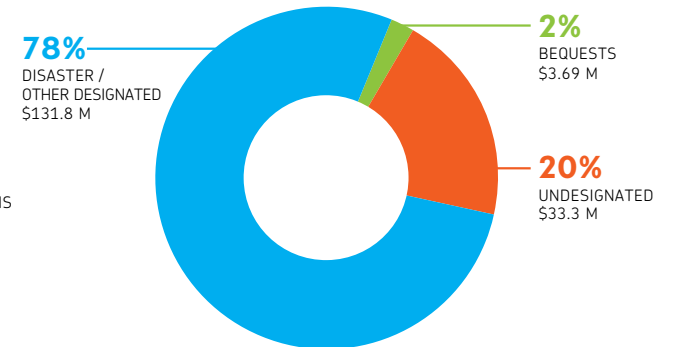
Merging cash and in-kind contributions in accordance with Generally Accepted Accounting Principles (GAAP) can be confusing to non-accountants. These notes, in addition to the financial statements on page 23, are to assist you in understanding how Direct Relief's program model is financed and works, to explain the state of the organization's financial health, and to inform you about how the money generously donated to Direct Relief in FY 2022 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 **CONT'D** ▶

SOURCES OF CASH REVENUE: \$169 M



CATEGORIES OF CASH SUPPORT: \$169 M



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) financial health and activities. One is the timing of donations being 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 2022 Direct Relief received less in contributions and earnings than was used to support its partner network and run operations. When the fiscal year ended, the Organization reported a decrease in net assets (or net operating “deficit”). In FY 2021 the opposite was true, and the Organization recorded an increase in net assets (or net operating “surplus”).

In FY 2022, Direct Relief received public support and revenue of \$2.05 billion in product donations, \$169 million in cash donations. The Organization had an unrealized net loss of \$3.5 million in earned income. In the same period, Direct Relief incurred program service costs including pharmaceuticals, medical supplies, equipment and related expenses of \$2.24 billion, administrative support services of \$6.6 million and fundraising costs of

\$3.5 million. For FY 2022, the change in net assets was a \$39 million net operating “deficit.” A fiscal year end net operating “deficit” (or “surplus”) 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. Direct Relief has used similar policies for all disaster responses in the last few years, including responses to the crisis in Ukraine, Covid19 Pandemic, Wildfires in the U.S., Australia, and the Amazon, the Congo Ebola Outbreak, Hurricanes Dorian, Harvey, Michael, Florence, Maria, and Irma, Cyclones Iday and Amphan, and earthquakes in Puerto Rico, Indonesia, Mexico, Ecuador, Nepal, Japan, Haiti, Pakistan, and Peru.

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 the 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 United States. The organization uses monthly pricing information available from the RED BOOK™ online service provided by Truven Health Analytics, 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 also is 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 **CONT'D ▶**



A Firehawk helicopter lands at Direct Relief on May 7, 2022. Direct Relief supported the aircraft's upgrade with equipment for water drops during firefighting. (Lara Cooper/Direct Relief)

value) of a generic product received through donation, compared to higher-priced branded product.

For non-FDA-approved pharmaceuticals, for example, products manufactured for use in non-U.S. markets, the organization uses independent pricing guides to determine the fair market value of the particular manufacturer's specific formulation. As is the case with FDA-approved formulations, the value relates to the specific product from the specific manufacturer. The sources of such pricing information vary, but relevant information may include the price paid by wholesalers or other third-party buyers, a favorable price negotiated by an organization for a particular drug, or other such reasonable bases.

For medical supplies and equipment, the organization determines wholesale value by reviewing the pricing information on the specific item listed for sale in trade publications, through online pricing, and through its own procurement history when purchasing. Such valuations are lower typically than published retail prices.

Different prices for similar products or services in different geographic areas can cause confusion. The specifics of Direct Relief's valuation methodology are noted here in recognition of the confusion that can arise with the value of contributed goods and services.

One source of confusion stems from the significant pricing (and therefore valuation) differences that exist in different parts of the world for similar products. With regard to pharmaceuticals, significant differences exist between a branded drug and a generic equivalent formulation even within the same market, including the U.S. Because Direct Relief operates on a global scale, such differences must be considered and reflected in the accounting and reporting of contributions.

Of course, similar pricing and valuation differences also exist for other commodities and services beyond pharmaceuticals. In the U.S., for example, 12 ounces of water is free from a public tap but can be several dollars if it comes in a branded bottle.

Similar pricing differences exist for services as well. The outsourcing and off-shoring phenomena reflect that even highly skilled services—surgery, computer

programming, research conducted by Ph.D.s—are done at vastly different prices in different countries.

Direct Relief's internal processes, information systems, and public disclosures ensure that these distinctions are clearly documented, and that the organization's financial reporting precisely and accurately reflects the fair market value of the specific items received through donation.

If a low-cost generic medication is received through donation, its value is properly recorded as that of the generic medication. Similarly, if a more expensive branded product is received through donation, its value is registered as that of a branded product.

As noted above, Direct Relief has long sought the contribution of needed goods and services to use for humanitarian purposes because of the efficiencies and other benefits that result. The organization, and (more importantly) the people it serves, benefit from the lowest-cost, 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.

A strong incentive exists to use higher valuation sources, such as retail prices, or use branded product values for generic donations. However, a conservative approach provides the most accurate, easy-to-understand basis and is best to instill public confidence in Direct Relief's financial reporting.

DIRECT RELIEF FOUNDATION AND THE BOARD-RESTRICTED INVESTMENT FUND

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

In October 2006, the Direct Relief Foundation was formed and incorporated in the State of California as a separate, wholly controlled, supporting organization of Direct Relief. Effective April 1, 2007, assets in the BRIF

were transferred to the Foundation. The Foundation's investments are managed by SEI Private Trust Company, an investment firm under the direction of the Foundation's Investment Committee, which meets quarterly and oversees investment policy and performance.

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

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

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

For the Fiscal Year 2022, the Foundation Trustees approved a distribution of \$3.6 million to pay for Direct Relief's fundraising expenses and the salary of the President and CEO. The Foundation also distributed \$3.2 million to Direct Relief that had been approved in prior years for the same purpose. Upon a majority vote by the Board, the BRIF may also be utilized to meet other general operational costs and extraordinary capital expenses.

