

Form 990
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2019, and ending 12-31-2019
B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending
C Name of organization: SAMARITAN'S PURSE
D Employer identification number: 58-1437002
E Telephone number: (828) 262-1980
F Name and address of principal officer: WILLIAM FRANKLIN GRAHAM III, PO BOX 3000, BOONE, NC 28607
G Gross receipts \$ 914,966,635
H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
I Tax-exempt status: 501(c)(3)
J Website: WWW.SAMARITAN.ORG
K Form of organization: Corporation
L Year of formation: 1980
M State of legal domicile: NC

Part I Summary

Table with 4 columns: Description, Prior Year, Current Year, End of Year. Rows include: 1. Mission statement, 2-7. Activities & Governance, 8-12. Revenue, 13-19. Expenses, 20-22. Net Assets or Fund Balances.

Part II Signature Block

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

Sign Here: Signature of officer, Date: 2020-08-13, Name and Title: MERRILL LITTLEJOHN VP-FINANCE/CFO

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN, Firm's name, Firm's EIN, Firm's address, Phone no.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission

SAMARITAN'S PURSE IS A NONDENOMINATIONAL EVANGELICAL CHRISTIAN ORGANIZATION PROVIDING SPIRITUAL AND PHYSICAL AID TO HURTING PEOPLE AROUND THE WORLD SINCE 1970, SAMARITAN'S PURSE HAS HELPED MEET NEEDS OF PEOPLE WHO ARE VICTIMS OF WAR, POVERTY, NATURAL DISASTERS, DISEASE, AND FAMINE WITH THE PURPOSE OF SHARING GOD'S LOVE THROUGH HIS SON, JESUS CHRIST THE ORGANIZATION SERVES THE CHURCH WORLDWIDE TO PROMOTE THE GOSPEL OF THE LORD JESUS CHRIST

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No
If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ 306,826,323 including grants of \$ 232,568,419) (Revenue \$)
See Additional Data

4b (Code) (Expenses \$ 41,041,391 including grants of \$ 6,287,060) (Revenue \$)
See Additional Data

4c (Code) (Expenses \$ 40,018,548 including grants of \$ 546,573) (Revenue \$)
See Additional Data

(Code) (Expenses \$ 205,500,316 including grants of \$ 32,083,234) (Revenue \$ 3,666,691)

THE MISSION OF SAMARITAN'S PURSE IS TO OBEDIENTLY SERVE THE LORD JESUS CHRIST AT THE CORE OF OUR MINISTRY IS THE BELIEF THAT MANKIND HAS BEEN SEPARATED FROM GOD BY SIN, AND OUR ONLY HOPE OF SALVATION COMES FROM THE ATONING SACRIFICE OF GOD'S SON, JESUS CHRIST "IF YOU CONFESS WITH YOUR MOUTH THE LORD JESUS AND BELIEVE IN YOUR HEART THAT GOD HAS RAISED HIM FROM THE DEAD, YOU WILL BE SAVED" (ROMANS 10 9) MANY CLAIM TO BEHAVE MERCIFULLY TOWARD THEIR NEIGHBORS OUT OF A SENSE OF SOCIAL CONSCIOUSNESS AT SAMARITAN'S PURSE, WE TAKE OUR NAME AND MANDATE FROM CHRIST'S INSTRUCTION THAT WE SHOULD FIRST LOVE THE LORD WITH OUR HEARTS, SOULS, MINDS, AND STRENGTH CARING FOR OUR NEIGHBORS THEN FLOWS FROM OUR DEEP LOVE FOR GOD THIS COMMAND IS ILLUSTRATED IN THE PARABLE OF THE GOOD SAMARITAN AS TOLD BY JESUS AND RECORDED IN LUKE 10 25-37 (NEW KING JAMES VERSION) AND BEHOLD, A CERTAIN LAWYER STOOD UP AND TESTED HIM, SAYING, "TEACHER, WHAT SHALL I DO TO INHERIT ETERNAL LIFE?" HE SAID TO HIM, "WHAT IS WRITTEN IN THE LAW? WHAT IS YOUR READING OF IT?" SO HE ANSWERED AND SAID, "'YOU SHALL LOVE THE LORD YOUR GOD WITH ALL YOUR HEART, WITH ALL YOUR SOUL, WITH ALL YOUR STRENGTH, AND WITH ALL YOUR MIND - AND 'YOUR NEIGHBOR AS YOURSELF' - AND HE SAID TO HIM, "YOU HAVE ANSWERED RIGHTLY, DO THIS AND YOU WILL LIVE " BUT HE, WANTING TO JUSTIFY HIMSELF, SAID TO JESUS, "-AND WHO IS MY NEIGHBOR?" THEN JESUS ANSWERED AND SAID "A CERTAIN MAN WENT DOWN FROM JERUSALEM TO JERICHO, AND FELL AMONG THIEVES, WHO STRIPPED HIM OF HIS CLOTHING, WOUNDED HIM, AND DEPARTED, LEAVING HIM HALF DEAD NOW BY CHANCE A CERTAIN PRIEST CAME DOWN THAT ROAD AND WHEN HE SAW HIM, HE PASSED BY ON THE OTHER SIDE LIKEWISE A LEVITE, WHEN HE ARRIVED AT THE PLACE, CAME AND LOOKED, AND PASSED BY ON THE OTHER SIDE BUT A CERTAIN SAMARITAN, AS HE JOURNEYED, CAME WHERE HE WAS AND WHEN HE SAW HIM, HE HAD COMPASSION SO HE WENT TO HIM AND BANDAGED HIS WOUNDS, POURING ON OIL AND WINE, AND HE SET HIM ON HIS OWN ANIMAL, BROUGHT HIM TO AN INN, AND TOOK CARE OF HIM ON THE NEXT DAY, WHEN HE DEPARTED, HE TOOK OUT TWO DENARII, GAVE THEM TO THE INNKEEPER, AND SAID TO HIM, "TAKE CARE OF HIM, AND WHATEVER MORE YOU SPEND, WHEN I COME AGAIN, I WILL REPAY YOU " SO WHICH OF THESE THREE DO YOU THINK WAS NEIGHBOR TO HIM WHO FELL AMONG THE THIEVES?- AND HE SAID, "HE WHO SHOWED MERCY ON HIM " THEN JESUS SAID TO HIM, "GO AND DO LIKEWISE " AT SAMARITAN'S PURSE, WE ARE RESPONDING TO CHRIST'S COMMAND TO DO LIKEWISE AS WE MINISTER TO THOSE SUFFERING FROM THE RESULTS OF SIN IN OUR WORLD WAR, POVERTY, DISASTER, DISEASE, AND FAMINE THE BIBLE TELLS US, "THE HEART IS DECEITFUL ABOVE ALL THINGS, AND DESPERATELY WICKED, WHO CAN KNOW IT?" (JEREMIAH 17 9) IN THE NEW TESTAMENT, WE READ THAT "THE WAGES OF SIN IS DEATH" (ROMANS 6 23) BECAUSE OF ADAM AND EVE'S DISOBEDIENCE, EVERY HUMAN BEING IS BORN WITH THE STAIN OF SIN, WHICH, WITHOUT THE CLEANSING BLOOD OF JESUS CHRIST, ULTIMATELY LEADS TO PHYSICAL AND SPIRITUAL DEATH THE LORD, IN HIS MERCY, SENT HIS BELOVED SON, JESUS CHRIST, FROM HEAVEN TO THIS EARTH ON A RESCUE MISSION JOHN 3 16 SAYS, "FOR GOD SO LOVED THE WORLD THAT HE GAVE HIS ONLY BEGOTTEN SON, THAT WHOEVER BELIEVES IN HIM SHOULD NOT PERISH, BUT HAVE EVERLASTING LIFE " JESUS TOOK OUR SINS UPON HIMSELF, SUFFERING AND DYING ON A ROMAN CROSS HE TOOK OUR SINS TO THE GRAVE, AND ON THE THIRD DAY, HE AROSE AGAIN THROUGH HIS DEATH AND RESURRECTION, JESUS BECAME THE WAY FOR US TO BE RECONCILED TO GOD HE SAID, "I AM THE WAY, THE TRUTH, AND THE LIFE NO ONE COMES TO THE FATHER EXCEPT THROUGH ME" (JOHN 14 6) IF YOU CHOOSE TO REMAIN IN YOUR SINS, YOU WILL BE SEPARATED FROM GOD FOREVER BUT, IF YOU PLACE YOUR FAITH AND TRUST IN WHAT JESUS HAS DONE, YOU WILL BE SAVED BY GOD'S GRACE THIS IS THE GOOD NEWS "HE WHO BELIEVES IN HIM IS NOT CONDEMNED, BUT HE WHO DOES NOT BELIEVE IS CONDEMNED ALREADY, BECAUSE HE HAS NOT BELIEVED IN THE NAME OF THE ONLY BEGOTTEN SON OF GOD" (JOHN 3 18) IF YOU WANT TO RECEIVE GOD'S FREE GIFT OF SALVATION, YOU CAN PRAY A SIMPLE PRAYER LIKE THIS ONE DEAR GOD, I AM A SINNER I AM SORRY FOR MY SINS PLEASE FORGIVE ME HELP ME TO TURN FROM MY SINFUL LIFE I BELIEVE BY FAITH THAT JESUS CHRIST IS YOUR SON WHO DIED FOR MY SINS, AND WHOM YOU HAVE RAISED TO LIFE I WANT TO TRUST JESUS AS MY SAVIOR AND FOLLOW HIM AS MY LORD FROM THIS DAY FORWARD AND FOREVERMORE AMEN IF YOU HAVE PRAYED THIS, OR WOULD LIKE SOME SPIRITUAL HELP, PLEASE CALL THE FOLLOWING NUMBER TO SPEAK WITH A COUNSELOR 1-877-247-2426 YOU CAN TRUST THESE WORDS ARE TRUE "FOR BY GRACE YOU HAVE BEEN SAVED THROUGH FAITH, AND THAT NOT OF YOURSELVES, IT IS THE GIFT OF GOD, NOT OF WORKS, LEST ANYONE SHOULD BOAST" (EPHESIANS 2 8-9) AT SAMARITAN'S PURSE, WE TAKE PRAYER SERIOUSLY THANKS TO WHAT JESUS CHRIST HAS DONE, WE CAN TAKE OUR PRAYER CONCERNS DIRECTLY TO OUR GOD IN HEAVEN WE CAN ASK HIM TO INTERVENE IMMEDIATELY ON BEHALF OF THOSE WHOSE LIVES ARE IN DANGER, AND WE TRUST HIM TO PROVIDE THE RESOURCES FOR US TO SWIFTLY ACCOMPLISH HIS WORK AND HIS WILL THE QUARTERLY MAGAZINE OF SAMARITAN'S PURSE, PRAYERPOINT, IS DEVOTED ENTIRELY TO PRAYER FOR OUR PROJECTS AROUND THE WORLD WE TRUST THAT AS GOD ANSWERS PRAYERS, HE WILL MEET THE NEEDS OF HIS PEOPLE IN ADDITION TO THE MINISTRIES LISTED IN PART III, THE FOLLOWING MINISTRIES ARE OUR RESPONSE TO THE EFFECTS OF SIN ON HUMANITY AND THE NATURAL WORLD OUR MISSION IS TO BRING GOD'S LOVE, HEALING, AND COMPASSION TO THOSE WHO ARE HURTING OR LOST BAHAMAS AFTER HURRICANE DORIAN HIT THE BAHAMAS, SAMARITAN'S PURSE RESPONDED IMMEDIATELY OUR DC-8 CARGO PLANE MADE A TOTAL OF 18 TRIPS TO THE ISLANDS, TRANSPORTING 360 TONS OF EMERGENCY SUPPLIES WE ESTABLISHED AN EMERGENCY FIELD HOSPITAL ADJACENT TO THE DAMAGED HOSPITAL IN FREEPORT, WHERE WE PROVIDED CARE TO NEARLY 8,000 PATIENTS AND PERFORMED 196 SURGERIES WORKING IN PARTNERSHIP WITH LOCAL CHURCHES, WE DISTRIBUTED MORE THAN 16,700 TARPS, 17,110 BLANKETS, 7,170 HYGIENE KITS, 5,950 AIR MATTRESSES, AND 6,690 SOLAR LIGHTS AFTER THE EMERGENCY PHASE, OUR TEAMS CLEANED OVER 17,000 CUBIC METERS OF DEBRIS AND RENOVATED 28 HOUSES THIS WORK CONTINUES IN 2020 IRAQ SAMARITAN'S PURSE ASSISTED IN REBUILDING OR REPAIRING 184 HOMES DAMAGED BY ISIS TERRORISTS, AND PROVIDED TRAUMA COUNSELING TO MORE THAN 1,600 PEOPLE WE DISTRIBUTED FOOD RATIONS TO OVER 18,600 PEOPLE AND WINTER BOOTS TO OVER 2,000 CHILDREN MANY OF THESE INDIVIDUALS WERE REFUGEES FROM THE FIGHTING IN SYRIA MORE THAN 6,530 PEOPLE HEARD THE GOSPEL COLOMBIA SAMARITAN'S PURSE WORKED ON THE BORDER TO MINISTER TO MIGRANTS LEAVING VENEZUELA WE SERVED MORE THAN 105,000 HOT MEALS, DISTRIBUTED 5,910 BACKPACKS AND 35,140 HYGIENE KITS, AND CARED FOR 14,180 PATIENTS THROUGH A PRIMARY CARE CLINIC AND A MOBILE CLINIC IN THE COURSE OF THIS WORK, OVER 183,500 PEOPLE WERE PRESENTED WITH THE GOSPEL DEMOCRATIC REPUBLIC OF THE CONGO IN THE MIDST OF AN ONGOING EBOLA OUTBREAK, SAMARITAN'S PURSE TREATED MORE THAN 600 PEOPLE AT A TREATMENT CENTER WE SET UP IN THE VILLAGE OF KOMANDA WE ALSO PROVIDED TRAINING AND SUPPLIES FOR HOSPITALS AND CLINICS TO EQUIP THEM TO RESPOND TO THE OUTBREAK TO HELP PREVENT THE SPREAD OF EBOLA, WE PROMOTED PROPER HYGIENE TECHNIQUES TO OVER 97,500 PEOPLE WE ALSO PROVIDED FOOD RATIONS TO MORE THAN 200,000 PEOPLE AND SUPPLEMENTARY FOOD TO OVER 3,700 WOMEN AND CHILDREN AT RISK OF MALNUTRITION MORE THAN 19,000 PEOPLE WERE ASSISTED WITH SEEDS AND TOOLS TO ENABLE THEM TO CARE FOR THEIR FAMILIES FOR YEARS TO COME, AND MORE THAN 15,000 HEARD THE GOSPEL THROUGH PROJECTS TRAINING AND VISITS OTHER INTERNATIONAL PROJECTS SAMARITAN'S PURSE DEPLOYED A DISASTER ASSISTANCE RESPONSE TEAM TO MOZAMBIQUE TO HELP SURVIVORS OF TROPICAL STORM IDAI, THE SECOND DEADLIEST TROPICAL STORM EVER IN THE SOUTHERN HEMISPHERE SAMARITAN'S PURSE SET UP AN EMERGENCY FIELD HOSPITAL TO CARE FOR MORE THAN 5,700 PEOPLE IN THE FLOODED TOWN OF BUZI, AND ALSO DISTRIBUTED 159 TONS OF EMERGENCY SUPPLIES, INCLUDING BLANKETS AND WATER FILTERS ALSO DURING 2019, WE HAD FIELD OFFICES IN 21 COUNTRIES TO HELP IMPOVERISHED FAMILIES AND COMMUNITIES WITH ACCESS TO CLEAN WATER, AGRICULTURAL ASSISTANCE, SCHOOLS, AND OTHER ESSENTIAL SERVICES WORLD MEDICAL MISSION THE MEDICAL ARM OF SAMARITAN'S PURSE ARRANGED 800 SHORT-TERM TRIPS FOR VOLUNTEERS TO SERVE AT 38 MISSION HOSPITALS AROUND THE WORLD ANOTHER 31 DOCTORS WERE ON TWO-YEAR ASSIGNMENTS THROUGH OUR POST-RESIDENCY PROGRAM AS THEY FOLLOWED GOD'S CALL TO DEVOTE THEIR CAREERS TO OVERSEAS MISSIONS OUR MEDICAL WAREHOUSE SHIPPED 189 TONS OF SUPPLIES TO 24 HOSPITALS AND CLINICS IN 21 COUNTRIES, AND OUR BIOMEDICAL TECHNICIANS VISITED 29 HOSPITALS TO REPAIR, UPDATE, OR SERVICE LIFE-SAVING MEDICAL EQUIPMENT WE PRAISE GOD FOR HOW HE USES THESE SERVANTS TO SAVE LIVES AND SPREAD THE GOSPEL OF JESUS CHRIST, THE GREAT PHYSICIAN "THE LORD IS NEAR TO ALL WHO CALL UPON HIM, TO ALL WHO CALL UPON HIM IN TRUTH" (PSALM 145 18) THE GREATEST JOURNEY THIS IS A FOLLOW-UP PROGRAM DEVELOPED BY SAMARITAN'S PURSE ESPECIA

4d Other program services (Describe in Schedule O)
(Expenses \$ 205,500,316 including grants of \$ 32,083,234) (Revenue \$ 3,666,691)

4e Total program service expenses 593,386,578

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a Did the organization maintain an office, employees, or agents outside of the United States?	Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	Yes	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	Yes	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 22 through 38 regarding organizational reporting and compliance.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V [checked]

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 1a, 1b, and 1c regarding IRS filings and gaming.

