

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2002

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2002 calendar year, or tax year beginning , 2002, and ending

B Check appropriate
☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization

DIRECT RELIEF INTERNATIONAL

Number and street (or P O box if mail is not delivered to street address)

Room/suite

27 SOUTH LA PATERA LANE

City or town, state or country, and ZIP + 4

SANTA BARBARA, CA 93117-3251

D Employer identification number

95-1831116

E Telephone number

(805) 964-4767

F Accounting method

☐ Cash☒ Accrual

Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

G Web site WWW.DIRECTRELIEF.ORG

J Organization type (check only one) ☒ 501(c)(3) (insert no) 4947(a)(1) or 527K Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail it should file a return without financial data. Some states require a complete return.

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes" enter number of affiliates ▶

H(c) Are all affiliates included? ☐ Yes ☒ No

(If "No" attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

I Enter 4-digit GEN ▶

M Check ☐ if the organization is not required to attach Sch. B (Form 990 990-EZ or 990-PF)

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 67,319,630.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions)

1 Contributions, gifts, grants, and similar amounts received STMT 1

a Direct public support

1a 64,473,903

b Indirect public support

1b 58,886

c Government contributions (grants)

1c 106,673

d Total (add lines 1a through 1c) (cash \$ 392,945 noncash \$ 62,246,517)

1d 64,639,462

2 Program service revenue including government fees and contracts (from Part VII, line 93)

2

3 Membership dues and assessments

3

4 Interest on savings and temporary cash investments

4

5 Dividends and interest from securities

5 121,236

6a Gross rents

6a 40,124

b Less rental expenses

6b 23,553

c Net rental income or (loss) (subtract line 6b from line 6a)

6c 16,571

7 Other investment income (describe ▶)

7

8a Gross amount from sales of assets other than inventory

(A) Securities

(B) Other

1,758,198

8a 301,753

b Less cost or other basis and sales expenses

1,976,860

8b 125,000

c Gain or (loss) (attach schedule)

-218,662

8c 176,753

d Net gain or (loss) (combine line 8c, columns (A) and (B))

8d -41,909

9 Special events and activities (attach schedule)

a Gross revenue (not including \$ of contributions reported on line 1a)

STMT 3

9a 434,868

b Less direct expenses other than fundraising expenses

9b 57,032

c Net income or (loss) from special events (subtract line 9b from line 9a)

9c 377,836

10a Gross sales of inventory, less returns and allowances

10a

b Less cost of goods sold

10b

c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)

10c

11 Other revenue (from Part VII, line 103)

11 23,989

12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)

12 65,137,185

13 Program services (from line 44, column (B))

13 69,585,569

14 Management and general (from line 44, column (C))

14 418,996

15 Fundraising (from line 44, column (D))

15 322,933

16 Payments to affiliates (attach schedule)

16

17 Total expenses (add lines 16 and 44, column (A))

17 70,327,498

18 Excess or (deficit) for the year (subtract line 17 from line 12)

18 -5,190,313

19 Net assets or fund balances at beginning of year (from line 73, column (A))

19 23,587,967

20 Other changes in net assets or fund balances (attach explanation)

STMT 4

STMT 5

20 -8,683

21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)

21 18,388,971

For Paperwork Reduction Act Notice, see the separate instructions

Form 990 (2002)

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 21 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ 228,003 noncash \$ 67,883,685)	22 68,111,688	68,111,688		
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc.	25 146,799.	80,739	22,020.	44,040
26 Other salaries and wages	26 971,309	681,110.	184,070.	106,129
27 Pension plan contributions	27 36,968	26,865	5,816.	4,287
28 Other employee benefits	28 125,959	91,268.	22,389.	12,302
29 Payroll taxes	29 87,417	59,160.	16,501	11,756
30 Professional fundraising fees	30			
31 Accounting fees	31 18,089		18,089	
32 Legal fees	32			
33 Supplies	33 18,846.	12,649.	4,112	2,085
34 Telephone	34			
35 Postage and shipping	35 17,243.	4,228	1,116	11,899
36 Occupancy	36			
37 Equipment rental and maintenance	37			
38 Printing and publications	38 84,139	5,310	2,663	76,166
39 Travel	39 37,790	31,104	4,341	2,345
40 Conferences, conventions, and meetings	40 5,820	847.	1,816	3,157
41 Interest	41 105,518	100,962	2,513	2,043
42 Depreciation depletion, etc (attach schedule)	42 76,782	51,776	16,661.	8,345
43 Other expenses not covered above (itemize) STMT 6	43a 483,131.	327,863.	116,889	38,379.
b	43b			
c	43c			
d	43d			
e	43e			
44 Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 70,327,498.	69,585,569.	418,996.	322,933.

Joint Costs Check ☒ if you are following SOP 98-2Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____,

(iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See page 24 of the instructions)What is the organization's primary exempt purpose? **SEE ATTACHED STATEMENT**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts but optional for others.)

a SEE ATTACHED STATEMENT			
(Grants and allocations \$ 68,111,688)			69,585,569.
b			
(Grants and allocations \$)			
c			
(Grants and allocations \$)			
d			
(Grants and allocations \$)			
e Other program services (attach schedule)	(Grants and allocations \$)		
f Total of Program Service Expenses (should equal line 44, column (B), Program services)			69,585,569

Part IV Balance Sheets (See page 24 of the instructions)

Note		Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year		(B) End of year
Assets	45	Cash - non-interest-bearing		1,017,491	45	823,179
	46	Savings and temporary cash investments			46	
	47a	Accounts receivable	47a	NONE		
	b	Less allowance for doubtful accounts	47b	56,613	47c	NONE
	48a	Pledges receivable	48a			
	b	Less allowance for doubtful accounts	48b		48c	
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51a	Other notes and loans receivable (attach schedule)	51a			
	b	Less allowance for doubtful accounts	51b		51c	
	52	Inventories for sale or use		18,098,032	52	12,571,138
	53	Prepaid expenses and deferred charges		123,694	53	31,043
	54	Investments - securities (attach schedule) STMT 7 ☐ Cost ☒ FMV		1,531,508	54	2,991,948
	55a	Investments - land, buildings, and equipment basis	55a			
	b	Less accumulated depreciation (attach schedule)	55b		55c	
56	Investments - other (attach schedule) STMT 8		733,293	56	530,000	
57a	Land, buildings, and equipment basis	57a	3,534,507			
b	Less accumulated depreciation (attach schedule)	57b	497,966	57c	3,036,541	
58	Other assets (describe STMT 9)		834,108	58	267,691	
59	Total assets (add lines 45 through 58) (must equal line 74)		25,462,802	59	20,251,540	
Liabilities	60	Accounts payable and accrued expenses		70,482	60	35,576
	61	Grants payable			61	
	62	Deferred revenue			62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			63	
	64a	Tax-exempt bond liabilities (attach schedule)			64a	
	b	Mortgages and other notes payable (attach schedule) STMT 10		1,694,171	64b	1,665,109
65	Other liabilities (describe STMT 11)		110,182	65	161,884	
66	Total liabilities (add lines 60 through 65)		1,874,835	66	1,862,569	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted		19,735,764	67	18,328,290
	68	Temporarily restricted		3,852,203	68	60,681
	69	Permanently restricted			69	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 70 through 74					
	70	Capital stock, trust principal, or current funds			70	
	71	Paid-in or capital surplus, or land, building, and equipment fund			71	
	72	Retained earnings, endowment, accumulated income, or other funds			72	
	73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		23,587,967	73	18,388,971
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)		25,462,802	74	20,251,540

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-B	Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
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Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page 26 of the instructions)

[illegible]

Form 990 (2002)

Part VI Other information (See page 27 of the instructions)

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	78b	X
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b If "Yes," enter the name of the organization: _____ and check whether it is ☐ exempt or ☐ nonexempt		
81 a Enter direct or indirect political expenditures. See line 81 instructions	81a	
b Did the organization file Form 1120-POL for this year?	81b	X
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III)	82b	397,277
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	X
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	X
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b	X
c Dues, assessments, and similar amounts from members	85c	N/A
d Section 162(e) lobbying and political expenditures	85d	N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	X
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	X
86 501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	N/A
b Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87 501(c)(12) orgs Enter a Gross income from members or shareholders	87a	N/A
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ▶ <u>N/A</u> , section 4912 ▶ <u>N/A</u> , section 4955 ▶ <u>N/A</u>		
b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ <u>N/A</u>		
d Enter Amount of tax on line 89c, above, reimbursed by the organization ▶ <u>N/A</u>		
90 a List the states with which a copy of this return is filed ▶ <u>CALIFORNIA</u>		
b Number of employees employed in the pay period that includes March 12, 2002 (See instructions)	90b	25
91 The books are in care of ▶ <u>CHRISTIAN WHITE - DRI</u> Telephone no ▶ <u>805-964-4767</u> Located at ▶ <u>27 S LA PATERA LN, S.B, CA</u> ZIP + 4 ▶ <u>93117-3251</u>		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ <u>92</u> <u>N/A</u>		

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	121,236	
97 Net rental income or (loss) from real estate					
a debt-financed property			30	16,571	
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			14	-41,909	
101 Net income or (loss) from special events			18		377,836
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a					
b OTHER INCOME			18	23,989	
c					
d					
e					
104 Subtotal (add columns (B), (D) and (E))				119,887	377,836
105 Total (add line 104, columns (B), (D), and (E))					497,723

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 32 of the instructions)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
101	FUNDRAISING EVENTS PROVIDE FOR SHIPMENTS OF MEDICAL SUPPLIES TO MEDICALLY INDIGENT AREAS

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions)

(A) Name, address, and EIN of corporation, partnership or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the instructions)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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.

Please Sign

Date

8-29-03

resident and CEO

8-29-03

Date

Check if self

Preparer's SSN or PTIN (See Gen. Inst. W)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

► **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2002

Name of the organization

DIRECT RELIEF INTERNATIONAL

Employer identification number

95-1831116

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50 000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
<u>CHRISTIAN WHITE</u> 27 SOUTH LA PATERA LANE SANTA BARBARA, CA 93117	CONTROLLER 40 HRS	65,024.	2,712	
<u>SUSAN FOWLER</u> 27 SOUTH LA PATERA LANE SANTA BARBARA, CA 93117	DIR OF PROGRAMS 40 HRS	56,708	5,103	
<u>ANTHOULA RANDOPOULOS</u> 27 SOUTH LA PATERA LANE SANTA BARBARA, CA 93117	DIR OF FDTN RELATION 40 HRS	62,283.	6,559	
<u>DAN SMITH</u> 27 SOUTH LA PATERA LANE SANTA BARBARA, CA 93117	SR PROGRAM OFFICER 40 HRS	53,529	5,251.	
<u>LANNY LAKE</u> 27 SOUTH LA PATERA LANE SANTA BARBARA, CA 93117	DIR OF OPERATIONS 40 HRS	51,867.	4,606.	
Total number of other employees paid over \$50,000	NONE			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50 000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	NONE	

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

Schedule A (Form 990 or 990-EZ) 2002

Part III Statements About Activities (See page 2 of the instructions)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities? STMT 14	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? STMT 15	2d	X
e Transfer of any part of its income or assets?	2e	X
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below)	3	X
4 Do you have a section 403(b) annuity plan for your employees?	4	X
Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments STMT 16		

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box.)