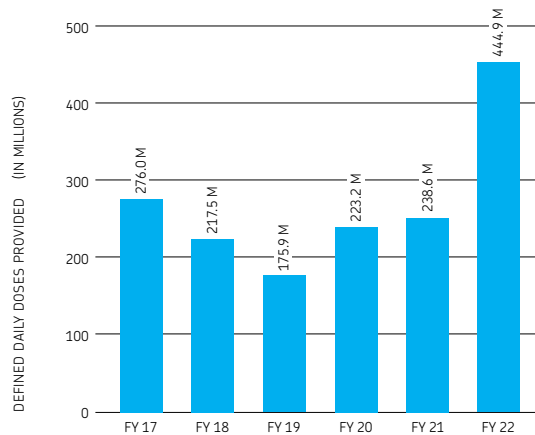
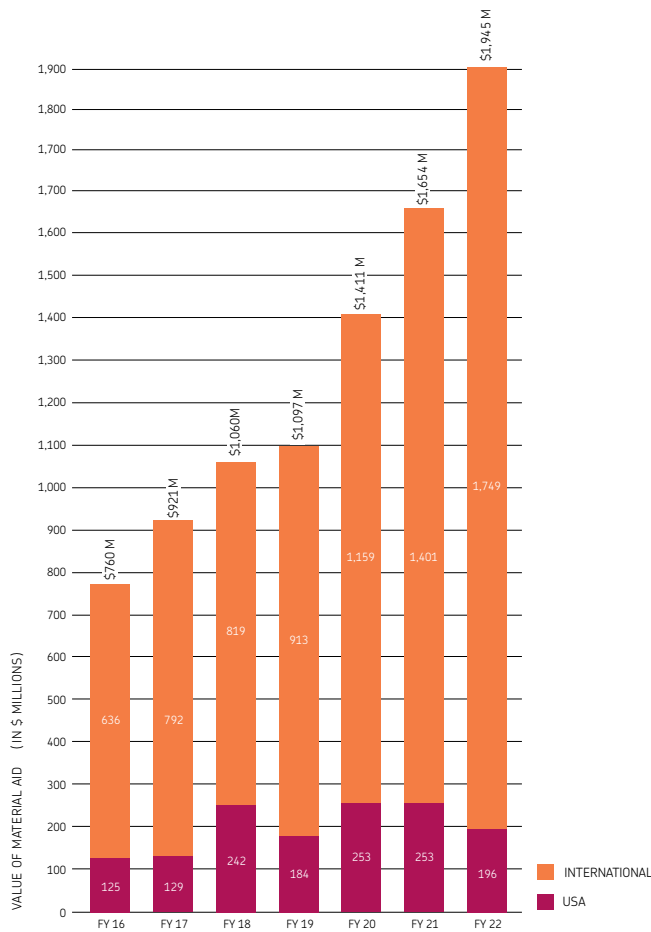
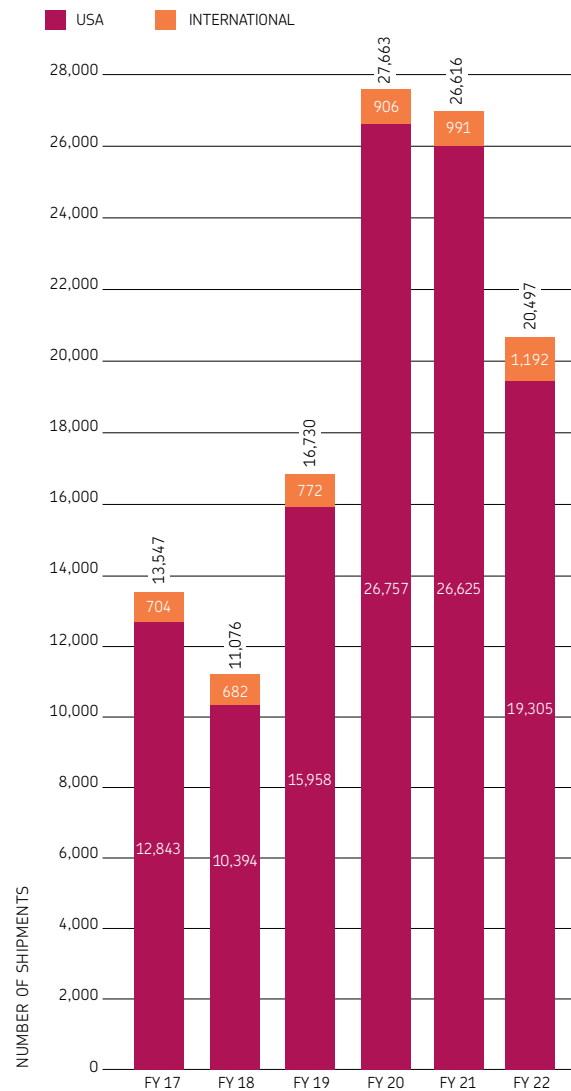
HOW YOUR SUPPORT WAS USED

[FY 2022]

Thanks to your participation, Direct Relief helped more people in more places than ever before in its 74-year history in FY 2022. The organization received \$2.22 billion in public support and provided a record \$2 billion in assistance around the world (including \$60 million in financial assistance). >>

MATERIAL ASSISTANCE

Advancing its mission to improve the health and lives of people affected by poverty or emergencies—without regard to politics, religious beliefs, or ethnic identities—Direct Relief delivered 20,497 shipments of humanitarian material aid in FY 2022 to 97 countries and all 50 U.S. states and 2 U.S. territories.



The medical aid contained in these shipments was sufficient to provide **444.9 million Defined Daily Doses (DDD)** for people who may have otherwise lacked access to quality health care.

The **6,300 tons** (over 12.6 million pounds) of pharmaceuticals, medical supplies, and medical equipment that were furnished to local health programs 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.



First responders deploy in Ukraine with a Direct Relief Emergency Medical Backpack. (Courtesy photo)

FINANCIAL ASSISTANCE

In addition to providing more essential medical material resources than ever before, Direct Relief furnished \$60 million in critically needed funding in FY 2022 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 (\$13.6m), Covid19 Pandemic (\$7.41m), Hurricane Maria (\$7m), the earthquake in Haiti (\$1.4m), Hurricane Florence (\$100k), and Hurricane Michael (\$150k).

Direct Relief's Fund for Health Equity provided financial support (\$19.5m) to community health centers, free and charitable clinics, educational institutions and other community-based organizations fighting the inequities that further health disparities.

Additional funding supported the innovative care and treatment programs of community health centers, free clinics, and charitable pharmacies in the U.S. (\$1.1m), and the on-going efforts of numerous other partners to address the chronic health needs of vulnerable people in their communities.