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

<p>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return</p>	<p>2a 3,305</p>		
<p>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>	<p>2b</p>	<p>Yes</p>	
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>	<p>3a</p>		<p>No</p>
<p>b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O</p>	<p>3b</p>		
<p>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</p>	<p>4a</p>	<p>Yes</p>	
<p>b If "Yes," enter the name of the foreign country ▶BL See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)</p>			
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>	<p>5a</p>		<p>No</p>
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>	<p>5b</p>		<p>No</p>
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>	<p>5c</p>		
<p>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?</p>	<p>6a</p>		<p>No</p>
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>	<p>6b</p>		
<p>7 Organizations that may receive deductible contributions under section 170(c).</p>			
<p>a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?</p>		<p>7a</p>	<p>Yes</p>
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>		<p>7b</p>	<p>Yes</p>
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>		<p>7c</p>	<p>Yes</p>
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	<p>7d 2</p>		
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>	<p>7e</p>		<p>No</p>
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>	<p>7f</p>		<p>No</p>
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>	<p>7g</p>		
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>	<p>7h</p>	<p>Yes</p>	
<p>8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</p>	<p>8</p>		
<p>9 Sponsoring organizations maintaining donor advised funds.</p>			
<p>a Did the sponsoring organization make any taxable distributions under section 4966?</p>	<p>9a</p>		
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>	<p>9b</p>		
<p>10 Section 501(c)(7) organizations. Enter</p>			
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	<p>10a</p>		
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	<p>10b</p>		
<p>11 Section 501(c)(12) organizations. Enter</p>			
<p>a Gross income from members or shareholders</p>	<p>11a</p>		
<p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</p>	<p>11b</p>		
<p>12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</p>			
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year</p>	<p>12b</p>		
<p>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</p>			
<p>a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O</p>		<p>13a</p>	
<p>b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans</p>	<p>13b</p>		
<p>c Enter the amount of reserves on hand</p>	<p>13c</p>		
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>	<p>14a</p>		<p>No</p>
<p>b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O</p>	<p>14b</p>		
<p>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N</p>	<p>15</p>		<p>No</p>
<p>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O</p>	<p>16</p>		<p>No</p>

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed	AK, CA, FL, GA, HI, IL, LA, MD, MN, MS, NH, NM, NC, ND, PA, SC, TN, UT, VA, WV, WI, AZ, MA
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, address, and telephone number of the person who possesses the organization's books and records C MERRILL LITTLEJOHN 801 BAMBOO ROAD BOONE, NC 28607 (828) 262-1980	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
1c Total from continuation sheets to Part VII, Section A										
1d Total (add lines 1b and 1c)								3,881,915	636,011	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 111

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
POIT LLC, 1914 SKILLMAN STREET SUITE 110360 DALLAS, TX 75206	IT CONSULTING	822,964
BRPH ARCHITECTS - ENGINEERS INC, 5700 N US HWY 1 SUITE 400 MELBOURNE, FL 32940	ARCHITECT/DESIG	757,753
HEALTH CITY CAYMAN ISLANDS LTD, 1283 SEA VIEW ROAD PB 10590 GCM HIGH ROCK CJ	MEDICAL/SURGERY	651,960
LS3P ASSOCIATES LTD, 227 W TRADE STREET SUITE 700 CHARLOTTE, NC 28202	ARCHITECT/DESIG	542,972
M ARTHUR GENSLER JR ASSOC INC, 500 SOUTH FIGUEROA STREET LOS ANGELES, CA 90071	ARCHITECT/DESIG	396,914

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 27

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 1,975,548			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e 46,399,110			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 671,951,372			
	g Noncash contributions included in lines 1a - 1f \$	1g 242,907,898			
	h Total. Add lines 1a-1f		720,326,030		

Program Service Revenue			(A)	(B)	(C)	(D)
		Business Code				
2a BGEA SHARED SERVICES		900099	2,618,850	2,618,850		
b						
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f.			2,618,850			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		10,532,155			10,532,155	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		2,412			2,412	
	6a Gross rents	6a	(i) Real	17,821			
			(ii) Personal				
		b Less rental expenses	6b				
		c Rental income or (loss)	6c	17,821			
	d Net rental income or (loss)			17,821			17,821
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities	175,299,465	932,356		
			(ii) Other				
		b Less cost or other basis and sales expenses	7b	175,756,407	907,650		
		c Gain or (loss)	7c	-456,942	24,706		
	d Net gain or (loss)			-432,236			-432,236
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	8a					
	b Less direct expenses	8b					
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities See Part IV, line 19	9a					
	b Less direct expenses	9b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	10a		4,647,055			
10b			4,189,705				
c Net income or (loss) from sales of inventory			457,350	457,350			
Miscellaneous Revenue	Business Code						
11a DISCOUNTS/OTHER	900099		578,228	578,228			
b DOCUMENTARY REVENUE	900099		12,263	12,263			
c							
d All other revenue							
e Total. Add lines 11a-11d			590,491				
12 Total revenue. See instructions			734,112,873	3,666,691		10,120,152	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	13,064,191	13,064,191		
2 Grants and other assistance to domestic individuals See Part IV, line 22	1,244,969	1,244,969		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	257,176,126	257,176,126		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,036,326	1,328,663	969,398	738,265
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	657,440	421,394	89,818	146,228
7 Other salaries and wages	111,258,419	76,207,994	17,032,278	18,018,147
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	5,097,640	2,840,752	1,032,613	1,224,275
9 Other employee benefits	29,382,307	20,353,068	4,379,042	4,650,197
10 Payroll taxes	6,540,183	3,863,575	1,295,744	1,380,864
11 Fees for services (non-employees)				
a Management				
b Legal	630,742	282,874	346,482	1,386
c Accounting	256,940	128,249	128,649	42
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	16,046,492	12,859,604	1,339,047	1,847,841
12 Advertising and promotion	14,974,343	5,403,853	503,282	9,067,208
13 Office expenses	21,062,460	11,881,157	1,512,431	7,668,872
14 Information technology	2,318,545	756,850	1,559,230	2,465
15 Royalties	191,644	191,644		
16 Occupancy	18,041,553	11,750,483	5,444,618	846,452
17 Travel	46,338,512	39,941,076	1,802,480	4,594,956
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,719,736	851,123	6,578	862,035
20 Interest	3,398	3,398		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	19,879,329	13,423,435	3,030,318	3,425,576
23 Insurance	171,825	87,631	39,520	44,674
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a PROJECT MTLs/SUPPLIES-VAR	41,507,182	41,430,814	30,340	46,028
b CONSTRUCTION PROGRAM MTLs	31,357,895	31,295,601	121	62,173
c TRANSPORT-RELIEF/OTHR MTLs	25,592,526	25,493,948	7,959	90,619
d BIBLES/EVANGELISTIC MTLs	11,981,899	11,762,987	52,376	166,536
e All other expenses	9,594,747	9,341,119	27,003	226,625
25 Total functional expenses. Add lines 1 through 24e	689,127,369	593,386,578	40,629,327	55,111,464
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	14,567,839	5,264,179	287,757	9,015,903

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	218,620,394	1	248,573,388
	2 Savings and temporary cash investments	202,659	2	203,461
	3 Pledges and grants receivable, net	9,073,607	3	8,199,662
	4 Accounts receivable, net	6,113,404	4	1,748,219
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	56,364,752	8	49,299,952
	9 Prepaid expenses and deferred charges	9,229,150	9	5,211,577
	10a Land, buildings, and equipment—cost or other basis—Complete Part VI of Schedule D	10a 331,368,352		
	b Less accumulated depreciation	10b 138,057,263	162,405,195	10c 193,311,089
	11 Investments—publicly traded securities	239,541,248	11	252,339,504
	12 Investments—other securities—See Part IV, line 11		12	
	13 Investments—program-related—See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets—See Part IV, line 11	6,752,169	15	7,757,324
16 Total assets. Add lines 1 through 15 (must equal line 34)	708,302,578	16	766,644,176	
Liabilities	17 Accounts payable and accrued expenses	31,897,957	17	39,841,643
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability—Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24)—Complete Part X of Schedule D	26,708,446	25	24,845,708
	26 Total liabilities. Add lines 17 through 25	58,606,403	26	64,687,351
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	388,051,760	27	458,674,126
	28 Net assets with donor restrictions	261,644,415	28	243,282,699
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	649,696,175	32	701,956,825	
33 Total liabilities and net assets/fund balances	708,302,578	33	766,644,176	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	734,112,873
2	Total expenses (must equal Part IX, column (A), line 25)	2	689,127,369
3	Revenue less expenses Subtract line 2 from line 1	3	44,985,504
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	649,696,175
5	Net unrealized gains (losses) on investments	5	9,811,299
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-2,536,153
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	701,956,825

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a	Yes	
3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 58-1437002

Name: SAMARITAN'S PURSE

Form 990 (2019)

Form 990, Part III, Line 4a:

OPERATION CHRISTMAS CHILD THROUGH THIS PROJECT, SAMARITAN'S PURSE COLLECTS AND DELIVERS GIFT-FILLED SHOEBOXES TO MILLIONS OF HURTING CHILDREN AROUND THE WORLD WE DO THIS TO DEMONSTRATE GOD'S LOVE, GAIN A HEARING FOR THE GOSPEL, AND SHARE THE TRUE MEANING OF CHRISTMAS-THE BIRTH OF JESUS CHRIST, OUR LORD AND SAVIOR JESUS TOLD US, "GO THEREFORE AND MAKE DISCIPLES OF ALL THE NATIONS" (MATTHEW 28 19) IN 2019, OPERATION CHRISTMAS CHILD REACHED BOYS AND GIRLS IN MORE THAN 100 COUNTRIES WITH 10,569,405 GIFT BOXES, INCLUDING 8,950,144 COLLECTED IN THE U S (OTHERS COME FROM CANADA, THE UNITED KINGDOM, GERMANY, FINLAND, SPAIN, AND AUSTRALIA) SINCE 1993, OCC HAS HANDED OUT OVER 179 MILLION SHOEBOX GIFTS NATIONAL COLLECTION WEEK WILL BE NOV 16-23, 2020, AT THOUSANDS OF LOCATIONS ACROSS THE U S

Form 990, Part III, Line 4b:

U S DISASTER RELIEF MORE THAN 14,800 VOLUNTEERS SERVED WITH OUR NORTH AMERICAN MINISTRIES IN 2019 AND HELPED OVER 4,600 HOUSEHOLDS TEAMS RESPONDED TO HURRICANE DORIAN IN THE BAHAMAS AND NORTH CAROLINA AND REPAIRED OR REBUILT 114 HOUSES FOR STORM VICTIMS IN TEXAS, LOUISIANA, ALABAMA, FLORIDA, AND THE CAROLINAS DISASTER RELIEF TEAMS RESPONDED TO TORNADOES IN ALABAMA, TEXAS, OHIO, MISSOURI, AND ALABAMA, FLOODS IN NEBRASKA, MICHIGAN, OKLAHOMA, AND NORTH CAROLINA, AND A WILDFIRE IN CALIFORNIA OUR VOLUNTEERS ALSO BUILT CHURCHES IN TWO ALASKAN VILLAGES ON THE TEXAS-MEXICO BORDER, MORE THAN 120 VOLUNTEERS WORKED TO HELP DESPERATE IMMIGRANTS "FOR ALL THE LAW IS FULFILLED IN ONE WORD, EVEN IN THIS "YOU SHALL LOVE YOUR NEIGHBOR AS YOURSELF" (GALATIANS 5 14)

Form 990, Part III, Line 4c:

SOUTH SUDAN RELIEF SAMARITAN'S PURSE DISTRIBUTED FOOD RATIONS TO MORE THAN 529,000 PEOPLE AND SUPPLEMENTARY FOOD TO OVER 77,500 WOMEN AND CHILDREN AT RISK OF MALNUTRITION WE ALSO PROVIDED OVER 590 MILLION LITERS OF CLEAN WATER TO REFUGEES OUR INTERNATIONAL MEDICAL TEAMS AT MABAN HOSPITAL SERVED 4,695 PATIENTS AND PERFORMED 2,613 SURGERIES OVER 3,100 PEOPLE RECEIVED BIBLES, AND MORE THAN 168,000 HEARD THE GOSPEL THROUGH THE JESUS FILM AND OTHER PROGRAMS FACILITATED BY LOCAL CHURCHES-MANY OF THESE CHURCHES CONSTRUCTED BY SAMARITAN'S PURSE SINCE 2005 "FOR HE SATISFIES THE LONGING SOUL, AND FILLS THE HUNGRY SOUL WITH GOODNESS" (PSALM 107 9)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
WILLIAM FRANKLIN GRAHAM III BD MEM/CHR/P	40 00	X		X				661,199	0	61,204
PHYLLIS PAYNE BD MEM/ASSTS	40 00	X		X				299,795	0	49,313
BRIAN PAULS BD MEM/VICE	1 00	X		X				0	0	0
STERLING CARROLL BD MEM/TREAS	1 00	X		X				0	0	0
JANE AUSTIN LYNCH BD MEM/SPOKE	40 00	X						69,730	0	8,343
FELIX MARTIN DEL CAMPO BD MEM/CONSU	1 00	X						17,000	0	0
LOUIS HEITZIG BOARD MEMBER	1 00	X						15,000	0	0
MICHAEL CHEATHAM BOARD MEMBER	1 00	X						0	0	0
MELVIN GRAHAM BOARD MEMBER	1 00	X						0	0	0
ROY GRAHAM BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL HARWOOD BOARD MEMBER	1 00	X						0	0	0
THOMAS HODGES BOARD MEMBER	1 00	X						0	0	0
DOUGLAS HORNE BOARD MEMBER	1 00	X						0	0	0
JAMES OLIVER BOARD MEMBER	1 00	X						0	0	0
JERRY PREVO BOARD MEMBER	1 00	X						0	0	0
PAUL SABER BOARD MEMBER	1 00	X						0	0	0
ROBERT SHANK BOARD MEMBER	1 00	X						0	0	0
JOHN SCOTT BOARD MEMBER	1 00	X						0	0	0
MERRILL LITTLEJOHN VP-FINANCE/C	40 00			X				262,733	0	46,326
DONNA PIERCE SECRETARY	40 00			X				176,426	0	42,056

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JAMES FURMAN ASSISTANT TR	1 00			X				0	0	0
RONALD WILCOX COO	40 00				X			294,852	0	49,016
JAMES HARRELSON VP-OP CHRIST	40 00				X			283,144	0	54,166
KENNETH ISAACS VP-PROG/GOVT	40 00				X			281,031	0	47,037
PAULA WOODRING VP-QUALITY A	40 00				X			272,167	0	45,785
WILLIAM MAUPIN VP-INFO TECH	40 00					X		259,925	0	53,890
JAMES DAILEY VP-COMMUNICA	40 00					X		259,857	0	47,027
CHRISTOPHER WEEKS CLO/DIRAFFIL	40 00					X		254,263	0	47,651
TODD CHASTEEN VP-PUBLIC PO	40 00					X		237,558	0	50,024
LUTHER HARRISON VP-NORTH AME	40 00					X		237,235	0	34,173

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
SAMARITAN'S PURSE

Employer identification number

58-1437002

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

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

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s)

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.
 If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	585,894,450	618,394,971	776,782,676	688,260,668	720,326,030	3,389,658,795
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	585,894,450	618,394,971	776,782,676	688,260,668	720,326,030	3,389,658,795
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						48,560,871
6 Public support. Subtract line 5 from line 4						3,341,097,924

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	585,894,450	618,394,971	776,782,676	688,260,668	720,326,030	3,389,658,795
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,868,513	1,306,454	5,565,478	7,924,599	10,552,388	31,217,432
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	479,035	389,576	594,706	481,814		1,945,131
11 Total support. Add lines 7 through 10						3,422,821,358
12 Gross receipts from related activities, etc. (see instructions)					12	17,778,199

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	97.610%
15 Public support percentage for 2018 Schedule A, Part II, line 14	15	98.990%

- 16a 33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2019			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2019 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2020. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

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

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
PART II, LINE 10	DISCOUNTS/OTHER 1,945,131

990 Schedule A, Supplemental Information

Return Reference	Explanation
SUPPLEMENTAL INFORMATION	THE MINISTRY'S PUBLIC CHARITY STATUS IS CLASSIFIED AS AN ASSOCIATION OF CHURCHES (IRS SECTION 170(B)(1)(A)(I)) THE MINISTRY HAS SELECTED SCHEDULE A, PART I, BOX 7 RATHER THAN BOX 1 SINCE THE NATURE OF THE MINISTRY CONTINUES TO BE THAT OF AN ORGANIZATION THAT RECEIVES A SUBSTANTIAL PART OF ITS SUPPORT FROM A GOVERNMENTAL UNIT OR FROM THE GENERAL PUBLIC

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047
2019
Open to Public Inspection

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization: SAMARITAN'S PURSE
Employer identification number: 58-1437002