- 5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 ☐ A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ _____
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A.)
- 11b ☐ A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A.)
- 12 ☐ 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 charitable, etc., 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) (Also complete the Support Schedule in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting.***Note** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants and contributions received (Do not include unusual grants. See line 28)	75,277,877	80,132,506	61,164,190	35,792,842	252,367,415
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	74,122	103,156	58,269	63,435	298,982
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	STMT 17 81,768	52,616	41,263	33,040	208,687
23 Total of lines 15 through 22	75,433,767	80,288,278	61,263,722	35,889,317	252,875,084
24 Line 23 minus line 17	75,433,767	80,288,278	61,263,722	35,889,317	252,875,084
25 Enter 1% of line 23	754,338	802,883	612,637	358,893	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a 5,057,502
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 122,552,041
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c 252,875,084
d Add: Amounts from column (e) for lines 18 298,982 19 22 208,687 26b 122,552,041					26d 123,059,710
e Public support (line 26c minus line 26d total)					26e 129,815,374
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 51.3358 %
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:				
(2001)	(2000)	(1999)	NOT APPLICABLE	(1998)	
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:	(2001)	(2000)	(1999)	(1998)	
c Add: Amounts from column (e) for lines 15 17	16 20	21			27c
d Add: Line 27a total and line 27b total					27d
e Public support (line 27c total minus line 27d total)					27e
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)			27f		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h %
28 Unusual Grants. For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V**Private School Questionnaire (See page 7 of the instructions)****(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	31	
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities?	33h	
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)(To be completed **ONLY** by an eligible organization that filed Form 5768) **NOT APPLICABLE**

- Check ☐ **a** if the organization belongs to an affiliated group
- Check ☐ **b** if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table -		
	If the amount on line 40 is -		
	Not over \$500,000	20% of the amount on line 40	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
	Over \$17,000,000	\$1,000,000	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution If there is an amount on either line 43 or line 44, you must file Form 4720.**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below)

See the instructions for lines 45 through 50 on page 11 of the instructions.)

		Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total	
Lobbying nontaxable amount						
45						
Lobbying ceiling amount (150% of line 45(e))						
46						
Total lobbying expenditures						
Grassroots nontaxable amount						
48						
Grassroots ceiling amount (150% of line 48(e))						
49						
Grassroots lobbying expenditures						
50						

Part VI-B Lobbying Activity by Nonelecting Public Charities**NOT APPLICABLE**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines c through h)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines c through h)

Yes	No	Amount
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of

Yes	No
-----	----

	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1998	1997	1996	1995	1994	1993	1992	1991	1990	1989	1988	1987	1986	1985	1984	1983	1982	1981	1980	1979	1978	1977	1976	1975	1974	1973	1972	1971	1970	1969	1968	1967	1966	1965	1964	1963	1962	1961	1960	1959	1958	1957	1956	1955	1954	1953	1952	1951	1950	1949	1948	1947	1946	1945	1944	1943	1942	1941	1940	1939	1938	1937	1936	1935	1934	1933	1932	1931	1930	1929	1928	1927	1926	1925	1924	1923	1922	1921	1920	1919	1918	1917	1916	1915	1914	1913	1912	1911	1910	1909	1908	1907	1906	1905	1904	1903	1902	1901	1900	1899	1898	1897	1896	1895	1894	1893	1892	1891	1890	1889	1888	1887	1886	1885	1884	1883	1882	1881	1880	1879	1878	1877	1876	1875	1874	1873	1872	1871	1870	1869	1868	1867	1866	1865	1864	1863	1862	1861	1860	1859	1858	1857	1856	1855	1854	1853	1852	1851	1850	1849	1848	1847	1846	1845	1844	1843	1842	1841	1840	1839	1838	1837	1836	1835	1834	1833	1832	1831	1830	1829	1828	1827	1826	1825	1824	1823	1822	1821	1820	1819	1818	1817	1816	1815	1814	1813	1812	1811	1810	1809	1808	1807	1806	1805	1804	1803	1802	1801	1800	1799	1798	1797	1796	1795	1794	1793	1792	1791	1790	1789	1788	1787	1786	1785	1784	1783	1782	1781	1780	1779	1778	1777	1776	1775	1774	1773	1772	1771	1770	1769	1768	1767	1766	1765	1764	1763	1762	1761	1760	1759	1758	1757	1756	1755	1754	1753	1752	1751	1750	1749	1748	1747	1746	1745	1744	1743	1742	1741	1740	1739	1738	1737	1736	1735	1734	1733	1732	1731	1730	1729	1728	1727	1726	1725	1724	1723	1722	1721	1720	1719	1718	1717	1716	1715	1714	1713	1712	1711	1710	1709	1708	1707	1706	1705	1704	1703	1702	1701	1700	1699	1698	1697	1696	1695	1694	1693	1692	1691	1690	1689	1688	1687	1686	1685	1684	1683	1682	1681	1680	1679	1678	1677	1676	1675	1674	1673	1672	1671	1670	1669	1668	1667	1666	1665	1664	1663	1662	1661	1660	1659	1658	1657	1656	1655	1654	1653	1652	1651	1650	1649	1648	1647	1646	1645	1644	1643	1642	1641	1640	1639	1638	1637	1636	1635	1634	1633	1632	1631	1630	1629	1628	1627	1626	1625	1624	1623	1622	1621	1620	1619	1618	1617	1616	1615	1614	1613	1612
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51a(i)		X
---------------	--	----------

(ii) Other assets

a(ii)		x
-------	--	---

b Other transactions

(i) Sales or exchanges of assets with a noncharitable exempt organization

b(i)		x
-------------	--	----------

(ii) Purchases of assets from a noncharitable exempt organization

b(ii)		x
--------------	--	----------

(iii) Rental of facilities, equipment, or other assets

b(III)		X
---------------	--	----------

(iv) Reimbursement arrangements	
---------------------------------	-------

b(iv)		X
-------	--	----------

(v) Loans or loan guarantees

b(v)		x
-------------	--	----------

(vi) Performance of services or membership or fundraising solicitations

b(vi)		x
-------	--	---

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

C		X
----------	--	----------

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

[illegible]

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

► ☐ Yes ☒ No

b If "Yes," complete the following schedule

[illegible]

Name of organization

Employer identification number

DIRECT RELIEF INTERNATIONAL

95-1831116

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	<u>WATSON PHARMACEUTICALS</u> <u>100 CAMPUS DRIVE</u> <u>FLORHAM PARK, NJ 07932</u>	15,691,040.	Person ☒ Payroll ☐ Noncash ☒ (Complete Part II if there is a noncash contribution)
2	<u>GLOBAL LINKS</u> <u>4809 PENN AVE.</u> <u>PITTSBURGH, PA 15224</u>	2,145,494	Person ☒ Payroll ☐ Noncash ☒ (Complete Part II if there is a noncash contribution)
3	<u>BRISTOL MYERS SQUIBB COMPANY</u> <u>P.O. BOX 80723</u> <u>WILMINGTON, DE 19880</u>	13,153,546.	Person ☒ Payroll ☐ Noncash ☒ (Complete Part II if there is a noncash contribution)
4	<u>BRISTOL MYERS SQUIBB COMPANY</u> <u>P O BOX 80723</u> <u>WILMINGTON, DE 19880</u>	5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
5	<u>TEVA PHARMACEUTICALS</u> <u>P O BOX 904</u> <u>SELLERSVILLE, PA 18960</u>	3,763,069.	Person ☒ Payroll ☐ Noncash ☒ (Complete Part II if there is a noncash contribution)
6	<u>JOHNSON & JOHNSON</u> <u>ONE JOHNSON & JOHNSON PLAZA</u> <u>NEW BRUNSWICK, NJ 08933</u>	8,224,139.	Person ☒ Payroll ☐ Noncash ☒ (Complete Part II if there is a noncash contribution)

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2002Department of the Treasury
Internal Revenue Service

▶ See separate instructions

▶ Attach to your tax return

Attachment
Sequence No **67**

Name(s) shown on return

Identifying number

95-1831116**DIRECT RELIEF INTERNATIONAL**

Business or activity to which this form relates

GENERAL DEPRECIATION**Part I Election To Expense Certain Tangible Property Under Section 179****Note: If you have any listed property, complete Part V before you complete Part I**

1	Maximum amount See page 2 of the instructions for a higher limit for certain businesses	1	
2	Total cost of section 179 property placed in service (see page 2 of the instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see page 2 of the instructions	5	
(a) Description of property		(b) Cost (business use only)	(c) Elected cost
6			
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2001 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2003 Add lines 9 and 10, less line 12	13	

Note Do not use Part II or Part III below for listed property. Instead, use Part V**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see page 3 of the instructions)	14	
15	Property subject to section 168(f)(1) election (see page 4 of the instructions)	15	
16	Other depreciation (including ACRS) (see page 4 of the instructions)	16	82,985

Part III MACRS Depreciation (Do not include listed property) (See page 4 of the instructions)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2002	17	
18	If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed In Service During 2002 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

Section C - Assets Placed In Service During 2002 Tax Year Using the Alternative Depreciation System

20a Class life				S/L	
b 12-year			12 yrs	S/L	
c 40-year			40 yrs	MM	S/L

Part IV Summary (see page 6 of the instructions)

21	Listed property Enter amount from line 28	21	96
22	Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr	22	83,081
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)

Note For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

Section A - Depreciation and Other Information (Caution: See page 8 of the instructions for limits for passenger automobiles)

24a Do you have evidence to support the business/investment use claimed?		Yes	No	24b If "Yes," is the evidence written?		Yes	No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see page 7 of the instructions)							25	
26 Property used more than 50% in a qualified business use (see page 7 of the instructions)							SEE LISTED PROPERTY DETAIL	
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use (see page 7 of the instructions)								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1							28	96
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1								29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
30 Total business/investment miles driven during the year (do not include commuting miles - see page 2 of the instructions)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year Add lines 30 through 32						
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see page 8 of the instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See page 8 of the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See page 9 of the instructions) Note If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2002 tax year (see page 9 of the instructions)					
43 Amortization of costs that began before your 2002 tax year					43
44 Total Add amounts in column (f) See page 9 of the instructions for where to report					44

SCHEDULE D
(Form 1041)

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1041 (or Form 5227) See the separate instructions for
Form 1041 (or Form 5227)

OMB No 1545-0092

2002

Name of estate or trust

Employer identification number

DIRECT RELIEF INTERNATIONAL

95-1831116

Note. Form 5227 filers need to complete *only* Parts I and II

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo. day yr.)	(c) Date sold (mo. day yr.)	(d) Sales price	(e) Cost or other basis (see page 31)	(f) Gain or (Loss) (col. (d) less col. (e))
1 SEE STATEMENT 1			420,295	459,249.	-38,954
2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824				2	
3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts				3	
4 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2001 Capital Loss Carryover Worksheet				4	()
5 Net short-term gain or (loss) Combine lines 1 through 4 in column (f) Enter here and on line 14 below				5	-38,954.