STAFFING & EXECUTIVE COMPENSATION

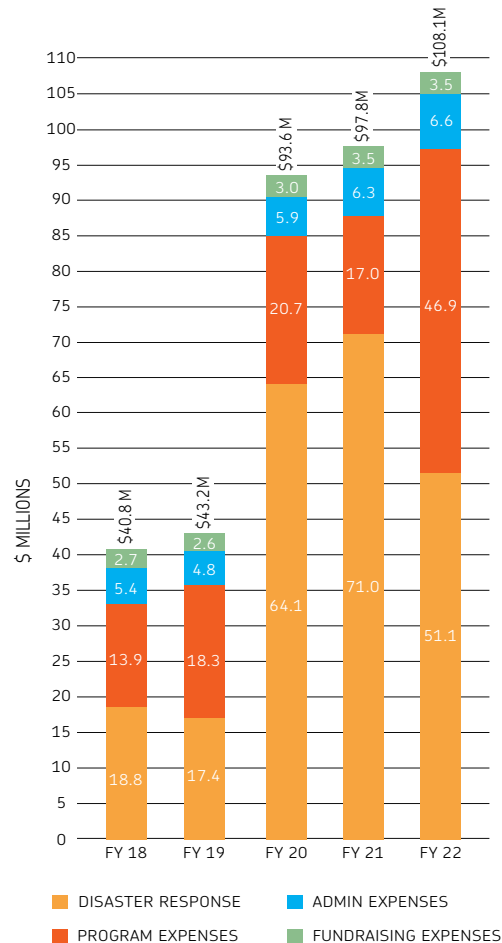
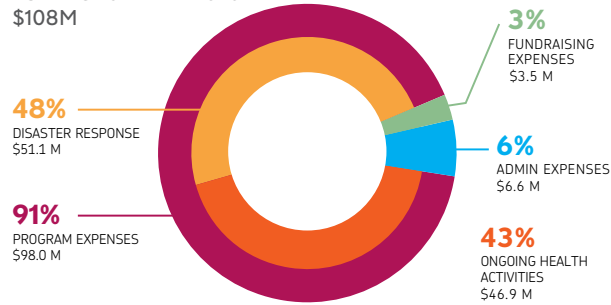
The \$2 billion in humanitarian assistance Direct Relief provided in FY 2022 across the U.S. and around the world was done so with a staff which, as of June 30, 2022, comprised 128 positions (121 full-time, 7 part-time). Measured on a full-time equivalent (FTE) basis, the total staffing over the course of the year was 110. This figure is derived by dividing the total hours worked by 2,080, the number of work hours of a full-time employee in one year. Two persons each working half-time, for example, would count as one FTE.

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

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

TOTAL CASH EXPENSES

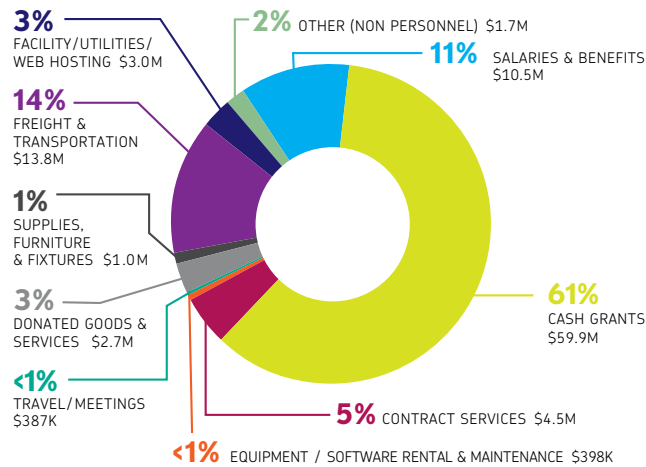
TOTAL CASH EXPENSES: \$108M



PROGRAM EXPENSES

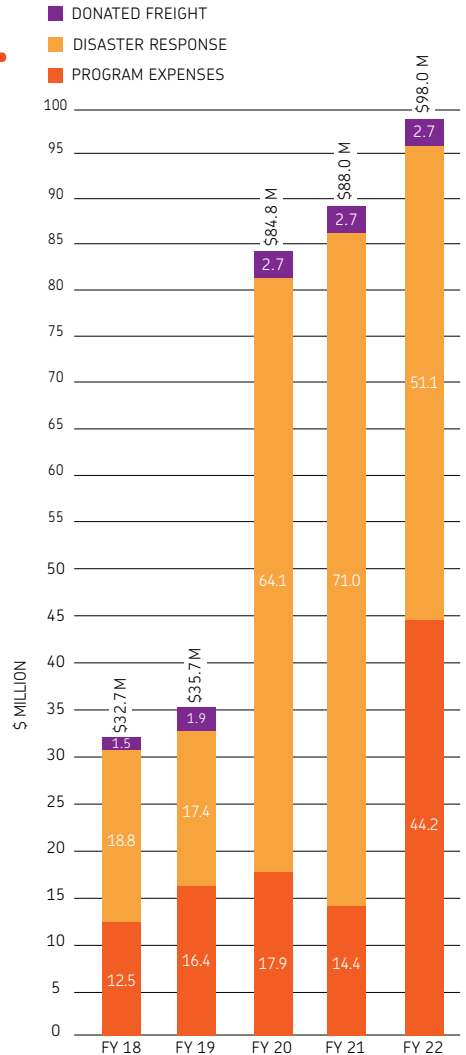
To implement its humanitarian programs (\$1.95 billion in medical material aid), Direct Relief spent \$45.4 million (excluding \$60 million in cash grants) in FY 2022, \$10.5 million of which paid for salaries, related benefits (health, dental, long-term disability insurance, and retirement-plan matching contributions), and mandatory employer paid taxes (Social Security, Medicare, workers' compensation, and state unemployment insurance) for 80 full-time and four part-time employees engaged in programmatic functions.

PROGRAM EXPENSES BY FUNCTION: \$98.0M



PROGRAM EXPENSES ALSO INCLUDE >>

- ▶ Ocean/air freight and trucking for outbound shipments to partners, in-country transportation and inbound product donations (\$16.5 million, of which \$2.7 million was donated)
- ▶ Travel for oversight and evaluation (\$378 thousand); contract services (\$4.6 million); packing materials and supplies (\$1.1 million) and disposal costs for expired pharmaceuticals (\$643 thousand)
- ▶ The value of expired products disposed of (\$199.8 million)
- ▶ A pro-rata portion of other allocable costs (see page 35)



FUNDRAISING EXPENSES

Direct Relief’s FY 2022 fundraising expenses totaled \$3.46 million, of which \$202,000 (or 6 percent) was the value of donated goods and services (such as donated advertising from Google) that were noncash expenditures. Such donated goods and services of an equal amount are also reported as revenue, as explained on page 24.

FY 2022 cash expenditures for fundraising totaled \$3.21 million, which were paid were paid by the Direct Relief Foundation – not from donors’ contributions – as explained on page 27. The majority of these cash expenditures, \$2.33 million or 67 percent of the total \$3.46 million, were used to pay the salaries, related benefits, and payroll taxes for 11 full-time and one 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.