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

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

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,007,009	1,007,009	1,007,009		
b Contributions				1,006,651	
c Net investment earnings, gains, and losses	274,870	4,237	149,177	17,358	
d Grants or scholarships					
e Other expenditures for facilities and programs	274,870	4,237	149,177	17,000	
f Administrative expenses					
g End of year balance	1,007,009	1,007,009	1,007,009	1,007,009	

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶ 100 000 %
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | Yes | No |
|--|---------------|----|
| (i) unrelated organizations | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		24,701,778		24,701,778
b Buildings		134,755,702	35,096,676	99,659,026
c Leasehold improvements				
d Equipment		171,910,872	102,960,587	68,950,285
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				193,311,089

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	24,845,708

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	753,607,738
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	9,811,299
b	Donated services and use of facilities	2b	12,486,196
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	22,297,495
3	Subtract line 2e from line 1	3	731,310,243
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	2,802,630
c	Add lines 4a and 4b	4c	2,802,630
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	734,112,873

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

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

1	Total expenses and losses per audited financial statements	1	701,347,088
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	12,486,196
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	12,486,196
3	Subtract line 2e from line 1	3	688,860,892
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	266,477
c	Add lines 4a and 4b	4c	266,477
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	689,127,369

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Additional Data

Software ID:

Software Version:

EIN: 58-1437002

Name: SAMARITAN'S PURSE

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 2, PART V, LINE 4	ENDOWMENT FUNDS HELD BY THE MINISTRY ARE INVESTED TO PROVIDE A LONG-TERM FUNDING SOURCE TO SUPPLEMENT THE ACTIVITIES OF OPERATION HEAL OUR PATRIOTS

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 3, PART X	THE MINISTRY IS EXEMPT FROM FEDERAL INCOME TAXES, AND CONTRIBUTIONS TO THE MINISTRY ARE DEDUCTIBLE AS CHARITABLE CONTRIBUTIONS UNDER INTERNAL REVENUE CODE SECTION 170 THE INTERNAL REVENUE SERVICE HAS ISSUED A DETERMINATION LETTER TO THE MINISTRY STATING THAT IT CONTINUES TO QUALIFY FOR TAX-EXEMPT STATUS UNDER INTERNAL REVENUE CODE SECTION 501(C)(3), THAT IT IS NOT A PRIVATE FOUNDATION, AND THAT IT IS CLASSIFIED AS A PUBLIC CHARITY DESCRIBED IN 509(A)(1) AND 170(B)(1)(A)(I) THE MINISTRY HAS DETERMINED THAT IT DOES NOT HAVE ANY MATERIAL UNRECOGNIZED TAX BENEFITS OR OBLIGATIONS AS OF DECEMBER 31, 2019

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 4, PART XI, LINE 4B	PLANNED GIVING BENEFICIARY PAYMENTS 2,536,153 PLANNED GIVING ADMIN FEES 266,477

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 4, PART XII, LINE 4B	PLANNED GIVING ADMIN FEES 266,477

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2019

**Open to Public
Inspection**

- ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization
SAMARITAN'S PURSE

Employer identification number

58-1437002

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

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- 3** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
See Add'l Data					
3a Sub-total	21	3,684			287,577,667
b Total from continuation sheets to Part I					105,931,615
c Totals (add lines 3a and 3b)	21	3,684			393,509,282

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)* Yes No

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PAGE 1, PART I, LINE 2	AN ACKNOWLEDGEMENT OF GIFT FORM IS SENT TO THE RECIPIENT AT THE TIME OF PAYMENT THE RECIPIENT WILL USE THE FORM TO NOTIFY SAMARITAN'S PURSE THAT THE FUNDS HAVE BEEN RECEIVED AND GIVE A BRIEF OVERVIEW OF HOW THE FUNDS HAVE BEEN USED FOR LARGER OR LONGER RUNNING PROGRAMS, THE REGIONAL DIRECTOR FOR THE PROJECT WILL COMMUNICATE REGULARLY WITH THE RECIPIENT AND OBTAIN A FINAL REPORT ON THE PROGRAM THE MINISTRY'S INTERNAL AUDIT DEPARTMENT MAY REVIEW A GRANTEE'S FINANCIAL RECORDS AT ITS DISCRETION

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PAGE 1, PART I, LINE 3	CENTRAL AMERICA/CARIBBEAN 22,884,010 0 CENTRAL AMERICA/CARIBBEAN 28,010,339 0 EAST ASIA/PACIFIC 8,449,372 0 EAST ASIA/PACIFIC 25,580,101 0 EUROPE 45,914 0 EUROPE 1,333,281 0 MIDDLE EAST & NORTH AFRICA 11,311,919 0 MIDDLE EAST & NORTH AFRICA 13,459,629 0 NORTH AMERICA 525,555 0 NORTH AMERICA 17,647,922 0 RUSSIA 7,932 0 RUSSIA 8,070,318 0 SOUTH AMERICA 13,218,742 0 SOUTH AMERICA 41,655,008 0 SOUTH ASIA 308,787 0 SOUTH ASIA 15,487,913 0 SUB-SAHARAN AFRICA 79,580,925 0 SUB-SAHARAN AFRICA 105,931,615 0

Additional Data

Software ID:

Software Version:

EIN: 58-1437002

Name: SAMARITAN'S PURSE

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA/CARIBBEAN	3	221	PROGRAM SVCS	COMMDEV/EMERRLF/MED	22,884,010
CENTRAL AMERICA/CARIBBEAN			GRANTS		28,010,339

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA/PACIFIC	6	323	PROGRAM SVCS	COMMDEV/EMERRLF/MED	8,449,372
EAST ASIA/PACIFIC			GRANTS		25,580,101

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE		37	PROGRAM SVCS	CHED/COMMDEV/MED	45,914
EUROPE			GRANTS		1,333,281

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
MIDDLE EAST & NORTH AFRICA	1	262	PROGRAM SVCS	CHED/COMMDEV/EMERRLF	11,311,919
MIDDLE EAST & NORTH AFRICA			GRANTS		13,459,629

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA			PROGRAM SVCS	COMMDEV/EMERRLF/MED	525,555
NORTH AMERICA			GRANTS		17,647,922

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
RUSSIA			PROGRAM SVCS	MED	7,932
RUSSIA			GRANTS		8,070,318

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH AMERICA	2	160	PROGRAM SVCS	COMMDEV/EMERRLF/MED	13,218,742
SOUTH AMERICA			GRANTS		41,655,008

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA	2	9	PROGRAM SVCS	COMMDEV/EMERRLF/MED	308,787
SOUTH ASIA			GRANTS		15,487,913

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	7	2,672	PROGRAM SVCS	COMMDEV/EMERRLF/MED	79,580,925
SUB-SAHARAN AFRICA			GRANTS		105,931,615

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST & NORTH AFRICA	CHILD MIN/EMERG RLF	1,770,142	WIRE			
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE	1,693,627	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST & NORTH AFRICA	CHRIST ED/COMM DEV	1,496,898	WIRE			
		MIDDLE EAST & NORTH AFRICA	MEDICAL ASSISTANCE	667,093	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	CHILD MIN/MED ASSIS	624,476	WIRE			
		MIDDLE EAST & NORTH AFRICA	COMMUNITY DEVELOP	478,312	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	MISC PROJECTS	460,268	WIRE			
		EAST ASIA/PACIFIC	CHILD MIN/CHRIST ED	375,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	CHILDREN'S MINISTRY	289,074	WIRE			
		EUROPE	MISC PROJECTS	253,492	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	MISC PROJECTS	236,142	WIRE			
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE	227,250	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST & NORTH AFRICA	CHRISTIAN EDUCATION	193,000	WIRE			
		SOUTH ASIA	COMM DEV/EMERG RLF	189,250	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	CHILDREN'S MINISTRY	185,761	WIRE			
		MIDDLE EAST & NORTH AFRICA	CHRISTIAN EDUCATION	160,000	CASH			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	150,000	EFT			
		EAST ASIA/PACIFIC	CHILDREN'S MINISTRY	149,570	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	CHILDREN'S MINISTRY	149,420	WIRE			
		SUB-SAHARAN AFRICA	CHRISTIAN EDUCATION	148,000	CASH			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHRISTIAN EDUCATION	133,334	EFT			
		MIDDLE EAST & NORTH AFRICA	MEDICAL ASSISTANCE	120,000	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	CHILDREN'S MINISTRY	119,399	WIRE			
		CENTRAL AMERICA/CARIBBEAN	CHILDREN'S MINISTRY	111,807	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	CHILDREN'S MINISTRY	106,802	WIRE			
		CENTRAL AMERICA/CARIBBEAN	MEDICAL ASSISTANCE	105,000	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST & NORTH AFRICA	CHRISTIAN EDUCATION	100,000	WIRE			
		SOUTH AMERICA	CHRISTIAN EDUCATION	96,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHRISTIAN EDUCATION	96,000	WIRE			
		SOUTH AMERICA	CHILDREN'S MINISTRY	95,298	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHRIST ED/COMM DEV	95,069	WIRE			
		MIDDLE EAST & NORTH AFRICA	CHILDREN'S MINISTRY	90,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	MISC PROJECTS	82,900	WIRE			
		SOUTH ASIA	CHRIST ED/EMERG RLF	82,725	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE	80,000	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	78,326	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST & NORTH AFRICA	CHILDREN'S MINISTRY	75,000	WIRE			
		SOUTH ASIA	EMERGENCY RELIEF	72,718	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	CHILDREN'S MINISTRY	71,810	WIRE			
		CENTRAL AMERICA/CARIBBEAN	COMMUNITY DEVELOP	65,607	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	CHRISTIAN EDUCATION	58,538	WIRE			
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE	58,200	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE	57,254	CHECK			
		SUB-SAHARAN AFRICA	COMMUNITY DEVELOP	57,000	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	EMERGENCY RELIEF	55,000	WIRE			
		EAST ASIA/PACIFIC	CHILDREN'S MINISTRY	53,357	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	CHILDREN'S MINISTRY	52,433	WIRE			
		EAST ASIA/PACIFIC	CHILDREN'S MINISTRY	52,129	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	52,099	WIRE			
		EAST ASIA/PACIFIC	MISC PROJECTS	50,000	CHECK			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST & NORTH AFRICA	CHRISTIAN EDUCATION	50,000	CHECK			
		MIDDLE EAST & NORTH AFRICA	EMERGENCY RELIEF	50,000	CHECK			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	CHILDREN'S MINISTRY	49,692	WIRE			
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE	49,673	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	45,280	WIRE			
		EAST ASIA/PACIFIC	EMERGENCY RELIEF	44,091	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	43,383	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	41,913	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	CHRISTIAN EDUCATION	41,800	WIRE			
		SOUTH ASIA	EMERGENCY RELIEF	41,485	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILD MIN/EMERG RLF	41,037	WIRE			
		RUSSIA	CHILDREN'S MINISTRY	40,985	CHECK			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	COMMUNITY DEVELOP	40,025	WIRE			
		MIDDLE EAST & NORTH AFRICA	CHRIST ED/EMERG RLF	40,000	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	COMMUNITY DEVELOP	40,000	WIRE			
		EAST ASIA/PACIFIC	EMERGENCY RELIEF	40,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	COMMUNITY DEVELOP	39,727	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	36,685	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	MEDICAL ASSISTANCE	36,000	CHECK			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	35,623	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	35,000	EFT			
		CENTRAL AMERICA/CARIBBEAN	COMMUNITY DEVELOP	34,952	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	34,485	WIRE			
		EAST ASIA/PACIFIC	COMMUNITY DEVELOP	34,280	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	CHILDREN'S MINISTRY	33,525	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	33,109	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	32,271	EFT			
		EAST ASIA/PACIFIC	MEDICAL ASSISTANCE	32,003	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	31,922	WIRE			
		MIDDLE EAST & NORTH AFRICA	COMMUNITY DEVELOP	31,800	CHECK			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	COMMUNITY DEVELOP	30,666	WIRE			
		CENTRAL AMERICA/CARIBBEAN	CHILDREN'S MINISTRY	30,123	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	30,100	WIRE			
		MIDDLE EAST & NORTH AFRICA	MEDICAL ASSISTANCE	30,000	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	COMMUNITY DEVELOP	30,000	EFT			
		MIDDLE EAST & NORTH AFRICA	EMERGENCY RELIEF	30,000	CHECK			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	MISC PROJECTS	29,432	WIRE			
		EAST ASIA/PACIFIC	COMMUNITY DEVELOP	29,202	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	CHILDREN'S MINISTRY	29,000	WIRE			
		EAST ASIA/PACIFIC	CHRISTIAN EDUCATION	28,819	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	CHILDREN'S MINISTRY	28,734	WIRE			
		SOUTH ASIA	CHRISTIAN EDUCATION	28,600	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	28,279	WIRE			
		SUB-SAHARAN AFRICA	EMERGENCY RELIEF	28,000	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	CHILDREN'S MINISTRY	26,215	WIRE			
		SOUTH ASIA	CHILDREN'S MINISTRY	25,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	CHILDREN'S MINISTRY	25,000	WIRE			
		MIDDLE EAST & NORTH AFRICA	COMMUNITY DEVELOP	25,000	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	COMMUNITY DEVELOP	25,000	WIRE			
		CENTRAL AMERICA/CARIBBEAN	COMMUNITY DEVELOP	24,912	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	24,519	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	24,069	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	22,276	WIRE			
		MIDDLE EAST & NORTH AFRICA	MEDICAL ASSISTANCE	22,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	COMMUNITY DEVELOP	21,471	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	21,173	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	21,076	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	20,996	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	CHILDREN'S MINISTRY	20,695	WIRE			
		EAST ASIA/PACIFIC	MEDICAL ASSISTANCE	20,621	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	CHILDREN'S MINISTRY	20,309	WIRE			
		MIDDLE EAST & NORTH AFRICA	EMERGENCY RELIEF	20,100	CHECK			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	COMMUNITY DEVELOP	20,090	WIRE			
		EAST ASIA/PACIFIC	MEDICAL ASSISTANCE	20,059	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	CHILDREN'S MINISTRY	20,000	WIRE			
		EAST ASIA/PACIFIC	CHILDREN'S MINISTRY	20,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST & NORTH AFRICA	CHILDREN'S MINISTRY	20,000	EFT			
		SOUTH AMERICA	CHRISTIAN EDUCATION	20,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA	CHRISTIAN EDUCATION	20,000	EFT			
		EAST ASIA/PACIFIC	MEDICAL ASSISTANCE	20,000	CHECK			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	20,000	WIRE			
		SOUTH AMERICA	CHILDREN'S MINISTRY	20,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHRISTIAN EDUCATION	20,000	WIRE			
		CENTRAL AMERICA/CARIBBEAN	CHRISTIAN EDUCATION	20,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	MEDICAL ASSISTANCE	20,000	EFT			
		EAST ASIA/PACIFIC	CHILDREN'S MINISTRY	20,000	CHECK			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	20,000	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	20,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	CHILDREN'S MINISTRY	19,894	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	19,579	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	COMMUNITY DEVELOP	19,424	WIRE			
		RUSSIA	CHILDREN'S MINISTRY	19,350	CHECK			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	CHILDREN'S MINISTRY	19,293	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	18,604	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	18,173	WIRE			
		SUB-SAHARAN AFRICA	COMMUNITY DEVELOP	18,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHRISTIAN EDUCATION	18,000	WIRE			
		SUB-SAHARAN AFRICA	EMERGENCY RELIEF	18,000	CASH/CHECK			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	17,950	CHECK			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	17,875	CHECK			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	17,357	WIRE			
		CENTRAL AMERICA/CARIBBEAN	COMMUNITY DEVELOP	17,321	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	MISC PROJECTS	17,280	WIRE			
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE	16,300	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	16,128	WIRE			
		SOUTH ASIA	EMERGENCY RELIEF	16,048	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	15,901	WIRE			
		EAST ASIA/PACIFIC	CHRISTIAN EDUCATION	15,811	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	CHILDREN'S MINISTRY	15,070	WIRE			
		SOUTH AMERICA	CHILDREN'S MINISTRY	15,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	CHILDREN'S MINISTRY	15,000	WIRE			
		SUB-SAHARAN AFRICA	CHRISTIAN EDUCATION	15,000	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	15,000	EFT			
		SUB-SAHARAN AFRICA	CHRISTIAN EDUCATION	15,000	CASH			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA	CHILDREN'S MINISTRY	14,749	CHECK			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	14,747	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	COMMUNITY DEVELOP	14,700	EFT			
		SUB-SAHARAN AFRICA	EMERGENCY RELIEF	14,026	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	MEDICAL ASSISTANCE	13,727	WIRE			
		SOUTH ASIA	MEDICAL ASSISTANCE	13,500	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	COMMUNITY DEVELOP	13,189	WIRE			
		EUROPE	CHILDREN'S MINISTRY	13,010	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST & NORTH AFRICA	CHILDREN'S MINISTRY	12,050	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	12,000	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	CHILDREN'S MINISTRY	12,000	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	12,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE	11,400	CHECK			
		MIDDLE EAST & NORTH AFRICA	COMMUNITY DEVELOP	11,100	CHECK			