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

(a) Description of property (Example 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo. day yr.)	(c) Date sold (mo. day yr.)	(d) Sales price	(e) Cost or other basis (see page 31)	(f) Gain or (Loss) (col. (d) less col. (e))	(g) 28% Rate Gain or (Loss) *(see instr. below)
6 SEE STATEMENT 2			1,639,656.	1,642,611.	-2,955.	NONE
7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824				7		
8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts				8		
9 Capital gain distributions				9		
10 Gain from Form 4797, Part I				10		
11 Long-term capital loss carryover Enter in both columns (f) and (g) the amount, if any, from line 14, of the 2001 Capital Loss Carryover Worksheet				11	()	()
12 Combine lines 6 through 11 in column (g)				12		
13 Net long-term gain or (loss) Combine lines 6 through 11 in column (f) Enter here and on line 15 below				13	-2,955.	

*28% rate gain or loss includes all "collectibles gains and losses" (as defined on page 31 of the instructions) and up to 50% of the eligible gain on qualified small business stock (see page 30 of the instructions)

Part III Summary of Parts I and II

	(1) Beneficiaries' (see page 32)	(2) Estate's or trust's	(3) Total
14 Net short-term gain or (loss) (from line 5 above)	14		-38,954.
15 Net long-term gain or (loss)			
a Total for year (from line 13 above)	15a		-2,955
b 28% rate gain or (loss) (from line 12 above)	15b		
c Qualified 5 - year gain	15c		
d Unrecaptured section 1250 gain (see line 17 of the worksheet on page 33)	15d		
16 Total net gain or (loss) Combine lines 14 and 15a	16		-41,909

Note If line 16, column (3), is a net gain, enter the gain on Form 1041, line 4. If lines 15a and 16, column (2), are net gains, go to Part V, and do not complete Part IV. If line 16, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2002

Part IV Capital Loss Limitation**17** Enter here and enter as a (loss) on Form 1041, line 4, the smaller of**a** The loss on line 16, column (3) or**b** \$3,000**17** (3,000)If the loss on line 16 column (3) is more than \$3,000, or if Form 1041, page 1, line 22, is a loss, complete the **Capital Loss Carryover Worksheet** on page 34 of the instructions to determine your capital loss carryover**Part V Tax Computation Using Maximum Capital Gains Rates** (Complete this part only if both lines 15a and 16 in column (2) are gains, and Form 1041, line 22 is more than zero)**Note** If line 15b, column (2) or line 15d, column (2) is more than zero, complete the worksheet on page 35 of the instructions to figure the amount to enter on lines 20 and 38 below and skip all other lines below. Otherwise, go to line 18

18	Enter taxable income from Form 1041, line 22	18		
19	Enter the smaller of line 15a or 16 in column (2)	19		
20	If the estate or trust is filing Form 4952, enter the amount from line 4e, otherwise, enter -0-	20		
21	Subtract line 20 from line 19. If zero or less, enter -0-	21		
22	Subtract line 21 from line 18. If zero or less, enter -0-	22		
23	Figure the tax on the amount on line 22. Use the 2002 Tax Rate Schedule on page 21 of the instructions	23		
24	Enter the smaller of the amount on line 18 or \$1,850	24		
If line 24 is greater than line 22, go to line 25. Otherwise, skip lines 25 through 31 and go to line 32				
25	Enter the amount from line 22	25		
26	Subtract line 25 from line 24. If zero or less, enter -0- and go to line 32	26		
27	Enter the estate's or trust's allocable portion of qualified 5-year gain, if any, from line 15c, column (2)	27		
28	Enter the smaller of line 26 or line 27	28		
29	Multiply line 28 by 8% (08)	29		
30	Subtract line 28 from line 26	30		
31	Multiply line 30 by 10% (10)	31		
If the amounts on lines 21 and 26 are the same, skip lines 32 through 35 and go to line 36.				
32	Enter the smaller of line 18 or line 21	32		
33	Enter the amount, if any, from line 26	33		
34	Subtract line 33 from line 32	34		
35	Multiply line 34 by 20% (20)	35		
36	Add lines 23, 29, 31, and 35	36		
37	Figure the tax on the amount on line 18. Use the 2002 Tax Rate Schedule on page 21 of the instructions	37		
38	Tax on all taxable income (including capital gains). Enter the smaller of line 36 or line 37 here and on line 1a of Schedule G, Form 1041	38		

Schedule D (Form 1041) 2002

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

DESCRIPTION	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
SEATTLE DINNER	221,300.	40,704.	180,596.
S.B. COUNTY VINTNERS FDTN	172,625.	3,085.	169,540.
ART WALK	30,503.	6,207.	24,296.
CLINIC VISIT	10,440.	6,620.	3,820.
FABULOUS FIVE TRIBUTE-03 EVENT		416.	-416.
TOTALS	434,868.	57,032.	377,836.

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES
=====DESCRIPTION
-----AMOUNT
-----CHANGE IN VALUE OF SPLIT INTEREST
AGREEMENTS85,741.

TOTAL

85,741.
=====

FORM 990, PART I - OTHER DECREASES IN FUND BALANCES
=====DESCRIPTION
-----AMOUNT
-----DECREASE IN UNREALIZED APPRECIATION OF
INVESTMENTS

94,424.

TOTAL

94,424.
=====

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
ADVERTISING	5,856.	219.	325.	5,312.
BANK CHARGES & BROKERAGE FEES	16,777.	144.	16,633.	
BUILDING EXPENSES	648.	623.	14.	11.
CONTRACT SERVICES	106,293.	23,598.	71,218.	11,477.
DEVELOPMENT EDUCATION	9,861.	533.		9,328.
DUES & SUBSCRIPTIONS	6,845.	4,380.	2,185.	280.
FREIGHT & PROCESSING CHARGES	233,887.	233,720.	16.	151.
INSURANCE	23,594.	22,694.	495.	405.
MISCELLANEOUS	3,029.	3,007.	22.	
PUBLIC RELATIONS	7,888.			7,888.
PUBLICATIONS	1,343.	699.	553.	91.
REPAIRS & MAINTENANCE	18,669.	7,749.	8,417.	2,503.
TAXES, LICENSES & FEES	13,101.	978.	12,003.	120.
UTILITIES & TELEPHONE	32,255.	26,434.	5,008.	813.
WAREHOUSE OPERATIONS	3,085.	3,085.		
TOTALS	483,131.	327,863.	116,889.	38,379.

FORM 990, PART IV - INVESTMENTS - SECURITIES
=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
MARKETABLE SECURITIES	1,531,508.	2,991,948.
	-----	-----
TOTALS	1,531,508.	2,991,948.
	=====	=====

FORM 990, PART IV - INVESTMENTS - OTHER
=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
INVESTMENT IN REAL ESTATE	530,000.	530,000.
OTHER INVESTMENTS	203,293.	NONE
	-----	-----
TOTALS	733,293.	530,000.
	=====	=====

FORM 990, PART IV - OTHER ASSETS

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
CONTRIBUTIONS RECEIVABLE	777,016.	246,800.
OTHER ASSETS	57,092.	20,891.
	-----	-----
TOTALS	834,108.	267,691.
	=====	=====

FORM 990, PART IV - MORTGAGES AND OTHER NOTES PAYABLE

LENDER: SANTA BARBARA BANK & TRUST
 ORIGINAL AMOUNT: 1,800,000.
 INTEREST RATE: 0.055000
 DATE OF NOTE: 10/01/1997
 MATURITY DATE: 10/01/2007
 REPAYMENT TERMS: MONTHLY
 SECURITY PROVIDED: LAND & BUILDING
 PURPOSE OF LOAN: PURCHASE LAND & BUILDING

BEGINNING BALANCE DUE 1,204,595.
 ENDING BALANCE DUE 1,185,090.

LENDER: HUTTON FOUNDATION
 ORIGINAL AMOUNT: 500,000.
 INTEREST RATE: 0.060000
 DATE OF NOTE: 11/01/2000
 MATURITY DATE: 11/01/2007
 REPAYMENT TERMS: MONTHLY
 SECURITY PROVIDED: LAND & BUILDING
 PURPOSE OF LOAN: REFINANCE PART OF ORIGINAL LAND & BUILDING LOAN

BEGINNING BALANCE DUE 489,563.
 ENDING BALANCE DUE 480,019.

LENDER: SBB&T - LINE OF CREDIT
 INTEREST RATE: 0.047500
 DATE OF NOTE: 01/01/2001
 MATURITY DATE: 05/01/2003
 REPAYMENT TERMS: MONTHLY
 SECURITY PROVIDED: UNSECURED
 PURPOSE OF LOAN: WORKING CAPITAL LOAN

BEGINNING BALANCE DUE 13.
 ENDING BALANCE DUE NONE

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE 1,694,171.
 =====

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE 1,665,109.
 =====

FORM 990, PART IV - OTHER LIABILITIES
=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
OTHER CURRENT LIABILITIES	110,182.	124,738.
DIST PAYABLE - SPLIT INTEREST AGREEMENTS	NONE	37,146.
	-----	-----
TOTALS	110,182.	161,884.
	=====	=====

FORM 990, PART IV-A - OTHER REVENUE ON BOOKS BUT NOT ON RETURN
=====

DESCRIPTION -----	AMOUNT -----
FUNDRAISING EXPENSES	57,032.
RENTAL EXPENSES	23,553.
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS	85,741.

TOTAL	166,326.
	=====

FORM 990, PART IV-B - OTHER EXPENSES ON BOOKS BUT NOT ON RETURN
=====DESCRIPTION
-----AMOUNT

FUNDRAISING EXPENSES

57,032.

RENTAL EXPENSES

23,553.

TOTAL

80,585.
=====

SCHEDULE A, PART III - EXPLANATION FOR LINE 2C

=====

THE ORGANIZATION CURRENTLY MAINTAINS A PARTIAL EQUITY INTEREST IN THE
PRESIDENT'S HOME.

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

=====

SEE ATTACHED LIST OF BOARD OFFICERS AND MEMBERS

SCHEDULE A, PART III - EXPLANATION FOR LINE 4
=====

THE COMPANY AWARDS GRANTS TO OTHER ORGANIZATIONS ON A DISCRETIONARY BASIS. THE MOST SIGNIFICANT CRITERIA USED TO DETERMINE AN AWARD IS WHETHER THE AWARD WILL FURTHER THE MISSION OF DIRECT RELIEF INTERNATIONAL AS FOLLOWS:

THE MISSION OF DIRECT RELIEF INTERNATIONAL IS TO PROVIDE APPROPRIATE ASSISTANCE TO HEALTH INSTITUTIONS AND PROJECTS WHICH SERVE THE POOR AND VICTIMS OF NATURAL AND CIVIL DISASTERS WITHOUT REGARD TO POLITICAL AFFILIATIONS, RELIGIOUS BELIEFS, ETHNIC IDENTITY, OR ABILITY TO PAY.

SCHEDULE A, PART IV-A - OTHER INCOME

DESCRIPTION	2001	2000	1999	1998	TOTAL
MISC. OPERATING INCOME	81,768.	52,616.	41,263.	33,040.	208,687.
TOTALS	81,768.	52,616.	41,263.	33,040.	208,687.

Direct Relief International								
2002								
Form 990, Part V - List of Board Officers and members								
		Title and Time			Contributions to		Expense Acct	
		devoted to position			Employee		& Other	
Name and Address		(per week)		Compensation	Benefit Plans		Allowances	
Thomas E Tighe		CEO/President		\$ 146,799	\$ 15,326		\$ 10,800	
27 So La Patera Lane		50+						
Santa Barbara, CA 93117								
Dorothy Adams		Director		\$0 00	\$0 00		\$0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
Carolyn Amory		Director		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
Gilbert Ashor, M.D		Director		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
Robert L. Bletcher, Esq.		Director		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
Jayne Brechwald, MPH		Director		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
William Burness		Treasurer		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
Andrea Capachietti, Ph. D		Director		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
Morgan Clendenen		Director		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
Wilton Doane, M.D.		Director		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
James Erling		Director		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
Catherine Firestone		Secretary		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
Louise Gaylord		Director		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
Richard D. Godfrey		Chair		0 00	0 00		0 00	
27 So La Patera Lane		10						
Santa Barbara, CA 93117								
Patricia Halloran		Director		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
Joseph Hardin, Jr		Director		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
Melville Haskell, M D		Director		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								
James H. Jackson		Director		0 00	0 00		0 00	
27 So La Patera Lane		5						
Santa Barbara, CA 93117								

Direct Relief International					
2002					
Form 990, Part V - List of Board Officers and members					
	Title and Time			Contributions to	Expense Acct
	devoted to position			Employee	& Other
Name and Address	(per week)	Compensation	Benefit Plans	Allowances	
Peter O Johnson, Sr	Director	0 00	0 00	0 00	
27 So La Patera Lane	5				
Santa Barbara, CA 93117					
Richard Johnson	Director	0 00	0 00	0 00	
27 So La Patera Lane	5				
Santa Barbara, CA 93117					
Lawrence Koppelman	Director	0 00	0 00	0 00	
27 So La Patera Lane	5				
Santa Barbara, CA 93117					
Nancy M. Lesner	Director	0 00	0 00	0 00	
27 So La Patera Lane	5				
Santa Barbara, CA 93117					
Don Lewis, M.D.	Director	0 00	0 00	0 00	
27 So La Patera Lane	5				
Santa Barbara, CA 93117					
William Morton-Smith, M D	Director	0 00	0 00	0 00	
27 So La Patera Lane	5				
Santa Barbara, CA 93117					
Paul Riemenschneider, M.D.	Director	0 00	0 00	0 00	
27 So La Patera Lane	5				
Santa Barbara, CA 93117					
Denis Saran	Vice Chair	0 00	0 00	0 00	
27 So La Patera Lane	10				
Santa Barbara, CA 93117					
Nancy Schlosser	Director	0 00	0 00	0 00	
27 So La Patera Lane	5				
Santa Barbara, CA 93117					
Krishan Singh	Director	0 00	0 00	0 00	
27 So La Patera Lane	5				
Santa Barbara, CA 93117					
Donn Tognazzini	Director	0 00	0 00	0 00	
27 So La Patera Lane	5				
Santa Barbara, CA 93117					
TOTALS		146,799	15,326	10,800	

Direct Relief International
Calendar Year 2002
Statement of Program Service Accomplishments
Form 990, Part III

Program Service Accomplishments

Direct Relief's mission is to improve the health of people living in developing countries and those who are victims of natural disasters, war, and civil unrest. We work to strengthen indigenous health efforts of our international partners by providing essential material resources – medicines, supplies and equipment.

People served is calculated based on the courses of treatment provided in an assistance shipment to a partner organization. A course of treatment is the recommended regimen by a manufacturer, for medicines treating a chronic condition or for an ongoing therapy (such as birth control). A one year supply is considered one course of treatment.

Grants and Allocations - By region

	Weight (lbs)	Value (\$)	People Served
Africa	116,691	\$ 6,359,293	1,232,463
Americas & the Caribbean	386,895	\$ 46,067,567	5,831,596
Asia	382,361	\$ 12,522,680	2,054,345
Other	40,871	\$ 2,934,145	658,585
	<u>926,818</u>	<u>\$ 67,883,685</u>	<u>9,776,989</u>

Total Grants and Allocations

Other Program Expenses

\$ 1,701,884

Total Program Service Expense

\$ 69,585,569

Shipment Number	Receiving Partner Organization	Country	Region	Weight (lbs)	Value (\$)	People Served
3137	Jabe Hospital and Rohero Clinic	Burundi	Africa	4,814	\$ 204,707	107,102
3001	Boma Ophthalmic Hospital	Congo, D R	Africa	11,808	\$ 228,699	54,413
3023	Diocese of Mweke	Congo, D R	Africa	5,620	\$ 587,217	56,463
3093	The People of Goma	Congo, D R	Africa	2,390	\$ 128,849	57,821
3290	Boma Ophthalmic Hospital	Congo, D R	Africa	3,000	\$ 57,500	0
3021	EOC-CFAO Migbabe Senay Clinic	Ethiopia	Africa	1,197	\$ 165,664	11,278
2843	Tema General Hospital	Ghana	Africa	1,752	\$ 13,518	20,396
3063	Aluba Community Health Clinic	Ghana	Africa	791	\$ 34,544	27,217
3096	Kofondua Midwife Training Center	Ghana	Africa	16	\$ 8,183	182
3128	Dr. J C Sam's Children's Clinic	Ghana	Africa	86	\$ 8,015	1,169
3132	Jehovah Rapha Healthcare Foundation	Ghana	Africa	8,057	\$ 346,143	93,632
3167	Korle-Bu Teaching Hospital	Ghana	Africa	130	\$ 25,548	2,847
3227	Dr. J C Sam's Children's Clinic	Ghana	Africa	105	\$ 19,788	1,658
3232	Maranatha Maternity & Clinic	Ghana	Africa	1,570	\$ 110,907	24,331
3253	Abura Clinic	Ghana	Africa	2,209	\$ 84,250	19,488
2954	Holy Family Dispensary - Of'lessoe	Kenya	Africa	474	\$ 32,168	6,994

Shipment Number	Receiving Partner Organization	Country	Region	Weight (lbs)	Value (\$)	People Served
3007	Nyumbani Orphanage	Kenya	Africa	1,125 \$	38,892	10,848
3018	Alice Nursing Home	Kenya	Africa	1,284 \$	220,021	28,138
3181	Waso Medical Services	Kenya	Africa	2,246 \$	393,254	34,088
3207	AMREF	Kenya	Africa	5,716 \$	312,312	102,293
3275	Immaculate Heart of Mary Hospital	Kenya	Africa	974 \$	87,777	21,839
3312	Waso Medical Services	Kenya	Africa	124 \$	2,621	2,454
3226	Phebe Hospital	Liberia	Africa	53 \$	24,163	1,753
3339	Christian Aid Ministries	Liberia	Africa	1,756 \$	822,461	12,853
3256	Queen Elizabeth Central Hospital	Malawi	Africa	1,240 \$	27,033	11,325
3257	Monifort Hospital	Malawi	Africa	4,851 \$	286,833	57,239
3258	Trinity Hospital	Malawi	Africa	3,272 \$	140,383	49,052
3087	Our Lord's Hospital	Nigeria	Africa	678 \$	47,732	3,006
3298	Our Lord's Hospital	Nigeria	Africa	76 \$	45,541	510
3163	Ndegbormel Development Organization	Sierra Leone	Africa	14,722 \$	508,706	88,894
3194	Norway-Sierra Leone Health Project (NSLHP)	Sierra Leone	Africa	10,362 \$	325,628	110,157
3352	Kalafong Hospital	South Africa	Africa	16 \$	8,863	483
3273	Sudan Future Care Health Clinics	Sudan	Africa	368 \$	31,000	4,278
3071	Kagera Salient Dispensary	Tanzania	Africa	1,268 \$	96,184	7,830
3142	Jambo Health Clinic	Tanzania	Africa	85 \$	11,809	570
3204	Health Department - KADERES	Tanzania	Africa	2,329 \$	192,322	44,022
2956	Rugendebara Foundation for Health	Uganda	Africa	687 \$	244,709	15,689
3121	Aids Orphans Education Trust (AOET)	Uganda	Africa	44 \$	6,120	484
3135	Mulago Hospital	Uganda	Africa	6 \$	1,395	1,240
3265	HOSO UNHCR/Kawambwa Hospital	Zambia	Africa	4,884 \$	214,728	81,208
3144	J.F. Kapnek Charitable Trust-PMTCT Program	Zimbabwe	Africa	14,518 \$	212,499	48,230
Subtotal - Africa				116,691 \$	6,359,293	1,232,463

3113	George Town Clinic	Bahamas	Americas & the Caribbean	100 \$	3,600	0
3289	George Town Clinic	Bahamas	Americas & the Caribbean	154 \$	3,645	5,052
3276	Mercy Care Center	Belize	Americas & the Caribbean	939 \$	205,377	53,691
3123	Proyecto de Salud del Rio Beni	Bolivia	Americas & the Caribbean	1,603 \$	215,081	21,714
3197	Proyecto de Salud del Rio Beni	Bolivia	Americas & the Caribbean	1 \$	20	0
3242	Proyecto de Salud del Rio Beni	Bolivia	Americas & the Caribbean	66 \$	28,503	660
3088	Santa Casa de Misericordia Campos Altos	Brazil	Americas & the Caribbean	589 \$	20,470	500
3083	Keckler Medical Missions	Brazil	Americas & the Caribbean	105 \$	3,200	0
3141	Aracaju Hospital	Brazil	Americas & the Caribbean	8,154 \$	20,635	2,084
3173	Operation U.S.A.	Brazil	Americas & the Caribbean	13 \$	2,741	240
3186	Keckler Medical Missions	Brazil	Americas & the Caribbean	200 \$	7,200	0
3188	Aracaju Hospital	Brazil	Americas & the Caribbean	470 \$	79,513	5,128
3224	Keckler Medical Missions	Brazil	Americas & the Caribbean	575 \$	17,800	0
3245	Asociación Obras Social Irma Dulce	Brazil	Americas & the Caribbean	550 \$	122,929	17,544
3110	Health Care Education Partnership	Dominican Republic	Americas & the Caribbean	231 \$	19,299	2,243
3155	Servicio Social de Iglesias Dominicanas	Dominican Republic	Americas & the Caribbean	12,980 \$	2,359,664	168,126
3156	BRA Dominicana / Batay Relief Alliance	Dominican Republic	Americas & the Caribbean	9,069 \$	367,841	89,819
3306	BRA Dominicana / Batay Relief Alliance	Dominican Republic	Americas & the Caribbean	3,341 \$	136,905	39,391

Shipment Number	Receiving Partner Organization	Country	Region	Weight (lbs)	Value (\$)	People Served
3330	J C Hispaniola Fund, Inc	Dominican Republic	Americas & the Caribbean	1,055 \$	138,278	63,881
3174	Project Perfect World	Ecuador	Americas & the Caribbean	552 \$	43,041	12,833
3185	Centro del Muchacho Trabajador	Ecuador	Americas & the Caribbean	939 \$	53,578	22,165
3210	Medical Aid to the Ecuador Amazon	Ecuador	Americas & the Caribbean	136 \$	23,229	2,005
3214	Pastaza Health Programs	Ecuador	Americas & the Caribbean	129 \$	16,687	3,055
3252	Fundacion de Proteccion	Ecuador	Americas & the Caribbean	71 \$	855	918
3149	O E F de El Salvador	El Salvador	Americas & the Caribbean	8,951 \$	3,205,538	43,199
3159	Clinica Maria Madre de los Pobres	El Salvador	Americas & the Caribbean	47 \$	9,888	1,283
3250	AJWS Projects in El Salvador	El Salvador	Americas & the Caribbean	148 \$	30,872	1,553
3301	Fundacion Salvadorena (FUSAL)	El Salvador	Americas & the Caribbean	1,890 \$	158,584	67,557
3092	St Vincent De Paul Society	Grenada	Americas & the Caribbean	18,229 \$	5,881,330	172,878
3015	Unidas Para Vivir Mejor - UPAVIM	Guatemala	Americas & the Caribbean	1,815 \$	80,592	20,862
3111	Santa Rosa Medical Clinic	Guatemala	Americas & the Caribbean	813 \$	79,590	8,323
3157	Light Ministries	Guatemala	Americas & the Caribbean	538 \$	25,728	3,119
3233	Order of Malta	Guatemala	Americas & the Caribbean	12,641 \$	1,695,876	140,828
3244	Santa Rosa Medical Clinic	Guatemala	Americas & the Caribbean	491 \$	55,450	4,200
3261	Cantas de Guatemala	Guatemala	Americas & the Caribbean	588 \$	52,328	4,898
3294	A Tomorrow for Children Foundation	Guatemala	Americas & the Caribbean	423 \$	1,017,547	2,873
3287	Hospital Santa Elena	Guatemala	Americas & the Caribbean	24 \$	1,199	5
3043	Port Maurant Hospital	Guyana	Americas & the Caribbean	1,291 \$	108,238	18,687
3045	New Amsterdam Hospital	Guyana	Americas & the Caribbean	1,689 \$	170,552	13,447
3048	Bartica Hospital	Guyana	Americas & the Caribbean	1,888 \$	103,814	20,317
3047	Malcolony District Hospital	Guyana	Americas & the Caribbean	1,792 \$	148,819	18,730
3048	Linden Hospital	Guyana	Americas & the Caribbean	2,587 \$	136,705	3,747
3049	Suddie Hospital	Guyana	Americas & the Caribbean	1,987 \$	130,818	27,736
3050	St Joseph's Mercy Hospital	Guyana	Americas & the Caribbean	1,251 \$	43,184	19,718
3051	Davis Memorial Hospital	Guyana	Americas & the Caribbean	1,135 \$	37,214	35,900
3119	Berbice River Healthcare Project	Guyana	Americas & the Caribbean	83 \$	76,812	5,143
3175	Food For the Poor	Guyana	Americas & the Caribbean	238 \$	34,045	978
3267	St Joseph's Mercy Hospital	Guyana	Americas & the Caribbean	879 \$	280,300	118,936
3288	Davis Memorial Hospital	Guyana	Americas & the Caribbean	784 \$	185,836	67,728
3289	Port Maurant Hospital	Guyana	Americas & the Caribbean	1,354 \$	205,859	127,170
3270	New Amsterdam Hospital	Guyana	Americas & the Caribbean	1,704 \$	381,458	126,788
3271	Bartica Hospital	Guyana	Americas & the Caribbean	1,572 \$	253,890	127,746
3272	Linden Hospital	Guyana	Americas & the Caribbean	1,718 \$	98,093	37,838
3311	Berbice River Healthcare Project	Guyana	Americas & the Caribbean	45 \$	62,104	9,489
3091	St Ignatius Medical Mission	Haiti	Americas & the Caribbean	73 \$	2,535	428
3105	Project Haiti	Haiti	Americas & the Caribbean	375 \$	26,178	7,828
3124	Arcachon Hospital	Haiti	Americas & the Caribbean	15,298 \$	3,532,620	157,339
3188	New Hope Ministries	Haiti	Americas & the Caribbean	288 \$	68,287	3,532
3236	New Hope Ministries	Haiti	Americas & the Caribbean	375 \$	68,368	4,248
3295	Arcachon Hospital	Haiti	Americas & the Caribbean	11,737 \$	2,322,772	821,815
2988	Honduran Health Exchange	Honduras	Americas & the Caribbean	8,946 \$	271,926	101,332
3097	Uhsan Clinic	Honduras	Americas & the Caribbean	115 \$	18,394	451
3118	COHAPAZ	Honduras	Americas & the Caribbean	988 \$	149,707	21,318
3125	Brigada de Salud / Honduras Relief Effort	Honduras	Americas & the Caribbean	68 \$	14,113	4,674

Shipment

Shipment Number	Receiving Partner Organization	Country	Region	Weight (lbs)	Value (\$)	People Served
3133	Hacienda Cristo Salva	Honduras	Americas & the Caribbean	61 \$	5 106	184
3205	Hacienda Cristo Salva	Honduras	Americas & the Caribbean	80 \$	6 730	872
3219	ESCUELA AGRICOLA PANAMERICANA / PROYECTO PROMESA	Honduras	Americas & the Caribbean	3 133 \$	127 162	38,328
3289	Honduran Health Exchange	Honduras	Americas & the Caribbean	5,107 \$	378,068	98 438
3323	Comite de Emergencia Garifuna	Honduras	Americas & the Caribbean	1,172 \$	96,072	35,090
3337	Dr Polo Galindo Clinic	Honduras	Americas & the Caribbean	1,208 \$	119,133	32,505
3341	Hacienda Cristo Salva	Honduras	Americas & the Caribbean	39 \$	578	888
3086	Cornwall Regional Hospital	Jamaica	Americas & the Caribbean	718 \$	113,020	4,218
3082	Misionaries of the Poor	Jamaica	Americas & the Caribbean	72 \$	1,739	388
3104	Misionaries of the Poor	Jamaica	Americas & the Caribbean	72 \$	34,207	1,429
3211	Jamaica Humanitarian Dental Mission	Jamaica	Americas & the Caribbean	1,849 \$	43,119	35,561
3241	Jamaica Humanitarian Dental Mission	Jamaica	Americas & the Caribbean	298 \$	9,541	7,900
3249	Food for the Poor, Jamaica	Jamaica	Americas & the Caribbean	10,438 \$	798,580	376,582
3280	Missionaries of the Poor	Jamaica	Americas & the Caribbean	33 \$	11,231	552
3340	Food for the Poor Jamaica	Jamaica	Americas & the Caribbean	7 026 \$	4,668,662	62 501
3358	Missionaries of the Poor	Jamaica	Americas & the Caribbean	143 \$	9,410	249
3057	PVO Mexico A C	Mexico	Americas & the Caribbean	5,950 \$	130,465	87,787
3082	Fundacion Justicia y Amor, I.A.P	Mexico	Americas & the Caribbean	5 520 \$	5,100	0
3081	AeroMedicos of Santa Barbara	Mexico	Americas & the Caribbean	1 844 \$	675,711	143,003
3108	Club Rotario de Tecate	Mexico	Americas & the Caribbean	11 040 \$	10,200	0
3109	Fundacion Rotaria de La Laguna	Mexico	Americas & the Caribbean	11 040 \$	10,200	0
3115	Juarez Eye Center	Mexico	Americas & the Caribbean	1,484 \$	113,881	22,777
3116	Potter's Clay	Mexico	Americas & the Caribbean	912 \$	65 513	6,228
3151	Hendido del Club Rotario	Mexico	Americas & the Caribbean	14 \$	3,346	128
3161	LIGA International	Mexico	Americas & the Caribbean	388 \$	46,628	3 197
3171	Casa Clinica Convivencia Campesina	Mexico	Americas & the Caribbean	560 \$	125,646	3,481
3180	Mexican Medical	Mexico	Americas & the Caribbean	150 \$	15 000	1,500
3208	Fundacion Justicia y Amor, I.A.P	Mexico	Americas & the Caribbean	1,191 \$	98 563	18,303
3291	Secretaria de Salud	Mexico	Americas & the Caribbean	2,371 \$	213 084	68,378
3292	LDS Humanitarian Services	Mexico	Americas & the Caribbean	2,000 \$	12,000	0
3348	LIGA International	Mexico	Americas & the Caribbean	770 \$	609,484	4,180
3058	Companeros de las Americas	Nicaragua	Americas & the Caribbean	541 \$	9,798	208,000
3090	Nicaraguan Children's Fund	Nicaragua	Americas & the Caribbean	929 \$	83,042	12,509
3117	American Nicaraguan Foundation	Nicaragua	Americas & the Caribbean	19 371 \$	3,718,163	184,938
3147	Companeros de las Americas	Nicaragua	Americas & the Caribbean	479 \$	8,250	165 000
3176	American Nicaraguan Foundation	Nicaragua	Americas & the Caribbean	17,576 \$	3 279,639	206,374
3185	Lions Club Distrito D-5	Nicaragua	Americas & the Caribbean	2,572 \$	180,150	95 572
3192	Nicaraguan Children's Fund	Nicaragua	Americas & the Caribbean	1,993 \$	283,728	32 585
3218	Companeros de las Americas	Nicaragua	Americas & the Caribbean	86 \$	1 530	0
3305	American Nicaraguan Foundation	Nicaragua	Americas & the Caribbean	12,780 \$	1,844,824	315,270
3084	Ministerio de Salud	Peru	Americas & the Caribbean	1,763 \$	42,602	14 072
3094	Hospital de Apoyo Departamental Cuzco	Peru	Americas & the Caribbean	9,049 \$	328 317	97,083
3127	Hospital Regional de Ayacucho	Peru	Americas & the Caribbean	10,193 \$	348,923	37 220
3184	Valley Baptist Church Mission Team	Peru	Americas & the Caribbean	50 \$	11,210	1,294
3206	Ciudad de Dios Medical Mission	Peru	Americas & the Caribbean	36 \$	13,208	1,087
3240	Instituto Nacional de Defensa Civil (INDECI)	Peru	Americas & the Caribbean	738 \$	88,107	5,804

Shipment Number	Receiving Partner Organization	Country	Region	Weight (lbs)	Value (\$)	People Served
3300	Hospital Regional de Ayacucho	Peru	Americas & the Caribbean	6 979 \$	464,724	151,824
3309	Dispensario de Salud de Pomata	Peru	Americas & the Caribbean	3,442 \$	102,187	57,733
3276	Cyril Ross Nursery	Trinidad and Tobago	Americas & the Caribbean	23 \$	1,481	2,136
3076	Marian Medical Center	USA	Americas & the Caribbean	278 \$	6,439	1,436
3088	St. Paul's Chapel	USA	Americas & the Caribbean	167 \$	6,350	788
3098	Healthy Start - Santa Maria	USA	Americas & the Caribbean	197 \$	3,256	1,992
3099	Summer & Santa Packs	USA	Americas & the Caribbean	9,514 \$	78,043	84,979
3100	Healthy Smiles Program	USA	Americas & the Caribbean	179 \$	2,781	1,808
3101	Carrillo Family Dental Clinic	USA	Americas & the Caribbean	319 \$	5,297	3,036
3102	St. Francis Parish Nurses	USA	Americas & the Caribbean	128 \$	2,078	1,040
3130	Santa Barbara County Fire Department	USA	Americas & the Caribbean	201 \$	2,200	1,000
3134	Santa Barbara Food Bank	USA	Americas & the Caribbean	27,729 \$	85,306	1,422
3145	Santa Barbara Food Bank	USA	Americas & the Caribbean	3,316 \$	55,846	0
3146	American Indian Health & Services	USA	Americas & the Caribbean	34 \$	735	8
3150	Victory Outreach Lompoc	USA	Americas & the Caribbean	29 \$	259	232
3153	Operation USA	USA	Americas & the Caribbean	266 \$	58,575	874
3184	American Indian Health & Services	USA	Americas & the Caribbean	1,184 \$	24,497	8,957
3185	Santa Barbara Food Bank	USA	Americas & the Caribbean	8,863 \$	8,938	0
3189	Santa Barbara Food Bank	USA	Americas & the Caribbean	20,189 \$	451,878	181,515
3200	Santa Barbara Neighborhood Clinics	USA	Americas & the Caribbean	54 \$	9,394	1,408
3201	Planned Parenthood of SB	USA	Americas & the Caribbean	60 \$	8,508	1,200
3202	Santa Barbara Public Health Department	USA	Americas & the Caribbean	107 \$	17,444	2,058
3203	People Assisting the Homeless (PATH)	USA	Americas & the Caribbean	175 \$	4,724	21
3220	Migrant Education Program	USA	Americas & the Caribbean	793 \$	9,572	2,936
3259	White Mountain Lake Fire Dist	USA	Americas & the Caribbean	34 \$	788	1,124
3262	Salvation Army - Oxnard	USA	Americas & the Caribbean	168 \$	640	504
3303	Maine's Worldwide Missions Outreach, Inc	USA	Americas & the Caribbean	1,387 \$	105,619	38
3317	Women's Community Clinic	USA	Americas & the Caribbean	14 \$	2,421	268
3318	Santa Barbara Hematology Oncology	USA	Americas & the Caribbean	12 \$	20,778	120
3319	Health Linkages Program	USA	Americas & the Caribbean	40 \$	152	120
3320	Santa Barbara Cancer Foundation	USA	Americas & the Caribbean	12 \$	20,779	120
3321	SB Day & Winter Shelter	USA	Americas & the Caribbean	80 \$	305	240
3353	Venice Family Clinic	USA	Americas & the Caribbean	169 \$	3,384	90
	Dreamweaver Medical Foundation	USA	Americas & the Caribbean		832,781	
3212	Turquoise Foundation	Venezuela	Americas & the Caribbean	32 \$	4,059	653
3282	Municipio del Alto Orinoco	Venezuela	Americas & the Caribbean	35 \$	8,588	816
Subtotal - Americas & the Caribbean				386,895 \$	48,067,567	5,831,598
3086	Kart-e-Seh Hospital	Afghanistan	Asia	6,158 \$	1,768,284	37,265
3089	Samaritan's Pulse Hospital	Afghanistan	Asia	52 \$	4,005	4,100
3138	Kart-e-Seh Hospital	Afghanistan	Asia	2,121 \$	213,678	18,982
3154	Kart-e-Seh Hospital	Afghanistan	Asia	5,939 \$	379,936	50,313
3160	Wafia Education Center for Orphans	Afghanistan	Asia	64 \$	3,743	803
3172	Afghan Women's Development Center	Afghanistan	Asia	68 \$	11,311	2,668
3189	Chak-e-Wadai Hospital, ALL Clinics	Afghanistan	Asia		2,843,821	66,216

Shipment Number	Receiving Partner Organization	Country	Region	Weight (lbs)	Value (\$)	People Served
3351	Chak-e-Wadai Hospital, AIL Clinics	Afghanistan	Asia	10,435 \$	55,427	45,186
3213	Health Ministry of Armenia	Armenia	Asia	2,022 \$	68,023	1,278
3327	Angloneurology Clinic & Research Center	Armenia	Asia	1,230 \$	18,478	10,226
3169	Sihanouk Hospital Center	Cambodia	Asia	1,988 \$	569,218	27,300
3221	Sihanouk Hospital Center	Cambodia	Asia	12,700 \$	1,217,015	221,854
3310	Sihanouk Hospital Center	Cambodia	Asia	3,637 \$	838,956	10,060
3286	Tibet Child Health/Nutrition Project	China	Asia	1,527 \$	151,958	14,561
3177	A Call to Serve (ACTS) Georgia	Georgia	Asia	649 \$	4,185	405
3085	Wanless Hospital	India	Asia	16 \$	2,832	189
3103	Diwaliben Mohanlal Mehta Charitable Trust	India	Asia	10,800 \$	10,200	0
3122	Rajkot Voluntary Blood Bank	India	Asia	7,984 \$	227,855	42,400
3129	Rajkot Voluntary Blood Bank	India	Asia	57,040 \$	52,700	0
3131	Diwaliben Mohanlal Mehta Charitable Trust	India	Asia	678 \$	24,311	0
3139	Society For Service To Voluntary Agencies	India	Asia	13,104 \$	212,488	300,568
3140	Hyderabad Eye Institute	India	Asia	354 \$	57,000	0
3158	Hyderabad Eye Institute	India	Asia	581 \$	14,060	0
3179	Venu Charitable Society	India	Asia	176 \$	21,050	0
3180	Venu Charitable Society	India	Asia	1,020 \$	10,138	0
3183	Venu Charitable Society	India	Asia	225 \$	4,439	0
3187	Diwaliben Mohanlal Mehta Charitable Trust	India	Asia	3,684 \$	243,894	130,225
3229	Diwaliben Mohanlal Mehta Charitable Trust	India	Asia	11,040 \$	10,200	0
3235	Diwaliben Mohanlal Mehta Charitable Trust	India	Asia	18,000 \$	3,500	0
3285	Rajkot Voluntary Blood Bank	India	Asia	188 \$	3,600	32,160
3287	Rajkot Voluntary Blood Bank	India	Asia	11,040 \$	10,200	0
3288	Diwaliben Mohanlal Mehta Charitable Trust	India	Asia	149,126 \$	37,497	431,000
3222	Red Crescent Society of Mazandaran Province	Iran	Asia	1,457 \$	28,613	445
3223	Dr. Seyyed Samad Aghamiri, Director	Iran	Asia	755 \$	58,128	5,243
3280	Relief International - Kurdistan	Iraq	Asia	69 \$	20,074	1,284
3338	Saint Raphael Hospital	Iraq	Asia	229 \$	28,705	2,084
3080	Muang Sing Hospital	Laos	Asia	57 \$	5,228	563
3230	Mahosot Hospital	Laos	Asia	18 \$	3,442	4,380
3325	Riverside Hospital & Rescue	Nepal	Asia	81 \$	8,435	2,848
3085	Overseas Korean Welcoming Committee	North Korea	Asia	4,291 \$	543,124	44,713
3191	Overseas Korean Welcoming Committee	North Korea	Asia	5,832 \$	722,822	41,741
3215	Overseas Korean Welcoming Committee	North Korea	Asia	8,865 \$	1,044,974	24,284
3217	Sariwon Orphanage	North Korea	Asia	3,744 \$	36,504	312
2894	Medical Outreach Clinic & Abulug Hospital	Philippines	Asia	92 \$	44,298	1,508
2999	Dr. Jose Locsin Memorial Hospital	Philippines	Asia	8,649 \$	110,117	218,756
3152	Medical Outreach Clinic & Abulug Hospital	Philippines	Asia	272 \$	47,743	4,192
3331	Medical Outreach Clinic & Abulug Hospital	Philippines	Asia	84 \$	2,474	612
3136	St. John of God Clinic	South Korea	Asia	654 \$	4,195	1,456
3247	St. John of God Clinic	South Korea	Asia	289 \$	3,610	1,348
3231	Grace Church Care Center	South Korea	Asia	182 \$	5,125	8,537
3074	Global Health Access Program	Thailand	Asia	700 \$	140,528	15,352
3314	Hill Tribe Clinics	Thailand	Asia	475 \$	41,134	6,387
3143	ANERA	West Bank/Gaza	Asia	5,270 \$	221,345	140,767

Shipment Number	Receiving Partner Organization	Country	Region	Weight (lbs)	Value (\$)	People Served
3170	ANERA	West Bank/Gaza	Asia	1,413 \$	24,976	1,180
3198	Rafidia Hospital	West Bank/Gaza	Asia	15 \$	14,342	1,508
3274	West Bank/Gaza Health Facilities	West Bank/Gaza	Asia	5,474 \$	270,943	59,988
	Subtotal - Asia			382,361 \$	12,522,680	2,054,345
3286	Caritas biskupije Banja Luka u BiHacu	Bosnia-Herzegovina	Other	971 \$	110,787	67,257
3054	Specialized Hosp for Active Treatment-Tran	Bulgaria	Other	2,558 \$	106,397	23,100
3055	MBAL-EODD - Samokov	Bulgaria	Other	2,454 \$	402,811	33,337
3077	Hospital "Christo Botev"-Vratza	Bulgaria	Other	2,185 \$	125,682	13,782
3078	Hospital Asenovgrad	Bulgaria	Other	2,286 \$	82,631	22,236
3079	Multiprofile Hospital - Targovishte	Bulgaria	Other	3,421 \$	146,733	31,090
3237	Dr A. Dabovoku Multi-Profile Hospital-Kardzhali	Bulgaria	Other	3,407 \$	155,111	54,625
3238	MBAL - EOOD Cherven Brag	Bulgaria	Other	1,928 \$	159,580	68,270
3239	MBAL Hosp Dr T. Vitanov - Tryavna	Bulgaria	Other	2,105 \$	100,527	47,884
3243	Agency for International Aid	Bulgaria	Other	1,247 \$	528,752	2,743
3182	Nursing Home Consortium	Estonia	Other	10,833 \$	662,646	137,778
3005	Ebeye Hospital	Marshall Islands	Other	9 \$	150	3,000
3075	Wewak General Hospital Outreach Boat	Papua New Guinea	Other	56 \$	2,559	1,176
3281	Kimba Hospital	Papua New Guinea	Other	77 \$	15,509	902
3120	World Opportunities International	Romania	Other	368 \$	98,442	19,898
3328	Central Clinic Pediatric Hospital	Romania	Other	63 \$	2,087	175
3017	Metropolitan Andrew Sheptytsky Hospital	Ukraine	Other	1,286 \$	32,281	5,018
3108	Lviv Regional Specialized Children's Clinic	Ukraine	Other	619 \$	67,610	1,842
3183	Children's Hospital #7	Ukraine	Other	4,992 \$	135,929	120,884
	Subtotal - Other			40,871 \$	2,934,145	658,585
	Total Program Grants and Allocations			826,818 \$	67,863,685	9,778,989

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Description	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Long-term Gain/Loss
CAPITAL GAINS (LOSSES) FROM SECURITIES					
SALE OF SECURITIES L/T-SEE ATTACHED	VAR	VAR	1,337,903.	1,517,611.	-179,708.
TOTAL CAPITAL GAINS (LOSSES) FROM SECURITIES			1,337,903.	1,517,611.	-179,708.
CAPITAL GAINS (LOSSES) FROM OTHER ASSETS					
SALE OF CONDO-SEE ATTACHED LIST	12/01/1995	12/17/2002	301,753.	125,000.	176,753.
TOTAL CAPITAL GAINS (LOSSES) FROM OTHER ASSETS			301,753.	125,000.	176,753.
Totals			1,639,656.	1,642,611.	-2,955.

Quantity	Security	Date Sold	Date Acquired	Sales Proceeds	Cost or Other Basis	Gain/ (Loss)
Short Term Capital Gains						
300	Biomet Inc.	11/22/02	5/8/02	8,836	8,901	(65)
150	Calpine Corporation	2/8/02	8/14/01	1,042	2,679	(1,636)
100,000	Chase Manhattan	11/22/02	3/28/02	104,328	101,488	2,837
400	Chocopoint Inc.	11/22/02	10/25/02	15,048	15,348	(300)
200	EMC Corp	2/15/02	3/14/01	2,630	2,848	(218)
150	Expeditors Intl Wash	11/22/02	10/25/02	4,655	4,650	204
350	Federal National Mortgage Assn	11/22/02	3/19/02	22,560	28,241	(5,680)
50,000	Household Fin Co	11/22/02	7/5/02	49,088	49,627	(539)
425	Invitrogen Corp	5/16/02	Various	14,726	24,906	(10,180)
1,500	MBNA Corp	11/22/02	Various	33,659	29,739	3,920
300	Microsoft	11/22/02	5/14/02	17,185	18,635	(1,450)
750	Nokia Corp	8/29/02	9/18/01	9,944	18,558	(8,613)
1,100	Pegasus Solutions Inc.	11/22/02	6/28/02	12,346	15,925	(3,580)
400	Quest Diagnostics	11/22/02	Various	22,606	25,510	(2,903)
300	Safeway Inc.	9/20/02	5/14/02	8,582	12,936	(4,354)
400	Stancycle Inc.	11/22/02	10/25/02	13,576	14,060	(484)
450	Univision Communications A	11/22/02	5/14/02	13,704	18,268	(4,564)
700	Wells Fargo & Company New	11/22/02	Various	33,485	34,570	(1,085)
12	GE	1/2/02	12/27/01	484	481	3
50	Kmart	1/2/02	12/27/01	256	273	(17)
29	Telefonos de Mexico	1/2/02	12/27/01	1,007	1,018	(9)
25	Walt Disney	1/23/02	12/19/01	518	518	(0)
15	Microsoft	1/23/02	1/16/02	1,038	1,018	20
100	Principal	5/1/02	12/31/01	2,738	2,335	403
8	Coca Cola	8/6/02	7/31/02	268	300	(32)
40	Microsoft	12/3/02	11/20/02	2,280	2,307	(27)
373	GE	12/10/02	12/4/02	9,490	9,862	(402)
13	M & T BK Corp	12/10/02	12/4/02	974	1,048	(75)
103	AIG	12/19/02	12/13/02	6,088	6,077	9
90	Merck	12/19/02	12/13/02	5,113	5,181	(68)
18	Pacific Capital Bancorp	12/19/02	12/13/02	447	479	(32)
83	Pharmacia	12/19/02	12/13/02	3,360	3,436	(77)
Subtotal				420,295	458,249	(38,954)
Long Term Capital Gains						
200	Adobe Systems	11/22/02	3/23/01	5,868	8,370	(2,502)
750	Altera Corp	11/22/02	Various	10,289	18,075	(7,786)
200	Amerade Hess	11/22/02	8/14/01	11,208	12,880	(1,672)
300	American International	11/22/02	Various	19,743	23,980	(4,237)
600	Apollo Group	11/22/02	Various	25,833	18,164	7,669
300	Automatic Data Processing	11/22/02	3/23/01	13,180	17,630	(4,450)
600	Avery Dennison	11/22/02	Various	38,482	34,078	4,404
850	Biomet Inc.	11/22/02	9/18/01	25,035	28,425	(3,390)
100,000	Cit Group Inc	7/2/02	11/7/00	100,494	107,200	(6,706)
350	CSG Systems Intl Inc.	6/26/03	9/18/00	6,845	14,318	(7,473)
600	Calpine Corporation	2/6/02	Various	4,189	10,234	(6,045)
900	Cisco Systems	11/22/02	Various	13,318	16,459	(3,141)
600	Cintas Corp	11/22/02	Various	30,532	28,980	1,552
800	Citigroup Inc.	11/22/02	Various	31,057	40,544	(9,487)
100,000	Commercial Credit Co	11/22/02	8/3/01	108,330	104,550	3,780
900	Concord EFS Inc	11/22/02	9/18/01	12,807	29,882	(17,075)
100,000	Donaldson Lufkin & Jenrette	11/22/02	8/3/01	104,671	101,520	3,151
50,000	Duke Energy Corp	11/22/02	5/4/01	48,774	47,455	1,319
400	EMC Corp	2/15/02	Various	5,260	5,536	(276)
900	Eco Lab	11/22/02	5/2/01	44,690	36,385	8,305
500	Emerson Electric	11/22/02	9/18/00	28,154	28,710	(556)
350	Expeditors Intl Wash	11/22/02	3/23/01	11,327	10,128	1,201
750	General Electric Co	11/22/02	Various	19,822	30,220	(10,398)
100,000	GMAC	11/22/02	8/20/01	102,414	102,280	134
1,100	General Motors CL H New	10/2/02	Various	10,571	17,155	(6,584)
700	Johnson & Johnson	11/22/02	Various	41,136	41,530	(394)
100,000	Lehman Brothers Inc.	11/22/02	9/19/00	108,383	104,410	3,973
550	Lincare Holdings Inc.	11/22/02	8/21/01	18,753	15,918	2,836
500	Linear Technology Corp	11/22/02	Various	16,853	19,680	(2,827)
650	Medtronic	11/22/02	9/18/00	31,481	33,447	(1,966)
400	Merck & Company	11/22/02	Various	23,687	23,680	7
200	Mercury Interactive Corp	11/22/02	Various	6,723	6,958	(235)
650	Nokia Corp	8/29/02	Various	8,618	16,105	(7,486)
400	Northern Trust	11/22/02	Various	15,747	24,248	(8,501)
700	Patterson Dental Corp	11/22/02	9/18/00	29,537	28,811	726
750	Pfizer Inc.	11/22/02	9/18/00	24,277	30,048	(5,771)
650	Questar Corporation	11/22/02	8/21/01	16,584	16,443	141
500	Micro Devices Inc.	9/18/02	Various	2,755	9,775	(7,020)
400	SBC Communications	10/25/02	3/23/01	8,862	15,828	(6,966)
500	Safeway Inc.	9/20/02	1/9/01	10,987	21,035	(10,048)
900	Soletron Corp	7/24/02	Various	3,726	10,312	(6,586)
700	State Street Corp	11/22/02	Various	32,540	36,735	(4,195)
1,250	Sun Microsystems Inc.	5/9/02	Various	8,312	15,535	(7,223)
550	Texas Instruments	11/22/02	Various	10,629	15,580	(4,951)
35	Travelers PPTY Casualty - A	Various	Various	536	967	(431)
71	Travelers PPTY Casualty - B	Various	Various	1,150	1,914	(764)
600	Tyco International New	1/29/02	9/18/00	20,084	35,500	(15,416)
400	Univision Communications A	11/22/02	5/2/01	12,181	18,344	(6,163)
300	Venzon Communications	10/25/02	8/14/01	10,738	14,398	(3,660)
500	Xilinx Inc.	11/22/02	Various	11,870	19,685	(7,815)
250	Amdocs	6/26/02	9/18/00	1,765	8,653	(6,888)
1,450	Flextronics Intl LTD	11/22/02	Various	15,848	34,939	(19,091)
	Smith Barney US Govt Sec Fund	Various	Various	12,500	12,263	237
	Condo Sale	12/17/02	12/1/95	301,753	125,000	176,753
Subtotal				1,838,656	1,842,811	(4,155)
Total Gain/Loss				2,058,951	2,101,880	(42,929)

95-1831116

Yes	No	Did you actively participate in the operation of the activity during the tax year?
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40,124.

6,299.

23,553.

16,571.

16,571.

SCHEDULE FOR DEPRECIATION

SCHEDULE FOR DEPRECIATION CLAIMED[illegible]

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE

OTHER INCOME

40,124.

40,124.

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OTHER DEDUCTIONS

DEPRECIATION - RENTAL PORTION OF BLDG-10.13%

3,896.

DEPRECIATION - RENTAL PORTION OF IMPR-80.00%

2,403.

6,299.

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RENT AND ROYALTY SUMMARY

PROPERTY -----	TOTAL INCOME -----	DEPLETION/ DEPRECIATION -----	OTHER EXPENSES -----	ALLOWABLE NET INCOME -----
WAREHOUSE RENTAL	40,124.	-----	23,553.	16,571.
TOTALS	40,124.	-----	23,553.	16,571.

DIRECT RELIEF INTERNATIONAL

Description of Property

GENERAL DEPRECIATION

DEPRECIATION

Asset description	Date placed in service	Unadjusted Cost or basis	Bus %	179 exp reduction in basis	30% & ITC Reduction in basis	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Me-thod	Conv	Life	ACRS class	MA CRS class	Current-year 179 expense	Current-year depreciation
DONATED FURNITURE	10/01/1991	40,000	100 000			40,000	40,000	40,000	SL		10 000				
DONATED FURNITURE	11/01/1991	3,500	100 000			3,500	3,500	3,500	SL		10 000				
DONATED FURNITURE	11/01/1991	3,000	100 000			3,000	3,000	3,000	SL		10 000				
FURNITURE	11/01/1991	500	100 000			500	500	500	SL		10 000				
FURNITURE	10/01/1991	531	100 000			531	531	531	SL		10 000				
FURNITURE	11/01/1991	128	100 000			128	128	128	SL		10 000				
FURNITURE	12/01/1991	321	100 000			321	321	321	SL		10 000				
OFFICE FURNITURE	12/01/1991	1,592	100 000			1,592	1,592	1,592	SL		10 000				200
TELEPHONE	03/01/1992	12,000	100 000			12,000	11,800	12,000	SL		10 000				
SHELVES	10/01/1991	2,726	100 000			2,726	2,726	2,726	SL		10 000				
SHELVING	10/01/1991	3,028	100 000			3,028	3,028	3,028	SL		10 000				
PHARMACY SHELVING	01/01/1992	984	100 000			984	984	984	SL		10 000				8
CHEVY VAN	07/01/1991	18,435	100 000			18,435	18,435	18,435	SL		5 000				138
PLUMBING	12/01/1991	163	100 000			163	81	89	SL		20 000				32
ALARM SYSTEM	12/01/1991	2,765	100 000			2,765	1,392	1,530	SL		20 000				382
LSHLD IMPROV	10/01/1991	645	100 000			645	329	361	SL		20 000				100
CARPETING	10/01/1991	7,644	100 000			7,644	3,916	4,298	SL		20 000				10
TELEPHONE WIRING	11/01/1991	2,000	100 000			2,000	1,017	1,117	SL		20 000				
PLUMBING	10/01/1991	200	100 000			200	103	113	SL		20 000				
Less Retired Assets															
Subtotals															

Listed Property

Less Retired Assets															
Subtotals															
TOTALS															

AMORTIZATION

Asset description	Date placed in service	Cost or basis	Accumulated amortization	Ending Accumulated amortization	Code	Life	Current-year amortization
TOTALS							

*Assets Retired
JSA

2X8024 1 000

DIRECT RELIEF INTERNATIONAL

Description of Property

GENERAL DEPRECIATION

DEPRECIATION

[illegible]

Listed Property

2008-2009		2007-2008		2006-2007		2005-2006		2004-2005		2003-2004		2002-2003		2001-2002		2000-2001		1999-2000		1998-1999		1997-1998		1996-1997		1995-1996		1994-1995		1993-1994		1992-1993		1991-1992		1990-1991		1989-1990		1988-1989		1987-1988		1986-1987		1985-1986		1984-1985		1983-1984		1982-1983		1981-1982		1980-1981		1979-1980		1978-1979		1977-1978		1976-1977		1975-1976		1974-1975		1973-1974		1972-1973		1971-1972		1970-1971		1969-1970		1968-1969		1967-1968		1966-1967		1965-1966		1964-1965		1963-1964		1962-1963		1961-1962		1960-1961		1959-1960		1958-1959		1957-1958		1956-1957		1955-1956		1954-1955		1953-1954		1952-1953		1951-1952		1950-1951		1949-1950		1948-1949		1947-1948		1946-1947		1945-1946		1944-1945		1943-1944		1942-1943		1941-1942		1940-1941		1939-1940		1938-1939		1937-1938		1936-1937		1935-1936		1934-1935		1933-1934		1932-1933		1931-1932		1930-1931		1929-1930		1928-1929		1927-1928		1926-1927		1925-1926		1924-1925		1923-1924		1922-1923		1921-1922		1920-1921		1919-1920		1918-1919		1917-1918		1916-1917		1915-1916		1914-1915		1913-1914		1912-1913		1911-1912		1910-1911		1909-1910		1908-1909		1907-1908		1906-1907		1905-1906		1904-1905		1903-1904		1902-1903		1901-1902		1900-1901		1899-1900		1898-1899		1897-1898		1896-1897		1895-1896		1894-1895		1893-1894		1892-1893		1891-1892		1890-1891		1889-1890		1888-1889		1887-1888		1886-1887		1885-1886		1884-1885		1883-1884		1882-1883		1881-1882		1880-1881		1879-1880		1878-1879		1877-1878		1876-1877		1875-1876		1874-1875		1873-1874		1872-1873		1871-1872		1870-1871		1869-1870		1868-1869		1867-1868		1866-1867		1865-1866		1864-1865		1863-1864		1862-1863		1861-1862		1860-1861		1859-1860		1858-1859		1857-1858		1856-1857		1855-1856		1854-1855		1853-1854		1852-1853		1851-1852		1850-1851		1849-1850		1848-1849		1847-1848		1846-1847		1845-1846		1844-1845		1843-1844		1842-1843		1841-1842		1840-1841		1839-1840		1838-1839		1837-1838		1836-1837		1835-1836		1834-1835		1833-1834		1832-1833		1831-1832		1830-1831		1829-1830		1828-1829		1827-1828		1826-1827		1825-1826		1824-1825		1823-1824		1822-1823		1821-1822		1820-1821		1819-1820		1818-1819		1817-1818		1816-1817		1815-1816		1814-1815		1813-1814		1812-1813		1811-1812		1810-1811		1809-1810		1808-1809		1807-1808		1806-1807		1805-1806		1804-1805		1803-1804		1802-1803		1801-1802		1800-1801		1799-1800		1798-1799		1797-1798		1796-1797		1795-1796		1794-1795		1793-1794		1792-1793		1791-1792		1790-1791		1789-1790		1788-1789		1787-1788		1786-1787		1785-1786		1784-1785		1783-1784		1782-1783		1781-1782		1780-1781		1779-1780		1778-1779		1777-1778		1776-1777		1775-1776		1774-1775		1773-1774		1772-1773		1771-1772		1770-1771		1769-1770		1768-1769		1767-1768		1766-1767		1765-1766		1764-1765		1763-1764		1762-1763		1761-1762		1760-1761		1759-1760		1758-1759		1757-1758		1756-1757		1755-1756		1754-1755		1753-1754		1752-1753		1751-1752		1750-1751		1749-1750		1748-1749		1747-1748		1746-1747		1745-1746		1744-1745		1743-1744		1742-1743		1741-1742		1740-1741		1739-1740		1738-1739		1737-1738		1736-1737		1735-1736		1734-1735		1733-1734		1732-1733		1731-1732		1730-1731		1729-1730		1728-1729		1727-1728		1726-1727		1725-1726		1724-1725		1723-1724		1722-1723		1721-1722		1720-1721		1719-1720		1718-1719		1717-1718		1716-1717		1715-1716		1714-1715		1713-1714		1712-1713		1711-1712		1710-1711		1709-1710		1708-1709		1707-1708		1706-1707		1705-1706		1704-1705		1703-1704		1702-1703		1701-1702		1700-1701		1699-1700		1698-1699		1697-1698		1696-1697		1695-1696		1694-1695		1693-1694		1692-1693		1691-1692		1690-1691		1689-1690		1688-1689		1687-1688		1686-1687		1685-1686		1684-1685		1683-1684		1682-1683		1681-1682		1680-1681		1679-1680		1678-1679		1677-1678		1676-1677		1675-1676		1674-1675		1673-1674		1672-1673		1671-1672		1670-1671		1669-1670		1668-1669		1667-1668		1666-1667		1665-1666		1664-1665		1663-1664		1662-1663		1661-1662		1660-1661		1659-1660		1658-1659		1657-1658		1656-1657		1655-1656		1654-1655		1653-1654		1652-1653		1651-1652		1650-1651		1649-1650		1648-1649		1647-1648		1646-1647		1645-1646		1644-1645		1643-1644		1642-1643		1641-1642		1640-1641		1639-1640		1638-1639		1637-1638		1636-1637		1635-1636		1634-1635		1633-1634		1632-1633		1631-1632		1630-1631		1629-1630		1628-1629		1627-1628		1626-1627		1625-1626		1624-1625		1623-1624		1622-1623		1621-1622		1620-1621		1619-1620		1618-1619		1617-1618		1616-1617		1615-1616		1614-1615		1613-1614		1612-1613		1611-1612		1610-1611		1609-1610		1608-1609		1607-1608		1606-1607		1605-1606		1604-1605		1603-1604		1602-1603		1601-1602		1600-1601		1599-1600		1598-1599		1597-1598		1596-1597		1595-1596		1594-1595		1593-1594		1592-1593		1591-1592		1590-1591		1589-1590		1588-1589		1587-1588		1586-1587		1585-1586		1584-1585		1583-1584		1582-1583		1581-1582		1580-1581		1579-1580		1578-1579		1577-1578		1576-1577		1575-1576		1574-1575		1573-1574		1572-1573		1571-1572		1570-1571		1569-1570		1568-1569		1567-1568		1566-1567		1565-1566		1564-1565		1563-1564		1562-1563		1561-1562		1560-1561		1559-1560		1558-1559		1557-1558		1556-1557		1555-1556		1554-1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AMORTIZATION

[illegible]

***Assets Retired**
JSA

DIRECT RELIEF INTERNATIONAL

Description of Property

GENERAL DEPRECIATION

DEPRECIATION

[illegible]

Listed Property

[illegible]

AMORTIZATION

[illegible]

*Assets Retired
JSA
2X0024 1 000

DIRECT RELIEF INTERNATIONAL

Description of Property

GENERAL DEPRECIATION

DEPRECIATION

[illegible]

Listed Property

[illegible]

AMORTIZATION

Asset description	Date placed in service	Cost or basis
TOTALS:		

Assets Retired
USA
2X9024 1 000

Description of Property

GENERAL DEPRECIATION

[illegible][illegible]

Asset description	Date placed in service	Cost or basis						
			Accumulated amortization	Ending accumulated amortization	Code	Life	Current-year amortization	
TOTALS								

*Assets Relined
JSA
2X9024 1 000

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury
Internal Revenue Service

► File a separate application for each return

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ☒
- If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Note Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Note Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print	Name of Exempt Organization	Employer identification number
	DIRECT RELIEF INTERNATIONAL	95-1831116
	Number, street, and room or suite no. If a P.O. box, see instructions	
	27 SOUTH LA PATERA LANE	
City, town or post office, state, and ZIP code. For a foreign address see instructions		
SANTA BARBARA, CA 93117-3251		

Check type of return to be filed (file a separate application for each return)

☒ Form 990	☐ Form 990-T (corporation)	☐ Form 4720
☐ Form 990-BL	☐ Form 990-T(sec 401(a) or 408(a) trust)	☐ Form 5227
☐ Form 990-EZ	☐ Form 990-T (trust other than above)	☐ Form 6069
☐ Form 990-PF	☐ Form 1041-A	☐ Form 8870

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

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until 08/15, 2003, to file the exempt organization return for the organization named above. The extension is for the organization's return for ☒ calendar year 2002 or ☐ tax year beginning _____, and ending _____

2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

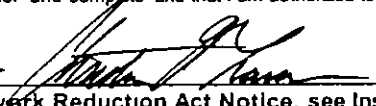
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ _____

c **Balance Due** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ _____

Signature and Verification

Under penalties of perjury I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete and that I am authorized to prepare this form.

Signature ►  Title ► CPA P00071142 Date ► 05/08/2003

For Paperwork Reduction Act Notice, see Instruction

Form 8868 (12-2000)

- If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box ☒ **X**
- Note Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)

Part II Additional (not automatic) 3-Month Extension of Time - Must File Original and One Copy.

Type or print

File by the extended due date for filing the return. See instructions.

Name of Exempt Organization

DIRECT RELIEF INTERNATIONAL

Employer identification number

95-1831116

Number, street, and room or suite no. If a P.O. box, see instructions

27 SOUTH LA PATERA LANE

For IRS use only

City, town or post office, state, and ZIP code. For a foreign address, see instructions

SANTA BARBARA, CA 93117-3251

Check type of return to be filed (File a separate application for each return)

☒ Form 990 ☐ Form 990-EZ ☐ Form 990-T (sec. 401(a) or 408(a) trust) ☐ Form 1041-A ☐ Form 5227 ☐ Form 8870
☐ Form 990-BL ☐ Form 990-PF ☐ Form 990-T (trust other than above) ☐ Form 4720 ☐ Form 6069

STOP Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868

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

4 I request an additional 3-month extension of time until 11/17/20035 For calendar year 2002, or other tax year beginning _____ and ending _____6 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period7 State in detail why you need the extension TAXPAYER IS STILL IN THE PROCESS OF GATHERINGADDITIONAL INFORMATION TAXPAYER REQUESTS ADDITIONAL TIME TO FILE IN ORDER TO FILE A COMPLETE AND ACCURATE RETURN

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ _____

c **Balance Due** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ _____**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶

Title ▶ CPA P00071142

Date ▶ 08/10/2003

Notice to Applicant - To Be Completed by the IRS

- ☐ We have approved this application. Please attach this form to the organization's return.
- ☐ We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- ☐ We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- ☐ We cannot consider this application because it was filed after the due date of the return for which an extension was requested.
- ☐ Other _____

By _____

Director

Date

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above

Type or print

Name

LARSON & RIDGE LLP

Number and street (include suite, room, or apt. no.) Or a P.O. box number

P O BOX 92021

City or town, province or state, and country (including postal or ZIP code)

SANTA BARBARA, CA 93190-2021