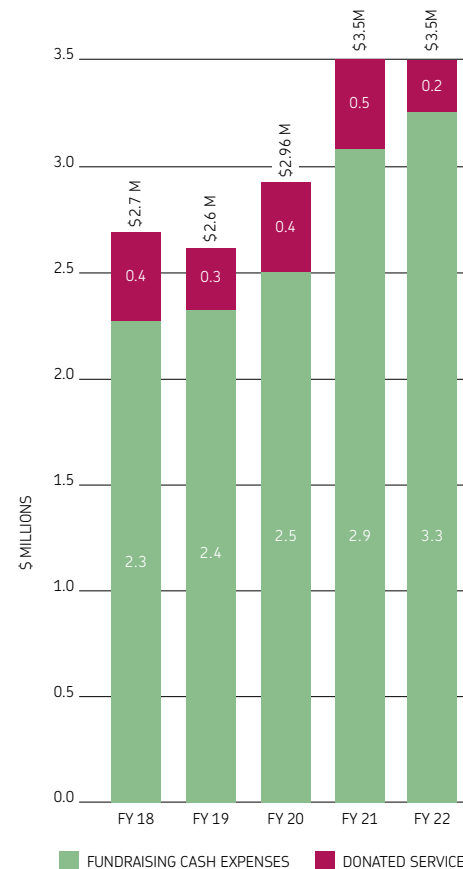
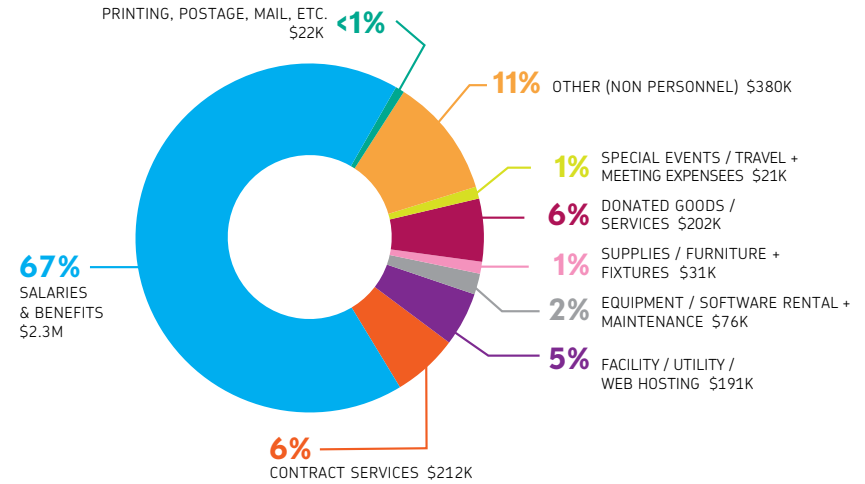
Direct Relief’s longstanding emphasis on efficiency extends to its fundraising efforts. Although not paid with donor funds, Direct Relief notes for comparative purposes that its total fundraising expenses for FY 2022 of \$3.46 million (which includes noncash expenditures) equals only 2 percent of the \$169 million of the cash support the organization received; cash expenditures for fundraising of \$3.21 million equals 1.9 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 92 percent of the \$2.2 billion in total revenue received by Direct Relief in FY 2022. 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 1.9 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 \$2.2 billion revenue figure for FY 2022.

FUNDRAISING EXPENSES BY FUNCTION: \$3.5M



FUNDRAISING EXPENSES ALSO INCLUDE >>

- ▶ \$22 thousand for the production, printing, and mailing of the annual report, tax-receipt letters to contributors, and informational materials
- ▶ \$127 thousand in advertising and marketing costs
- ▶ \$414 thousand in contract services (\$199 thousand in donated services)
- ▶ \$31 thousand in supplies and furniture in support of the fundraising staff
- ▶ A pro-rata portion of other allocable costs (see page 35)

MANAGEMENT & GENERAL EXPENSES

DDirect Relief spent \$6.6 million on administration in FY 2022. Administration expenses are those that relate to financial and human resource management, information technology, communications, public relations, and general office management. A total of \$3.2 million was for salaries, related benefits, and taxes for 25 full-time employees and three part-time employees engaged in administration and financial management.

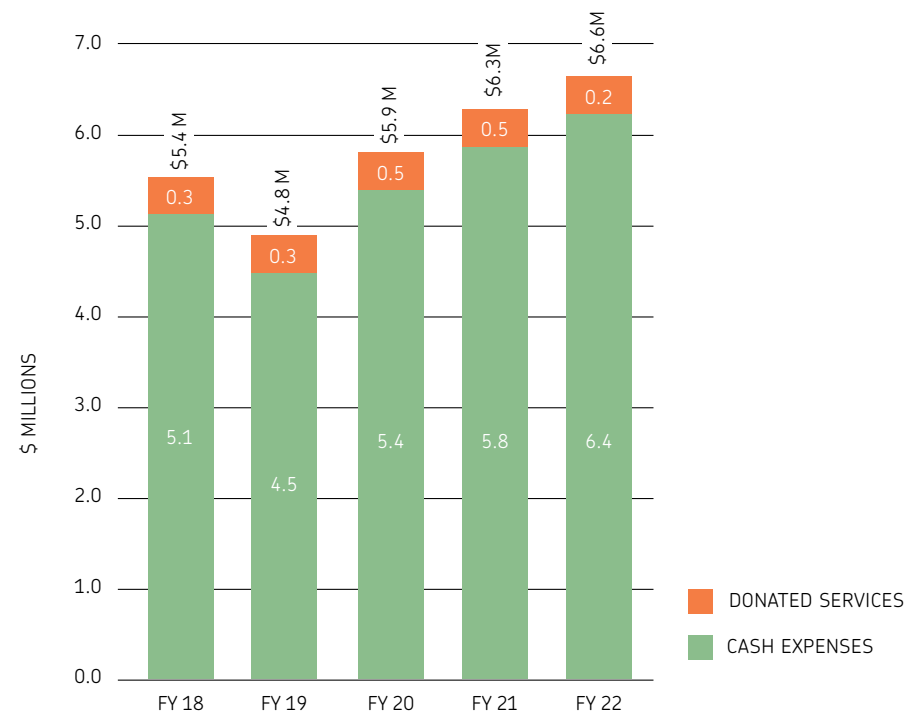
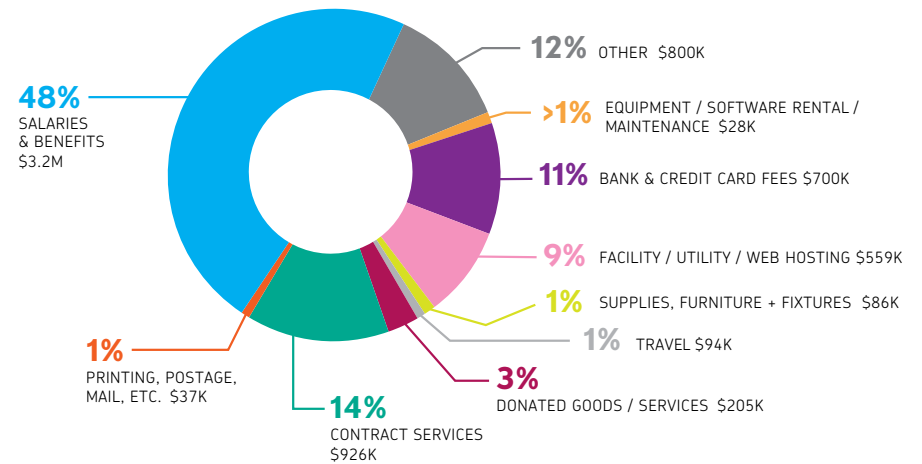
MANAGEMENT & GENERAL EXPENSES ALSO INCLUDE >>