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	CHILDREN'S MINISTRY	10,954	WIRE			
		CENTRAL AMERICA/CARIBBEAN	CHILDREN'S MINISTRY	10,660	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	EMERGENCY RELIEF	10,500	EFT			
		SUB-SAHARAN AFRICA	CHRISTIAN EDUCATION	10,500	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	CHRISTIAN EDUCATION	10,080	WIRE			
		EAST ASIA/PACIFIC	CHILDREN'S MINISTRY	10,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	CHILDREN'S MINISTRY	10,000	WIRE			
		CENTRAL AMERICA/CARIBBEAN	CHILDREN'S MINISTRY	10,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	10,000	WIRE			
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE	10,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	EMERGENCY RELIEF	10,000	CHECK			
		SUB-SAHARAN AFRICA	COMMUNITY DEVELOP	10,000	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	CHILDREN'S MINISTRY	10,000	WIRE			
		NORTH AMERICA	MISC PROJECTS	10,000	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHRISTIAN EDUCATION	10,000	CASH			
		SUB-SAHARAN AFRICA	COMMUNITY DEVELOP	10,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	EMERGENCY RELIEF	9,900	EFT			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	9,731	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	CHILDREN'S MINISTRY	9,609	WIRE			
		SOUTH ASIA	MEDICAL ASSISTANCE	9,600	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	CHILDREN'S MINISTRY	9,562	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	9,500	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	CHILDREN'S MINISTRY	9,412	WIRE			
		MIDDLE EAST & NORTH AFRICA	COMMUNITY DEVELOP	9,300	CHECK			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	COMMUNITY DEVELOP	9,289	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	9,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	8,996	CHECK			
		EAST ASIA/PACIFIC	CHILDREN'S MINISTRY	8,946	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	8,868	WIRE			
		EAST ASIA/PACIFIC	MEDICAL ASSISTANCE	8,838	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	EMERGENCY RELIEF	8,700	EFT			
		SUB-SAHARAN AFRICA	CHRISTIAN EDUCATION	8,500	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	COMMUNITY DEVELOP	8,322	WIRE			
		CENTRAL AMERICA/CARIBBEAN	CHILDREN'S MINISTRY	8,028	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA	CHILDREN'S MINISTRY	8,000	EFT			
		SUB-SAHARAN AFRICA	COMMUNITY DEVELOP	8,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	8,000	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	8,000	CHECK			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	CHILDREN'S MINISTRY	7,767	WIRE			
		EUROPE	CHILDREN'S MINISTRY	7,722	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHRISTIAN EDUCATION	7,500	EFT			
		SUB-SAHARAN AFRICA	CHRISTIAN EDUCATION	7,500	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST & NORTH AFRICA	COMMUNITY DEVELOP	7,495	WIRE			
		SOUTH ASIA	EMERGENCY RELIEF	7,357	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	CHILDREN'S MINISTRY	7,200	WIRE			
		EAST ASIA/PACIFIC	COMMUNITY DEVELOP	6,269	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	6,185	WIRE			
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE	6,173	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	MEDICAL ASSISTANCE	6,000	EFT			
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE	6,000	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	6,000	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	6,000	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	5,932	WIRE			
		SOUTH AMERICA	CHILDREN'S MINISTRY	5,902	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	CHILDREN'S MINISTRY	5,857	WIRE			
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE	5,800	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST & NORTH AFRICA	COMMUNITY DEVELOP	5,800	CHECK			
		SOUTH AMERICA	CHILDREN'S MINISTRY	5,795	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA	CHILDREN'S MINISTRY	5,767	WIRE			
		SUB-SAHARAN AFRICA	CHILDREN'S MINISTRY	5,583	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHRISTIAN EDUCATION	5,500	WIRE			
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE	5,298	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA	CHILDREN'S MINISTRY	5,270	WIRE			
		MIDDLE EAST & NORTH AFRICA	CHILDREN'S MINISTRY	5,146	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	CHILDREN'S MINISTRY	5,040	WIRE			
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			271,300	MED/RELIEF MTLs	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			197,484	MED/RELIEF MTLS	FMV
		SOUTH ASIA	MEDICAL ASSISTANCE			197,222	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			183,482	MED/RELIEF MTLS	FMV
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			181,293	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			162,553	MED/RELIEF MTLS	FMV
		CENTRAL AMERICA/CARIBBEAN	MEDICAL ASSISTANCE			129,246	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA	MEDICAL ASSISTANCE			110,060	MED/RELIEF MTLS	FMV
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			97,997	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	MEDICAL ASSISTANCE			82,786	MED/RELIEF MTLS	FMV
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			57,827	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			53,068	MED/RELIEF MTLS	FMV
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			47,123	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			42,317	MED/RELIEF MTLS	FMV
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			37,666	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			35,734	MED/RELIEF MTLS	FMV
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			33,592	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	MEDICAL ASSISTANCE			28,659	MED/RELIEF MTLS	FMV
		CENTRAL AMERICA/CARIBBEAN	MEDICAL ASSISTANCE			27,901	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST & NORTH AFRICA	MEDICAL ASSISTANCE			26,361	MED/RELIEF MTLs	FMV
		EAST ASIA/PACIFIC	MEDICAL ASSISTANCE			26,135	MED/RELIEF MTLs	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			24,404	MED/RELIEF MTLS	FMV
		CENTRAL AMERICA/CARIBBEAN	MEDICAL ASSISTANCE			23,577	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	MEDICAL ASSISTANCE			21,498	MED/RELIEF MTLS	FMV
		SOUTH AMERICA	MEDICAL ASSISTANCE			21,339	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	MEDICAL ASSISTANCE			19,229	MED/RELIEF MTLS	FMV
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			14,000	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			11,874	MED/RELIEF MTLS	FMV
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			11,145	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	MEDICAL ASSISTANCE			10,679	MED/RELIEF MTLS	FMV
		CENTRAL AMERICA/CARIBBEAN	MEDICAL ASSISTANCE			9,176	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	MEDICAL ASSISTANCE			8,640	MED/RELIEF MTLS	FMV
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			8,160	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	MEDICAL ASSISTANCE			7,183	MED/RELIEF MTLS	FMV
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			6,944	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	MEDICAL ASSISTANCE			6,933	MED/RELIEF MTLS	FMV
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			6,235	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			6,109	MED/RELIEF MTLS	FMV
		SOUTH AMERICA	MEDICAL ASSISTANCE			5,895	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			5,738	MED/RELIEF MTLS	FMV
		SUB-SAHARAN AFRICA	MEDICAL ASSISTANCE			5,522	MED/RELIEF MTLS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	OCC			17,212,168	SHOEBOX GIFTS	FMV
		EAST ASIA/PACIFIC	OCC			16,556,471	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	OCC			11,710,449	SHOEBOX GIFTS	FMV
		SOUTH AMERICA	OCC			10,329,793	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	OCC			10,235,037	SHOEBOX GIFTS	FMV
		CENTRAL AMERICA/CARIBBEAN	OCC			8,871,451	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			7,667,899	SHOEBOX GIFTS	FMV
		SOUTH ASIA	OCC			6,963,294	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			6,525,386	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			6,477,506	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA	OCC			5,908,544	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			5,612,544	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	OCC			5,455,494	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			5,163,555	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			5,075,292	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			5,008,160	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			4,828,550	SHOEBOX GIFTS	FMV
		CENTRAL AMERICA/CARIBBEAN	OCC			4,412,826	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	OCC			4,030,142	SHOEBOX GIFTS	FMV
		EAST ASIA/PACIFIC	OCC			3,483,891	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			3,443,958	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			3,186,612	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			3,153,272	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			3,081,227	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			2,900,163	SHOEBOX GIFTS	FMV
		SOUTH ASIA	OCC			2,782,295	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			2,747,826	SHOEBOX GIFTS	FMV
		SOUTH AMERICA	OCC			2,596,818	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			2,596,818	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			2,537,658	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			2,402,192	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			2,198,241	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	OCC			2,175,129	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			2,061,923	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			1,993,864	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			1,990,830	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			1,990,830	SHOEBOX GIFTS	FMV
		SOUTH AMERICA	OCC			1,809,841	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST & NORTH AFRICA	OCC			1,740,830	SHOEBOX GIFTS	FMV
		MIDDLE EAST & NORTH AFRICA	OCC			1,669,387	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			1,631,334	SHOEBOX GIFTS	FMV
		EAST ASIA/PACIFIC	OCC			1,488,222	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			1,282,316	SHOEBOX GIFTS	FMV
		CENTRAL AMERICA/CARIBBEAN	OCC			1,266,899	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	OCC			1,176,780	SHOEBOX GIFTS	FMV
		RUSSIA	OCC			1,112,933	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	OCC			1,112,933	SHOEBOX GIFTS	FMV
		SOUTH ASIA	OCC			1,112,933	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			967,114	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			906,299	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			906,299	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			906,299	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA	OCC			904,921	SHOEBOX GIFTS	FMV
		EAST ASIA/PACIFIC	OCC			806,053	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	OCC			749,801	SHOEBOX GIFTS	FMV
		SOUTH AMERICA	OCC			747,921	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	OCC			653,215	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			580,268	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			574,377	SHOEBOX GIFTS	FMV
		SOUTH AMERICA	OCC			562,345	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			556,454	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			556,454	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	OCC			549,560	SHOEBOX GIFTS	FMV
		MIDDLE EAST & NORTH AFRICA	OCC			541,463	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	OCC			386,846	SHOEBOX GIFTS	FMV
		CENTRAL AMERICA/CARIBBEAN	OCC			374,888	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	OCC			374,888	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			374,888	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	OCC			370,978	SHOEBOX GIFTS	FMV
		MIDDLE EAST & NORTH AFRICA	OCC			370,978	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			370,978	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			370,978	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	OCC			366,365	SHOEBOX GIFTS	FMV
		MIDDLE EAST & NORTH AFRICA	OCC			282,087	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST & NORTH AFRICA	OCC			278,227	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			274,016	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	OCC			233,732	SHOEBOX GIFTS	FMV
		CENTRAL AMERICA/CARIBBEAN	OCC			223,253	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	OCC			212,173	SHOEBOX GIFTS	FMV
		CENTRAL AMERICA/CARIBBEAN	OCC			209,541	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			201,545	SHOEBOX GIFTS	FMV
		EAST ASIA/PACIFIC	OCC			193,423	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OCC			187,457	SHOEBOX GIFTS	FMV
		MIDDLE EAST & NORTH AFRICA	OCC			172,591	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	OCC			100,772	SHOEBOX GIFTS	FMV
		SOUTH ASIA	OCC			100,472	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST & NORTH AFRICA	OCC			92,751	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			88,665	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN	OCC			85,907	SHOEBOX GIFTS	FMV
		SUB-SAHARAN AFRICA	OCC			83,952	SHOEBOX GIFTS	FMV

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA/PACIFIC	OCC			32,237	SHOEBOX GIFTS	FMV
		RUSSIA	OCC			12,885	SHOEBOX GIFTS	FMV

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
COMMUNITY DEVELOPMENT	MIDDLE EAST & NORTH AFRICA	128	641,876	CASH			
CHILDREN'S MINISTRY	EAST ASIA & PACIFIC	19	290,531	WIRE			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
CHILDREN'S MINISTRY	SOUTH AMERICA	15	206,548	CASH/WIRE			
CHILDREN'S MINISTRY	SUB-SAHARAN AFRICA	13	175,247	WIRE			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
MEDICAL ASSISTANCE	SUB-SAHARAN AFRICA	5	62,656	WIRE			
MISSIONARY ASSISTANCE	MIDDLE EAST & NORTH AFRICA	2	33,200	WIRE			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
MISSIONARY ASSISTANCE	CENTRAL AMERICA/CARIBBEAN	3	19,767	WIRE			
CHRISTIAN EDUCATION	SUB-SAHARAN AFRICA	1	14,000	WIRE			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
MISSIONARY ASSISTANCE	SOUTH ASIA	1	10,000	WIRE			
MISSIONARY ASSISTANCE	EUROPE	1	6,774	WIRE			

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col (a) through col (c))
Revenue	1 Gross receipts				
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				

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

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

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in
- | | | |
|----------|-----------------------------|---|
| a | The organization's facility | % |
| b | An outside facility | % |

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

Name ▶

Address ▶

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c** If "Yes," enter name and address of the third party
- Name ▶
- Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

- 17** Mandatory distributions
- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

Return Reference	Explanation
------------------	-------------

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule I
(Form 990)**

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

OMB No 1545-0047

2019

**Open to Public
Inspection**

Department of the
Treasury
Internal Revenue Service
Name of the organization
SAMARITAN'S PURSE

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ **Attach to Form 990.**
▶ Go to www.irs.gov/Form990 for the latest information.

Employer identification number
58-1437002

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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

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

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 187

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) PERSONAL ASSISTANCE	13	169,458			
(2) MISSIONARY ASSISTANCE	1	25,222			
(3) CHRISTIAN EDUCATION	1	9,405			
(4) OPERATION CHRISTMAS CHILD	41273		1,034,621	FMV	SHOEBOX GIFTS
(5) MEDICAL ASSISTANCE	10		6,263	FMV	MEDICAL EQUIP
(5)					
(6)					
(7)					

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

Return Reference	Explanation
SCHEDULE I, PAGE 1, PART I, LINE 2	GRANT RECIPIENTS ARE REQUIRED TO SUBMIT TO SAMARITAN'S PURSE AN ACKNOWLEDGEMENT OF FUNDS FORM UPON RECEIPT OF THE GRANT THE FORM SERVES TO CONFIRM THAT THE FUNDS WERE RECEIVED AND TO REPORT HOW THE FUNDS WERE USED THIS PROCESS IS CLOSELY MONITORED BY THE PROJECTS DEPARTMENT STAFF

Additional Data

Software ID:
Software Version:
EIN: 58-1437002
Name: SAMARITAN'S PURSE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VICTORIA COUNTY LONG TERM RECOVERY 207 N GLASS STREET VICTORIA, TX 77901	82-4862966	3	1,069,773				COMMUNITY DEVELOP
CATHEDRAL IN THE PINES CHRISTIAN 2350 EASTEX FREEWAY BEAUMONT, TX 77703	74-6051487	3	700,000				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAY AREA HABITAT FOR HUMANITY 1120 NASA PKWY SUITE 420 HOUSTON, TX 77058	76-0329145	3	566,082				COMMUNITY DEVELOP
SETX CIVILIAN TASKFORCE 223 S 17TH STREET NEDERLAND, TX 77627	82-2744221	3	501,767				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COASTAL BEND DISASTER RECOVERY 111 N ODEM AVENUE SUITE 4 SINTON, TX 78387	47-5463138	3	488,888				COMMUNITY DEVELOP
KINGDOM AIR CORPS 39911 N GLENN HWY SUTTON, AK 99674	92-0168877	3	422,115				MISSIONARY ASSIST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WHARTON RECOVERY TEAM PO BOX 641 WHARTON, TX 77488	81-3900542	3	400,000				COMMUNITY DEVELOP
NEHEMIAH'S VISION INC PO BOX 477 VIDOR, TX 77670	20-3705076	3	397,018				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREMONT BRANCH OF THE CHRISTIAN 1615 NORTH LINCOLN AVENUE FREMONT, NE 68025	47-0496803	3	348,500				COMMUNITY DEVELOP
BILLY GRAHAM EVANGELISTIC ASSOC PO BOX 668129 CHARLOTTE, NC 28209	45-2588350	3	333,310				CHRISTIAN EDUCATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEVENTH DISTRICT MISSIONARY BAPTIST 822 W HICKORY STREET VILLE PLATTE, LA 70586	23-7144272	3	300,000				EMERGENCY RELIEF
VICTORIA COUNTY UNITED WAY 101 S MAIN STREET SUITE 500 VICTORIA, TX 77901	74-6024990	3	298,049				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EVANGELICAL FREE CHURCH OF AMERICA 901 EAST 78TH STREET MINNEAPOLIS, MN 55420	41-0721672	3	250,000				COMMUNITY DEVELOP
ICONNECT OUTREACH INC 2405 WINTER TRAIL DRIVE CONROE, TX 77304	94-3442459	3	194,086				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA CATEDRAL ESPERANZA CALLE RIUS RIVERA 8 ADJUNTAS, PR 00601	66-0768716	3	171,800				COMMUNITY DEVELOP
CY-HOPE INC 12715 TELGE ROAD CYPRESS, TX 77429	45-2346150	3	165,645				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRO DE ADORACION Y RESTAURACION AVENIDA PENONCILLO 1027A COTO LAUREL, PR 00780	66-0693279	3	164,344				COMMUNITY DEVELOP
CORNERSTONE CHRISTIAN CHURCH PO BOX 504579 SAIPAN, MP 96950	99-0012472	3	154,000				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA CRISTIANA DISCIPULOS BO GATOS SECTOR BAJURA CARR 568 KM OROCOVIS, PR 00720		3	152,000				COMMUNITY DEVELOP
BETHEL WORSHIP CENTRE PO BOX 1189 AMITE, LA 70422	72-1260101	3	125,729				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA PUERTA DEL CIELO BO BAJURA CALLE IGUERO FINAL VEGA ALTA, PR 00692	66-0762519	3	118,449				COMMUNITY DEVELOP
MOUNT PARAN MISSIONARY BAPTIST 3511 AIRPORT BLVD HOUSTON, TX 77051	76-0406713	3	115,100				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRISTWAY MISSIONARY BAPTIST CHURCH 8207 WILEYVALE STREET HOUSTON, TX 77016	31-1775441	3	113,900				COMMUNITY DEVELOP
CORNERSTONE CHURCH OF UNITY 8110 HOMEWOOD LANE HOUSTON, TX 77028	82-4031586	3	113,900				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW COVENANT CHRISTIAN TABERNACLE 9049 BRANDON STREET HOUSTON, TX 77051	46-2926518	3	113,900				COMMUNITY DEVELOP
NEW ZION HOLY CHURCH 6801 WHEATLEY STREET HOUSTON, TX 77091	02-0651052	3	113,900				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA CRISTIANA DISCIPULOS BO CANDELERO ARRIBA CARR 3 KM 91 HUMACAO, PR 00791		3	112,112				COMMUNITY DEVELOP
AGAPE FELLOWSHIP BAPTIST CHURCH 4810 REED ROAD HOUSTON, TX 77033	39-2057677	3	107,499				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENIKOR FOUNDATION 11931 WICKCHESTER LANE SUITE 300 HOUSTON, TX 77043	76-0031861	3	104,790				COMMUNITY DEVELOP
VIEQUES BAPTIST CHURCH INC 200 VILLA BORINQUEN VIEQUES, PR 00765		3	102,000				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ZION HILL MISSIONARY BAPTIST CHURCH 4120 CRANE STREET HOUSTON, TX 77026	74-6215617	3	101,100				COMMUNITY DEVELOP
FIRST BAPTIST CHURCH BEVIL OAKS 7725 SWEETGUM ROAD BEAUMONT, TX 77713	74-1563630	3	100,949				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRISTIAN AID MINISTRIES PO BOX 360 BERLIN, OH 44610	34-1344364	3	100,000				COMMUNITY DEVELOP
CITY CHURCH AT NORTHSIDE INC 530 AIRPORT ROAD PANAMA CITY, FL 32405	59-1475367	3	100,000				EMERGENCY RELIEF

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MONTREAT COLLEGE PO BOX 1267 BOX 802 MONTREAT, NC 28757	56-0543261	3	100,000				CHRISTIAN EDUCATION
THE CHRISTIAN HEALTH SERVICE CORPS PO BOX 132 FRUITVALE, TX 75127	27-1505747	3	96,897				MEDICAL ASSIST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRO DE RESTAURACION UN NUEVO BO PAMPANO VEGA ALTA, PR 00692		3	95,220				COMMUNITY DEVELOP
IGLESIA NUEVO TESTAMENTO CALLE MALAGA 133 URB DORAVILLE DORADO, PR 00646		3	93,550				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA DE DIOS PENTECOSTAL EL BUEN BO BAUTA ABAJAO OROCOVIS, PR 00720		3	89,900				COMMUNITY DEVELOP
UNITED WAY OF BRAZORIA COUNTY PO BOX 1959 ANGLETON, TX 77516	74-1362982	3	89,665				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LANIER BAPTIST CHURCH 4851 LANIER DRIVE BATON ROUGE, LA 70812	72-0548085	3	83,120				COMMUNITY DEVELOP
COMITE BAPTIST CHURCH 12250 GREENWELL SPRINGS ROAD BATON ROUGE, LA 70814	23-7057840	3	81,691				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRIMERA IGLESIA BAUTISTA DE CAYEY PO BOX 371360 CAYEY, PR 00737	66-0212970	3	79,250				COMMUNITY DEVELOP
PINE DRIVE BAPTIST CHURCH 705 FM 517 E DICKINSON, TX 77539	74-1549248	3	74,370				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRO CRISTIANO BET-EL FLORIDA CALLE HUCAR 359 ALTURAS DE YANES FLORIDA, PR 00650		3	70,121				COMMUNITY DEVELOP
CHURCH OF LIFE FELLOWSHIP BAPTIST 6066 EVANGELINE STREET BATON ROUGE, LA 70805	27-3128466	3	65,979				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW LIFE ASSEMBLY OF GOD PO BOX 122 ORANGEFIELD, TX 77639	76-0281645	3	63,887				COMMUNITY DEVELOP
STADIUM VIEW CHURCH 3102 MIORI LANE VICTORIA, TX 77905	47-3053771	3	62,165				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA DE DIOS PENTECOSTAL CARR 663 KM 48 BO MIRA FLORES ARECIBO, PR 00612	66-0778805	3	60,898				COMMUNITY DEVELOP
KATY RESPONDS 22765 WESTHEIMER PARKWAY KATY, TX 77450	83-1220489	3	60,600				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA BET EL TORRE FUERTE CALLE 13 MARZO ESQ PEDRO VARGAS GUANICA, PR 00653	66-0877908	3	59,465				COMMUNITY DEVELOP
CONCILIO DE IGLESIAS EVANGELICAS CARR 164 RAMAL 825 KM 22 ACHIOTE S NARANJITO, PR 00719		3	58,000				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STEVENDALE BAPTIST CHURCH 16545 OLD HAMMOND HWY BATON ROUGE, LA 70816	72-0537869	3	56,942				COMMUNITY DEVELOP
IGLESIA ALPHA Y OMEGA AICU INC CALLE CIBUCO 419 BRISAS DEL TORTUG VEGA BAJA, PR 00693		3	53,365				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST PAUL MISSIONARY BAPTIST CHURCH 213 N GAGON STREET ROCKPORT, TX 78382	81-0599964	3	52,800				COMMUNITY DEVELOP
IGLESIA CRISTIANA CARISMATICA CARR 123 KM 398 BO JUAN GONZALEZ ADJUNTAS, PR 00601		3	52,550				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA DE DIOS PENTECOSTAL CARR 160 KM 18 ALMIRANTE NORTE VEGA BAJA, PR 00694		3	52,400				COMMUNITY DEVELOP
FIRST ASSEMBLY OF GOD CHURCH PO BOX 399 BLOOMINGTON, TX 77951	44-0577787	3	51,360				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA NAZARENO PUERTA DEL CIELO PO BOX 1126 JAYUYA, PR 00664		3	50,250				COMMUNITY DEVELOP
ALLIANCE DEFENDING FREEDOM 15100 N 90TH STREET SCOTTSDALE, AZ 85260	54-1660459	3	50,000				MISSIONARY ASSIST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRISTIAN & MISSIONARY ALLIANCE 6491 CLARK ROAD PARADISE, CA 95969	94-2350721	3	50,000				EMERGENCY RELIEF
INTERNATIONAL FOUNDATION 133 C STREET SE WASHINGTON, DC 20003	53-0204614	3	50,000				CHRISTIAN EDUCATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAINLAND CHILDREN'S PARTNERSHIP 2000 TEXAS AVENUE SUITE 601 TEXAS CITY, TX 77590	76-0350823	3	50,000				COMMUNITY DEVELOP
MOODY AVIATION 6719 E RUTTER AVENUE BLDG 68 SPOKANE, WA 99212	36-2167792	3	50,000				EMERGENCY RELIEF

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WAY MAKER MINISTRIES INC 804 1ST AVENUE HARVEY, LA 70058	72-1240077	3	50,000				COMMUNITY DEVELOP
IGLESIA CRISTIANA CARISMATICA BO EL GUAYABAL JUANA DIAZ, PR 00795	66-0524567	3	49,962				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY PRESBYTERIAN CHURCH 113 SOUTH ALISTER PORT ARANSAS, TX 78373	74-6027915	3	48,106				COMMUNITY DEVELOP
IGLESIA PENTECOSTAL RIO DE AGUA BO PIEDRAS NUEVAS CARR 685 SEC CABA MANATI, PR 00674		3	46,780				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLO APOSENTO ALTO AG 1300 W MT HOUSTON ROAD HOUSTON, TX 77038	76-0268495	3	46,400				COMMUNITY DEVELOP
ASSOCIATION OF BAPTISTS WORLD EVANG PO BOX 8585 HARRISBURG, PA 17105	23-1445623	3	45,715				MEDICAL ASSIST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST BAPTIST CHURCH WEWAHITCHKA 436 S HWY 71 WEWAHITCHKA, FL 32465	59-1114262	3	44,874				EMERGENCY RELIEF
IGLESIA DE DIOS PENTECOSTAL PUNTA DIAMANTE CALLE AUSTRAL P-5 PONCE, PR 00730		3	44,000				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA CRISTIANA DE LA FAMILIA CARR 14 KM 7 BO CERRILLO HOYOS COTO LAUREL, PR 00780	66-0479566	3	43,050				COMMUNITY DEVELOP
FIRST ASSEMBLY OF GOD CHURCH 306 W DEPOT STREET REFUGIO, TX 78377	74-2466984	3	38,935				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA MANANTIAL DE VIDA ASAMBLEA EL TUQUE PONCE, PR 00728	76-0516261	3	37,500				COMMUNITY DEVELOP
TRINITY EVANGELICAL FREE CHURCH 301 LEISURE LANE FRIENDSWOOD, TX 77546	76-0382760	3	37,440				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINISTERIO EL RHEMA RESTAURADOR CARR 174 83 URB AGUSTIN STHAL BAYAMON, PR 00960		3	35,660				COMMUNITY DEVELOP
IGLESIA MARANATHA RESCATANDO CARR 939 KM 08 BO QUEBRADAS ARENAS MAUNABO, PR 00707		3	35,600				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA PENTECOSTAL DE JESUCRISTO BO PASTILLO JUANA DIAZ, PR 00795	66-0659423	3	34,975				COMMUNITY DEVELOP
MEMORIAL BAPTIST CHURCH 4011 MEMORIAL BLVD PORT ARTHUR, TX 77640	74-6001898	3	33,770				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SERGE GLOBAL INC 101 W AVENUE SUITE 305 JENKINTOWN, PA 19046	23-2223692	3	31,197				MEDICAL ASSIST
CORPORACION DE LOS ADVENTISTAS CARR 365 KM 77 BO INDIERA FRIA MARICAO, PR 00606		3	30,800				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA DE DIOS PENTECOSTAL 130 INT 491 HATILLO, PR 00659		3	30,500				COMMUNITY DEVELOP
IGLESIA DE DIOS PENTECOSTAL CARR 111 KM 108 BO BAHOMANEI SAN SEBASTIAN, PR 00685	66-0499849	3	28,640				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOVIMIENTO EVANGELICO EL TAVOR CALLE 5 215 BO FLORIDA SAN LORENZO, PR 00777		3	28,100				COMMUNITY DEVELOP
LIFE CHURCH CENTRAL 10523 LOVETT ROAD BATON ROUGE, LA 70818	45-5009346	3	28,072				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA DE DIOS PENTECOSTAL BO CHORRERA SECTRO PUENTE BLANCO UTUADO, PR 00641		3	26,700				COMMUNITY DEVELOP
GOSEN IGLESIA DE LA FAMILIA AVE SAN CRISTOBAL LOTE 2 COTO LAUREL, PR 00780		3	26,514				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA CRISTIANA DISCIPULOS CARR 2 KM 289 VEGA ALTA, PR 00692		3	26,400				COMMUNITY DEVELOP
CASA DE RESTAURACION LA ROCA INTL CARR 629 KM 04 CALLE FOGONES FLORIDA, PR 00650		3	25,050				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFRICAN ENTERPRISE PO BOX 28190 SPOKANE, WA 99228	95-2275044	3	25,000				MISSIONARY ASSIST
BRIGADE AIR INC PO BOX 97 BLOOMINGTON, NJ 07403	20-0896758	3	25,000				MISSIONARY ASSIST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAITH WAY ASSEMBLY OF GOD PO BOX 1602 LAFOLLETTE, TN 37766	62-1812171	3	25,000				COMMUNITY DEVELOP
IGLESIA DE DIOS PENTECOSTAL BO CARRIZALES CALLE D-306 HATILLO, PR 00659	66-0709366	3	25,000				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA DE DIOS PENTECOSTAL CALLE MONSERRATE 809 SANTURCE, PR 00907	66-0497143	3	24,750				COMMUNITY DEVELOP
IGLESIA DE DIOS PENTECOSTAL CARR 667 KM 4 BO PRIETO CORTEZ MANATI, PR 00674		3	24,000				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REBUILD BAY COUNTY INC PO BOX 306 PANAMA CITY, FL 32402	83-3817372	3	23,892				COMMUNITY DEVELOP
FIRST BAPTIST CHURCH OF ADDIS 6781 LA HWY 1 SOUTH ADDIS, LA 70710	72-0924357	3	23,575				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHURCH OF GOD MISSION BOARD MANATI CARR 6668 KM 31 SABANA SECA MANATI, PR 00674		3	23,100				COMMUNITY DEVELOP
IGLESIA CRISTIANA UNIDA CENTRAL MERCEDITA 78 PONCE, PR 00716		3	23,000				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA CASA DE VIDA CALLE COROZAL 61 MOROVIS, PR 00687		3	22,800				COMMUNITY DEVELOP
ASOCIACION DE IGLESIAS CRISTIANAS CARR 486 KM 21 BO ZANJA PARCELAS E CAMUY, PR 00627		3	22,262				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MT ZION BAPTIST CHURCH OF ORANGE 512 W JOHN AVENUE ORANGE, TX 77630	27-0092766	3	22,048				COMMUNITY DEVELOP
IGLESIA DE DIOS PENTECOSTAL PARCELAS 144 CALLE LAS FLORES BO LO PATILLAS, PR 00767	66-0828705	3	22,000				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TESTIMONIO MUNDIAL DE GRACIA PO BOX 1416 JUANA DIAZ, PR 00795	66-0439578	3	21,450				COMMUNITY DEVELOP
IGLESIA PENTECOSTAL DE JESUCRISTO COMUNIDAD LAS 500 TAS CALLE DIAMENT ARROYO, PR 00723		3	20,350				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIONEERS 10123 WILLIAM CAREY DRIVE ORLANDO, FL 32832	52-1206938	3	20,096				MEDICAL ASSIST
GRACE ACADEMY BOONE PO BOX 2407 BOONE, NC 28607	26-2961966	3	20,000				CHILDREN'S MINISTRY

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA CRISTIANA DISCIPULOS CARR 167 RAMAL 829 KM 02 BAYAMON, PR 00957		3	19,826				COMMUNITY DEVELOP
IGLESIA DE DIOS PENTECOSTAL CARR 151 KM 75 BO EL LIMON VILLALBA, PR 00766		3	19,600				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA DE DIOS PENTECOSTAL BO PASTOS CARR 162 KM 45 AIBONITO, PR 00705		3	19,000				COMMUNITY DEVELOP
IGLESIA ALPHA Y OMEGA INC LAJAS CARR 3101 KM 4 BO LA HAYA LAJAS, PR 00667		3	18,850				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA PENTECOSTAL DE JESUCRISTO BO ANONES CARR 4406 KM 19 LAS MARIAS, PR 00670		3	18,600				COMMUNITY DEVELOP
SAVANNAH BRANCH CHURCH OF GOD 11067 HIGHWAY 1078 FOLSOM, LA 70437	72-1215860	3	18,519				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LILY OF THE VALLEY CHURCH OF GOD PO BOX 1872 ANAHUAC, TX 77514	61-1865566	3	18,500				COMMUNITY DEVELOP
FAITH BAPTIST CHURCH PO BOX 1536 ARANSAS PASS, TX 78335	74-1848170	3	18,127				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARMY OF HOPE 6105 ALLENDALE ROAD HOUSTON, TX 77017	80-3027155	3	17,908				COMMUNITY DEVELOP
IGLESIA CRISTIANA MENSAJEROS CALLE GUADALUPE 82 PONCE, PR 00728	66-0429666	3	17,500				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LA IGLESIA DE DIOS PATILLAS URB MARIANI CALLE A 82 PATILLAS, PR 00723		3	17,150				COMMUNITY DEVELOP
CENTRO FAMILIAR CRISTIANO NUEVA CARR 125 KM 157 BO GUATEMALA SAN SEBASTIAN, PR 00685	66-0712807	3	17,100				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA DE DIOS PENTECOSTAL BO COLLORES PARCELAS JOSE E RODRIGU JUANA DIAZ, PR 00795		3	16,597				COMMUNITY DEVELOP
GLOBAL OUTREACH INTERNATIONAL PO BOX 1 TUPELO, MS 38802	48-1256219	3	16,045				MEDICAL ASSIST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASA DE ALABANZAS OASIS CALLE CAROLINA 223 SECTOR PLAYITA SAN JUAN, PR 00915		3	16,000				COMMUNITY DEVELOP
CHURCH OF GOD MISSION BOARD BO PLAYA CALLE CARACOL 38 GUAYANILLA, PR 00656		3	16,000				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA CIUDAD DESEADA INC CARR 119 KM 354 BO PIEDRAS BLANCAS SAN SEBASTIAN, PR 00685	66-0665421	3	14,580				COMMUNITY DEVELOP
IGLESIA CAMINO AL CIELO CON SANIDAD URB JARDINES DE YABUCOA 350 YABUCOA, PR 00767		3	14,400				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRIMERA ASAMBLEA DE DIOS 402 CHEYENNE STREET CORPUS CHRISTI, TX 78405	74-6034706	3	14,199				COMMUNITY DEVELOP
CHURCH OF RESTORATION OF WHARTON 3639 COUNTY ROAD 161 WHARTON, TX 77488	76-0652041	3	14,113				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MISSIONARY AVIATION REPAIR CENTER 595 FUNNY RIVER ROAD SOLDOTNA, AK 99669	92-0032812	3	14,067				CHRISTIAN EDUCATION
IGLESIA CASA DE ORACION GETSEMANI ESQUINA 25 DE ENERO SABANETAS PONCE, PR 00715	66-0483079	3	13,525				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LA IGLESIA DE DIOS CARR 151 RAMAL 562 KM 07 VILLALBA, PR 00766		3	13,524				COMMUNITY DEVELOP
IGLESIA DE DIOS PENTECOSTAL BO INDIERA BAJA CARR 105 INTER 426 MARICAO, PR 00606		3	13,500				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAITH BAPTIST CHURCH INC 15880 PLANK ROAD BAKER, LA 70714	72-0549471	3	13,437				COMMUNITY DEVELOP
IGLESIA DE DIOS PENTECOSTAL CALLE PEPITO FIGUEROA 199 COTO LAUREL, PR 00780	66-0359273	3	13,355				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA DE DIOS PENTECOSTAL CARR 155 KM 149 COAMO, PR 00769		3	12,900				COMMUNITY DEVELOP
IGLESIA CRISTIANA MISIONERA INC CARR 2 KM 132 BO SIERRA BAYAMON, PR 00960	66-0427053	3	12,666				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA CRISTIANA ADORAD AL REY CARR 306 KM 10 BO PALMAREJO II LAJAS, PR 00667		3	12,636				COMMUNITY DEVELOP
IGLESIA DE DIOS PENTECOSTAL PARCELAS ANGEL VELEZ BO BAYANEY HATILLO, PR 00659		3	12,400				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST ASSEMBLY OF GOD CHURCH PO BOX 684 EDNA, TX 77957	74-1908792	3	12,373				COMMUNITY DEVELOP
IGLESIA ALIANZA CRISTIANA CARR 719 KM 34 BARRANQUITAS, PR 00794	66-0470285	3	12,100				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALCANZA MINISTRIES INC CALLE BALDORIOTY 54 COAMO, PR 00769	66-0847770	3	12,000				COMMUNITY DEVELOP
IGLESIA DE DIOS PENTECOSTAL RAMAL I-116 ZONA INDUSTRIAL GUANICA, PR 00653		3	12,000				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASA DE ADORACION Y RESTAURACION GOLDEN HILLS CALLE LUNA BO ESPINOSA VEGA ALTA, PR 00692	66-0622960	3	11,900				COMMUNITY DEVELOP
IGLESIA PENTECOSTAL ASAMBLEA APARTADO 207 YABUCOA, PR 00767	66-0578562	3	11,900				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA DE DIOS PENTECOSTAL BO SABANA HOYOS SECTOR CORDOVA ARECIBO, PR 00748		3	11,200				COMMUNITY DEVELOP
IGLESIA BAUTISTA OASIS DE AMOR BO COTTO QUEBRADAS CARR 383 KM 8 PENUELAS, PR 00624		3	10,500				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST BAPTIST CHURCH OF FOUNTAIN PO BOX 349 FOUNTAIN, FL 32438	59-1420777	3	10,345				COMMUNITY DEVELOP
CRAIG CHURCH MINISTRIES INC PO BOX 129 PURLEAR, NC 28665	26-1385977	3	10,000				EMERGENCY RELIEF