- ▶ •\$700 thousand in credit card and banking fees
- ▶ \$94 thousand for travel, meetings and conferences
- ▶ \$1.1 million in contract services (\$199 thousand of which were donated services)
- ▶ \$173 thousand in accounting fees for the annual CPA audit, payroll processing and reporting, and other financial services
- ▶ \$49 thousand in legal fees
- ▶ \$105 thousand in press releases and online advertising
- ▶ \$21 thousand in taxes, licenses, and permits (Direct Relief is registered as an exempt organization in each U.S. state requiring such registration)
- ▶ A pro-rata portion of other allocable costs (see below)

OTHER ALLOCABLE COSTS

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

MANAGEMENT + GENERAL EXPENSES BY FUNCTION: \$6.6M





The Tunnel Fire in Arizona burned more than 32 square miles and forced hundreds to evacuate. Direct Relief quickly delivered aid, including N95 Masks, backup power units, and personal care products. (Courtesy photos)

COMBINED STATEMENT OF FINANCIAL POSITION

For the fiscal year ended
June 30, 2022 with summarized
totals for FY 2021. Amounts are
presented in the thousands.

	FY 2022						FY 2021	
	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	\$ 233,031	\$ 1,611	\$ 272	\$ 12	\$ 607	\$ -	\$ 235,533	\$ 186,993
Investments	79	65,822	-	-	-	-	65,901	72,254
Contributions and other receivables, net	19,838	5,752	-	-	-	(11,985)	13,605	11,201
Inventories, net	656,509	-	-	-	-	-	656,509	747,673
Prepaid expenses	8,385	-	-	-	-	-	8,384	8,042
Property and equipment, net	1,595	-	-	-	37,985	-	39,580	40,495
Investment in subsidiary	42,367	-	-	-	-	(42,367)	-	-
Other assets	225	-	4	-	-	-	229	231
Total assets	\$ 962,029	\$ 73,185	\$ 276	\$ 12	\$ 38,592	\$ (54,352)	\$ 1,019,742	\$ 1,066,890
LIABILITIES								
Accounts payable	\$ 6,314	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,314	\$ 9,624
Accrued liabilities	12,360	9,552	9	-	-	(11,985)	9,936	8,796
Long-term debt	-	-	-	-	-	-	-	6,000
Total liabilities	18,674	9,552	9	-	-	(11,985)	16,250	24,420
NET ASSETS								
Without donor restrictions	761,653	58,702	(5)	12	37,985	(42,367)	815,979	888,881
With donor restrictions	181,702	4,931	272	-	607	-	187,512	153,588
Total net assets	943,355	63,633	267	12	38,592	(42,367)	1,003,492	1,042,469
Total liabilities and net assets	\$ 962,029	\$ 73,185	\$ 276	\$ 12	\$ 38,592	\$ (54,352)	\$ 1,019,742	\$ 1,066,890

* 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, 2022 with summarized totals for FY 2021. Amounts are presented in the thousands.

	FY 2022						FY 2021	
	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	\$ 73,210	\$ 3,960	\$ 690	\$ 45	\$ -	\$ (8,188)	\$ 69,717	\$ 104,726
Business and foundation grants	91,942	-	419	-	-	-	92,361	61,376
Workplace giving campaigns	6,693	-	-	-	-	-	6,693	4,876
Special events	-	-	-	-	-	-	-	-
Total public support from cash + securities	171,845	3,960	1,109	45	-	(8,188)	168,771	170,978
From contributed goods and services:								
Pharmaceuticals, medical supplies and equipment	2,045,962	-	8	-	-	-	\$ 2,045,970	1,750,553
Contributed freight	2,726	-	-	-	-	-	2,726	2,759
Contributed goods - other	5	-	-	-	-	-	5	410
Professional services received	399	-	-	-	-	-	399	1,072
Total from contributed goods and services	2,049,092	-	8	-	-	-	2,049,100	1,754,795
Total public support	2,220,937	3,960	1,117	45	-	(8,188)	2,217,871	1,925,773
REVENUE								
Investment income	311	1,442	-	-	-	-	1,753	936
Realized gain on sale of investments	-	4,703	-	-	-	-	4,703	3,716
Unrealized (loss) gain on investments	(224)	(9,754)	-	-	-	-	(9,978)	7,937
Program service fees	-	-	-	-	-	-	-	-
Total revenue	87	(3,609)	-	-	-	-	(3,522)	12,588
Net assets released from restrictions	-	-	-	-	-	-	-	-
Total public support and revenue	2,221,024	351	1,117	45	-	(8,188)	2,214,349	1,938,361
PROGRAM SERVICES								
Program related expenses	2,245,885	3,574	1,006	46	926	(8,188)	2,243,249	1,878,533
SUPPORTING SERVICES:								
Administration	6,025	468	87	-	35	-	6,615	6,345
Fundraising	3,437	2	-	-	25	-	3,464	3,454
Total supporting services	9,462	470	87	-	60	-	10,079	9,799
Total expenses	2,255,347	4,044	1,093	46	986	(8,188)	2,253,328	1,888,331
Change in net assets	\$ (34,323)	\$ (3,693)	\$ 24	\$ (1)	\$ (986)	\$ -	\$ (38,979)	\$ 50,030

COMBINED STATEMENT OF FUNCTIONAL EXPENSES

For the fiscal year ended June 30, 2022
with summarized totals for FY 2021.
Amounts are presented in the thousands.

	FY 2022			FY 2022		FY 2021
	PROGRAM SERVICES: Pharmaceuticals, Medical Supplies, Equipment & Related Expenses			SUPPORTING SERVICES		TOTAL PROGRAM & SUPPORTING SERVICES
	USA	International	Total	Administration	Fundraising	TOTAL PROGRAM & SUPPORTING SERVICES
\$ IN THOUSANDS						
COMPENSATION AND RELATED BENEFITS						
Cash and cash equivalents	\$ 1,615	\$ 6,913	\$ 8,528	\$ 2,719	\$ 1,906	\$ 13,153
Investments	107	468	575	166	125	866
Contributions and other receivables, net	265	1,111	1,376	297	297	1,970
Total compensation and related benefits	1,987	8,492	10,480	3,182	2,328	15,989
OTHER EXPENSES						
Pharmaceuticals, medical equipment and supplies distributed - donated	193,755	1,740,371	1,934,126	-	-	1,934,126
Pharmaceuticals, medical equipment and supplies distributed - procured	2,547	8,800	11,347	-	-	11,347
Inventory adjustment (expired pharmaceuticals)	10,984	188,781	199,764	-	-	199,764
Accounting and legal fees	9	46	55	222	3	280
Advertising	159	-	159	105	127	391
Bank charges	-	2	2	700	-	702
Contract services	1,795	2,763	4,558	926	212	5,695
Contributed services	-	-	-	199	199	399
Contributed freight	129	2,559	2,687	-	-	2,687
Contributed goods	-	7	8	5	3	15
Disposal costs (expired pharmaceuticals)	36	607	643	-	-	643
Dues and subscriptions	117	260	377	140	236	753
Duplicating and printing	12	74	87	34	17	138
Equipment and software maintenance	64	221	285	28	75	387
Equipment rental	31	73	103	-	-	103
Freight and transportation	2,004	11,776	13,780	-	-	13,780
Grants and stipends	39,269	20,704	59,973	-	-	59,973
Insurance	121	348	468	353	115	936
Interest	16	190	206	8	6	220
Meetings, conferences, special events	33	39	72	53	14	139
Miscellaneous	3	31	34	283	3	319
Outside computer services	2	4	6	2	1	9
Postage and mailing services	14	12	26	3	5	34
Rent and other occupancy	58	460	518	14	10	542
Supplies, furniture and fixtures	42	1,013	1,055	86	31	1,172
Taxes, licenses and fees	3	47	49	21	-	71
Training and education	5	13	18	19	4	42
Travel and automobile	91	215	306	41	8	356
Utilities and telephone	35	357	392	30	17	439
Web hosting	104	238	342	96	1	439
Total expenses before depreciation	253,425	1,988,503	2,241,928	6,550	3,415	2,251,893
Depreciation and amortization	103	1,218	1,321	65	49	1,435
Total functional expenses June 30, 2022	\$ 253,528	\$ 1,989,721	\$ 2,243,249	\$ 6,615	\$ 3,464	\$ 2,253,328
Total functional expenses June 30, 2021	\$ 404,853	\$ 1,473,680	\$ 1,878,533	\$ 6,345	\$ 3,453	\$ 1,888,331

CORPORATE PARTNERSHIPS

MATERIAL DONATIONS AND IN-KIND SUPPORT

[FY 2022]

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. >>

CORPORATE PARTNERSHIPS

MATERIAL DONATIONS AND IN-KIND SUPPORT

MANUFACTURERS & DISTRIBUTORS PROVIDING MEDICAL MATERIAL DONATIONS

3M	BYD Cares	ICU Medical	Nephron Pharmaceuticals
Abbott	CA OES	Integra LifeSciences	Novartis Corporation
AbbVie	ConvaTec	Janssen Pharmaceuticals	Novo Nordisk A/S Denmark
Accord Healthcare	Corza Medical	Jazz Pharmaceuticals	Novo Nordisk Inc.
Ajanta Pharma	Covidien	Johnson & Johnson Consumer Companies	Organon
Alvogen	DePuy Synthes	Johnson & Johnson Medical	Pfizer
AmerisourceBergen	Dynavax	Johnson & Johnson Patient Assistance Foundation	Sandoz
Amgen	Edgewell	Kate Farms	Sanofi Cares North America
Apotex	Eli Lilly & Company	Kirk Humanitarian	Servier Pharmaceuticals
AstraZeneca	Emergent BioSolutions	LifeScan	SREE Medical Systems
Baxter Europe	Encube Ethicals	Liquid IV	Takeda Pharmaceuticals
Baxter International	Ethicon	Lutema	Teva Mepha Schweiz
Bayer	FIGS	McKesson Medical-Surgical	Teva Pharmaceuticals
Bayer de México, S.A.	Genentech	Medicines360	Trividia Health
Bayer Europe	Grifols	Medline Industries	Unilever
BD	GSK	Medtronic	Unite to Light, Inc.
Belmora	GSMS Incorporated	Merck & Co.	Viartis
Benco Dental	Henry Schein, Inc.	Merck KGaA	Walgreens
Boehringer Ingelheim	Hikma		Zarbee's
Bristol-Myers Squibb	ICU Health		

COMPANIES PROVIDING SERVICES, VISIBILITY, AND OTHER IN-KIND SUPPORT

Balcony Lab Inc.	Ezoic	Meta Platforms	TikTok
Convergence Point Media	FedEx	Narrative Sciences	Twitch.tv
Cuebiq Inc.	Google	Qlik Technologies Inc.	
Dataminr	Mapbox	SAP	
Esri	Media Matters Worldwide	Sonos	

STRATEGIC FOUNDATION PARTNERSHIPS

[FY 2022]

Direct Relief was able to provide more help to more people than ever before this fiscal year due in part to coordinated efforts with these leading foundations that share commitments to improve health and lives across the U.S. and around the world. >>

STRATEGIC FOUNDATION PARTNERSHIPS

The Aall Foundation
Abbaszadeh Foundation
The Ahlsten Foundation
All Within My Hands Foundation
AMG Foundation
Bentson Foundation
Bluebird Legacy, Inc.
The Boston Foundation
California Community Foundation
Clara Lionel Foundation
Community Foundation of St. Joseph
County
The Crown Family
David C. Copley Foundation
The Donald B. & Dorothy L. Stabler
Foundation
The Doogood Foundation
Elsie and Marvin Dekelboum
Foundation
Farvue Foundation, Inc.
Fistula Foundation
Fredman Family Foundation
FreeWishes Foundation
G A Fowler Family Foundation
Gene Haas Foundation
Givinga Foundation, Inc.
The Goodman Family Foundation
The Green Foundation
The Hailey Family Foundation

Head Family Charitable Foundation
The Hexberg Family Foundation
Hutton Parker Foundation
The Hyman Levine Family Foundation:
L'Dor V'Dor
The Ilsababy Foundation
Jadetree Foundation
Johnson Charitable Gift Fund
W.M. Keck Foundation
The Kemmerer Family Foundation
The Khachaturian Foundation
The Koroluk Zupon Family Foundation
Leo Feist
Maltz Family Foundation
McHugh O'Donovan Foundation
Micky and Madeleine Arison Family
Foundation
MKM Foundation
Natalie Orfalea Foundation
National Christian Foundation -
Houston
National Philanthropic Trust
New Hampshire Charitable Foundation
Outhwaite Charitable Trust
Rock Paper Scissors Foundation
Rolf and Elizabeth Rosenthal Family
Foundation
Roy R. and Laurie M. Cummins Fund
of Oregon Community Foundation

Santa Barbara Foundation
Schwab Charitable
Sterling Foundation
Stifel Charitable, Inc.
The Tides Foundation
Together Rising, Inc.
The Tolkien Trust
Tres Chicas
The Trustees' Philanthropy Fund of
Fidelity Charitable
Walter J. and Holly O. Thomson Fund
The Wasily Family Foundation
The Weissman Family Foundation
William H. Donner Foundation
Zegar Family Foundation

INVESTORS

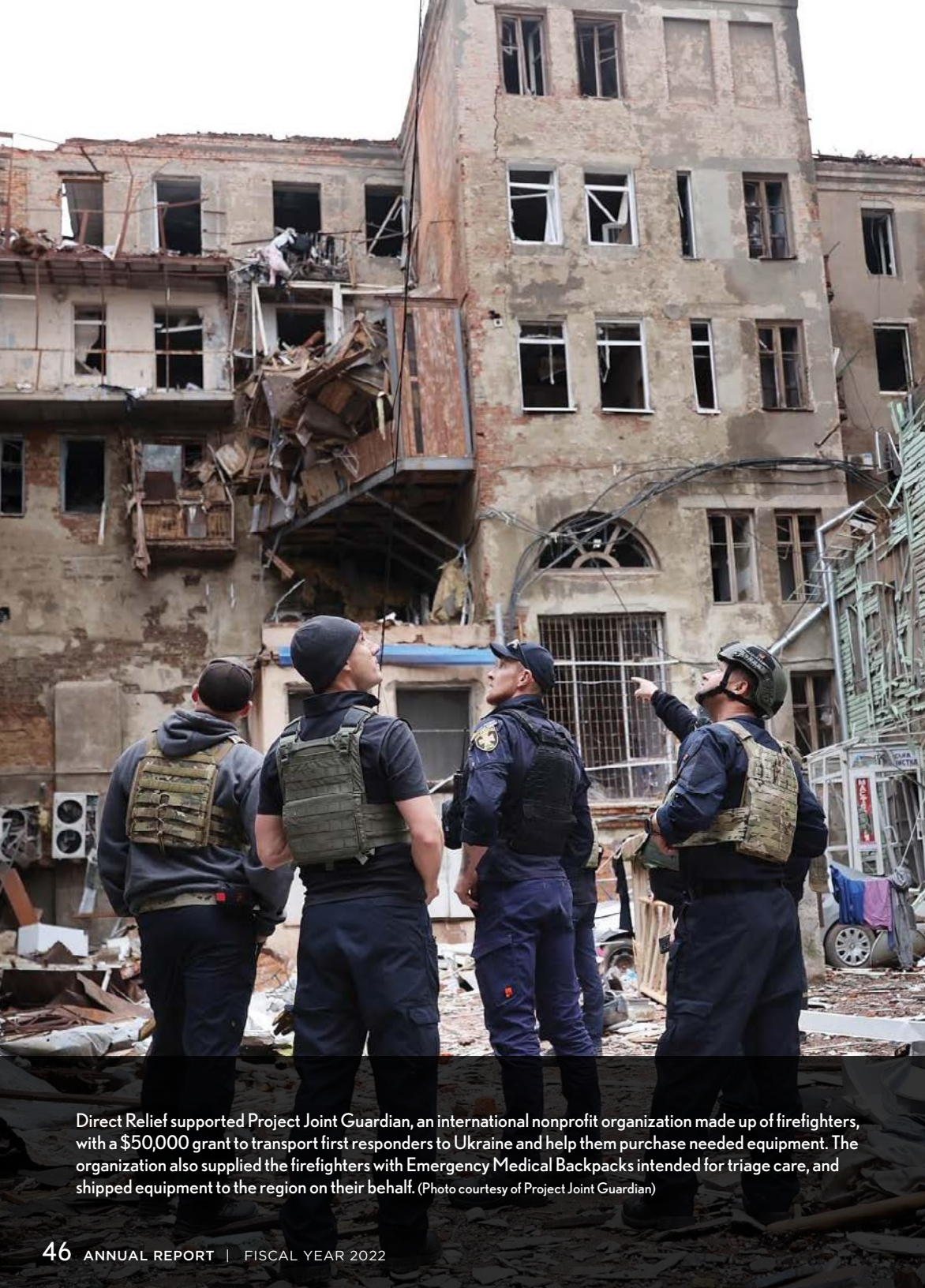
[FY 2022]

Our deepest thanks to Direct Relief's investors, whose generosity has enabled service to millions of people throughout the world. >>

LEGACY SOCIETY

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

Anonymous (41)	Robert A. and Lynn T. Burtness	Julia Flynn	Ellen and Peter Johnson	Jacqueline and Jay McMahan
Dotsy and Jack Adams	William S. Burtness	Harvey Foo	Pat and Dick Johnson	Harry and Jacquie McMahon
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Marguerite Bulf	June Breton Fisher			Howard Stewart Rauchwerger
Don Bullick				Mary Anne Reardon



Direct Relief supported Project Joint Guardian, an international nonprofit organization made up of firefighters, with a \$50,000 grant to transport first responders to Ukraine and help them purchase needed equipment. The organization also supplied the firefighters with Emergency Medical Backpacks intended for triage care, and shipped equipment to the region on their behalf. (Photo courtesy of Project Joint Guardian)

FY 2022 LEGACY SOCIETY CONTINUED

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- Anne M. Reilly
- Penny Ridgeway
- Nancy Roberts
- Paul N. Roberts
- Rod and Valerie Rose
- Mary Kimble-Rosenfeld
- Maria Rosmann
- Babette L. Roth
- Natalie and Matthew Rowe
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- Mr. Thomas J. Ryder
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- Mary Ellen Scheidt
- Petar Schepanovich and Kathleen Schepanovich
- Harvey Schildkraut
- Nancy and Bill Schlosser
- June H. Schuerch
- Mr. Kevin Segall
- Susan Sher
- Mr. and Mrs. Philip M. Sheridan
- Alexander J. Sherwin
- Nancy Ann Shores
- Harold and Carol Shrout
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- Dorothy P. Slater
- Leon Sledge
- Connie Smith
- Margaret H. Smith
- Marion B. Smith
- Thelma R. Smith
- D. J. Smith-Brooks
- Mr. Scott Smoot
- Judith Smorto
- Robert H. Sommer
- Ronald Sowers
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- Charles H. Sparkes
- Barbara Spaulding
- William G. Sprague
- Charles Starnes
- Mary Joan Staves
- K. Walter Stawicki
- Joyce L. Steier
- Elaine F. Stepanek
- Walter and Mae Stern
- Heather and Tom Sturgess
- Anna Stuurmans
- William Sunderlin
- Harold M. Sutton
- Mr. Robert Taucus
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- Oknam Yu
- Marjorie Lynn Zinner

FY 2022 INVESTORS Contributors to Direct Relief from July 1, 2021, to June 30, 2022

\$25,000,000 +

Epic Games

\$5,000,000 +

Humble Bundle

\$2,500,000 +

Anonymous
The Crown Family
Eli Lilly and Company

\$1,000,000 +

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CVS Health Foundation
FedEx
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Teva Pharmaceuticals USA
Upwork Inc.
Dr. Abigail F. Winkel and Mr. Adam J. Winkel

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BD
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Give Lively Foundation, Inc.
The Ilsababy Foundation
King Salman Center for Relief and Humanitarian Affairs
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Otis and Bettina Chandler Foundation
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S&P Global
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Judith and Jack Stapelmann
Unilever-Vaseline
UnitedHealth Group

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AbbVie Foundation
AmerisourceBergen Foundation
AstraZeneca
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The Bungie Foundation
California Community Foundation
The Capital Group Companies Charitable Foundation
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Thomas and Heather Sturgess
Together Rising
Vitech
Walmart
The Weissman Family Foundation
Yardi Systems, Inc.
Zukowski Giving Fund

\$100,000 +

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3M
ALM Works
AMG Foundation
The Amit J. and Vicky L. Patel Foundation
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Bitsy Becton Bacon
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Pura Vida
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Resideo
Schnader Attorneys at Law
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TGS Management Company
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Viatrix
Frank Vitiello
Walter J. and Holly O. Thomson Fund
William H. Donner Foundation
Wine Warehouse
Wisconsin Evangelical Lutheran Synod - WELS
Zegar Family Foundation

\$50,000 +

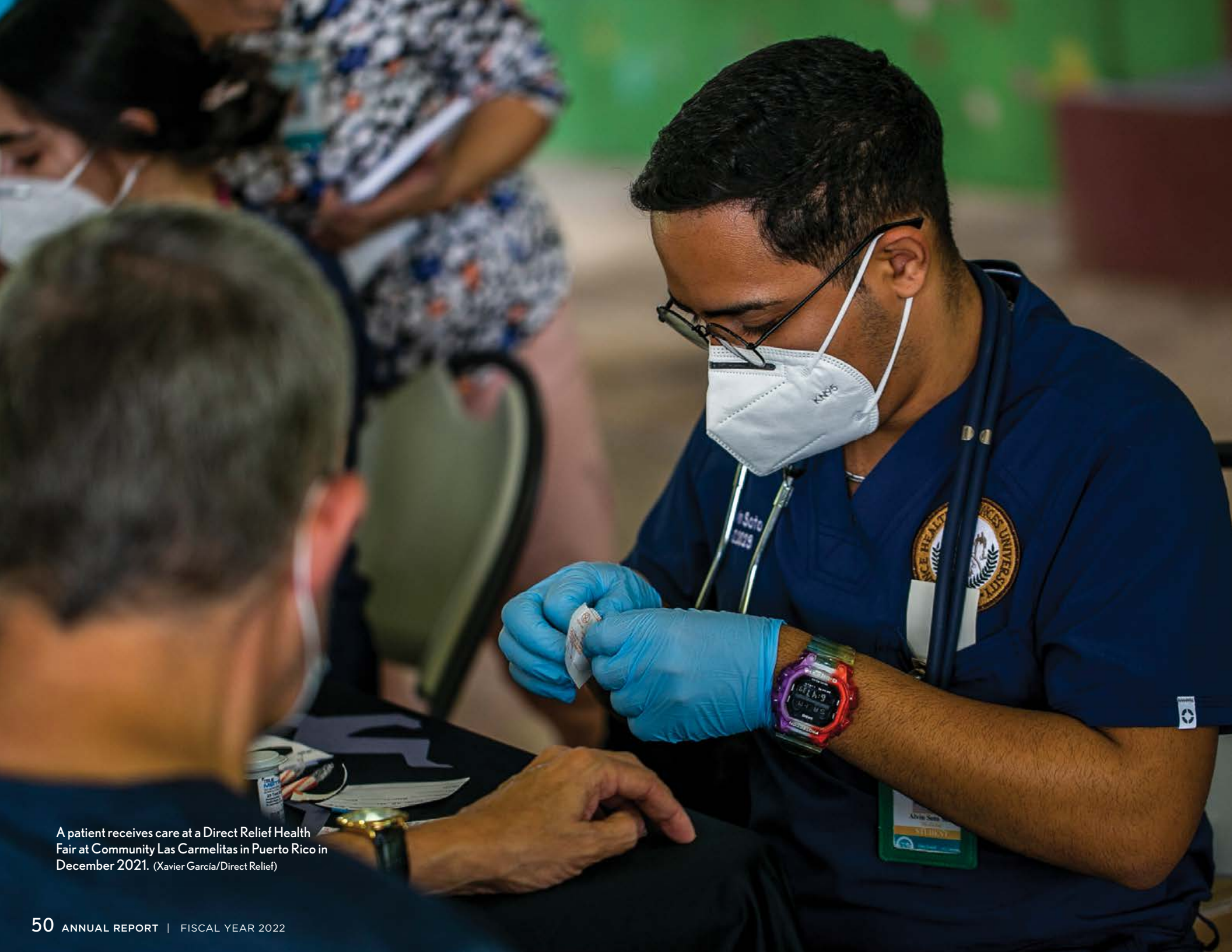
Anonymous (6)
The Aall Foundation
Abbaszadeh Foundation
Abercrombie Family Fund
The Ahlsten Foundation
Dr. Farouq Ahmed and Mrs. Shahnaz Ahmed
Scott and Lynn Alexander

All Within My Hands Foundation
David H. Anderson
Astera Institute
BananaBird LLC
The Bank of New York Mellon
Battelle
Mr. and Mrs. William P. Becker
The Birenbaum Family Fund
Blue Crew
Bluebird Legacy, Inc.
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Gene Haas Foundation
The Gerstner-Lakdawala Family Fund
Givinga Foundation, Inc.
Global Impact
Irena Goldenberg
Goldman Sachs Group, Inc.
Green Leaf Foundation Fund
The Hailey Family Foundation
Harold Brown Foundation
HBK Capital Management
Head Family Charitable Foundation



Midwives in Tikonko, Sierra Leone receive ultrasound training. (Courtesy photo)

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A patient receives care at a Direct Relief Health Fair at Community Las Carmelitas in Puerto Rico in December 2021. (Xavier García/Direct Relief)

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Aguiniga
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In Haiti, a nurse speaks with a young patient before an examination at a Direct Relief-supported mobile clinic. (Photo courtesy of Health Equity International)

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.

Ruth M. Beach

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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.