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CROSSOVER GLOBAL 7520 MONTICELLO ROAD COLUMBIA, SC 29203	58-1758477	3	10,000				MEDICAL ASSIST
FIRST MISSIONARY BAPTIST CHURCH PO BOX 1590 ANAHUAC, TX 77514	76-0096371	3	10,000				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOPE PREGNANCY RESOURCE CENTER 208 HOWARD STREET BOONE, NC 28607	58-1859569	3	10,000				MEDICAL ASSIST
IGLESIA DE DIOS PENTECOSTAL QUEBRADA CEIBA SECTOR KOREA PENUELAS, PR 00656		3	10,000				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA DE DIOS MISSION BOARD 284 LOLA RODRIGUEZ DE TIO BO MARUE PONCE, PR 00728		3	9,200				COMMUNITY DEVELOP
MOUNTAIN OF FAITH OUTREACH PO BOX 23693 HOUSTON, TX 77228	74-3199631	3	8,500				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA DE JESUCRISTO MONTE MORIAH BO TEJAS SECTOR PIEDRA AZUL YABUCOA, PR 00767		3	8,425				COMMUNITY DEVELOP
ASAMBLEA DE IGLESIAS CRISTIANAS BRISAS DE MARAVILLA J45 CALLE ROSAL JUANA DIAZ, PR 00795		3	8,330				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SIM USA INC PO BOX 7900 CHARLOTTE, NC 28241	22-1936391	3	8,317				MEDICAL ASSIST
CASA DE REFUGIO Y RESTAURACION CARR 124 KM 44 BUENA VISTA LAS MARIAS, PR 00670	66-0728073	3	8,120				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA DE DIOS PENTECOSTAL CARR 109 KM 235 BO ALTOZANO SAN SEBASTIAN, PR 00685	66-0716934	3	7,985				COMMUNITY DEVELOP
SUNLIGHT BAPTIST CHURCH 6319 LAURA KOPPE HOUSTON, TX 77016	76-0517446	3	7,825				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA BAUTISTA DE GLENVIEW ROUTE 505 KM 12 BO CASSAVA PONCE, PR 00716		3	7,800				COMMUNITY DEVELOP
IGLESIA DE DIOS PENTECOSTAL CARR 455 KM 11 BO SIBAO SAN SEBASTIAN, PR 00685		3	7,500				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA CRISTIANA Y MISIONERA BO MORA 7 AVENUE CARLOS GARDEL ISABELA, PR 00662		3	7,274				COMMUNITY DEVELOP
TRINITY NAVAJO BIBLE CHURCH PO BOX 1078 THOREAU, NM 87323	82-4495083	3	6,561				CHILDREN'S MINISTRY

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TABERNACULO DE ADORACION CIUDAD CALLE ULISES MARTINEZ 59 HUMACAO, PR 00791		3	6,400				COMMUNITY DEVELOP
LA IGLESIA DE DIOS INC CARR 189 BO CANTA GALLO JUNCOS, PR 00777		3	5,817				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MT CALVARY MISSIONARY BAPTIST 3770 BROWN COLLEGE LANE WASHINGTON, TX 77880	83-0486018	3	5,693				COMMUNITY DEVELOP
IGLESIA DE DIOS DESPERTAR CRISTIANO ALTURAS DE VILLA DEL REY CALLE ESPA CAGUAS, PR 00725	66-0854874	3	5,569				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA PENTECOSTAL EL JARDIN CARR 186 KM 9 CANOVANAS, PR 00729		3	5,508				COMMUNITY DEVELOP
IGLESIA ALIANZA CRISTIANA CARR 445 KM 53 SECTOR LOS PINOS SAN SEBASTIAN, PR 00685		3	5,500				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA CRISTIANA EL HIJO DEL DIOS BO CORRAL VIEJO KM 160 CARR 123 PONCE, PR 00731		3	5,500				COMMUNITY DEVELOP
JAVIER F OTERO RAMOS 4173 HATO VIEJO SECTOR CUMBRE CIALES, PR 00638		3	5,052				COMMUNITY DEVELOP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLEANNING FOR THE WORLD 7539 STAGE ROAD CONCORD, VA 24538	54-1930105	3		308,475	FMV	MEDICAL MTLs	MEDICAL ASSISTANCE
RESTORE GLOBAL INC 9525 MONROE ROAD SUITE 150 CHARLOTTE, NC 28270	26-0745879	3		96,232	FMV	MEDICAL MTLs	MEDICAL ASSISTANCE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOPE SUPPLY CO 10480 SHADY TRAILS SUITE 104 DALLAS, TX 75220	75-2284779	3		73,139	FMV	MEDICAL MTLs	MEDICAL ASSISTANCE
FOUR HOLES BAPTIST CHURCH 1622 FOUR HOLES ROAD ORANGEBURG, SC 29115	57-0762333	3		50,466	FMV	MEDICAL MTLs	MEDICAL ASSISTANCE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARVEST INTERNATIONAL INC 3711 NE 42ND LANE OCALA, FL 34479	59-2850646	3		25,162	FMV	MEDICAL MTLs	MEDICAL ASSISTANCE
CATHOLIC CHARITIES 700 N VIRGEN DE SAN JUAN BLVD SAN JUAN, TX 78589	68-0599307	3		25,104	FMV	RELIEF MTLs	EMERGENCY RELIEF

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOOD NEIGHBOR SETTLEMENT HOUSE 1254 E TYLER STREET BROWNSVILLE, TX 78520	74-1211654	3		16,828	FMV	RELIEF MTLs	EMERGENCY RELIEF
GLOBAL AID NETWORK PO BOX 139020 DALLAS, TX 75313	95-4578963	3		16,196	FMV	MEDICAL MTLs	MEDICAL ASSISTANCE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEAM BROWNSVILLE 755 INTERNATIONAL BLVD BROWNSVILLE, TX 78520	84-1727617	3		10,911	FMV	RELIEF MTLs	EMERGENCY RELIEF
EL BUEN SAMARITANO MIGRANTE 2206 BURNSIDE STREET LAREDO, TX 78040	75-6044885	3		10,846	FMV	RELIEF MTLs	EMERGENCY RELIEF

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OZANAM CENTER 656 N MINNESOTA AVENUE BROWNSVILLE, TX 78521	74-2740560	3		10,103	FMV	RELIEF MTLs	EMERGENCY RELIEF
MINISTERIO UNA MISION 3294 TICONDEROGA DRIVE BROWNSVILLE, TX 78526	27-2414304	3		8,533	FMV	RELIEF MTLs	EMERGENCY RELIEF

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MISSION BORDER HOPE 571 QUARRY STREET EAGLE PASS, TX 78852	45-5327586	3		7,152	FMV	RELIEF MTLs	EMERGENCY RELIEF
LA POSADA PROVIDENCIA 30094 MARYDALE ROAD SAN BENITO, TX 78586	30-0691482	3		7,003	FMV	RELIEF MTLs	EMERGENCY RELIEF

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASA CARIDAD 1080 VISTA HERMOSA DRIVE EAGLE PASS, TX 78852	74-1444294	3		6,427	FMV	RELIEF MTLs	EMERGENCY RELIEF

Schedule J (Form 990)

Compensation Information

OMB No 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
SAMARITAN'S PURSE

Employer identification number
58-1437002

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

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

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

a The organization?

b Any related organization?

If "Yes," on line 5a or 5b, describe in Part III

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

a The organization?

b Any related organization?

If "Yes," on line 6a or 6b, describe in Part III

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

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

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

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

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
SCHEDULE J, PART III	<p>PART I, LINE 1A - FRINGE OR EXPENSE EXPLANATION FIRST-CLASS TRAVEL ONE BOARD MEMBER TRAVELED ONE TIME VIA FIRST-CLASS AIRFARE FOR MINISTRY PURPOSES THE FLIGHT WAS APPROVED BY MANAGEMENT TWO KEY EMPLOYEES TRAVELED VIA FIRST-CLASS AIRFARE FOR FIVE TOTAL FLIGHTS FOR MINISTRY PURPOSES THREE FLIGHTS WERE DUE TO COACH BEING UNAVAILABLE AND TWO FLIGHTS WERE APPROVED BY MANAGEMENT TWO HIGHER COMPENSATED EMPLOYEES EACH TRAVELED ONE TIME VIA FIRST-CLASS AIRFARE FOR MINISTRY PURPOSES ONE FLIGHT WAS DUE TO COACH BEING UNAVAILABLE AND ONE FLIGHT WAS APPROVED BY MANAGEMENT FIVE FAMILY MEMBERS TRAVELED VIA FIRST-CLASS AIRFARE FOR A TOTAL OF ELEVEN FLIGHTS, WHICH WAS REQUESTED BY MANAGEMENT CHARTER TRAVEL (MINISTRY-OWNED AIRCRAFT, OTHER MISSIONARY AVIATION AND CHARTER TRIPS) SAMARITAN'S PURSE PROVIDES CHARTER TRAVEL VIA THE USE OF MINISTRY-OWNED AIRCRAFT BASED IN BAHAMAS, KENYA, LIBERIA AND THE UNITED STATES (ALASKA, NORTH CAROLINA, AND PUERTO RICO), TO PERFORM ITS EVANGELISM AND RELIEF PROGRAMS, AS WELL AS CHARTER FLIGHTS PROVIDED BY OTHER MISSIONARY AVIATION MINISTRIES OR PRIVATE CHARTERS TO CARRY OUT RELIEF AND MINISTRY PROGRAMS THESE AIRCRAFT TRANSPORT LISTED PERSONS, AND OTHER PERSONS, IN PERFORMANCE OF MINISTRY PROGRAMS, OFTEN IN AREAS NOT SERVED BY COMMERCIAL AIR TRANSPORTATION ANY PERSONAL USE FOLLOWED THE BOARD-APPROVED POLICY AND THE RELATED BENEFIT AMOUNT PER IRS REGULATIONS WAS REPORTED AS TAXABLE COMPENSATION LISTED PERSONS FLOWN ON CHARTER FLIGHTS WERE AS FOLLOWS FIVE BOARD MEMBERS, FOUR OFFICERS, FOUR KEY EMPLOYEES, AND THREE HIGHER COMPENSATED EMPLOYEES TRAVELED IN MINISTRY-OWNED OR CHARTERED AIRCRAFT FOR MINISTRY PURPOSES A PORTION OF ONE OFFICER'S AND TWO BOARD MEMBER'S TRIPS WERE REPORTED AS TAXABLE COMPENSATION TRAVEL FOR SPOUSE AND/OR OTHER FAMILY MEMBER(S) AS A CHRISTIAN MINISTRY, WE BELIEVE THAT MARRIAGE, BETWEEN ONE MAN AND ONE WOMAN, WAS CREATED BY GOD (GENESIS 2 24, MATTHEW 19 4-6) WE ALSO BELIEVE THAT MARRIAGE AND THE FAMILY PROVIDE A MEANS TO GLORIFY AND SERVE GOD THE SIGNIFICANCE OF GOD'S DESIGN FOR MARRIAGE IS DISPLAYED THROUGH THE SCRIPTURAL COMPARISON OF THE RELATIONSHIP BETWEEN HUSBAND AND WIFE TO THE RELATIONSHIP BETWEEN CHRIST AND THE CHURCH (EPHESIANS 5 22-27, REVELATION 21 2, 21 9) SAMARITAN'S PURSE ACKNOWLEDGES THE UNIQUE, DISTINCT, AND ELEVATED ROLE OF MARRIAGE AND THE FAMILY, AND WE DESIRE TO AFFIRM GOD'S DESIGN FOR MARRIAGE AND THE FAMILY AS IT PERTAINS TO CARRYING OUT OUR MISSION AND MINISTRY (MATTHEW 5 14-16) THE BOARD OF DIRECTORS FURTHER RECOGNIZES THAT SPOUSES AND OTHER FAMILY MEMBERS ARE OFTEN PASSIONATE AMBASSADORS AND MINISTRY PARTNERS WHOSE FAMILIARITY, SUPPORT, AND DIRECT INVOLVEMENT CAN EXPAND THE IMPACT OF OUR MISSION AND PURPOSES OF FURTHERING THE GOSPEL OF JESUS CHRIST (ACTS 1 8) MANAGEMENT HAS IMPLEMENTED THE BOARD'S RECOMMENDATION TO ACTIVELY CULTIVATE THE INVOLVEMENT OF SPOUSES AND OTHER FAMILY MEMBERS OF BOARD MEMBERS AND STAFF IN THE MINISTRY, THROUGH VOLUNTEER SERVICES, TRAINING, DISCIPLESHIP, PRAYER, SHARING THE STORY OF OUR WORK, DEVELOPMENT, AND OTHER MINISTRY ACTIVITIES TRAVEL BY A SPOUSE AND/OR OTHER FAMILY MEMBER(S) WAS FOR VOLUNTEERING ON MINISTRY PROJECTS THE TRAVEL RESULTED IN MINIMAL, IF ANY, ADDITIONAL EXPENSE TO THE MINISTRY LISTED PERSONS WITH TRAVEL BY A SPOUSE AND/OR OTHER FAMILY MEMBER(S) WERE AS FOLLOWS FOUR BOARD MEMBERS, TWO OFFICERS, THREE KEY EMPLOYEES AND THREE HIGHER COMPENSATED EMPLOYEES WERE ACCOMPANIED BY A SPOUSE AND/OR OTHER FAMILY MEMBER(S) ON MINISTRY ACTIVITY ONE BOARD MEMBER AND ONE OFFICER WERE ACCOMPANIED BY A SPOUSE AND/OR OTHER FAMILY MEMBER(S) NOT ON MINISTRY ACTIVITY THE BOARD OF DIRECTORS ADOPTED A POLICY REGARDING THE PRESIDENT/CEO'S TRAVEL FOR FAMILY MEMBERS THAT INCLUDES REPORTING ANY PERSONAL USE AS TAXABLE COMPENSATION ALSO, THE COMPENSATION COMMITTEE HAS ESTABLISHED A GUIDELINE ON THE MAXIMUM AMOUNT THAT MAY BE INCURRED BY THE PRESIDENT/CEO FOR PERSONAL USE TAX INDEMNIFICATION AND GROSS-UP PAYMENTS ONE KEY EMPLOYEE RECEIVED A GROSS-UP PAYMENT THE PAYMENT WAS RELATED TO FAMILY MEMBER EDUCATION THE PAYMENT WAS REVIEWED AND APPROVED BY BOTH THE COMPENSATION COMMITTEE AND THE BOARD OF DIRECTORS, AND WAS TREATED AS TAXABLE PERSONAL SERVICES THE BOARD OF DIRECTORS HAS ADOPTED A POLICY THAT PROVIDES MAINTENANCE AND BOOKKEEPING SERVICES TO THE PRESIDENT/CEO THE VALUE OF THESE SERVICES ARE REPORTED AS TAXABLE COMPENSATION AND INCLUDED IN THE ANNUAL REASONABLENESS COMPENSATION REVIEW BY THE COMPENSATION COMMITTEE</p>

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
See Additional Data Table					

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 58-1437002

Name: SAMARITAN'S PURSE

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) EDWARD GRAHAM	SON DIRECTOR	163,465	COMP/BENEFITS		No
(1) COREY LYNCH	SPOUSE DIR	101,002	COMP/BENEFITS		No

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(3) MARTY COTTRELL	SON-IN-LAW DIR	89,626	COMP/BENEFITS		No
(1) JESSICA ZERKLE	DAUGHTER KEYEMP	66,648	COMP/BENEFITS		No

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(5) ANN LITTLEJOHN	DAUGHTER OFF	61,400	COMP/BENEFITS		No
(1) JOHN PAYNE	SPOUSE DIR	50,569	COMP/BENEFITS		No

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(7) JANE GRAHAM	SPOUSE DIR	46,503	COMP/BENEFITS		No
(1) JEREMY ZERKLE	SN-IN-LAW KYEMP	34,275	COMP/BENEFITS		No

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(9) WILLIAM FURMAN	SON OFFICER	21,630	COMP/BENEFITS		No

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2019

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
SAMARITAN'S PURSE

Employer identification number
58-1437002

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		13,595	COST
5 Clothing and household goods	X		1,096,015	COST/SELLING PRICE
6 Cars and other vehicles	X	4	143,552	SELLING PRICE
7 Boats and planes	X	1	15,045	APPRAISAL
8 Intellectual property				
9 Securities—Publicly traded	X	649	8,523,606	SELLING PRICE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential	X	5	742,814	APPRAISAL/SELLING PRICE
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles	X	6	24,222	SELLING PRICE
19 Food inventory	X	45	4,977,963	COST
20 Drugs and medical supplies	X	1,129	4,218,910	COST
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
SHOEBOX	X	8,883,008	222,802,593	COST
25 Other ▶ (GIFTS)				
26 Other ▶ (AGRI /LIVESTOCK)	X	32	244,888	COST/SELLING PRICE
VEHICLE	X	30	64,695	COST
27 Other ▶ (IMPROV)				
SOFTWARE	X	1	40,000	COST
28 Other ▶ (LIC)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 5

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	Yes	
b If "Yes," describe in Part II		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
SCHEDULE M, PAGE 1, PART I, LINE 32B	SAMARITAN'S PURSE UTILIZES THE SERVICES OF VARIOUS THIRD PARTIES TO ASSIST IN LIQUIDATING NONCASH ASSETS DONATED TO THE MINISTRY. THE THIRD PARTIES INCLUDE A BROKERAGE FIRM FOR LIQUIDATION OF PUBLICLY TRADED SECURITIES, REAL ESTATE AGENTS, AND CONSIGNMENT AGENTS.
SCHEDULE M, PAGE 2, PART II	PART I, COLUMN (B) - NUMBER OF CONTRIBUTIONS OR ITEMS CONTRIBUTED. SAMARITAN'S PURSE REPORTS A COMBINATION OF NUMBER OF CONTRIBUTIONS AND NUMBER OF ITEMS RECEIVED, DEPENDING ON THE ITEM DONATED.

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

2019
Open to Public Inspection

Department of the Treasury

Name of the organization
SAMARITAN'S PURSE

Employer identification number

58-1437002

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 - ORGANIZATION'S MISSION	SAMARITAN'S PURSE IS A NONDENOMINATIONAL EVANGELICAL CHRISTIAN ORGANIZATION PROVIDING SPIRITUAL AND PHYSICAL AID TO HURTING PEOPLE AROUND THE WORLD SINCE 1970, SAMARITAN'S PURSE HAS HELPED MEET NEEDS OF PEOPLE WHO ARE VICTIMS OF WAR, POVERTY, NATURAL DISASTERS, DISEASE, AND FAMINE WITH THE PURPOSE OF SHARING GOD'S LOVE THROUGH HIS SON, JESUS CHRIST THE ORGANIZATION SERVES THE CHURCH WORLDWIDE TO PROMOTE THE GOSPEL OF THE LORD JESUS CHRIST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 1, PART I, LINE 6	THE MINISTRY USES VOLUNTEERS IN WORLD MEDICAL MISSION, OPERATION CHRISTMAS CHILD, OPERATION HEAL OUR PATRIOTS, NORTH AMERICAN MINISTRIES, AND INTERNATIONAL CONSTRUCTION PROJECTS THOUSANDS MORE VOLUNTEER FROM AFAR THROUGH THEIR PRAYERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PAGE 2, PART III, LINE 4D</p>	<p>THE MISSION OF SAMARITAN'S PURSE IS TO OBEDIENTLY SERVE THE LORD JESUS CHRIST AT THE CORE OF OUR MINISTRY IS THE BELIEF THAT MANKIND HAS BEEN SEPARATED FROM GOD BY SIN, AND OUR ONLY HOPE OF SALVATION COMES FROM THE ATONING SACRIFICE OF GOD'S SON, JESUS CHRIST "IF YOU CONFESS WITH YOUR MOUTH THE LORD JESUS AND BELIEVE IN YOUR HEART THAT GOD HAS RAISED HIM FROM THE DEAD, YOU WILL BE SAVED" (ROMANS 10 9) MANY CLAIM TO BEHAVE MERCIFULLY TOWARD THEIR NEIGHBORS OUT OF A SENSE OF SOCIAL CONSCIOUSNESS AT SAMARITAN'S PURSE, WE TAKE OUR NAME AND MANDATE FROM CHRIST'S INSTRUCTION THAT WE SHOULD FIRST LOVE THE LORD WITH OUR HEARTS, SOULS, MINDS, AND STRENGTH CARING FOR OUR NEIGHBORS THEN FLOWS FROM OUR DEEP LOVE FOR GOD THIS COMMAND IS ILLUSTRATED IN THE PARABLE OF THE GOOD SAMARITAN AS TOLD BY JESUS AND RECORDED IN LUKE 10 25-37 (NEW KING JAMES VERSION) AND BEHOLD, A CERTAIN LAWYER STOOD UP AND TESTED HIM, SAYING, "TEACHER, WHAT SHALL I DO TO INHERIT ETERNAL LIFE?" HE SAID TO HIM, "WHAT IS WRITTEN IN THE LAW? WHAT IS YOUR READING OF IT?" SO HE ANSWERED AND SAID, "'YOU SHALL LOVE THE LORD YOUR GOD WITH ALL YOUR HEART, WITH ALL YOUR SOUL, WITH ALL YOUR STRENGTH, AND WITH ALL YOUR MIND,- AND YOUR NEIGHBOR AS YOURSELF '- AND HE SAID TO HIM, "YOU HAVE ANSWERED RIGHTLY, DO THIS AND YOU WILL LIVE " BUT HE, WANTING TO JUSTIFY HIMSELF, SAID TO JESUS, -AND WHO IS MY NEIGHBOR?" THEN JESUS ANSWERED AND SAID "A CERTAIN MAN WENT DOWN FROM JERUSALEM TO JERICO, AND FELL AMONG THIEVES, WHO STRIPPED HIM OF HIS CLOTHING, WOUNDED HIM, AND DEPARTED, LEAVING HIM HALF DEAD NOW BY CHANCE A CERTAIN PRIEST CAME DOWN THAT ROAD AND WHEN HE SAW HIM, HE PASSED BY ON THE OTHER SIDE LIKEWISE A LEVITE, WHEN HE ARRIVED AT THE PLACE, CAME AND LOOKED, AND PASSED BY ON THE OTHER SIDE BUT A CERTAIN SAMARITAN, AS HE JOURNEYED, CAME WHERE HE WAS AND WHEN HE SAW HIM, HE HAD COMPASSION SO HE WENT TO HIM AND BANDAGED HIS WOUNDS, POURING ON OIL AND WINE, AND HE SET HIM ON HIS OWN ANIMAL, BROUGHT HIM TO AN INN, AND TOOK CARE OF HIM ON THE NEXT DAY, WHEN HE DEPARTED, HE TOOK OUT TWO DENARII, GAVE THEM TO THE INNKEEPER, AND SAID TO HIM, 'TAKE CARE OF HIM, AND WHATEVER MORE YOU SPEND, WHEN I COME AGAIN, I WILL REPAY YOU ' SO WHICH OF THESE THREE DO YOU THINK WAS NEIGHBOR TO HIM WHO FELL AMONG THE THIEVES?- AND HE SAID, "HE WHO SHOWED MERCY ON HIM " THEN JESUS SAID TO HIM, "GO AND DO LIKEWISE " AT SAMARITAN'S PURSE, WE ARE RESPONDING TO CHRIST'S COMMAND TO DO LIKEWISE AS WE MINISTER TO THOSE SUFFERING FROM THE RESULTS OF SIN IN OUR WORLD WAR, POVERTY, DISASTER, DISEASE, AND FAMINE THE BIBLE TELLS US, "THE HEART IS DECEITFUL ABOVE ALL THINGS, AND DESPERATELY WICKED, WHO CAN KNOW IT?" (JEREMIAH 17 9) IN THE NEW TESTAMENT, WE READ THAT "THE WAGES OF SIN IS DEATH" (ROMANS 6 23) BECAUSE OF ADAM AND EVE'S DISOBEDIENCE, EVERY HUMAN BEING IS BORN WITH THE STAIN OF SIN, WHICH, WITHOUT THE CLEANSING BLOOD OF JESUS CHRIST, ULTIMATELY LEADS TO PHYSICAL AND SPIRITUAL DEATH THE LORD, IN HIS MERCY,</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PAGE 2, PART III, LINE 4D</p>	<p>SENT HIS BELOVED SON, JESUS CHRIST, FROM HEAVEN TO THIS EARTH ON A RESCUE MISSION JOHN 3 16 SAYS, "FOR GOD SO LOVED THE WORLD THAT HE GAVE HIS ONLY BEGOTTEN SON, THAT WHOEVER BELIEVES IN HIM SHOULD NOT PERISH, BUT HAVE EVERLASTING LIFE " JESUS TOOK OUR SINS UPON HIMSELF, SUFFERING AND DYING ON A ROMAN CROSS HE TOOK OUR SINS TO THE GRAVE, AND ON THE THIRD DAY, HE AROSE AGAIN THROUGH HIS DEATH AND RESURRECTION, JESUS BECAME THE WAY FOR US TO BE RECONCILED TO GOD HE SAID, "I AM THE WAY, THE TRUTH, AND THE LIFE NO ONE COMES TO THE FATHER EXCEPT THROUGH ME" (JOHN 14 6) IF YOU CHOOSE TO REMAIN IN YOUR SINS, YOU WILL BE SEPARATED FROM GOD FOREVER BUT, IF YOU PLACE YOUR FAITH AND TRUST IN WHAT JESUS HAS DONE, YOU WILL BE SAVED BY GOD'S GRACE THIS IS THE GOOD NEWS "HE WHO BELIEVES IN HIM IS NOT CONDEMNED, BUT HE WHO DOES NOT BELIEVE IS CONDEMNED ALREADY, BECAUSE HE HAS NOT BELIEVED IN THE NAME OF THE ONLY BEGOTTEN SON OF GOD" (JOHN 3 18) IF YOU WANT TO RECEIVE GOD'S FREE GIFT OF SALVATION, YOU CAN PRAY A SIMPLE PRAYER LIKE THIS ONE DEAR GOD, I AM A SINNER I AM SORRY FOR MY SINS PLEASE FORGIVE ME HELP ME TO TURN FROM MY SINFUL LIFE I BELIEVE BY FAITH THAT JESUS CHRIST IS YOUR SON WHO DIED FOR MY SINS, AND WHOM YOU HAVE RAISED TO LIFE I WANT TO TRUST JESUS AS MY SAVIOR AND FOLLOW HIM AS MY LORD FROM THIS DAY FORWARD AND FOREVERMORE AMEN IF YOU HAVE PRAYED THIS, OR WOULD LIKE SOME SPIRITUAL HELP, PLEASE CALL THE FOLLOWING NUMBER TO SPEAK WITH A COUNSELOR 1-877-247-2426 YOU CAN TRUST THESE WORDS ARE TRUE "FOR BY GRACE YOU HAVE BEEN SAVED THROUGH FAITH, AND THAT NOT OF YOURSELVES, IT IS THE GIFT OF GOD, NOT OF WORKS, LEAST ANYONE SHOULD BOAST" (EPHESIANS 2 8-9) AT SAMARITAN'S PURSE, WE TAKE PRAYER SERIOUSLY THANKS TO WHAT JESUS CHRIST HAS DONE, WE CAN TAKE OUR PRAYER CONCERNS DIRECTLY TO OUR GOD IN HEAVEN WE CAN ASK HIM TO INTERVENE IMMEDIATELY ON BEHALF OF THOSE WHOSE LIVES ARE IN DANGER, AND WE TRUST HIM TO PROVIDE THE RESOURCES FOR US TO SWIFTLY ACCOMPLISH HIS WORK AND HIS WILL THE QUARTERLY MAGAZINE OF SAMARITAN'S PURSE, PRAYERPOINT, IS DEVOTED ENTIRELY TO PRAYER FOR OUR PROJECTS AROUND THE WORLD WE TRUST THAT AS GOD ANSWERS PRAYERS, HE WILL MEET THE NEEDS OF HIS PEOPLE IN ADDITION TO THE MINISTRIES LISTED IN PART III, THE FOLLOWING MINISTRIES ARE OUR RESPONSE TO THE EFFECTS OF SIN ON HUMANITY AND THE NATURAL WORLD OUR MISSION IS TO BRING GOD'S LOVE, HEALING, AND COMPASSION TO THOSE WHO ARE HURTING OR LOST BAHAMAS AFTER HURRICANE DORIAN HIT THE BAHAMAS, SAMARITAN'S PURSE RESPONDED IMMEDIATELY OUR DC-8 CARGO PLANE MADE A TOTAL OF 18 TRIPS TO THE ISLANDS, TRANSPORTING 360 TONS OF EMERGENCY SUPPLIES WE ESTABLISHED AN EMERGENCY FIELD HOSPITAL ADJACENT TO THE DAMAGED HOSPITAL IN FREEPORT, WHERE WE PROVIDED CARE TO NEARLY 8,000 PATIENTS AND PERFORMED 196 SURGERIES WORKING IN PARTNERSHIP WITH LOCAL CHURCHES, WE DISTRIBUTED MORE THAN 16,700 TARPES, 17,110 BLANKETS, 7,170 HYGIENE KITS, 5,950 AIR MATTRESSES, AND 6,690 SOLAR LIGHTS AF</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PAGE 2, PART III, LINE 4D</p>	<p>TER THE EMERGENCY PHASE, OUR TEAMS CLEANED OVER 17,000 CUBIC METERS OF DEBRIS AND RENOVATE D 28 HOUSES THIS WORK CONTINUES IN 2020 IRAQ SAMARITAN'S PURSE ASSISTED IN REBUILDING O R REPAIRING 184 HOMES DAMAGED BY ISIS TERRORISTS, AND PROVIDED TRAUMA COUNSELING TO MORE T HAN 1,600 PEOPLE WE DISTRIBUTED FOOD RATIONS TO OVER 18,600 PEOPLE AND WINTER BOOTS TO OV ER 2,000 CHILDREN MANY OF THESE INDIVIDUALS WERE REFUGEES FROM THE FIGHTING IN SYRIA MOR E THAN 6,530 PEOPLE HEARD THE GOSPEL COLOMBIA SAMARITAN'S PURSE WORKED ON THE BORDER TO MINISTER TO MIGRANTS LEAVING VENEZUELA WE SERVED MORE THAN 105,000 HOT MEALS, DISTRIBUTED 5,910 BACKPACKS AND 35,140 HYGIENE KITS, AND CARED FOR 14,180 PATIENTS THROUGH A PRIMARY CARE CLINIC AND A MOBILE CLINIC IN THE COURSE OF THIS WORK, OVER 183,500 PEOPLE WERE PRES ENTED WITH THE GOSPEL DEMOCRATIC REPUBLIC OF THE CONGO IN THE MIDST OF AN ONGOING EBOLA OUTBREAK, SAMARITAN'S PURSE TREATED MORE THAN 600 PEOPLE AT A TREATMENT CENTER WE SET UP I N THE VILLAGE OF KOMANDA WE ALSO PROVIDED TRAINING AND SUPPLIES FOR HOSPITALS AND CLINICS TO EQUIP THEM TO RESPOND TO THE OUTBREAK TO HELP PREVENT THE SPREAD OF EBOLA, WE PROMOTE D PROPER HYGIENE TECHNIQUES TO OVER 97,500 PEOPLE WE ALSO PROVIDED FOOD RATIONS TO MORE T HAN 200,000 PEOPLE AND SUPPLEMENTARY FOOD TO OVER 3,700 WOMEN AND CHILDREN AT RISK OF MALN UTRITION MORE THAN 19,000 PEOPLE WERE ASSISTED WITH SEEDS AND TOOLS TO ENABLE THEM TO CAR E FOR THEIR FAMILIES FOR YEARS TO COME, AND MORE THAN 15,000 HEARD THE GOSPEL THROUGH PROJ ECTS TRAINING AND VISITS OTHER INTERNATIONAL PROJECTS SAMARITAN'S PURSE DEPLOYED A DISAS TER ASSISTANCE RESPONSE TEAM TO MOZAMBIQUE TO HELP SURVIVORS OF TROPICAL STORM IDAI, THE S ECOND DEADLIEST TROPICAL STORM EVER IN THE SOUTHERN HEMISPHERE SAMARITAN'S PURSE SET UP A N EMERGENCY FIELD HOSPITAL TO CARE FOR MORE THAN 5,700 PEOPLE IN THE FLOODED TOWN OF BUZI, AND ALSO DISTRIBUTED 159 TONS OF EMERGENCY SUPPLIES, INCLUDING BLANKETS AND WATER FILTERS ALSO DURING 2019, WE HAD FIELD OFFICES IN 21 COUNTRIES TO HELP IMPOVERISHED FAMILIES AND COMMUNITIES WITH ACCESS TO CLEAN WATER, AGRICULTURAL ASSISTANCE, SCHOOLS, AND OTHER ESSEN TIAL SERVICES WORLD MEDICAL MISSION THE MEDICAL ARM OF SAMARITAN'S PURSE ARRANGED 800 SH ORT-TERM TRIPS FOR VOLUNTEERS TO SERVE AT 38 MISSION HOSPITALS AROUND THE WORLD ANOTHER 3 1 DOCTORS WERE ON TWO-YEAR ASSIGNMENTS THROUGH OUR POST- RESIDENCY PROGRAM AS THEY FOLLOWE D GOD'S CALL TO DEVOTE THEIR CAREERS TO OVERSEAS MISSIONS OUR MEDICAL WAREHOUSE SHIPPED 1 89 TONS OF SUPPLIES TO 24 HOSPITALS AND CLINICS IN 21 COUNTRIES, AND OUR BIOMEDICAL TECHNI CIANS VISITED 29 HOSPITALS TO REPAIR, UPDATE, OR SERVICE LIFE- SAVING MEDICAL EQUIPMENT WE PRAISE GOD FOR HOW HE USES THESE SERVANTS TO SAVE LIVES AND SPREAD THE GOSPEL OF JESUS CH RIST, THE GREAT PHYSICIAN "THE LORD IS NEAR TO ALL WHO CALL UPON HIM, TO ALL WHO CALL UPO N HIM IN TRUTH" (PSALM 145 18) THE GREATEST JOURNEY THIS IS A FOLLOW-UP PROGRAM DEVELOPE D BY SAMARITAN'S PURSE ESPECIA</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART V, LINE 4B	BOLIVIA, BURMA, CAMBODIA, COLOMBIA, CONGO (KINSHASA), DOMINICA, ETHIOPIA, HAITI, IRAQ, JAPAN, KENYA, KOREA (SOUTH), LIBERIA, MONGOLIA, NEPAL, NIGER, PHILIPPINES, SOUTH SUDAN, SRI LANKA, UGANDA, VIETNAM

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI	PART VI-A, LINE 1A EXECUTIVE COMMITTEE COMPOSITION OF COMMITTEE - THE MINISTRY'S BYLAWS PROVIDE FOR THE ESTABLISHMENT OF AN EXECUTIVE COMMITTEE THE EXECUTIVE COMMITTEE IS COMPOSED OF AT LEAST THREE (3) AND UP TO SEVEN (7) BOARD MEMBERS APPOINTED OR REMOVED BY THE BOARD CHAIRMAN AND RATIFIED BY THE BOARD OF DIRECTORS THE CURRENT COMPOSITION OF THE EXECUTIVE COMMITTEE IS THREE (3) WITH TWO (2) BEING INDEPENDENT BOARD MEMBERS SCOPE OF COMMITTEE'S AUTHORITY - PURSUANT TO THE MINISTRY'S BYLAWS, THE EXECUTIVE COMMITTEE MAY HOLD MEETINGS BETWEEN MEETINGS OF THE BOARD OF DIRECTORS TO ACT ON BEHALF OF THE BOARD OF DIRECTORS THE EXECUTIVE COMMITTEE MAY ACT ON MATTERS OF BUSINESS, FINANCIAL, OR SPIRITUAL CONCERN EXCEPT FOR MATTERS PRECLUDED BY THE BYLAWS THE EXECUTIVE COMMITTEE DOES NOT HAVE POWER TO AMEND THE ARTICLES OF INCORPORATION OR BYLAWS OF THE MINISTRY, AND MAY NOT AUTHORIZE THE DISSOLUTION OR MERGER OF THE MINISTRY, REMOVE OR ELECT BOARD MEMBERS, HIRE OR DISMISS THE CEO, DISTRIBUTE OR SELL SUBSTANTIALLY ALL OF THE ASSETS OF THE MINISTRY, OR TAKE ANY OTHER ACTION IN CONFLICT WITH THE ARTICLES OF INCORPORATION OR BYLAWS OF THE MINISTRY ALL ACTIONS OF THE EXECUTIVE COMMITTEE ARE RATIFIED BY THE BOARD OF DIRECTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 2	FRANKLIN GRAHAM ROY GRAHAM BD/CHAIR/CEO BOARD MEMBER FAMILY/BUSINESS FRANKLIN GRAHAM JANE AUSTIN LYNCH BD/CHAIR/CEO BOARD MEMBER FAMILY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	THE MINISTRY'S FORM 990 IS PREPARED BY THE FINANCE DEPARTMENT OF THE MINISTRY WITH ASSISTANCE AND REVIEW BY THE VICE PRESIDENT OF FINANCE/CFO, VICE PRESIDENT OF CORPORATE AFFAIRS, VICE PRESIDENT OF COMMUNICATIONS, VICE PRESIDENT OF PUBLIC POLICY AND CORPORATE COUNSEL THE RETURN IS ALSO REVIEWED BY AN INDEPENDENT CERTIFIED PUBLIC ACCOUNTING FIRM, INTERNAL AUDIT, THE CHIEF OPERATING OFFICER, A BOARD-APPOINTED CONSULTANT, THE SENIOR EXECUTIVE ADVISOR, AND THE CHIEF EXECUTIVE OFFICER AFTER THIS REVIEW, THE RETURN IS REVIEWED AND ACCEPTED BY THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS THE RETURN IS THEN PROVIDED TO THE BOARD OF DIRECTORS PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PAGE 6, PART VI, LINE 12C</p>	<p>THE MINISTRY'S CONFLICT OF INTEREST POLICY COVERS ALL "RESPONSIBLE PERSONS," WHICH INCLUDE S BOARD MEMBERS, OFFICERS, VICE PRESIDENTS, MEMBERS OF EXECUTIVE MANAGEMENT, MEMBERS OF TH E TRAVEL DEPARTMENT AND EMPLOYEES THROUGHOUT THE MINISTRY WHO HAVE PURCHASING AUTHORITY A NNUALLY, THE CONFLICT OF INTEREST POLICY IS PROVIDED TO EACH RESPONSIBLE PERSON, AND THE R ESPOINSIBLE PERSON MUST COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT WHETHER OR NOT INVOLVED IN A POTENTIAL TRANSACTION WITH THE MINISTRY THE DISCLOSURE STATEMENTS ARE SUBM ITTED BY THESE INDIVIDUALS ON AN ANNUAL BASIS, AS WELL AS THROUGHOUT THE YEAR AS A TRANSAC TION MAY ARISE THROUGHOUT THE YEAR, THE CORPORATE AFFAIRS AND FINANCE DEPARTMENTS MONITOR THE ADDITION OF NEW RESPONSIBLE PERSONS WHOSE POSITIONS MAY ALLOW THEM TO HAVE MATERIAL F INANCIAL INTEREST IN A TRANSACTION A SUMMARY OF POTENTIAL CONFLICTS OF INTEREST DISCLOSED BY RESPONSIBLE PERSONS IS REVIEWED BY INTERNAL AUDIT AND REPORTED TO THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS RESTRICTIONS IMPOSED ON INDIVIDUALS INVOLVED IN TRANSACTIONS WI TH A POTENTIAL CONFLICT OF INTEREST INCLUDE PROHIBITING THEM FROM PARTICIPATING IN THE BOA RD OR COMMITTEE DELIBERATIONS AND APPROVAL OF THE TRANSACTIONS THE PROCESS FOR REVIEW OF TRANSACTIONS WITH POTENTIAL CONFLICTS OF INTEREST VARIES BASED ON THE INDIVIDUAL WITH THE CONFLICT IF A PERSON IS A STAFF MEMBER AND IS NOT A DISQUALIFIED PERSON, ANY PROPOSED TRA NSACTION THAT MAY BE A CONFLICT OF INTEREST MUST BE REVIEWED AND APPROVED BY THE CEO OR HI S DESIGNEE ALL MATERIAL TERMS AND CONDITIONS OF THE TRANSACTION SHALL BE DESCRIBED IN WRI TING AND PROVIDED TO THE CEO PRIOR TO ENTERING INTO THE TRANSACTION THE CEO WILL REVIEW T HE TRANSACTION TO DETERMINE IF IT IS FAIR AND IN THE BEST INTEREST OF THE MINISTRY IF THE PERSON WITH THE POTENTIAL CONFLICT OF INTEREST IS A DISQUALIFIED PERSON, THE RESPONSIBLE PERSON WILL PROVIDE ALL MATERIAL TERMS AND CONDITIONS TO THE CEO IN WRITING THE CEO WILL FORWARD SUCH INFORMATION TO THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS PRIOR TO ENTERING INTO THE TRANSACTION THE TRANSACTION SHALL ONLY BE PERMITTED IF THE COMPENSATION COMMITTEE DETERMINES THAT THE CONFLICTING INTEREST IS FULLY DISCLOSED, THE RESPONSIBLE PE RSON WITH THE CONFLICT OF INTEREST IS EXCLUDED FROM THE DISCUSSION AND APPROVAL OF SUCH TR ANSACTION BY THE COMPENSATION COMMITTEE, AND THE TRANSACTION IS FAIR AND IN THE BEST INTER EST OF THE MINISTRY BY USE OF COMPARABLE VALUATION OR COMPETITIVE BID THE COMPENSATION CO MMITTEE CHAIR WILL PRESENT THE MATERIAL FACTS OF THE TRANSACTION TO THE FULL BOARD OF DIRE CTORS FOR RATIFICATION IF THE CEO OR HIS FAMILY MEMBER IS THE ONE WITH THE POTENTIAL CONF LICT OF INTEREST, THEN INITIAL DISCLOSURE SHALL BE MADE DIRECTLY TO THE COMPENSATION COMMI TTEE CHAIR BY THE VICE PRESIDENT OF CORPORATE AFFAIRS USING THE SAME CRITERIA LISTED ABOVE, THE COMPENSATION COMMITTEE WILL REVIEW AND DECIDE IF THE TRANSACTION IS FAIR AND IN THE BEST INTEREST OF THE MINISTRY</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 12C	THE COMPENSATION COMMITTEE WILL PRESENT THE MATERIAL FACTS OF THE TRANSACTION TO THE BOARD OF DIRECTORS FOR RATIFICATION IF THE CONFLICT OF INTEREST INVOLVES A GRANT, PAYMENT OR BENEFIT TO ANOTHER 501(C)(3) ORGANIZATION WITHIN THE EXEMPT PURPOSES OF THE MINISTRY, THE MATERIAL TERMS OF SUCH TRANSACTIONS WILL BE ANNUALLY SUBMITTED TO THE FINANCE COMMITTEE FOR REVIEW AND TO THE BOARD OF DIRECTORS FOR REVIEW AND RATIFICATION THE FINANCE DEPARTMENT REVIEWS THE SUMMARY OF CONFLICTS OF INTEREST DISCLOSED BY RESPONSIBLE PERSONS AND MONITORS POTENTIAL CONFLICT OF INTEREST TRANSACTIONS THROUGHOUT THE YEAR

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15A	THE COMPENSATION FOR ALL DISQUALIFIED PERSONS, AS DEFINED IN IRC SECTION 4958, IS REVIEWED AND APPROVED BY THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS. IN PRACTICE, THE MINISTRY PURPOSELY SELECTED MEMBERS OF THE COMPENSATION COMMITTEE HAVING NO CONFLICT OF INTEREST AS DEFINED IN THE IRC SECTION 4958 REGULATIONS. THE COMPENSATION COMMITTEE REVIEWED AND APPROVED THE 2019 COMPENSATION ARRANGEMENT FOR THE CEO AND REPORTED TO THE BOARD OF DIRECTORS. FOR CALENDAR YEAR 2019, THE COMPENSATION COMMITTEE RELIED ON AND REVIEWED APPROPRIATE COMPARATIVE DATA COMPILED BY AN INDEPENDENT COMPENSATION CONSULTANT IN MAKING A DETERMINATION. CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATIONS AND DECISIONS ARE CONTAINED IN THE MINUTES OF THE COMPENSATION COMMITTEE MEETING. COMPENSATION DECISIONS ARE REVIEWED AND APPROVED IN ADVANCE OF THE PAYMENT OF SUCH COMPENSATION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15B	THE COMPENSATION FOR ALL DISQUALIFIED PERSONS, AS DEFINED IN IRC SECTION 4958, IS REVIEWED AND APPROVED BY THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS FOR THESE DISQUALIFIED PERSONS, A COMPENSATION COMMITTEE COMPRISED OF DIRECTORS WITH NO CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT PERFORMED THE COMPENSATION REVIEW THE COMPENSATION COMMITTEE REVIEWED AND APPROVED THE 2019 COMPENSATION ARRANGEMENTS FOR THE CHIEF OPERATING OFFICER, VP OF CORPORATE AFFAIRS/ASSISTANT SECRETARY, VP OF OPERATION CHRISTMAS CHILD, VP OF PROGRAMS AND GOVERNMENT RELATIONS, VP OF FINANCE/CFO, VP OF QUALITY ASSURANCE, THE SENIOR DIRECTOR OF CORPORATE AFFAIRS/SECRETARY AND REPORTED TO THE BOARD OF DIRECTORS FOR CALENDAR YEAR 2019, THE COMPENSATION COMMITTEE RELIED ON AND REVIEWED COMPARATIVE DATA COMPILED BY AN INDEPENDENT COMPENSATION CONSULTANT IN MAKING A DETERMINATION CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATIONS AND DECISIONS ARE CONTAINED IN THE MINUTES OF THE COMPENSATION COMMITTEE MEETING COMPENSATION DECISIONS ARE REVIEWED AND APPROVED IN ADVANCE OF THE PAYMENT OF SUCH COMPENSATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 17	NORTH DAKOTA, PENNSYLVANIA, SOUTH CAROLINA, TENNESSEE, UTAH, VIRGINIA, WEST VIRGINIA, WISCONSIN, ARIZONA, MASSACHUSETTS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 19	THE MINISTRY'S ARTICLES OF INCORPORATION, IRS LETTER OF DETERMINATION, CONFLICT OF INTEREST POLICY, AUDITED FINANCIAL STATEMENTS, AND THE ANNUAL MINISTRY REPORT ARE PROVIDED UPON REQUEST AND ARE AVAILABLE FOR INSPECTION AT OUR OFFICE IN BOONE, NC THE ANNUAL MINISTRY REPORT AND THE AUDITED FINANCIAL STATEMENTS ARE ALSO POSTED ON THE MINISTRY'S WEBSITE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VIII	PART VII, LINE 1E GOVERNMENT GRANTS GOVERNMENT GRANTS ARE USED ONLY FOR THE CHARITABLE AND HUMANITARIAN PURPOSES PERMITTED BY GOVERNMENT AGENCIES AND REGULATIONS FUNDS FROM GOVERNMENT GRANTS ARE NOT EXPENDED FOR CHRISTIAN EVANGELISM OR RELIGIOUS PROGRAMS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART X	INVENTORY CONSISTS OF OPERATION CHRISTMAS CHILD SHOEBOX GIFTS, MEDICAL EQUIPMENT AND SUPPLIES, AND OTHER EQUIPMENT AND SUPPLIES FOR USE IN PROGRAMS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	PLANNED GIVING BENEFICIARY PAYMENTS -2,536,153 PLANNED GIVING ADMIN FEES -266,477 PLANNED GIVING ADMIN FEES 266,477 TOTAL -2,536,153

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2019

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
SAMARITAN'S PURSE

Employer identification number

58-1437002

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) EMMANUEL GROUP 300 CORPORATE AVIATION DR NORTH WILKESBORO, NC 28659 76-0748803	TITLE HLDG	NC	501C2		SAM PURSE	Yes	

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)CHARITABLE REMAINDER UNITRUST (2)	TRUST	NC	NA	TRUST				Yes	
(2)CHARITABLE REMAINDER UNITRUST (1)	TRUST	NC	NA	TRUST					No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b	No
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d	No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	1o	No
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q	No
r Other transfer of cash or property to related organization(s)	1r	No
s Other transfer of cash or property from related organization(s)	1s	No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation