### **PUBLIC DISCLOSURE COPY**

Form **990** 

## **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2021

Open to Public

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

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

_		nue Service		ov/Form990 for instru		_		inspection			
<u>A</u>			dar year, or tax year beginning		, 2021, and end	ing 06	7	<b>, 20</b> 22			
В	Check if	applicable:	C Name of organization LIONS CI	LUBS INTERNATIONA	L FOUNDATION		D Employ	er identification number			
	Address	change	Doing business as LCIF					23-7030455			
	Name cl	hange	Number and street (or P.O. box if	mail is not delivered to st	reet address)	Room/suite	<b>E</b> Telepho	one number			
	Initial ref	turn	300 WEST 22ND STREET					(630) 468-6901			
	Final retu	urn/terminated	City or town, state or province, co	ountry, and ZIP or foreign	postal code						
	Amende	ed return	OAK BROOK, IL 60523-8842				<b>G</b> Gross r	receipts \$ 147,940,909			
	Applicat	ion pending	F Name and address of principal offi	icer: REBECCA DAOL	J	H(a) Is this a	roup return for	subordinates? Yes Vo No			
			SAME AS C ABOVE			H(b) Are all	subordinates included?  Yes No				
ı	Tax-exe	mpt status:	<b>✓</b> 501(c)(3)	) ◀ (insert no.)	4947(a)(1) or 527	If "No,"	attach a list	. See instructions.			
J	Website	e: ► WWW.L	JONSCLUBS.ORG		<del></del>	H(c) Group	exemption n	umber ►			
<u>к</u>	•	organization:		tion Other▶	L Year of for			of legal domicile:			
_	art I	Summa			= 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1				
	1		cribe the organization's miss	ion or most significa	nt activities: TO S	LIPPORT THE E	FEORTS (	DELIONS CLUBS			
Ф	'	-	DE IN SERVING THEIR LOCAL	_							
n c			RIAN SERVICE PROJECTS.	COMMONTILS AND	THE WORLD COIVIN	ONTT AS THE	OAKKI	JOT ESSENTIAL			
Ë				discontinued its on	votiono or dionoco	d of more than	0E0/ of i				
ove	2		box ► ☐ if the organization	·			1 1				
Ğ	3		voting members of the gove	• • •	•		3	22			
တ	4		independent voting member			·	4	22			
Activities & Governance	5		per of individuals employed in	=			5	85			
ŧ	6		per of volunteers (estimate if i				6	22,410			
ĕ	7a		ated business revenue from I				7a	61,975			
	b	Net unrelat	ted business taxable income	from Form 990-T, P	art I, line 11		7b	45,570			
						Prior Ye	ar	Current Year			
Φ	8	Contribution	ons and grants (Part VIII, line	1h)		44	688,565	60,836,017			
ž	9	Program s	ervice revenue (Part VIII, line	2g)				0			
Revenue	10	Investment	t income (Part VIII, column (A	), lines 3, 4, and 7d)		15	899,375	14,532,357			
Œ	11	Other reve	nue (Part VIII, column (A), line	es 5, 6d, 8c, 9c, 10c	, and 11e)	(2	291,146)	383,637			
	12		ue-add lines 8 through 11 (m		•		296,794	75,752,011			
	13	•	d similar amounts paid (Part I)	· · · · · · · · · · · · · · · · · · ·			211,332	32,702,949			
	14		aid to or for members (Part IX	• •	•		,	- 7 - 7			
'n	15	-	her compensation, employee I			7	134,372	6,582,635			
Expenses	16a		al fundraising fees (Part IX, c	•		•	0	0,002,000			
Sen	b		aising expenses (Part IX, colu		10,149,810						
Ä	17		enses (Part IX, column (A), line			11	612,863	14,528,295			
	18	-			•						
		-	nses. Add lines 13–17 (must	-			958,567	53,813,879			
	19	neveriue ie	ess expenses. Subtract line 1	o iroittille 12			338,227	21,938,132			
Net Assets or Fund Balances	00	T-4-1	t- (Dt V 15 40)			Beginning of Cu		End of Year			
Sse	20		ts (Part X, line 16)				255,002	351,383,302			
et A	21		, ,				957,809	18,060,640			
			or fund balances. Subtract li	ine 21 from line 20		359	297,193	333,322,662			
17	art II	Signatu	re Block								
			, I declare that I have examined this repeated the control of the					ly knowledge and belief, it is			
Sig	an	Signati	ure of officer			l Dat	e				
He	_			ADMINISTRATOR		Du	-				
. 16	/1 <del>C</del>		ECCA DAOU, LCIF EXECUTIVE r print name and title	AUINIINIOTRATUK							
		1, ,	·	Proparar's signature	T	Data	T	T DTIN			
Pa	id		preparer's name	Preparer's signature	~II∠	Date 1/25/2023	. –	] if PTIN			
	epare	r		NICOLE BEN	JIN.		self-empl	1 00730133			
	e On	Iv Firm's nar					's EIN ►	35-0921680			
		Firm's add	dress ► 225 WEST WACKER DF		· · · · · · · · · · · · · · · · · · ·	24 Pho	ne no.	(312) 899-7000			
Ma	v the IF	RS discuss t	this return with the preparer s	shown above? See i	nstructions			. ✓ Yes No			

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2021)

i Oiiii 33	30 (2021)	rage <b>Z</b>
Part		
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission: TO EMPOWER LIONS CLUBS, VOLUNTEERS, AND PARTNERS TO IMPROVE HEALTH AND WELL-BEING, STRENGTHEN	
	COMMUNITIES, AND SUPPORT THOSE IN NEED THROUGH HUMANITARIAN SERVICES AND GRANTS THAT IMPACT	
	LIVES GLOBALLY, AND ENCOURAGE PEACE AND INTERNATIONAL UNDERSTANDING.	
	EIVEO GEOBALET, AND ENGOGRAGET EAGE AND INTERNATIONAL GROEKGTANDING.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	✓ No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	✓ No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as mea-	sured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	o others,
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$22,098,635 including grants of \$18,910,842 ) (Revenue \$178,664	4_)
	HUMANITARIAN INITIATIVES - AS MEMBERS OF THEIR COMMUNITY, LIONS ARE UNIQUELY POSITIONED TO	
	IDENTIFY LOCAL INITIATIVES AND IMPLEMENT PROJECTS THAT STRENGTHEN THEIR COMMUNITIES, IMPROVE	
	HEALTH AND WELL BEING, AND SUPPORT THOSE IN NEED. GRANTS ARE COMBINED WITH LOCALLY RAISED FUNDS,	
	TO ADDRESS UNMET HUMANITARIAN NEEDS FOR CAPITAL CONSTRUCTION, EQUIPMENT, OR VITAL COMMUNITY	
	RESOURCES. SPECIAL AREAS OF FOCUS FOR LIONS INCLUDE SERVICE IN THE AREAS OF CHILDHOOD CANCER,	
	HUNGER, DIABETES, AND YOUTH. LIONS QUEST GRANTS ARE AWARDED TO EXPAND A SOCIAL AND EMOTIONAL	
	LEARNING PROGRAM, WHICH FOCUSES ON DELIVERING LIFE SKILLS TRAINING IN EDUCATIONAL SETTINGS FOR	
	GRADES PRE-K THROUGH HIGH SCHOOL. MORE THAN 20 MILLION STUDENTS AND 800,000 EDUCATORS IN MORE	
	THAN 110 COUNTRIES HAVE BEEN POSITIVELY IMPACTED THROUGH THIS PROGRAM. IN ADDITION, LCIF	
	DEVELOPS GLOBAL INITIATIVES AND PARTNERSHIPS TO FURTHER THE IMPACT OF LIONS AND LCIF. FOR	
	EXAMPLE, THROUGH THE SPECIAL OLYMPICS MISSION INCLUSION PARTNERSHIP, LIONS HAVE SCREENED THE	
41	(CONTINUED ON SCHEDULE O)	
4b	(Code: ) (Expenses \$ 9,206,222 including grants of \$ 8,132,843 ) (Revenue \$ VISION - LIONS ARE KNOWN THROUGHOUT THE WORLD FOR THEIR WORK TO IMPROVE THE LIVES OF THE	)
	VISUALLY IMPAIRED AND TO PREVENT AVOIDABLE BLINDNESS. THE FOUNDATION PROUDLY SERVES THEIR	
	CONTINUED EFFORTS BY OFFERING IMPACTFUL INITIATIVES, PROGRAMS AND GRANTS. SIGHTFIRST IS THE	
	FOUNDATION'S PROGRAM THAT HAS PLAYED A KEY ROLE IN REDUCING BLINDNESS AND VISUAL IMPAIRMENT	
	AROUND THE WORLD. THE SIGHTFIRST PROGRAM POSITIONS LIONS AS A GLOBAL LEADER IN THE PREVENTION OF	
	BLINDNESS. TO DATE, SIGHTFIRST HAS INVESTED \$377 MILLION IN 1,419 BLINDNESS PREVENTION PROJECTS,	
	IMPACTING MORE THAN 488 MILLION PEOPLE WORLDWIDE IN NEARLY 120 COUNTRIES. THE SIGHTFIRST PROGRAM	
	WORKS TO DEVELOP HIGH-QUALITY, LOCALLY-DRIVEN, SUSTAINABLE PROJECTS THAT DELIVER AFFORDABLE EYE	
	CARE SERVICES, IMPROVE INFRASTRUCTURE, PROMOTE EYE HEALTH EDUCATION AND AWARENESS, AND TRAIN EYE	
	CARE PERSONNEL IN COMMUNITIES OF NEED. SUPPORT HAS INCLUDED ATTENTION TO THE MAJOR CAUSES OF	
	BLINDNESS: CATARACT, TRACHOMA, UNCORRECTED REFRACTIVE ERROR, DIABETIC RETINOPATHY,	
	(CONTINUED ON SCHEDULE O)	
4c	(Code: ) (Expenses \$ 7,025,460 including grants of \$ 5,659,264 ) (Revenue \$	)
	DISASTER RELIEF - SUPPORT DISASTER PRE-PLANNING, IMMEDIATE NEEDS, MID-TERM AND LONG-TERM	
	RECONSTRUCTION IN THE WAKE OF NATURAL DISASTERS SUCH AS HURRICANES, EARTHQUAKES, WILDFIRES, AND	
	FLOODS. GRANTS SUPPORT LIONS-LED RELIEF PROJECTS IN THE COMMUNITIES WHERE THEY LIVE AND SERVE.	
	DISASTER FUNDING ENABLES LIONS TO COLLABORATE WITH LOCAL PARTNERS TO EXPAND THEIR IMPACT.	
	IMMEDIATELY AFTER A DISASTER, LIONS QUICKLY ASSESS THE MOST URGENT NEEDS IN THEIR COMMUNITIES.	
	ON AVERAGE, LCIF ANNUALLY AWARDS 140-160 EMERGENCY GRANTS TO DELIVER IMMEDIATE NEEDS SUCH AS	
	WATER, FOOD, CLOTHING, AND MEDICINE. DEPENDING ON THE SCALE AND SCOPE OF DAMAGES, ADDITIONAL	
	COMMUNITY RECOVERY OR MAJOR CATASTROPHE GRANTS MAY BE AWARDED. TO DATE, NEARLY 5,300 EMERGENCY	
	GRANTS HAVE BEEN AWARDED WORLDWIDE.	
4d		
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses ► 38,330,317	

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## Part IV Checklist of Required Schedules

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

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Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	~	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a			
		24a		~
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
d 25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	24a 25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		v
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		,
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):	21		
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		v
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		~
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	~	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	~	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	~	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line $2$	35b		~
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		~
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	,	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
1a b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	~	

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OIIII 33				rage C		
Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 85					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~			
	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	~			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b	~			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	~			
b	If "Yes," enter the name of the foreign country ▶ IN					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		_		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods					
_	and services provided to the payor?	7a		~		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Ť		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
•	required to file Form 8282?	7c		1		
d	If "Yes," indicate the number of Forms 8282 filed during the year					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~		
g g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8						
_	sponsoring organization have excess business holdings at any time during the year?					
9	Sponsoring organizations maintaining donor advised funds.	8				
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b					
11	Section 501(c)(12) organizations. Enter:					
	Gross income from members or shareholders					
b	Gross income from other sources. (Do not net amounts due or paid to other sources					
-	against amounts due or received from them.)					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?	13a				
-	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	- 54				
b	Enter the amount of reserves the organization is required to maintain by the states in which					
	the organization is licensed to issue qualified health plans					
С	Enter the amount of reserves on hand					
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		Ť		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1-710				
	excess parachute payment(s) during the year?	15		·		
	If "Yes," see the instructions and file Form 4720, Schedule N.	13				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~		
16	If "Yes," complete Form 4720, Schedule O.	10				
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any					
.,	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17				
	If "Yes," complete Form 6069.	17				
	n res, complete romi odos.					

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Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year . . . 22 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 1b 22 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O . . . . . 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? . . . . . . . . . . . . 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . . . . 15a 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► AL, AR, CA, CO, (CONTINUED ON SCHEDULE O) 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Other (explain on Schedule O) Own website Another's website ☐ Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶ REBECCA DAOU, 300 WEST 22ND STREET, OAK BROOK, IL 60523-8842, (630) 468-6901

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## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trus									
		(C)							

(A) Name and title	(B) Average hours per week	(do n box, office	Position (do not check box, unless pofficer and a conficer and a c			e than o is both or/trus	one n an tee)	(D)  Reportable compensation from the	(E)  Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) REBECCA DAOU	40.0									
LCIF EXECUTIVE ADMINISTRATOR	0.0			~				235,007	0	82,865
(2) CHRISTOPHER PLUNKETT	40.0									
DIV. MGR., LCIF DEVELOPMENT	0.0					~		130,642	0	16,478
(3) ERIK BREJLA	40.0									
GLOBAL CSR AND STRATEGIC PARTNERSHIP MANAGER	0.0					~		107,749	0	33,484
(4) CHRISTINE HASTINGS	40.0									
LCIF CONTROLLER AND FINANCIAL ANALYSIS MANAGER	0.0					~		111,522	0	6,683
(5) DR. JUNG-YUL CHOI	20.0									
LCIF CHAIRPERSON	0.0	~		~				0	0	0
(6) DR. SANDRO CASTELLANA	2.0									
SECRETARY	0.0	~		~				0	0	0
(7) DR. TA-LUNG CHIANG	2.0									
TREASURER	0.0	~		~				0	0	0
(8) GUDRUN YNGVADOTTIR	2.0									
VICE CHAIRPERSON	0.0	~		~				0	0	0
(9) ARUNA ABHEY OSWAL	2.0									
TRUSTEE	0.0	~						0	0	0
(10) BRIAN E SHEEHAN	5.0									
INTERNATIONAL FIRST VICE PRESIDENT	0.0	~						0	0	0
(11) CHIKAO SUZUKI	2.0									
TRUSTEE	0.0	~						0	0	0
(12) DOUGLAS X. ALEXANDER	5.0									
LCI INTERNATIONAL PRESIDENT	0.0	~						0	0	0
(13) DR NARESH AGGARWAL	2.0									
TRUSTEE	0.0	~						0	0	0
(14) DR NICOLAS EDUARDO ORELLANA	2.0									
TRUSTEE	0.0	~						0	0	0

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

(A) Name and title	(B) Average hours	box,	unles	Pos neck ss pe	rson	e than o is both or/trust	n an	(D)  Reportable compensation	(E) Reportable compensation		(F) ated am	
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2, 1099-MISC/ 1099-NEC)	fı orgar	pensati om the nization organiza	and
(15) DR WING-KUN TAM	2.0											
TRUSTEE	0.0	~						0	0			0
(16) DR. JITSUHIRO YAMADA	2.0											
TRUSTEE	0.0	~						0	0			0
(17) DR. MANOJ SHAH	2.0											
TRUSTEE	0.0	~						0	0			0
(18) DR. PATTI HILL	5.0							_	_			
INTERNATIONAL SECOND VICE-PRESIDENT	0.0	~						0	0			0
(19) FABRICIO OLIVEIRA	5.0											
INTERNATIONAL THIRD VICE PRESIDENT	0.0	~						0	0			0
(20) GARNET E DAVIS	2.0											•
TRUSTEE	2.0	~						0	0	-		0
(21) IN-KYO OH TRUSTEE	0.0	_						0	0			0
(22) JAMES E ERVIN	2.0							U	U			
TRUSTEE	0.0	~						0	0			0
(23) LEWIS QUINN	2.0							0	0			
TRUSTEE	0.0	~						0	0			0
(24) ROBERT LIBIN	2.0							0	0	1		
TRUSTEE	0.0	~						0	0			0
(25) (SEE STATEMENT)	0.0	_										
<u> </u>												
1b Subtotal							<b></b>	584,920	0		13	9,510
c Total from continuation sheets to Part		n A					<b></b>	0	0			0
d Total (add lines 1b and 1c)							<b></b>	584,920	0		13	9,510
2 Total number of individuals (including but							e) w	ho received more	e than \$100,000	of		
reportable compensation from the organi	zation >							4				
											Yes	No
3 Did the organization list any former of							mpl	loyee, or highes	t compensated	d		
employee on line 1a? If "Yes," complete s										3		<u> </u>
4 For any individual listed on line 1a, is the												
organization and related organizations individual	greater th	an \$1	150,	UUU	)? [	r "Ye	s,"	complete Sched	dule J for suci			
			٠.			•		. <i></i>		. 4	~	
5 Did any person listed on line 1a receive of for services rendered to the organization?												4
	: II 1 ES, C	.опрі	ele	JUI	ieut	ile o i	OI S	sucii persori .		5		
Section B. Independent Contractors  1 Complete this table for your five high	act comp	ancat/	-d	inda	2001	adont		entractors that r	accived more	than ¢	100.00	00 of
compensation from the organization. Rep												
(A) Name and business add								(B) Description of serv		(C) Compen		
INTERNATIONAL ASSOCIATION OF LIONS CLUBS , 300 W.						60523	_	ROFESSIONAL SE			3,88	2,214
RKD GROUP, 2701 NORTH DALLAS PARKWAY, SU							_	ROFESSIONAL SE				5,100
WORLD HEALTH ORGANIZATION, 20 AVENUE APP			1 27,	, SW	/		_	CHNICAL SUPPO				6,058
JPMORGAN, 10 S DEARBORN ST, FLOOR 08, CHIC							-	VESTMENT ADVIS				0,870
UNIVERSITY OF DELAWARE, 116 STUDENT SERVIC	:FS BUII DIN	G. NF	WAF	≺K. I	DF 1	19716	$\Pi \Omega$	) PROGAM EVAL	UATION		10	4 254

Total number of independent contractors (including but not limited to those listed above) who

received more than \$100,000 of compensation from the organization ▶

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## Part VIII Statement of Revenue

		Check if Schedule O contains a response or	note to any	y line in this Pa	rt VIII....		🗆
		·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Š, Š	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1b					
တ် ရူ	С	Fundraising events 1c					
rs,	d	Related organizations 1d					
اعًا قِ	е	Government grants (contributions) 1e					
ns, Sin	f	All other contributions, gifts, grants,					
itio er		and similar amounts not included above 1f	60,836,017				
혈	g	Noncash contributions included in					
ig g		lines 1a–1f 1g  \$	105,454				
<u>a</u>	h	<b>Total.</b> Add lines 1a–1f	▶	60,836,017			
4		Bus	siness Code				
Program Service Revenue	2a						
le P	b						
n S	С						
gram Ser Revenue	d						
, 1	e						
₫	f	All other program service revenue		0	0	0	0
	<u>g</u> 3	Total. Add lines 2a–2f	D	0			
	3	other similar amounts)		7,209,036		44,733	7,164,303
	4	Income from investment of tax-exempt bond pr		7,203,030		77,700	7,104,500
	5	Royalties	<b>D</b>				
	•		) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	C	Rental income or (loss) 6c 0	0				
	d	Net rental income or (loss)	▶				
	7a		(ii) Other				
		sales of assets 79,491,453					
		other than inventory <b>7a</b>					
ē	b	Less: cost or other basis					
Revenue		and sales expenses . <b>7b</b> 72,168,132					
è	С	Gain or (loss) <b>7c</b> 7,323,321	0				
	d	Net gain or (loss)	▶	7,323,321		17,242	7,306,079
Other	8a	Gross income from fundraising					
		events (not including \$ of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
	C	Net income or (loss) from fundraising events	•				
	9a	Gross income from gaming	• • •				
		activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9b					
	С	Net income or (loss) from gaming activities .	▶				
	10a	Gross sales of inventory, less					
		returns and allowances 10a	131,132				
	b	Less: cost of goods sold 10b	20,766				
	С	Net income or (loss) from sales of inventory .		110,366	110,366		
Sno			siness Code	004.070			004.070
Jed ue	11a		900099	204,973	07.405		204,973
llar /en	b		900099	37,135 31,163	37,135		
Miscellaneous Revenue	Q C	LIONS QUEST ONLINE LICENSES, NET OF COSTS  All other revenue	200033	31,163	31,163	0	0
Ξ̈́	d e	<b>Total.</b> Add lines 11a–11d	•	273,271	0	U	0
	12	Total revenue. See instructions		75,752,011	178,664	61,975	14,675,355

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## Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response			must complete colum	
Do no	t include amounts reported on lines 6b, 7b,				(D)
	o, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21 .	E 007 202	E 007 222		
2	Grants and other assistance to domestic	5,807,323	5,807,323		
2	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	26,895,626	26,895,626		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	319,862	174,536	72,663	72,663
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .	010,002	17-1,000	72,000	72,000
7	Other salaries and wages	4,853,166	1,631,498	1,463,370	1,758,298
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	315,329	104,705	91,771	118,853
9	Other employee benefits	707,764	235,013	205,982	266,769
10	Payroll taxes	386,514	128,342	112,488	145,684
11	Fees for services (nonemployees):				
а	Management				
b	Legal	3,467		2,717	750
С	Accounting	53,700		53,700	
d	Lobbying			·	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	690,372		690,372	
g g	Other. (If line 11g amount exceeds 10% of line 25, column	000,012		000,012	
•	(A), amount, list line 11g expenses on Schedule O.) .	6,565,658	2,884,968	1,986,396	1,694,294
12	Advertising and promotion	821,777	164,217	1,000,000	657,560
13	· ·	1,405,140	47,110	232,433	1,125,597
	· · · · · · · · · · · · · · · · · · ·	1,405,140	47,110	232,433	1,125,597
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	1,266,299	99,891	266,519	899,889
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	232,009	59,795	32,691	139,523
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	99,016		99,016	
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
_		0.000.000	70 700	04.050	0.040.057
a	RECOGNITION	3,338,029	72,722	21,350	3,243,957
b	SPONSORSHIP FEES	57,797	57,797		
C	GIFTS AND ENTERTAINMENT	15,755	5 100		15,671
d	SUBSCRIPTION AND MEMBERSHIP FEE	8,220	5,198	191	2,831
е	All other expenses	(28,944)	(38,508)	2,093	7,471
25	Total functional expenses. Add lines 1 through 24e	53,813,879	38,330,317	5,333,752	10,149,810
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				F <b>990</b> (9991)

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## Part X Balance Sheet

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		Check if Schedule O contains a response or note to any line in this Par	(A)		(B)
_			Beginning of year		End of year
	1	Cash—non-interest-bearing	40.074.000	1	0.004.404
	2	Savings and temporary cash investments	13,874,363	2	6,694,461
	3	Pledges and grants receivable, net	6,460,819	3	8,054,789
	4	Accounts receivable, net	77,246	4	53,650
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	•	controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined	0	5	(
	6	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .	0	6	(
2	7	Notes and loans receivable, net		7	
499619	8	Inventories for sale or use		8	
ť	9	Prepaid expenses and deferred charges	1,165,385	9	942,630
1	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 5,317,053			
	b	Less: accumulated depreciation 10b 4,996,612	419,457	10c	320,441
1	11	Investments—publicly traded securities	298,011,496	11	270,529,194
1	12	Investments—other securities. See Part IV, line 11	48,858,305	12	55,879,384
	13	Investments—program-related. See Part IV, line 11	0	13	С
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	7,387,931	15	8,908,753
1	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 33)	376,255,002	16	351,383,302
1	17	Accounts payable and accrued expenses	1,023,878	17	1,367,774
1	18	Grants payable	15,747,619	18	16,206,276
1	19	Deferred revenue	115,885	19	419,251
2	20	Tax-exempt bond liabilities		20	
2	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0	22	C
1 2	23	Secured mortgages and notes payable to unrelated third parties		23	
2	24	Unsecured notes and loans payable to unrelated third parties		24	
2	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D	70,427	25	67,339
2	26	Total liabilities. Add lines 17 through 25	16,957,809	26	18,060,640
200		Organizations that follow FASB ASC 958, check here ▶   and complete lines 27, 28, 32, and 33.			
2 2	27	Net assets without donor restrictions	321,330,314	27	290,258,620
2 2	28	Net assets with donor restrictions	37,966,879	28	43,064,042
Net Assets of Fully Datalices		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.			
5   2	29	Capital stock or trust principal, or current funds		29	
נו ב	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
2   4	31	Retained earnings, endowment, accumulated income, or other funds		31	
ک ا ک		<del>-</del>		-	
ž   3	32	Total net assets or fund balances	359,297,193	32	333,322,662

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Part	XI Reconciliation of Net Assets				-					
	Check if Schedule O contains a response or note to any line in this Part XI					~				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			75,75	2,011				
2	Total expenses (must equal Part IX, column (A), line 25)	2			53,81	3,879				
3	Revenue less expenses. Subtract line 2 from line 1	3			21,93	8,132				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		3	59,29	7,193				
5	Net unrealized gains (losses) on investments	5		(4	18,649	9,168)				
6	Donated services and use of facilities	6								
7	Investment expenses	7								
8	Prior period adjustments	8								
9	Other changes in net assets or fund balances (explain on Schedule O)	9			73	6,505				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line									
	32, column (B))	10		3	33,32	2,662				
Part	Part XII Financial Statements and Reporting									
	Check if Schedule O contains a response or note to any line in this Part XII									
					Yes	No				
1	Accounting method used to prepare the Form 990:  Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.									
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. [	2a		~				
	If "Yes," check a box below to indicate whether the financial statements for the year were co reviewed on a separate basis, consolidated basis, or both:									
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis									
b	Were the organization's financial statements audited by an independent accountant?			2b	~					
	If "Yes," check a box below to indicate whether the financial statements for the year were auc	ited c	n a							
	separate basis, consolidated basis, or both:									
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis									
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over									
	the audit, review, or compilation of its financial statements and selection of an independent account		L	2c	~					
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.									
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	orth in	the							
	Single Audit Act and OMB Circular A-133?			3a		<b>'</b>				
b	<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.									

Part VII

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

(A) Name and Title	(B) Average hours per week	(Check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(25) RONAL ARTHUR LUXTON	2.0	./						0	0	0	
TRUSTEE	0.0	•						U	U	U	
(26) VIJAY KUMAR RAJU	2.0	/						0	0	0	
TRUSTEE	0.0	•						U	U		

# SCHEDULE A (Form 990)

## **Public Charity Status and Public Support**

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

Name of the organization ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

LION	S CLUI	BS INTERNATIONAL FOUNDA	TION				23-70	30455
Par	t I	Reason for Public Cha	rity Status. (All	l organizations mus	t comple	ete this p	oart.) See instructi	ons.
The o	organiz	zation is not a private founda	ition because it i	s: (For lines 1 through	12, ched	ck only or	ne box.)	
1		church, convention of churc					0(b)(1)(A)(i).	
2		school described in <b>section</b>		,		•		
3		hospital or a cooperative ho		•			, , , ,	
4		medical research organization		onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(A)	(iii). Enter the
-		spital's name, city, and state						
5	se	n organization operated for ection 170(b)(1)(A)(iv). (Com	plete Part II.)			•		ai unit described in
6 7								
8	□ A ○	community trust described i	n <b>section 170(b)</b>	(1)(A)(vi). (Complete I	Part II.)			
9	or un	n agricultural research organ university or a non-land-gra iiversity:	nt college of agr	iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or
10	O ☐ An organization that normally receives (1) more than 33½% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)							
11		n organization organized and	•	•	•		` '` '	
12	2 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.							
а	a ☐ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.							
b		Type II. A supporting organization(s). You must	the supporting o	rganization vested in	the same			
С		Type III functionally integ its supported organization(						ally integrated with,
d		Type III non-functionally interest that is not functionally interequirement (see instruction	grated. The orga	nization generally mus	st satisfy	a distribu	ution requirement an	• • • • • • • • • • • • • • • • • • • •
е		Check this box if the organ functionally integrated, or	Гуре III non-func	tionally integrated sur				e II, Type III
f		er the number of supported of	-					
g		vide the following information					T	
	(i) Nam	ne of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Secti	on A. Public Support	quality arido	1 1110 10010 110	tod bolow, pi	odec comple	to r art m.,	_
	dar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	<b>(e)</b> 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	48,057,506	50,960,795	44,596,468	44,688,565	60,836,017	249,139,351
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	-,,		, ,	, ,		0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	48,057,506	50,960,795	44,596,468	44,688,565	60,836,017	249,139,351
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0
6	Public support. Subtract line 5 from line 4						249,139,351
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) ▶	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	<b>(e)</b> 2021	(f) Total
7	Amounts from line 4	48,057,506	50,960,795	44,596,468	44,688,565	60,836,017	249,139,351
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,409,693	3,865,982	6,160,775	5,844,554	7,163,466	26,444,470
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	123,375	0	45,570	168,945
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	33,028	3,173	637	0	0	36,838
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First 5 years. If the Form 990 is for the organization, check this box and stop her	(see instructio organization's	first, second,		or fifth tax ye	12 ar as a section	` ' ; '
Secti	on C. Computation of Public Suppor	t Percentage	)				
14	Public support percentage for 2021 (line 6					14	90.34 %
15 16a	Public support percentage from 2020 Sch 33 <sup>1</sup> / <sub>3</sub> % support test—2021. If the organization qual box and stop here. The organization qual	zation did not	check the box	on line 13, an	d line 14 is 33		
b	331/3% support test—2020. If the organization this box and stop here. The organization						
17a	a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization in Part VI how the organization meets the organization	<b>920.</b> If the organ meets the facts and circ	inization did no cts-and-circun cumstances te	ot check a box nstances test, st. The organiz	on line 13, 10 check this box cation qualifies	6a, 16b, or 17a x and <b>stop her</b> s as a publicly	a, and line re. Explain supported
18	<b>Private foundation.</b> If the organization of instructions	did not check	a box on line	13, 16a, 16b,	17a, or 17b,	check this bo	x and see

Schedule A (Form 990) 2021 Page **3** 

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

Cooti	on A. Public Support	under the te	sts listed beit	Jw, piease co	implete Fart	11.)	
		(a) 2017	(b) 2019	(a) 2010	(4) 2020	(a) 2021	(f) Total
1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	<b>(e)</b> 2021	(f) Total
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the organization, check this box and stop her	•	s first, second		•		. , , ,
Secti	on C. Computation of Public Suppor	t Percentag	e				
15	Public support percentage for 2021 (line 8					15	%
16	Public support percentage from 2020 Sch					16	%
	on D. Computation of Investment Inc						
17	Investment income percentage for 2021 (I			-		17	%
18	Investment income percentage from 2020					18 221 m	% and line
19a	331/3% support tests—2021. If the organi						
b	17 is not more than 33½%, check this box a 33½% support tests—2020. If the organiz	_	-	-		_	_
D	line 18 is not more than 331/3%, check this b						
20	<b>Private foundation.</b> If the organization did	_	<del>-</del>	=	· · · · · · · ·		_

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#### Part IV **Supporting Organizations**

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

#### Se

secti	on A. All Supporting Organizations					
			Yes	No		
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1				
2						
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).					
20		2				
sа	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a				
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b				
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)					
10	purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b				
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)					
_	purposes.	4c				
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action					
	was accomplished (such as by amendment to the organizing document).	5a				
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b				
С	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5с				
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6				
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity					
_	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7				
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8				
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI.</b>	9a				
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI.</b>	9b				
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit	35				
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с				
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section					
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.					
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	10a				
D	determine whether the organization had excess business holdings.)	10b				

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				ugo 🗨	
Part	Supporting Organizations (continued)				
			Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?  A person who directly or indirectly controls gither along or together with persons described on lines 11b and				
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?				
		11a			
	A family member of a person described on line 11a above?	11b			
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI.</b>	44-			
Sacti	on B. Type I Supporting Organizations	11c			
Secu	on B. Type i Supporting Organizations		Yes	No	
_			163	140	
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,				
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)				
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported				
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the				
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.				
2	Did the organization operate for the benefit of any supported organization other than the supported				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part				
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,				
	supervised, or controlled the supporting organization.	2			
Secti	on C. Type II Supporting Organizations				
			Yes	No	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors				
	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control				
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	_			
Secti	on D. All Type III Supporting Organizations	1			
occu	on b. All Type in Supporting Organizations		Yes	No	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140	
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax				
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the				
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported				
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how				
	the organization maintained a close and continuous working relationship with the supported organization(s).	2			
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have				
	a significant voice in the organization's investment policies and in directing the use of the organization's				
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's				
<u> </u>	supported organizations played in this regard.	3			
	on E. Type III Functionally Integrated Supporting Organizations			`	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i The organization satisfied the Activities Test. Complete line 2 below.	nstru	ctions	5).	
a	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>				
b c	The organization is the parent of each of its supported organizations. <i>Complete line's below.</i> The organization supported a governmental entity. <i>Describe in Part VI how you supported a governmental entity</i> .	(coo in	ctruct	ionel	
2	Activities Test. <i>Answer lines 2a and 2b below.</i>	SEC III	Yes		
			103	140	
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>				
	those supported organizations and explain how these activities directly furthered their exempt purposes,				
	how the organization was responsive to those supported organizations, and how the organization determined				
	that these activities constituted substantially all of its activities.	2a			
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's				
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If				
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would				
	have engaged in these activities but for the organization's involvement.	2b			
3	Parent of Supported Organizations. Answer lines 3a and 3b below.				
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or				
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a			
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b			

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Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	izations	
1	$\Box$ Check here if the organization satisfied the Integral Part Test as a qualifying			
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	
Sect	tion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
_2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	allv i	integrated Type III suppo	rting organization

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(see instructions).

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Part	V Type III Non-Functionally Integrated 509(a)(3	8) Supporting Organi	zations (continue	<u>(d)</u>	Page /
		n Supporting Organi	zations (continue	:u <i>)</i>	•
Sect	ion D-Distributions				Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		1	
2	Amounts paid to perform activity that directly furthers exe				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purp	3			
4	Amounts paid to acquire exempt-use assets			4	
_ 5	Qualified set-aside amounts (prior IRS approval required-	5			
6	Other distributions (describe in Part VI). See instructions.	6			
	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to whice (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	sponsive	8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	ns	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
<u>g</u>	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2021 distributable amount				
<u>!</u>	Carryover from 2016 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D, line 7: \$				
	· · · · · · · · · · · · · · · · · · ·				
a	Applied to underdistributions of prior years  Applied to 2021 distributable amount				
b	Remainder. Subtract lines 4a and 4b from line 4.				
	, 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2017				
b	Excess from 2018				
С	Excess from 2019				
d	Excess from 2020				

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Excess from 2021

е

#### Part VI

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

Return Reference - Identifier		Explanation								
SCHEDULE A, PART II,	Description	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total			
LINE 10 - OTHER INCOME	(1) MISCELLANE OUS	33,028	3,173	637	0	0	36,838			
	Total	33,028	3,173	637	0	0	36,838			

#### **SCHEDULE D** (Form 990)

## **Supplemental Financial Statements**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information.

	f the organization CLUBS INTERNATIONAL FOUNDATION	Employer identification number			
			23-7030455		
Par			ds or Accounts.		
	Complete if the organization answered "				
		(a) Donor advised funds	(b) Funds and other accounts		
1	Total number at end of year				
2	Aggregate value of contributions to (during year) .				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor a				
	funds are the organization's property, subject to the	9			
6	Did the organization inform all grantees, donors, an				
	only for charitable purposes and not for the benefit				
	conferring impermissible private benefit?		· · · · · · 🗌 Yes 🗌 No		
Par	Conservation Easements.				
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.			
1	Purpose(s) of conservation easements held by the o	rganization (check all that apply).			
	Preservation of land for public use (for example, recrea	• • • • • • • • • • • • • • • • • • • •	f a historically important land area		
	☐ Protection of natural habitat		f a certified historic structure		
	☐ Preservation of open space				
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contributior	n in the form of a conservation		
	easement on the last day of the tax year.		Held at the End of the Tax Year		
а	Total number of conservation easements		. 2a		
b	Total acreage restricted by conservation easements				
C	Number of conservation easements on a certified hi		<del> </del>		
d	Number of conservation easements included in (				
3	Number of conservation easements modified, trans	ferred, released, extinguished, or term			
	tax year ►	, , , ,	, 3		
4	Number of states where property subject to conserv	vation easement is located ▶			
5	Does the organization have a written policy regard		pection, handling of		
	violations, and enforcement of the conservation eas	ements it holds?	· · · · · · · · · · · · · · · · · · ·		
6	Staff and volunteer hours devoted to monitoring, inspec-	ting, handling of violations, and enforcing	conservation easements during the vear		
	<b>▶</b>	<b>3</b> , a <b>3 3 3 3 3 3 3 3 3 3</b>	,		
7	Amount of expenses incurred in monitoring, inspecting	a, handling of violations, and enforcing	conservation easements during the year		
-	<b>▶</b> \$	,,	oonoon vallen oacennen aan ing inc year		
8	Does each conservation easement reported on line 2	(d) above satisfy the requirements of s	section 170(h)(4)(B)(i)		
	and section 170(h)(4)(B)(ii)?		· · · · · · □ Yes □ No		
9	In Part XIII, describe how the organization reports co	onservation easements in its revenue			
	balance sheet, and include, if applicable, the text of	the footnote to the organization's fina	ancial statements that describes the		
	organization's accounting for conservation easemer	its.			
Part	III Organizations Maintaining Collections	of Art. Historical Treasures. or	Other Similar Assets.		
	Complete if the organization answered "				
1a	If the organization elected, as permitted under FASI		le statement and balance sheet works		
	of art, historical treasures, or other similar assets				
	service, provide in Part XIII the text of the footnote to		•		
b	If the organization elected, as permitted under FAS				
	art, historical treasures, or other similar assets held				
	provide the following amounts relating to these item	The state of the s	,		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>▶</b> \$		
	(ii) Assets included in Form 990, Part X				
2	If the organization received or held works of art,		· · · · · · · · · · · · · · · · · · ·		
_	following amounts required to be reported under FA		access for interioral gain, provide the		
2	Revenue included on Form 990, Part VIII, line 1 .	<del>-</del>	<b>•</b> •		
a	Assets included in Form 990, Part V		<b>ν</b> φ		

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Part	III Organizations Maintaining	Collections of A	Art, Histo	rical T	reasures	, or Ot	her Similar As	sets (con	tinued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and oth	her record	s, checl	k any of th	e follow	ring that make s	significant u	se of its
а	☐ Public exhibition		d [	Loan	or exchang	e progra	am		
b	Scholarly research		e		_				
С	Preservation for future generations	i		_					
4	Provide a description of the organization.		and explair	n how th	ney further	the org	anization's exer	npt purpos	e in Part
5	During the year, did the organization	solicit or receive	donations	of art, I	historical tr	easures	s, or other simil	ar	
	assets to be sold to raise funds rather							☐ Yes	☐ No
Part	EN Escrow and Custodial Arra	ingements.							
	Complete if the organization 990, Part X, line 21.						•		orm
1a	Is the organization an agent, trustee included on Form 990, Part X?			-				ot ☐ <b>Yes</b>	☐ No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the follo	owing ta	able:				
							А	mount	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount	nt on Form 990, Pa	art X, line 2	21, for e	scrow or co	ustodial	account liability	/? ☐ Yes	☐ No
b	If "Yes," explain the arrangement in P	art XIII. Check here	e if the exp	lanation	n has been	provide	ed on Part XIII .		
Par	t V Endowment Funds.								
	Complete if the organization	answered "Yes"	' on Form	1990, F	Part IV, line	e 10.			
		(a) Current year	<b>(b)</b> Prior	year	(c) Two year	rs back	(d) Three years bac	k <b>(e)</b> Four ye	ars back
1a	Beginning of year balance	1,393,347	1,1	161,320	1,1	39,473	606,70	0	584,508
b	Contributions						515,87	6	
С	Net investment earnings, gains, and								
	losses	(167,066)	2	246,198		21,847	29,55	7	55,322
d	Grants or scholarships	256,289		14,171			12,66	0	33,130
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance	969,992	1,3	393,347	1,1	61,320	1,139,47	3	606,700
2	Provide the estimated percentage of t	he current year en	d balance	(line 1g	, column (a	i)) held a	as:		
а	Board designated or quasi-endowment	nt ▶0.00	%						
b	Permanent endowment ► 100	.00 %							
С	Term endowment ► 0.00 %								
	The percentages on lines 2a, 2b, and								
3a	Are there endowment funds not in the	e possession of th	e organiza	ation tha	at are held	and adı	ministered for th	ne	
	organization by:							Υ	es No
	(i) Unrelated organizations							3a(i)	· ·
	(ii) Related organizations							3a(ii)	· ·
b	If "Yes" on line 3a(ii), are the related o	rganizations listed	as require	d on Sc	hedule R?			3b	
4	Describe in Part XIII the intended uses	of the organizatio	n's endow	rment fu	ınds.				
Part									
	Complete if the organization	answered "Yes"	on Form	1990, F	Part IV, line	e 11a. S	See Form 990,	Part X, lin	e 10.
	Description of property	(a) Cost or oth (investme	1 '	•	r other basis ther)	٠,	Accumulated preciation	(d) Book	alue
1a	Land								
b	Buildings								
С	Leasehold improvements								
d	Equipment				5,317,053		4,996,612		320,441
е	Other								
Total.	Add lines 1a through 1e. (Column (d) n		90, Part X,	column	(B), line 10	Oc.)	▶		320,441

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Part VII	Investments – Other Securities.  Complete if the organization answered "Yes" on For	m 990 Part IV lin	e 11b. See Form	990 Part X line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Met	hod of valuation: -of-year market value
(1) Financial	derivatives			<u> </u>
	eld equity interests			
(0)				
(A) HEDG	E FUNDS	36,269,295	END OF YEAR MA	RKET VALUE
(B) PRIVA	TE EQUITY FUNDS	19,610,089	END OF YEAR MA	RKET VALUE
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	mn (b) must equal Form 990, Part X, col. (B) line 12.) .	55,879,384		
Part VIII	Investments – Program Related.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11c. See Form	990, Part X, line 13.
	(a) Description of investment	(b) Book value		hod of valuation: -of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.  Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11d. See Form	
(4)	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6) (7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 15.)		<b>•</b>	
Part X	Other Liabilities.	<u> </u>		
. a. c.x	Complete if the organization answered "Yes" on For	m 990. Part IV. lin	e 11e or 11f. See	e Form 990. Part X.
	line 25.	000, . a,		,
1.	(a) Description of liability			(b) Book value
(1) Federal in				(4, 44 444
	ABLE GIFT ANNUITIES			67,339
(3)				,,,,,,,
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 25.)			67,339
	uncertain tax positions. In Part XIII, provide the text of the footn		n's financial stateme	ents that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII . 🔽

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Part				Retur	n.
	Complete if the organization answered "Yes" on Form 990, I				
1	Total revenue, gains, and other support per audited financial statements			1	31,210,364
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1		
а	Net unrealized gains (losses) on investments	2a	(48,649,168)		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	4,797,893		
е	Add lines 2a through 2d			2e	(43,851,275)
3	Subtract line 2e from line 1			3	75,061,639
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	١.	000.070		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	690,372		
b	Other (Describe in Part XIII.)	4b	0	4 -	000 070
с 5	Add lines <b>4a</b> and <b>4b</b>			4c 5	690,372
Part					75,752,011
rait	Complete if the organization answered "Yes" on Form 990, I			net	uii.
1	Total expenses and losses per audited financial statements	arti	v, iiile 12a.	1	54,687,336
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			1	34,007,000
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	1,563,829		
e	Add lines 2a through 2d	_		2e	1,563,829
3	Outstand the Onformation 4			3	53,123,507
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	690,372		
b	Other (Describe in Part XIII.)	4b	0		
С	Add lines <b>4a</b> and <b>4b</b>			4c	690,372
_ 5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)		5	53,813,879
Part	• •				
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and				
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to pro	ovide any additional in	tormat	tion.
SEE S	TATEMENT 				

#### Part XIII

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

Return Reference - Identifier	Explanation					
SCHEDULE D, PART XI, LINE 2(D) - OTHER REVENUES IN	(a) Description	(b) Amount				
AÙÓITED FINANCIAL	LCIF INDIA REVENUE - CONSOLIDATED IN AUDITED FINANCIAL STATEMENTS	4,797,893				
STATEMENTS NOT IN FORM 990						
SCHEDULE D, PART XII, LINE	(a) Description	(b) Amount				
2(D) - OTHER EXPENSES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM	RECOVERIES OF PRIOR YEAR GRANTS - NETTED AGAINST GRANT EXPENSE ON AUDITED FINANCIAL STATEMENTS	- 736,505				
990	LCIF INDIA EXPENSES - CONSOLIDATED IN AUDITED FINANCIAL STATEMENTS	2,300,334				

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

Return Reference - Identifier	Explanation
SCHEDULE D, PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUNDS	THE FOUNDATION HAS TWO ENDOWMENT FUNDS. ONE IS FOR THE TREATMENT AND PREVENTION OF BLINDNESS IN THE STATE OF LOUISIANA, AND THE OTHER IS FOR THE BENEFIT OF THE BLIND.
SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE	THE FOUNDATION HAS RECEIVED A FAVORABLE DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE, STATING THAT IT IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) OF 1986, AS AMENDED, EXCEPT FOR INCOME TAXES PERTAINING TO UNRELATED BUSINESS INCOME. THE FINANCIAL ACCOUNTING STANDARDS BOARD ISSUED GUIDANCE THAT REQUIRES TAX EFFECTS FROM UNCERTAIN TAX POSITIONS TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS ONLY IF THE POSITION IS MORE LIKELY THAN NOT TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY.  MANAGEMENT HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN POSITIONS THAT REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS. ADDITIONALLY, THERE IS NO INTEREST OR PENALTIES RECOGNIZED IN THE CONSOLIDATED FINANCIAL STATEMENTS.

#### **SCHEDULE F** (Form 990)

Part I

#### **Statement of Activities Outside the United States**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

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

Employer identification number

Name of the organization LIONS CLUBS INTERNATIONAL FOUNDATION 23-7030455

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

1	For grantmakers. Does the other assistance, the grante	es' eligibility	for the gran	ts or assistance, and the	selection criteria used to	_
	award the grants or assistant	ce?				✓ Yes □ No
2	For grantmakers. Describe outside the United States.		-	·		d other assistance
3	Activities per Region. (The fo	llowing Part	I, line 3 table o	can be duplicated if addition	nal space is needed.)	
	(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)	CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	GRANTMAKING	277,271
	EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	GRANTMAKING	
(2)		0	0			9,531,388
(3)	EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	GRANTMAKING	3,826,754
(4)	MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	GRANTMAKING	1,241,770
(5)	NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	PROGRAM SERVICES	GRANTMAKING	507,474
(6)	RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	GRANTMAKING	723,000
(7)	SOUTH AMERICA	0	0	PROGRAM SERVICES	GRANTMAKING	1,922,374
(8)	SOUTH ASIA	1	0	PROGRAM SERVICES	GRANTMAKING	2,104,628
(9)	SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	GRANTMAKING	6,760,967
(10)	EAST ASIA AND THE PACIFIC	0	1	PROGRAM SERVICES	PROJECT CONSULTING	20,550
(11)	SOUTH AMERICA	0	1	PROGRAM SERVICES	PROJECT CONSULTING	25,820
(12)	SOUTH ASIA	0	1	PROGRAM SERVICES	PROJECT CONSULTING	18,000
(13)	SUB-SAHARAN AFRICA	0	2	PROGRAM SERVICES	PROJECT CONSULTING	41,560
(14)	EAST ASIA AND THE PACIFIC	0	4	ADMINISTRATIVE SUPPORT		176,459
(15)	CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		40,984,135
(16)	EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS		968,594
(17)						
3a	Subtotal	1	9			69,130,744
b	Total from continuation sheets to Part I	0	0			0
С	Totals (add lines 3a and 3b)	1	9			69,130,744

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Schedule F (Form 990) 2021

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (g) Amount of (h) Description (i) Method of section and EIN organization grant cash grant cash noncash of noncash assistance valuation (book, FMV, (if applicable) disbursement assistance appraisal, other) (SEE STATEMENT) (1) (2) (3) (4) (5) (6) (7) (8) (9)(10)(11) (12)(13)(14)(15)(16)Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 0 551 

Schedule F (Form 990) 2021

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2021 Page **4** 

### Part IV Foreign Forms

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

Schedule F (Form 990) 2021

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States (continued)

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
(1)		CENTRAL AMERICA AND THE CARIBBEAN	HAITI EARTHQUAKE 2021	100,000	WIRE			,
(2)		CENTRAL AMERICA AND THE CARIBBEAN	PEDIATRIC CLINIC AND HOSPITAL EXPANSION	100,000	WIRE			
(3)		CENTRAL AMERICA AND THE CARIBBEAN	TYPE 1 DIABETES INITIATIVES PANAMA	28,067	CHECK			
(4)		CENTRAL AMERICA AND THE CARIBBEAN	FLOOD RELIEF	10,000	WIRE			
(5)		CENTRAL AMERICA AND THE CARIBBEAN	FLOOD RELIEF	10,000	WIRE			
(6)		CENTRAL AMERICA AND THE CARIBBEAN	STORM RELIEF	10,000	WIRE			
(7)		CENTRAL AMERICA AND THE CARIBBEAN	PARK RENOVATION PROJECT	6,327	WIRE			
(8)		CENTRAL AMERICA AND THE CARIBBEAN	HAITI EARTHQUAKE 2021 - TENT OPERATIONS	6,070	WIRE			
(9)		EAST ASIA AND THE PACIFIC	2019 TYPHOON HAGIBIS NAGANO DISASTER SUPPORT CENTER PROJECT	895,318	CHECK			
(10)		EAST ASIA AND THE PACIFIC	AUSTRALIA BUSHFIRES	314,500	CHECK			
(11)		EAST ASIA AND THE PACIFIC	SPECIAL OLYMPICS - NIPPON SUMMER NATIONAL GAMES 2022	300,000	CHECK			
(12)		EAST ASIA AND THE PACIFIC	NATIONAL EYE HEALTH SYSTEM CATARACT SURGICAL SUPPORT IN LAE, MOUNT HAGEN, MENDI AND RABAUL	295,655	CHECK			
(13)		EAST ASIA AND THE PACIFIC	2019 TYPHOON HAGIBIS RELIEF	280,000	CHECK			
(14)		EAST ASIA AND THE PACIFIC	COMMUNITY DIABETES SCREENING PROGRAM	150,000	CHECK			
(15)		EAST ASIA AND THE PACIFIC	DIABETES SCREENING AND PREVENTION EDUCATION	112,249	CHECK			
(16)		EAST ASIA AND THE PACIFIC	EXPAND DIABETES SCREENING AND EDUCATION	109,357	CHECK			
(17)		EAST ASIA AND THE PACIFIC	AUSTRALIA BUSHFIRES	109,000	ELECTRONIC			
(18)		EAST ASIA AND THE PACIFIC	SPECIAL OLYMPICS - JAPAN NATIONAL PARTNERSHIP 2020	100,000	ELECTRONIC			
(19)		EAST ASIA AND THE PACIFIC	SPECIAL OLYMPICS - JAPAN NATIONAL PARTNERSHIP 2021	100,000	ELECTRONIC			
(20)		EAST ASIA AND	SPECIAL	100,000	ELECTRONIC			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
		THE PACIFIC	OLYMPICS - JAPAN NATIONAL PARTNERSHIP 2022					
(21)		EAST ASIA AND THE PACIFIC	PURCHASE MOBILE BLOOD DONATION VEHICLE	100,000	CHECK			
(22)		EAST ASIA AND THE PACIFIC	PURCHASE FIRE TRUCK FOR VOLUNTEER FIRE BRIGADE	100,000	CHECK			
(23)		EAST ASIA AND THE PACIFIC	EQUIP TAICHUNG CITY HEALTH BUREAU	100,000	CHECK			
(24)		EAST ASIA AND THE PACIFIC	PURCHASE MOBILE EARTHQUAKE PROTECTION TRAINING VEHICLE	100,000	CHECK			
(25)		EAST ASIA AND THE PACIFIC	EQUIP ACADEMY FOR UNDERSERVED CHILDREN	100,000	CHECK			
(26)		EAST ASIA AND THE PACIFIC	EQUIP VISION SCREENING PROGRAM WITH VEHICLE AND EQUIPMENT	100,000	CHECK			
(27)		EAST ASIA AND THE PACIFIC	PURCHASE AND EQUIP MOBILE BLOOD DONATION VEHICLE	100,000	CHECK			
(28)		EAST ASIA AND THE PACIFIC	EQUIP FIRE BRIGADE WITH AMBULANCE AND EQUIPMENT	100,000	CHECK			
(29)		EAST ASIA AND THE PACIFIC	PURCHASE MOBILE BLOOD DONATION VEHICLE	100,000	CHECK			
(30)		EAST ASIA AND THE PACIFIC	PURCHASE OF REHAB EQUIPMENT AND REMODELING OF CENTER FOR DISABLED	100,000	CHECK			
(31)		EAST ASIA AND THE PACIFIC	EQUIP HOSPITAL IN THAILAND	99,861	WIRE			
(32)		EAST ASIA AND THE PACIFIC	MEDICAL EQUIPMENT FOR SADAO HOSPITAL	99,844	WIRE			
(33)		EAST ASIA AND THE PACIFIC	PURCHASE & EQUIP MOBILE VISION SCREENING VEHICLE	87,068	CHECK			
(34)		EAST ASIA AND THE PACIFIC	PURCHASE AIR PURIFIER FOR HOSPITAL	87,000	CHECK			
(35)		EAST ASIA AND THE PACIFIC	EXPANDING MEAL SERVICE FACILITY FOR FEEDING PROGRAM	85,950	CHECK			
(36)		EAST ASIA AND THE PACIFIC	RENOVATE CENTER FOR DISABLED	85,881	CHECK			
(37)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT VEHICLE TO SUPPORT MEDICAL NEEDS	84,998	CHECK			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
(38)		EAST ASIA AND THE PACIFIC	SCHOOL RENOVATION IN VIETNAM	82,089	CHECK			
(39)		EAST ASIA AND THE PACIFIC	EXPAND PROGRAM SERVICES OF DISABILITY ORGANIZATION	80,442	CHECK			
(40)		EAST ASIA AND THE PACIFIC	PURCHASE VISION SCREENING TOUR SERVICE VEHICLE AND VISION INSPECTION EQUIPMENT	80,000	CHECK			
(41)		EAST ASIA AND THE PACIFIC	EQUIP A SENIOR SERVICE CENTER	75,054	CHECK			
(42)		EAST ASIA AND THE PACIFIC	LIONS QUEST	74,812	WIRE			
(43)		EAST ASIA AND THE PACIFIC	EQUIPPING HOSPITAL WITH OPTICAL BIOMETER AND ELECTRIC BEDS	74,808	WIRE			
(44)		EAST ASIA AND THE PACIFIC	PURCHASE A MOBILE LAUNDRY VEHICLE FOR RURAL AREA LOW INCOME ELDERLY	71,444	CHECK			
(45)		EAST ASIA AND THE PACIFIC	2020 JAPAN FLOODING	71,161	CHECK			
(46)		EAST ASIA AND THE PACIFIC	PURCHASE EQUIPMENT FOR LOW VISION ASSESSMENT AND LOW VISION AIDS	71,138	CHECK			
(47)		EAST ASIA AND THE PACIFIC	EQUIPPING THE VOLUNTEER FIRE BRIGADE WITH AN AMBULANCE	71,110	CHECK			
(48)		EAST ASIA AND THE PACIFIC	PURCHASE AMBULANCE FOR HOSPITAL IN THAILAND	64,134	WIRE			
(49)		EAST ASIA AND THE PACIFIC	EQUIPPING DISASTER RELIEF ORGANIZATION WITH RESCUE EQUIPMENT	61,017	CHECK			
(50)		EAST ASIA AND THE PACIFIC	AMBULANCE FOR RATCHAPHIPHAT HOSPITAL	58,594	WIRE			
(51)		EAST ASIA AND THE PACIFIC	PURCHASE AMBULANCE FOR KING NARAI HOSPITAL	58,594	WIRE			
(52)		EAST ASIA AND THE PACIFIC	PURCHASE SUPPORT VEHICLE FOR VOLUNTEER FIRE BRIGADE	58,027	CHECK			
(53)		EAST ASIA AND THE PACIFIC	PURCHASE AMBULANCE FOR SURAT THANI CANCER HOSPITAL IN THAILAND	55,992	WIRE			
(54)		EAST ASIA AND THE PACIFIC	DIABETES COMMUNITY SCREENING AND AWARENESS PROGRAM	55,631	CHECK			

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(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
(55)		EAST ASIA AND THE PACIFIC	COMPUTERS FOR THE RACHINEEBURAN A SCHOOL	55,399	WIRE			
(56)		EAST ASIA AND THE PACIFIC	PURCHASE WHEELCHAIR LIFT VEHICLE	53,000	CHECK			
(57)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT VEHICLE FOR DISABLED	52,250	CHECK			
(58)		EAST ASIA AND THE PACIFIC	LIONS QUEST	50,000	CHECK			
(59)		EAST ASIA AND THE PACIFIC	EQUIP HOSPITAL IN THAILAND	50,000	WIRE			
(60)		EAST ASIA AND THE PACIFIC	PURCHASE MOBILE LIBRARY	46,428	CHECK			
(61)		EAST ASIA AND THE PACIFIC	PURCHASE VISION SCREENING EQUIPMENT	46,071	CHECK			
(62)		EAST ASIA AND THE PACIFIC	RENOVATE & EQUIP SCHOOL LIBRARY	46,000	CHECK			
(63)		EAST ASIA AND THE PACIFIC	DISASTER RESPONSE VEHICLE FOR FIRE DEPARTMENT	45,753	CHECK			
(64)		EAST ASIA AND THE PACIFIC	EQUIP DIGITAL STUDIO FOR LOCAL WELFARE CENTER	41,546	CHECK			
(65)		EAST ASIA AND THE PACIFIC	DIABETES SCREENING CAMPAIGN	40,000	CHECK			
(66)		EAST ASIA AND THE PACIFIC	PLANT TREES IN COMMUNITY PARK	39,538	CHECK			
(67)		EAST ASIA AND THE PACIFIC	EQUIPPING HOSPITAL WITH AMBULANCE	37,070	CHECK			
(68)		EAST ASIA AND THE PACIFIC	DONATING BLOOD TRANSPORT VEHICLE	36,071	CHECK			
(69)		EAST ASIA AND THE PACIFIC	PURCHASE AND INSTALL REHAB EQUIPMENT FOR DISABLED	34,501	CHECK			
(70)		EAST ASIA AND THE PACIFIC	COVID DONATIONS FOR THE VULNERABLE IN DAZHU DISTRICT	34,500	CHECK			
(71)		EAST ASIA AND THE PACIFIC	REMODELING NANHSI SUNSHINE FOOD BANK	33,348	CHECK			
(72)		EAST ASIA AND THE PACIFIC	EQUIPPING WELFARE ORGANIZATION WITH OUTREACH VEHICLE	33,243	CHECK			
(73)		EAST ASIA AND THE PACIFIC	CONSTRUCT CLEAN WATER WELLS	32,815	WIRE			
(74)		EAST ASIA AND THE PACIFIC	MEDICAL EQUIPMENT FOR LAEM CHABANG HOSPITAL	32,344	WIRE			
(75)		EAST ASIA AND THE PACIFIC	CONSTRUCT SCHOOL IN CAMBODIA	31,688	CHECK			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
(76)		EAST ASIA AND THE PACIFIC	COVID-19 RELIEF	30,000	WIRE			
(77)		EAST ASIA AND THE PACIFIC	PURCHASE A PATIENT TRANSPORT VAN FOR LOCAL HOSPITAL	28,875	CHECK			
(78)		EAST ASIA AND THE PACIFIC	EQUIP MEDICAL OUTREACH PROGRAM WITH VEHICLE	28,752	CHECK			
(79)		EAST ASIA AND THE PACIFIC	PEACE POSTERS ON TRAINS PROJECT	27,454	CHECK			
(80)		EAST ASIA AND THE PACIFIC	NATIONAL YOUTH TUG OF WAR TOURNAMENT	27,273	CHECK			
(81)		EAST ASIA AND THE PACIFIC	SCHOOL RENOVATION IN VIETNAM	26,893	CHECK			
(82)		EAST ASIA AND THE PACIFIC	DONATING EQUIPMENT TO KAOHSIUNG CITY SANMIN DISTRICT LI-DE BOROUGH PATROL TEAM	26,250	CHECK			
(83)		EAST ASIA AND THE PACIFIC	PURCHASE A VEHICLE FOR KIMCHUN TRANSPORTATIO N CENTER FOR DISABLED	25,965	CHECK			
(84)		EAST ASIA AND THE PACIFIC	CANCER WARD INFRASTRUCTUR E IMPROVEMENTS	25,890	CHECK			
(85)		EAST ASIA AND THE PACIFIC	PURCHASE A VEHICLE FOR DISABLED	25,365	CHECK			
(86)		EAST ASIA AND THE PACIFIC	SPORT TOURNAMENT FOR CHILDREN WITH SPECIAL NEEDS	25,271	CHECK			
(87)		EAST ASIA AND THE PACIFIC	SCHOOL EXPENSES AND TEXTBOOK FEE SUPPORT FOR NEEDY STUDENTS	25,088	CHECK			
(88)		EAST ASIA AND THE PACIFIC	LIONS QUEST	25,000	CHECK			
(89)		EAST ASIA AND THE PACIFIC	PURCHASE A VEHICLE FOR VISION CARE OUTREACH PROGRAM	25,000	CHECK			
(90)		EAST ASIA AND THE PACIFIC	CONSTRUCTION OF SCHOOL LIBRARY	25,000	WIRE			
(91)		EAST ASIA AND THE PACIFIC	TONGA VOLCANO RECONSTRUCTIO N	24,100	ELECTRONIC			
(92)		EAST ASIA AND THE PACIFIC	PURCHASE COMPUTERS FOR CHILDREN BEOM- SOOK SCHOOL FOR AT-RISK CHILDREN	23,942	CHECK			
(93)		EAST ASIA AND THE PACIFIC	WALKIE-TALKIES FOR TAICHUNG CITY VOLUNTEER FIRE BRIGADE	23,601	CHECK			
(94)		EAST ASIA AND THE PACIFIC	EQUIPPING WELFARE	23,496	CHECK			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
			ORGANIZATION WITH SERVICE VEHICLE					
(95)		EAST ASIA AND THE PACIFIC	CONSTRUCT INDOOR GYM FOR PEOPLE WITH DISABILITIES	23,321	CHECK			
(96)		EAST ASIA AND THE PACIFIC	DIABETES SCREENING AND COMPREHENSIVE FOLLOW-UP CARE, WEST JAKARTA	23,248	WIRE			
(97)		EAST ASIA AND THE PACIFIC	1ST HOKKAIDO JUNIOR HIGH AND HIGH SCHOOL BRASS BAND COMPETITION	23,213	CHECK			
(98)		EAST ASIA AND THE PACIFIC	PRODUCE TV PROGRAM TO RAISE AWARENESS OF DISABILITIES	23,000	CHECK			
(99)		EAST ASIA AND THE PACIFIC	LIONS QUEST	23,000	CHECK			
(100)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT VEHICLE FOR DISABLED	22,448	CHECK			
(101)		EAST ASIA AND THE PACIFIC	DONATION OF A VENTILATOR TO HACHINOHE CITY HOSPITAL	21,740	CHECK			
(102)		EAST ASIA AND THE PACIFIC	DEVELOPMENT OF WALKING AND RUNNING TRACKS IN YASUDA TOWN PHOENIX PARK	21,350	CHECK			
(103)		EAST ASIA AND THE PACIFIC	EQUIPPING WELFARE CENTER WITH WHEELCHAIR LIFT EQUIPPED VEHICLE	21,341	CHECK			
(104)		EAST ASIA AND THE PACIFIC	PURCHASE WHEELCHAIR LIFT VEHICLE FOR COMMUNITY CENTER FOR DISABLED	21,275	CHECK			
(105)		EAST ASIA AND THE PACIFIC	SUPPORT FOR BLOOD DONATION EVENTS	20,805	CHECK			
(106)		EAST ASIA AND THE PACIFIC	BLOOD DONATION PROMOTION GIFTS	20,082	CHECK			
(107)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	20,000	CHECK			
(108)		EAST ASIA AND THE PACIFIC	LIONS QUEST PROGRAM	20,000	CHECK			
(109)		EAST ASIA AND THE PACIFIC	EQUIP RURAL SCHOOL WITH BUS	19,691	CHECK			
(110)		EAST ASIA AND THE PACIFIC	RENOVATING COMMUNITY PARK	19,500	CHECK			
(111)		EAST ASIA AND THE PACIFIC	PURCHASE VEHICLE FOR HUAREN SOCIAL WELFARE FOR ELDERLY	19,017	CHECK			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
(112)		EAST ASIA AND THE PACIFIC	PURCHASE DISASTER RESPONSE VEHICLE	17,106	CHECK			
(113)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT VEHICLE FOR CHILDREN WITH CEREBRAL PALSY	16,909	CHECK			
(114)		EAST ASIA AND THE PACIFIC	SEND WHEELCHAIRS TO THAILAND	16,750	CHECK			
(115)		EAST ASIA AND THE PACIFIC	PURCHASE A VEHICLE FOR PEOPLE WITH DISABILITIES	16,650	CHECK			
(116)		EAST ASIA AND THE PACIFIC	PURCHASE MOBILE MEDICAL VEHICLE FOR LOCAL HOSPITAL	16,650	CHECK			
(117)		EAST ASIA AND THE PACIFIC	EQUIPPING CHILD WELFARE CENTER WITH PASSENGER VAN	16,546	CHECK			
(118)		EAST ASIA AND THE PACIFIC	BOOK DONATION FOR ELEMENTARY SCHOOLS	16,353	CHECK			
(119)		EAST ASIA AND THE PACIFIC	COVID DONATIONS FOR THE VULNERABLE IN LUZHU DISTRICT	16,000	CHECK			
(120)		EAST ASIA AND THE PACIFIC	HUALIEN EARTHQUAKE RELIEF	15,361	CHECK			
(121)		EAST ASIA AND THE PACIFIC	DONATE WELFARE VEHICLE-W/ TOYOTA LC	15,289	CHECK			
(122)		EAST ASIA AND THE PACIFIC	PINE TREE PROTECTION PROGRAM	15,000	CHECK			
(123)		EAST ASIA AND THE PACIFIC	PURCHASE BLOOD TRANSPORT VEHICLE	15,000	CHECK			
(124)		EAST ASIA AND THE PACIFIC	VEHICLE SUPPORT FOR SEODAEMOON JEONGDAMEUN FOOD MARKET	15,000	CHECK			
(125)		EAST ASIA AND THE PACIFIC	LIONS QUEST	14,500	CHECK			
(126)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT VEHICLE FOR EMERGENCY RELIEF GOODS	14,000	CHECK			
(127)		EAST ASIA AND THE PACIFIC	PURCHASE ELECTRIC CART FOR LOW- INCOME ELDERLY	13,854	CHECK			
(128)		EAST ASIA AND THE PACIFIC	RENOVATE TOILET AND PRAYER ROOM IN NORTH JAKARTA	12,839	WIRE			
(129)		EAST ASIA AND THE PACIFIC	COVID ANTIGEN TEST KITS AND MEDICAL SUPPLIES	12,730	CHECK			
(130)		EAST ASIA AND THE PACIFIC	DONATION OF A WELFARE VEHICLE TO TENDO MAIZURU	12,714	CHECK			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
			SOCIAL WELFARE ASSOCIATION					
(131)		EAST ASIA AND THE PACIFIC	LIONS QUEST	12,600	CHECK			
(132)		EAST ASIA AND THE PACIFIC	EQUIPMENT DONATION FOR DISABLED	12,500	CHECK			
(133)		EAST ASIA AND THE PACIFIC	WHEELCHAIRS FOR HOSPITALS	12,243	CHECK			
(134)		EAST ASIA AND THE PACIFIC	DISTRICT 303 COVID-19 RELIEF SERVICES	12,111	WIRE			
(135)		EAST ASIA AND THE PACIFIC	BOOKS FOR ELEMENTARY SCHOOL CHILDREN FROM LOW-INCOME FAMILIES	11,960	CHECK			
(136)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT VEHICLE FOR HOME VISITS	11,862	CHECK			
(137)		EAST ASIA AND THE PACIFIC	EQUIP WELFARE CENTER WITH VEHICLE	11,806	CHECK			
(138)		EAST ASIA AND THE PACIFIC	MEDICAL EQUIPMENT FOR HOSPITAL	11,756	CHECK			
(139)		EAST ASIA AND THE PACIFIC	HOME REPAIR FOR ELDERLY	11,300	CHECK			
(140)		EAST ASIA AND THE PACIFIC	TREE PLANTING PROJECT	11,164	CHECK			
(141)		EAST ASIA AND THE PACIFIC	DONATION OF A TELESCOPE TO THE LOCAL FACILITY FOR CHILD WELFARE	11,143	CHECK			
(142)		EAST ASIA AND THE PACIFIC	SCHOLARSHIPS FOR LOW- INCOME STUDENTS	11,130	CHECK			
(143)		EAST ASIA AND THE PACIFIC	DONATE UMBRELLAS TO COMMUNITIES IN NEED	11,115	CHECK			
(144)		EAST ASIA AND THE PACIFIC	SUPPORT LOCAL SHELTER WITH MEALS AND HEATING COST	10,980	CHECK			
(145)		EAST ASIA AND THE PACIFIC	LIBRARY RENOVATION PROJECT OF THE NEW TAIPEI CITY MUNICIPAL GONGLIAO MIDDLE HIGH SCHOOL	10,950	CHECK			
(146)		EAST ASIA AND THE PACIFIC	SUPPORT FOR LOW-INCOME FAMILIES DURING URBAN DEVELOPMENT PROJECT	10,847	CHECK			
(147)		EAST ASIA AND THE PACIFIC	PROVIDE BASIC NECESSITIES TO DISADVANTAGE FAMILY FOR CHINESE NEW YEAR	10,800	CHECK			
(148)		EAST ASIA AND THE PACIFIC	FOOD DISBURSEMENT TO LOW INCOME FAMILIES	10,800	CHECK			
(149)		EAST ASIA AND THE PACIFIC	MEALS, BLOOD	10,575	CHECK			

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(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
			PRESSURE MEASUREMENT SERVICES, AND VISION EXAMINATION FOR LIVING- ALONE ELDERLY					
(150)		EAST ASIA AND THE PACIFIC	EQUIPPING WOMEN'S CENTER WITH NEW AIR CONDITIONER	10,515	CHECK			
(151)		EAST ASIA AND THE PACIFIC	DONATING VEHICLE TO TAIWAN FUND FOR CHILDREN AND FAMILIES IN NORTH KAOHSIUNG	10,239	CHECK			
(152)		EAST ASIA AND THE PACIFIC	TYPE 1 DIABETES YOUTH CAMP	10,000	ELECTRONIC			
(153)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(154)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(155)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(156)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(157)		EAST ASIA AND THE PACIFIC	VOLCANO ERUPTION RELIEF	10,000	WIRE			
(158)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(159)		EAST ASIA AND THE PACIFIC	EARTHQUAKE RELIEF	10,000	WIRE			
(160)		EAST ASIA AND THE PACIFIC	FOOD FOR CHILDREN'S CAFETERIAS	10,000	CHECK			
(161)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(162)		EAST ASIA AND THE PACIFIC	COMMUNITY RECOVERY	10,000	CHECK			
(163)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(164)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(165)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(166)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(167)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(168)		EAST ASIA AND THE PACIFIC	TYPHOON RELIEF	10,000	CHECK			
(169)		EAST ASIA AND THE PACIFIC	TYPHOON RELIEF	10,000	CHECK			
(170)		EAST ASIA AND THE PACIFIC	TYPHOON RELIEF	10,000	CHECK			
(171)		EAST ASIA AND THE PACIFIC	TYPHOON RELIEF	10,000	WIRE			
(172)		EAST ASIA AND THE PACIFIC	TYPHOON RELIEF	10,000	WIRE			
(173)		EAST ASIA AND THE PACIFIC	TYPHOON RELIEF	10,000	WIRE			
(174)		EAST ASIA AND THE PACIFIC	LANDSLIDE RELIEF	10,000	CHECK			
(175)		EAST ASIA AND THE PACIFIC	DISASTER PREPAREDNESS	10,000	CHECK			
(176)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(177)		EAST ASIA AND THE PACIFIC	WILDFIRE RELIEF	10,000	CHECK			
(178)		EAST ASIA AND THE PACIFIC	WILDFIRE RELIEF	10,000	CHECK			
(179)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(180)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			

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Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
(181)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(182)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(183)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(184)		EAST ASIA AND THE PACIFIC	SUPPORT FOR SCHOOL BASED ANTI-DRUG PROGRAM	9,967	CHECK			
(185)		EAST ASIA AND THE PACIFIC	SPECIAL EVENT FOR UNDERPRIVILEGE D TO ATTEND OPERA	9,868	CHECK			
(186)		EAST ASIA AND THE PACIFIC	EQUIPPING SCHOOL WITH LIFE JACKETS	9,630	CHECK			
(187)		EAST ASIA AND THE PACIFIC	FOOD SUPPORT FOR FOOD BANK	9,543	CHECK			
(188)		EAST ASIA AND THE PACIFIC	DIABETES AWARENESS WITH ROGAINE ACTIVITY	9,469	CHECK			
(189)		EAST ASIA AND THE PACIFIC	DONATE WATER HOSE AND DIVING EQUIPMENT FOR FIRE DEPARTMENT	9,450	CHECK			
(190)		EAST ASIA AND THE PACIFIC	SCHOLARSHIP FOR LOW- INCOME STUDENTS	9,448	CHECK			
(191)		EAST ASIA AND THE PACIFIC	DONATE AIR PURIFIERS TO LOCAL PUBLIC HEALTH CENTER	9,225	CHECK			
(192)		EAST ASIA AND THE PACIFIC	DELIVERY OF UNIFORMS TO PARTICIPATING ATHLETES IN THE NATIONAL PARALYMPIC GAMES	9,157	CHECK			
(193)		EAST ASIA AND THE PACIFIC	VEHICLE FOR WELFARE ASSOCIATION	9,000	CHECK			
(194)		EAST ASIA AND THE PACIFIC	GROUP HOME RENOVATION PROJECT	9,000	CHECK			
(195)		EAST ASIA AND THE PACIFIC	COVID-19 RELIEF	8,583	CHECK			
(196)		EAST ASIA AND THE PACIFIC	PROVIDE LUNCH BOX FOR LOW- INCOME FAMILIES	8,565	CHECK			
(197)		EAST ASIA AND THE PACIFIC	DONATE MEDICAL EQUIPMENT, WINTER SUPPLIES, MEALS AND MASKS	8,504	CHECK			
(198)		EAST ASIA AND THE PACIFIC	CONSTRUCTION OF BUS STOP SHELTER FOR HEALTH CENTER	8,500	CHECK			
(199)		EAST ASIA AND THE PACIFIC	DISASTER PREPAREDNESS	8,109	CHECK			
(200)		EAST ASIA AND THE PACIFIC	SUPPORT MEDICAL EXPENSE FOR SICK CHILDREN	8,070	CHECK			
(201)		EAST ASIA AND THE PACIFIC	NEWSPAPER SUBSCRIPTIONS FOR SCHOOLS	8,035	CHECK			
(202)		EAST ASIA AND	PURCHASE A	7,801	CHECK			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
		THE PACIFIC	FOOD DELIVERY TRUCK FOR WELFARE CENTER FOR ELDERLY					
(203)		EAST ASIA AND THE PACIFIC	EQUIPPING EMS WITH AUTOMATIC CARDIOPULMONA RY RESUSCITATION MACHINE	7,800	CHECK			
(204)		EAST ASIA AND THE PACIFIC	SCHOLARSHIPS AND LEARNING EXPENSES FOR CHILDREN FROM LOW-INCOME FAMILIES	7,665	CHECK			
(205)		EAST ASIA AND THE PACIFIC	WHEELCHAIRS FOR HOSPITAL	7,509	CHECK			
(206)		EAST ASIA AND THE PACIFIC	DISTRIBUTE SUPPLIES TO CARE FOR DISADVANTAGED FAMILIES AT THE WINTER OF THE END OF YEAR	7,350	CHECK			
(207)		EAST ASIA AND THE PACIFIC	INSTALLING COMMUNITY PARK SIGN	7,230	CHECK			
(208)		EAST ASIA AND THE PACIFIC	LIONS QUEST	7,200	CHECK			
(209)		EAST ASIA AND THE PACIFIC	DONATE RICE TO LOW-INCOME FAMILIES	7,200	CHECK			
(210)		EAST ASIA AND THE PACIFIC	DONATE VEHICLE FOR WELFARE HOME FOR DISADVANTAGED CHILDREN	7,050	CHECK			
(211)		EAST ASIA AND THE PACIFIC	COMPUTERS FOR LOW-INCOME STUDENTS	7,000	CHECK			
(212)		EAST ASIA AND THE PACIFIC	PROJECT TO INSTALL LIGHTS IN A LOCAL PARK	6,945	CHECK			
(213)		EAST ASIA AND THE PACIFIC	DISASTER INVESTIGATION VEHICLE FOR NEW TAIPEI CITY FIRE DEPARTMENT	6,750	CHECK			
(214)		EAST ASIA AND THE PACIFIC	SCHOLARSHIPS AND LUNCH PARTY FOR VULNERABLE CHILDREN	6,713	CHECK			
(215)		EAST ASIA AND THE PACIFIC	EQUIPPING SCHOOL WITH INTERACTIVE TOUCH SCREENS	6,671	CHECK			
(216)		EAST ASIA AND THE PACIFIC	DONATE TO THE WORLD PEACE ASSOCIATION, SUMMER SUPPLIES FOR CHILDREN FROM DISADVANTAGED AND MARGINALIZED FAMILIES	6,650	CHECK			
(217)		EAST ASIA AND THE PACIFIC	DONATE BASKETBALL EQUIPMENT TO ASSOCIATION	6,600	CHECK			
(218)		EAST ASIA AND THE PACIFIC	SUICIDE PREVENTION	6,596	CHECK			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
			SYMPOSIUM					
(219)		EAST ASIA AND THE PACIFIC	PROVIDE EYE GLASSES FOR LOW-INCOME FAMILY CHILDREN	6,450	CHECK			
(220)		EAST ASIA AND THE PACIFIC	DONATE WELFARE VEHICLE-W/ TOYOTA LC	6,442	CHECK			
(221)		EAST ASIA AND THE PACIFIC	12-PASSENGER STAREX VEHICLE FOR VISUALLY IMPAIRED PEOPLE	6,423	CHECK			
(222)		EAST ASIA AND THE PACIFIC	SUPPORT FOR LOCAL SCHOOLS FOR THE VISUALLY IMPAIRED	6,400	CHECK			
(223)		EAST ASIA AND THE PACIFIC	VEHICLE FOR CHILDREN & FAMILY SERVICE ORGANIZATION	6,324	CHECK			
(224)		EAST ASIA AND THE PACIFIC	DONATION OF SCHOOL NAME PLATES TO LOCAL JUNIOR HIGH SCHOOLS MERGING INTO NEW SCHOOLS	6,164	CHECK			
(225)		EAST ASIA AND THE PACIFIC	EQUIP TAINAN CITY FIRE BUREAU WITH MASKS	6,150	CHECK			
(226)		EAST ASIA AND THE PACIFIC	PURCHASE RICE FOR LOW- INCOME FAMILIES	6,150	CHECK			
(227)		EAST ASIA AND THE PACIFIC	SUSTAINABLE DEVELOPMENT GOALS AWARENESS PROGRAM	6,042	CHECK			
(228)		EAST ASIA AND THE PACIFIC	HOLIDAY BAND CONCERT FOR HOSPITALS AND PUBLIC SPACES.	6,000	CHECK			
(229)		EAST ASIA AND THE PACIFIC	BOOK DONATION TO ELEMENTARY SCHOOLS	6,000	CHECK			
(230)		EAST ASIA AND THE PACIFIC	WHEEL CHAIRS FOR LOCAL NURSING HOME	6,000	CHECK			
(231)		EAST ASIA AND THE PACIFIC	COVID-19 RELIEF	6,000	CHECK			
(232)		EAST ASIA AND THE PACIFIC	SCHOOL ANTI- DRUG PROGRAM	6,000	CHECK			
(233)		EAST ASIA AND THE PACIFIC	PROMOTE GUIDE DOG ASSOCIATION	5,985	CHECK			
(234)		EAST ASIA AND THE PACIFIC	LIONS QUEST	5,892	CHECK			
(235)		EAST ASIA AND THE PACIFIC	FOOD SUPPORT FOR LOW- INCOME FAMILIES	5,844	CHECK			
(236)		EAST ASIA AND THE PACIFIC	REMODEL EDUCATIONAL PARK FOR DISADVANTAGED CHILDREN	5,750	CHECK			
(237)		EAST ASIA AND THE PACIFIC	BOOKSHELVES FOR LIBRARY	5,627	CHECK			
(238)		EAST ASIA AND THE PACIFIC	COVID-19 RELIEF	5,580	CHECK			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
(239)		EAST ASIA AND THE PACIFIC	DONATE RICE, KIMCHI AND FIRST AID KIT TO LOW-INCOME ELDERLY	5,520	CHECK			
(240)		EAST ASIA AND THE PACIFIC	PROMOTE SERVICE DOGS FOR PEOPLE WITH DISABILITIES	5,501	CHECK			
(241)		EAST ASIA AND THE PACIFIC	FOOD SUPPORT FOR LOW- INCOME STUDENTS	5,500	CHECK			
(242)		EAST ASIA AND THE PACIFIC	SUPPORT FOR KAKOGAWA SOCIAL WELFARE ASSOCIATION	5,450	CHECK			
(243)		EAST ASIA AND THE PACIFIC	INSTALLING AEDS IN PUBLIC SPACES	5,400	CHECK			
(244)		EAST ASIA AND THE PACIFIC	SUPPORT FOR LOW-INCOME FAMILIES	5,400	CHECK			
(245)		EAST ASIA AND THE PACIFIC	YOUTH BASEBALL TOURNAMENT	5,346	CHECK			
(246)		EAST ASIA AND THE PACIFIC	INSTALL A STORAGE IN LOCAL COMMUNITY FOR AFTER DISASTERS	5,340	CHECK			
(247)		EAST ASIA AND THE PACIFIC	RENOVATION OF BIRD WATCHING TOWER IN PARK	5,307	CHECK			
(248)		EAST ASIA AND THE PACIFIC	PURCHASE DISASTER AND WELFARE SERVICE VEHICLE	5,253	CHECK			
(249)		EAST ASIA AND THE PACIFIC	TRAFFIC SAFETY ITEMS TO PATROL TRAFFIC FOR SCHOOLS	5,250	CHECK			
(250)		EAST ASIA AND THE PACIFIC	DELIVERY OF GOODS AND SERVING OF JJAJANGMYEONG TO DISADVANTAGED CHILDREN AND CHILDREN WITH DISABILITIES	5,205	CHECK			
(251)		EAST ASIA AND THE PACIFIC	DONATE VENTILATOR TO MIN-SHENG HOSPITAL	5,100	CHECK			
(252)		EAST ASIA AND THE PACIFIC	DONATION OF STROLLERS TO THE PORT OF NAGOYA PUBLIC AQUARIUM	5,073	CHECK			
(253)		EAST ASIA AND THE PACIFIC	PURCHASE DESKS AND CHAIRS TO LOW- INCOME FAMILIES	5,050	CHECK			
(254)		EAST ASIA AND THE PACIFIC	SCHOLARSHIPS FOR LOW- INCOME STUDENTS	5,037	CHECK			
(255)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	330,000	WIRE			
(256)		EUROPE (INCLUDING	REFUGEE RELIEF	309,125	ELECTRONIC			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
		ICELAND AND GREENLAND)						,
(257)		EUROPE (INCLUDING ICELAND AND GREENLAND)	UNODC LIONS QUEST PARTNERSHIP - CROATIA 2022	157,983	ELECTRONIC			
(258)		EUROPE (INCLUDING ICELAND AND GREENLAND)	MOBILE DIABETES SCREENING VEHICLE TURKEY	112,667	WIRE			
(259)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CLEAN WATER PROJECT IN TAJIKISTAN - AYNI	101,729	WIRE			
(260)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RENOVATE SHELTER FOR HOMELESS PEOPLE RECOVERING FROM TUBERCULOSIS	100,000	ELECTRONIC			
(261)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EUROPEAN FLOODING DISASTER	100,000	ELECTRONIC			
(262)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP FOOD BANK WITH REFRIGERATED VEHICLE	100,000	ELECTRONIC			
(263)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP SWEDISH LIONS TENT PROGRAM	100,000	WIRE			
(264)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CLEAN WATER PROJECT IN TAJIKISTAN	91,980	WIRE			
(265)		EUROPE (INCLUDING ICELAND AND GREENLAND)	POTABLE WATER PROJECT IN SOMALIA	87,599	ELECTRONIC			
(266)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CLEAN WATER PROJECT IN TAJIKISTAN - HISSOR	81,982	WIRE			
(267)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CLEAN WATER IN TAJIKISTAN - HISSOR	81,982	WIRE			
(268)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CLEAN WATER IN TAJIKISTAN - SARVODA	78,489	WIRE			
(269)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CLEAN WATER PROJECT IN KENYA	76,070	ELECTRONIC			
(270)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	64,890	WIRE			
(271)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CONSTRUCT SCHOOL IN TOGO	64,099	ELECTRONIC			
(272)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP CHILD FRIENDLY PLAY CENTER WITH VEHICLE AND FURNISHINGS	54,055	WIRE			
(273)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EXPAND AND EQUIP DIABETES CENTER AT BRONI HOSPITAL	52,909	ELECTRONIC			
(274)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CLEAN WATER PROJECT IN TAJIKISTAN	51,621	WIRE			
(275)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST	48,773	WIRE			
(276)		EUROPE (INCLUDING ICELAND AND GREENLAND)	BULGARIA AGAINST DIABETES	46,250	ELECTRONIC			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
(277)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RENOVATE SCHOOL IN RURAL ROMANIA	44,825	ELECTRONIC			
(278)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP FOOD PROGRAM WITH REFRIGERATED VEHICLE	41,175	ELECTRONIC			
(279)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP NEUROLOGY LAB	39,229	ELECTRONIC			
(280)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FURNISH TWO RESIDENTIAL UNITS FOR THE DISABLED	35,910	ELECTRONIC			
(281)		EUROPE (INCLUDING ICELAND AND GREENLAND)	SENSORY ROOM FOR DISABLED CHILDREN	35,121	ELECTRONIC			
(282)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EXPAND A SOCIAL CENTER'S MEAL DELIVERY PROGRAM	34,276	ELECTRONIC			
(283)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE VAN FOR FOOD BANK	32,920	ELECTRONIC			
(284)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CONSTRUCT MATERNITY IN ZAMBIA	30,646	WIRE			
(285)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EXPAND SOUP KITCHEN	30,146	WIRE			
(286)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FURNISH TEMPORARY HOUSING FOR FAMILIES IN NEED	30,002	ELECTRONIC			
(287)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FURNISH APARTMENTS FOR FAMILIES OF CHILDREN WITH CANCER	27,483	ELECTRONIC			
(288)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ESTABLISH VOCATIONAL TRAINING PROGRAM FOR THE BLIND	26,633	ELECTRONIC			
(289)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP NEONATAL DEPARTMENT - EGE UNIVERSITY HOSPITAL	26,600	WIRE			
(290)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RENOVATE PEDIATRIC ONCOLOGY DEPARTMENT	26,002	ELECTRONIC			
(291)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CONSTRUCT SCHOOL IN DEMOCRATIC REPUBLIC OF CONGO	25,820	ELECTRONIC			
(292)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	25,000	ELECTRONIC			
(293)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	25,000	ELECTRONIC			
(294)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP PEDIATRIC CANCER HOSPITAL	24,356	WIRE			
(295)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	24,245	ELECTRONIC			
(296)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EUROPEAN FLOODING DISASTER	23,000	ELECTRONIC			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
(297)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE TRANSPORT VEHICLE FOR THE DISABLED	21,527	ELECTRONIC			
(298)		EUROPE (INCLUDING ICELAND AND GREENLAND)	COMMUNITY RECOVERY	20,000	ELECTRONIC			
(299)		EUROPE (INCLUDING ICELAND AND GREENLAND)	COMMUNITY RECOVERY	20,000	ELECTRONIC			
(300)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RENOVATE SCHOOL IN DEMOCRATIC REPUBLIC OF CONGO (LOCAL MATCH 2)	19,350	ELECTRONIC			
(301)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP SENSORY ROOM CENTER FOR DISABLED	19,300	ELECTRONIC			
(302)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP HOSPITAL IN INDIA	18,647	ELECTRONIC			
(303)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ESTABLISH DIGITAL LIBRARY FOR THE DISABLED	18,028	ELECTRONIC			
(304)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP CHILDREN'S HOSPICE AT HOSPITAL IN TURIN	17,652	ELECTRONIC			
(305)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST	17,205	WIRE			
(306)		EUROPE (INCLUDING ICELAND AND GREENLAND)	VEHICLE TO TRANSPORT PEOPLE WITH DISABILITIES	17,003	ELECTRONIC			
(307)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE TRANSPORT VEHICLE FOR SANTA MARIA ASSUNTA PARISH	15,975	ELECTRONIC			
(308)		EUROPE (INCLUDING ICELAND AND GREENLAND)	UPGRADE KITCHEN FACILITIES AT FIVE DAYCARE CENTERS	15,172	WIRE			
(309)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(310)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(311)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(312)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(313)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(314)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(315)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(316)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(317)		EUROPE (INCLUDING	REFUGEE RELIEF	15,000	ELECTRONIC			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
		ICELAND AND GREENLAND)						
(318)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(319)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(320)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(321)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(322)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(323)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(324)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(325)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(326)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(327)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(328)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(329)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(330)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(331)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ELECTRONIC			
(332)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	WIRE			
(333)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	WIRE			
(334)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP NURSERY SCHOOL	14,896	ELECTRONIC			
(335)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE RETINAL CAMERA	14,200	ELECTRONIC			
(336)		EUROPE (INCLUDING ICELAND AND GREENLAND)	HYDROTHERAPY POOL FOR THE DISABLED	13,996	ELECTRONIC			
(337)		EUROPE (INCLUDING ICELAND AND GREENLAND)	UPGRADE NATIONAL DIABETES CLINICS IN DEDOCANESE ISLANDS, GREECE	13,320	ELECTRONIC			
(338)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FURNISH PEDIATRIC ONCOLOGY WARD & FAMILY STAY HOME	13,310	ELECTRONIC			
(339)		EUROPE (INCLUDING	EQUIP MOBILE EYE CLINIC	12,936	ELECTRONIC			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant			Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
		ICELAND AND GREENLAND)						
(340)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE COMPUTERS FOR SCHOOL IN GUATEMALA	12,000	ELECTRONIC			
(341)		EUROPE (INCLUDING ICELAND AND GREENLAND)	UPDATE COMPUTER TRAINING CENTER FOR BLIND AND VISUALLY IMPAIRED	11,768	ELECTRONIC			
(342)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ALL-INCLUSIVE PLAYGROUND	11,764	ELECTRONIC			
(343)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP LIONS EYE BANK	10,885	ELECTRONIC			
(344)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP PEDIATRIC UNIT AT D. ESTEFANIA HOSPITAL	10,643	ELECTRONIC			
(345)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GROUP CARE EDUCATIONAL PROGRAM IN TURIN	10,500	ELECTRONIC			
(346)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP OPHTHALMOLOG Y IN IZMIR	10,050	WIRE			
(347)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FLOOD RELIEF	10,000	ELECTRONIC			
(348)		EUROPE (INCLUDING ICELAND AND GREENLAND)	WILDFIRE RELIEF	10,000	ELECTRONIC			
(349)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TYPE 1 DIABETES YOUTH CAMPS CRETE	10,000	ELECTRONIC			
(350)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FLOOD RELIEF	10,000	WIRE			
(351)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE EQUIPMENT FOR OPHTHALMOLOG Y	10,000	WIRE			
(352)		EUROPE (INCLUDING ICELAND AND GREENLAND)	WILDFIRE RELIEF	10,000	WIRE			
(353)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FLOOD RELIEF	10,000	WIRE			
(354)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP CENTER FOR AUTISTIC CHILDREN	10,000	WIRE			
(355)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ART THERAPY WORKSHOP FOR UKRAINIAN REFUGEE CHILDREN	8,450	ELECTRONIC			
(356)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FLASHLIGHTS FOR SEARCH & RESCUE TEAM	7,700	ELECTRONIC			
(357)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PSYCHOTHERAP Y SERVICES FOR CHILDREN IMPACTED BY COVID-19	6,400	6,400 ELECTRONIC			
(358)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EST. WEB RADIO PROGRAM FOR THE DISABLED	5,500	ELECTRONIC			
(359)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GYM EQUIPMENT FOR CHILD CANCER FAMILY	5,500	ELECTRONIC			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
			HOME					
(360)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PARENT BEDS FOR PEDIATRIC HOSPITAL	5,200	ELECTRONIC			
(361)		MIDDLE EAST AND NORTH AFRICA	FRANCOPHONE TRAINING INSTITUTE FOR COMMUNITY EYE CARE MANAGEMENT	442,410	WIRE			
(362)		MIDDLE EAST AND NORTH AFRICA	LEBANON EXPLOSION	314,400	WIRE			
(363)		MIDDLE EAST AND NORTH AFRICA	LIONS DIABETIC RETINOPATHY PROJECT IN ORIENTAL REGION, MOROCCO	192,000	WIRE			
(364)		MIDDLE EAST AND NORTH AFRICA	EXPAND SCHOOL FEEDING PROGRAM	99,750	WIRE			
(365)		MIDDLE EAST AND NORTH AFRICA	PURCHASE RETINAL CAMERA FOR ASSUTA ASHOD UNIVERSITY HOSPITAL	87,165	WIRE			
(366)		MIDDLE EAST AND NORTH AFRICA	PURCHASE DIALYSIS MACHINES FOR SOHAG HOSPITAL	63,000	WIRE			
(367)		MIDDLE EAST AND NORTH AFRICA	UPGRADE HOSPITAL RECREATIONAL SPACE	33,045	WIRE			
(368)		MIDDLE EAST AND NORTH AFRICA	WILDFIRE RELIEF	10,000	WIRE			
(369)		NORTH AMERICA (CANADA & MEXICO ONLY)	RENOVATIONS AT FAMILY PATIENT GUESTHOUSE	81,600	CHECK			
(370)		NORTH AMERICA (CANADA & MEXICO ONLY)	ALL INCLUSIVE PLAYGROUND	72,050	CHECK			
(371)		NORTH AMERICA (CANADA & MEXICO ONLY)	EQUIP BC CANCER FOUNDATION	64,649	CHECK			
(372)		NORTH AMERICA (CANADA & MEXICO ONLY)	EQUIPMENT FOR PEDIATRIC ONCOLOGY UNIT AT HOSPITAL	53,040	CHECK			
(373)		NORTH AMERICA (CANADA & MEXICO ONLY)	EQUIP HOSPICE HOUSE	39,544	CHECK			
(374)		NORTH AMERICA (CANADA & MEXICO ONLY)	PORTABLE ULTRASOUND FOR EASTERN MEMORIAL HOSPITAL	21,637	CHECK			
(375)		NORTH AMERICA (CANADA & MEXICO ONLY)	CATARACT SURGERIES	17,591	WIRE			
(376)		NORTH AMERICA (CANADA & MEXICO ONLY)	FURNITURE FOR FEEDING CENTER	16,275	CHECK	CHECK		
(377)		NORTH AMERICA (CANADA & MEXICO ONLY)	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2021	15,000	ELECTRONIC			
(378)		NORTH AMERICA (CANADA & MEXICO ONLY)	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2021	15,000	000 ELECTRONIC			
(379)		NORTH AMERICA (CANADA & MEXICO ONLY)	HURRICANE RELIEF	10,000	000 WIRE			
(380)		NORTH AMERICA	FLOOD RELIEF	10,000	WIRE			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
		(CANADA & MEXICO ONLY)						,
(381)		NORTH AMERICA (CANADA & MEXICO ONLY)	FLOOD RELIEF	10,000	WIRE			
(382)		NORTH AMERICA (CANADA & MEXICO ONLY)	FLOOD RELIEF	10,000	WIRE			
(383)		NORTH AMERICA (CANADA & MEXICO ONLY)	HURRICANE RELIEF	10,000	WIRE			
(384)		NORTH AMERICA (CANADA & MEXICO ONLY)	HURRICANE RELIEF	10,000	WIRE			
(385)		NORTH AMERICA (CANADA & MEXICO ONLY)	HURRICANE RELIEF	10,000	WIRE			
(386)		NORTH AMERICA (CANADA & MEXICO ONLY)	DISASTER PREPAREDNESS	8,700	ELECTRONIC			
(387)		NORTH AMERICA (CANADA & MEXICO ONLY)	MATCHING FUNDS FOR MAT20906/5-SKS	7,032	ELECTRONIC			
(388)		NORTH AMERICA (CANADA & MEXICO ONLY)	CATARACT SURGERIES	5,500	WIRE			
(389)		RUSSIA AND NEIGHBORING STATES	LIONS QUEST	150,000	WIRE			
(390)		RUSSIA AND NEIGHBORING STATES	INTERNALLY DISPLACED PERSONS RELIEF	150,000	WIRE			
(391)		RUSSIA AND NEIGHBORING STATES	INTERNALLY DISPLACED PERSONS RELIEF	100,000	WIRE			
(392)		RUSSIA AND NEIGHBORING STATES	EQUIP SENSORY ROOM FOR IRC FOR THE DISABLED	97,000	WIRE			
(393)		RUSSIA AND NEIGHBORING STATES	LIONS QUEST	88,500	WIRE			
(394)		RUSSIA AND NEIGHBORING STATES	INTERNALLY DISPLACED PERSONS RELIEF	50,000	WIRE			
(395)		RUSSIA AND NEIGHBORING STATES	REFUGEE RELIEF	15,000	WIRE			
(396)		RUSSIA AND NEIGHBORING STATES	REFUGEE RELIEF	15,000	WIRE			
(397)		RUSSIA AND NEIGHBORING STATES	INTERNALLY DISPLACED PERSONS RELIEF	15,000	WIRE			
(398)		RUSSIA AND NEIGHBORING STATES	INTERNALLY DISPLACED PERSONS RELIEF	15,000	WIRE			
(399)		RUSSIA AND NEIGHBORING STATES	INTERNALLY DISPLACED PERSONS RELIEF	15,000	WIRE			
(400)		RUSSIA AND NEIGHBORING STATES	LIONS QUEST	12,500	WIRE			
(401)		SOUTH AMERICA	EXPAND DIABETIC RETINOPATHY SERVICES AT OURO PRETO MUNICIPAL EYE CLINIC	207,620	ELECTRONIC			
(402)		SOUTH AMERICA	EXPAND DIABETIC RETINOPATHY SERVICES IN GOIANIA	206,213	CHECK			
(403)		SOUTH AMERICA	EXPAND RURAL HOSPITAL	100,000	WIRE			
(404)		SOUTH AMERICA	PURCHASE EQUIPMENT FOR HOSPITAL	98,747	CHECK			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
(405)		SOUTH AMERICA	RENOVATE SENIOR LIVING FACILITY	93,568	CHECK			
(406)		SOUTH AMERICA	EXPANSION OF SUPPORT HOUSE	80,602	CHECK			
(407)		SOUTH AMERICA	UPDATE HOSPITAL DIAGNOSTIC EQUIPMENT	75,000	CHECK			
(408)		SOUTH AMERICA	SÃO VICENTE SCHOOL PROJECT	75,000	CHECK			
(409)		SOUTH AMERICA	HEMODIALYSIS EQUIPMENT FOR SANTA CASA HOSPITAL	71,228	CHECK			
(410)		SOUTH AMERICA	ESTABLISH VOCATIONAL TRAINING FOR JUVENILE DETAINEES	68,464	WIRE			
(411)		SOUTH AMERICA	EXPAND AND EQUIP CENTER FOR DISABLED CHILDREN	56,069	CHECK			
(412)		SOUTH AMERICA	PURCHASE AMBULANCE FOR HOSPITAL	53,635	CHECK			
(413)		SOUTH AMERICA	EQUIPMENT FOR CHILDHOOD CANCER HOSTEL	51,109	WIRE			
(414)		SOUTH AMERICA	CONSTRUCT NUTRITIONAL CENTER FOR THE ELDERLY	51,070	WIRE			
(415)		SOUTH AMERICA	RAPID ASSESSMENT OF AVOIDABLE BLINDNESS (RAAB) IN PARAGUAY	49,050	WIRE			
(416)		SOUTH AMERICA	X-RAY EQUIPMENT FOR HOSPITAL	48,787	WIRE			
(417)		SOUTH AMERICA	UPGRADE SENIOR HOME IN TELEFERIC	42,381	CHECK			
(418)		SOUTH AMERICA	EQUIP UROLOGY UNIT	28,769	CHECK			
(419)		SOUTH AMERICA	EQUIP CLASSROOMS FOR CHILDREN WITH CANCER	23,330	CHECK			
(420)		SOUTH AMERICA	ESTABLISH LAUNDRY UNIT AT HOME FOR SENIORS	22,848	CHECK			
(421)		SOUTH AMERICA	HOME RESTORATIONS AFTER FLOODS	20,000	CHECK			
(422)		SOUTH AMERICA	EXPAND AND FURNISH HOSPITAL	15,612	CHECK			
(423)		SOUTH AMERICA	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2021	15,000	ELECTRONIC			
(424)		SOUTH AMERICA	RENOVATE AND EQUIP LIONS PHYSIOTHERAPY CENTER	11,875	5 CHECK			
(425)		SOUTH AMERICA	DENTAL EQUIPMENT FOR	11,781	CHECK			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
			CENTER SERVING AT-RISK YOUTH AND THEIR FAMILIES - AMMA					
(426)		SOUTH AMERICA	EXPAND AND EQUIP LIONS DENTAL CLINIC	JIP LIONS 10,970 WIRE				
(427)		SOUTH AMERICA	FLOOD RELIEF	10,000	ELECTRONIC			
(428)		SOUTH AMERICA	ROOF RESTORATIONS		CHECK			
(429)		SOUTH AMERICA	FLOOD RELIEF		CHECK			
(430)		SOUTH AMERICA	STORM RELIEF		CHECK			
(431)		SOUTH AMERICA	FLOOD RELIEF		CHECK			
(432)		SOUTH AMERICA	FLOOD RELIEF		CHECK			
(433)		SOUTH AMERICA SOUTH AMERICA	FLOOD RELIEF		CHECK			
(434)		SOUTH AMERICA	FLOOD RELIEF FLOOD RELIEF		CHECK			
(435) (436)		SOUTH AMERICA	FLOOD RELIEF		CHECK			
(437)		SOUTH AMERICA	FLOOD RELIEF		CHECK			
(438)		SOUTH AMERICA	FLOOD RELIEF		CHECK			
(439)		SOUTH AMERICA	ROOF RESTORATIONS		CHECK			
(440)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(441)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(442)		SOUTH AMERICA	FLOOD RELIEF		CHECK			
(443)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(444)		SOUTH AMERICA	WILDFIRE RELIEF	10,000				
(445)		SOUTH AMERICA	FLOOD RELIEF	10,000				
(446)		SOUTH AMERICA	FIRE RELIEF	10,000				
(447)		SOUTH AMERICA SOUTH AMERICA	WILDFIRE RELIEF FLOOD RELIEF	10,000				
(448) (449)		SOUTH AMERICA	FLOOD RELIEF	10,000 10,000				
(449)		SOUTH AMERICA	FLOOD RELIEF	10,000				
(451)		SOUTH AMERICA	STORM RELIEF	10,000				
(452)		SOUTH AMERICA	STORM RELIEF	10,000				
(453)		SOUTH AMERICA	EARTHQUAKE RELIEF	10,000				
(454)		SOUTH AMERICA	EARTHQUAKE RELIEF	10,000	WIRE			
(455)		SOUTH AMERICA	EARTHQUAKE RELIEF	10,000	WIRE			
(456)		SOUTH AMERICA	FLOOD RELIEF	10,000				
(457)		SOUTH AMERICA	FLOOD RELIEF	10,000				
(458)		SOUTH ASIA	COVID-19 RELIEF	156,080	WIRE			
(459)		SOUTH ASIA	CONSTRUCT PALLIATIVE CARE CENTER FOR CHILDREN WITH CANCER	150,000	150,000 CHECK			
(460)		SOUTH ASIA	LIONS QUEST	150,000	WIRE			
(461)		SOUTH ASIA	LIONS QUEST	150,000	WIRE			
(462)		SOUTH ASIA	CONSTRUCT GUEST HOUSE AT B.P. KOIRALA MEMORIAL CANCER HOSPITAL					
(463)		SOUTH ASIA	UPGRADE LIONS EYE HOSPITAL PARASIA	103,885	33,885 WIRE			
(464)		SOUTH ASIA	CONSTRUCT KITCHEN AND DINING HALL FOR SECONDARY	100,000	CHECK			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
			SCHOOL					
(465)		SOUTH ASIA	IMPACT OF CATARACT SURGERY ON PRODUCTIVITY: A MULTICENTER INTERVENTION STUDY IN INDIA, BRAZIL AND MEXICO	99,126	99,126 WIRE			
(466)		SOUTH ASIA	UPGRADE LAHAN CANCER CARE CENTER	97,500	CHECK			
(467)		SOUTH ASIA	UPGRADE CANCER HOSPICE CENTER IN NEPAL	94,745	CHECK			
(468)		SOUTH ASIA	UPGRADE ANNASAHEB GALATGE LIONS BLOOD BANK	87,539	WIRE			
(469)		SOUTH ASIA	EXPAND PEDIATRIC PALLIATIVE CARE CENTER	87,300	WIRE			
(470)		SOUTH ASIA	COVID-19 RELIEF	87,190	WIRE			
(471)		SOUTH ASIA	J & J SIGHT FOR KIDS - KERALA	82,410	CHECK			
(472)		SOUTH ASIA	CONSTRUCT KITCHEN AND DINING HALL FOR EDUCATIONAL INSTITUTION	75,000	WIRE			
(473)		SOUTH ASIA	EQUIP ICU UNIT MANNAR HOSPITAL IN SRI LANKA	74,582	CHECK			
(474)		SOUTH ASIA	UPGRADE VOCATIONAL TRAINING FOR THE DISABLED	60,000	CHECK			
(475)		SOUTH ASIA	UPGRADE LIONS EYE HOSPITAL, PATRAN	45,541	WIRE			
(476)		SOUTH ASIA	COVID-19 RELIEF	31,058	WIRE			
(477)		SOUTH ASIA	UPGRADE LIONS CLUB OF POONA EYE HOSPITAL, PUNE	23,453	WIRE			
(478)		SOUTH ASIA	PURCHASE VEHICLE & EQUIPMENT FOR MOBILE FOOD PROGRAM	23,440	WIRE			
(479)		SOUTH ASIA	ESTABLISH A COMMUNITY KITCHEN	22,701	WIRE			
(480)		SOUTH ASIA	FLOOD RELIEF	10,000	CHECK			
(481)		SOUTH ASIA	LANDSLIDE RELIEF	10,000	CHECK			
(482)		SOUTH ASIA	FLOOD RELIEF	10,000	10,000 CHECK			
(483)		SOUTH ASIA	FLOOD RELIEF	10,000	CHECK			
(484)		SOUTH ASIA	LANDSLIDE RELIEF	10,000	000 CHECK			
(485)		SOUTH ASIA	FLOOD RELIEF	10,000	10,000 CHECK			
(486)		SOUTH ASIA	FLOOD RELIEF		000 CHECK			
(487)		SOUTH ASIA	FLOOD RELIEF		10,000 CHECK			
(488)		SOUTH ASIA	FLOOD RELIEF		CHECK			
(489)		SOUTH ASIA	FLOOD RELIEF		CHECK			
(490)		SOUTH ASIA	FLOOD RELIEF	10,000	CHECK			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
(491)		SOUTH ASIA	EARTHQUAKE RELIEF	10,000	WIRE			
(492)		SOUTH ASIA	FLOOD RELIEF	9,945	CHECK			
(493)		SOUTH ASIA	FLOOD RELIEF	9,927	CHECK			
(494)		SOUTH ASIA	ESTABLISH LIONS PARK	7,864	CHECK			
(495)		SOUTH ASIA	PURCHASE VEHICLE & EQUIPMENT FOR MOBILE FOOD PROGRAM (LOCAL MATCH)	7,813	WIRE			
(496)		SOUTH ASIA	BUILD TECHNICAL TRAINING FACILITY AT SANDAGALA SPECIAL SCHOOL	6,298	CHECK			
(497)		SUB-SAHARAN AFRICA	UPGRADE MILLENNIUM EYE CENTER, ONDO STATE	583,419	WIRE			
(498)		SUB-SAHARAN AFRICA	RIVER BLINDNESS ELIMINATION, ETHIOPIA	500,000	CHECK			
(499)		SUB-SAHARAN AFRICA	TRACHOMA ELIMINATION IN AMHARA REGIONAL STATE, ETHIOPIA	500,000	CHECK			
(500)		SUB-SAHARAN AFRICA	CENTRAL PROVINCE COMPREHENSIVE EYE CARE PROJECT	476,096	WIRE			
(501)		SUB-SAHARAN AFRICA	DIABETIC RETINOPATHY SCREENING AND TREATMENT IN BURUNDI	472,495	WIRE			
(502)		SUB-SAHARAN AFRICA	MD103 DRINKING WATER TOGO PROJECT	393,513	WIRE			
(503)		SUB-SAHARAN AFRICA	DEVELOPMENT OF SUSTAINABLE VISION CENTERS IN BOMI, MONTSERRADO AND MARGIBI COUNTIES, LIBERIA	299,142	WIRE			
(504)		SUB-SAHARAN AFRICA	SUPPORT FOR EYE CARE SYSTEM DEVELOPMENT IN NIGER	293,557	WIRE			
(505)		SUB-SAHARAN AFRICA	DEVELOPMENT OF SUSTAINABLE VISION CENTERS IN OGUN STATE, NIGERIA	267,545	WIRE			
(506)		SUB-SAHARAN AFRICA	MICEI EYE HEALTH PERSONNEL TRAINING PROGRAM FOR FRANCOPHONE AFRICA, PHASE II	227,898	WIRE			
(507)		SUB-SAHARAN AFRICA	UPGRADE WARRI CENTRAL HOSPITAL OPHTHALMOLOG Y DEPARTMENT, DELTA STATE	196,815				
(508)		SUB-SAHARAN	SFP2132/411-B:	191,487	WIRE			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant disbursement		Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
		AFRICA	SUPPLEMENTAL GRANT (LDSC)					
(509)	SUB-SAHARAN RUB		MEASLES RUBELLA INITIATIVE 2021	164,000	WIRE			
(510)		SUB-SAHARAN AFRICA	UPGRADE EYE CARE SERVICES AT YALGADO OUÉDRAOGO UNIVERSITY HOSPITAL CENTER IN OUAGADOUGOU (LDSC)	146,148	WIRE			
(511)		SUB-SAHARAN AFRICA	LIONS QUEST	135,000	WIRE			
(512)		SUB-SAHARAN AFRICA	EXPANSION OF COMPREHENSIVE DIABETES SERVICES IN IBADAN	132,199	WIRE			
(513)		SUB-SAHARAN AFRICA	LIONS QUEST	123,893	WIRE			
(514)		SUB-SAHARAN AFRICA	EXPANSION OF DIABETES SERVICES IN KAFUE AND CHILANGA DISTRICTS, ZAMBIA	112,501	WIRE			
(515)		SUB-SAHARAN AFRICA	EXPANSION OF COMPREHENSIVE DIABETES SERVICES IN CROSS RIVER STATE, NIGERIA	109,220	WIRE			
(516)		SUB-SAHARAN AFRICA	LIONS QUEST	107,962	WIRE			
(517)		SUB-SAHARAN AFRICA	UPGRADE MEDICAL CENTER IN SENEGAL	100,000	WIRE			
(518)		SUB-SAHARAN AFRICA	UPGRADE ORPHANS KISHAZE SCHOOL IN UGANDA	100,000	WIRE			
(519)		SUB-SAHARAN AFRICA	HOUSE EXTENSION FOR CHILDREN WITH CANCER	99,750	WIRE			
(520)		SUB-SAHARAN AFRICA	SMALL INCISION CATARACT SURGERY EFFICACY IN CAMPAIGN- BASED VERSUS URBAN HOSPITAL-BASED SETTINGS IN GHANA AND ETHIOPIA	99,200	99,200 ELECTRONIC			
(521)		SUB-SAHARAN AFRICA	EVALUATING TARGETED INVESTMENTS DIRECTED BY FEEDBACK FROM THE BOOST APP IN IMPROVING CATARACT SURGICAL OUTCOMES IN AFRICA	99,010	ELECTRONIC			
(522)		SUB-SAHARAN AFRICA	CONSTRUCTION CHILDREN'S CANCER PATIENT LODGING	97,506	WIRE			
(523)		SUB-SAHARAN AFRICA	ESTABLISH THE DIAB-ESPACE AT	71,892	WIRE			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
			LOANDJILI GENERAL HOSPITAL					
(524)		SUB-SAHARAN AFRICA	EXPAND YALGADO CHU CHILDHOOD CANCER	70,000	WIRE			
(525)		SUB-SAHARAN AFRICA	UPGRADE PAJOBI DISABLED SCHOOL IN UGANDA	63,559	WIRE			
(526)		SUB-SAHARAN AFRICA	UPGRADE EYE CARE SERVICES AT YALGADO OUEDRAOGO UNIVERSITY HOSPITAL CENTER IN OUAGADOUGOU	61,902	WIRE			
(527)		SUB-SAHARAN AFRICA	CLEAN WATER PROJECT IN SENEGAL	46,992	WIRE			
(528)		SUB-SAHARAN AFRICA	LIONS DIABETES SCREENING AND TREATMENT CENTER AT OFFA GENERAL HOSPITAL	42,999	WIRE			
(529)		SUB-SAHARAN AFRICA	CLEAN WATER PROJECT IN MALI	35,419	WIRE			
(530)		SUB-SAHARAN AFRICA	EXPANSION OF DIABETES SERVICES IN ADIAKE, BONGOUANOU, DUEKOU, AND KATIOLA, IVORY COAST	33,073	WIRE			
(531)		SUB-SAHARAN AFRICA	DIABETES AWARENESS, SCREENING AND TREATMENT IN IGANDO, LAGOS STATE	32,057	WIRE			
(532)		SUB-SAHARAN AFRICA	LIONS DIABETES AWARENESS AND PREVENTION PROJECT IN THE KAMPALA METROPOLITAN AREA	30,184	WIRE			
(533)		SUB-SAHARAN AFRICA	SCHOOL SCREENING PROJECT, TSHWANE DISTRICT, GAUTENG PROVINCE	27,816	WIRE			
(534)		SUB-SAHARAN AFRICA	DIABETES SCREENING AND AWARENESS IN NORTH KIVU AND SOUTH KIVU PROVINCES, DRC	23,918	WIRE			
(535)		SUB-SAHARAN AFRICA	DIABETES SCREENING, EDUCATION AND CAPACITY BUILDING IN TOGO	17,037	WIRE			
(536)		SUB-SAHARAN AFRICA	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2021	15,000	ELECTRONIC			
(537)		SUB-SAHARAN AFRICA	LIONS QUEST COMMUNITY	15,000	ELECTRONIC			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	nization section and Cash grant ca EIN cash grant ca disburs		Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)		
			PARTNERSHIP GRANT 2021					
(538)		SUB-SAHARAN AFRICA	SFP2087/413: SUPPLEMENTAL GRANT 2022	14,839	WIRE			
(539)		SUB-SAHARAN AFRICA	DIABETES SCREENING AND AWARENESS IN OUAGADOUGOU AND BOBO- DIOULASSO, BURKINA FASO	12,630	WIRE			
(540)		SUB-SAHARAN AFRICA	DISTRICT 403-A4 FIGHT AGAINST MALARIA IN BENIN	11,352	WIRE			
(541)		SUB-SAHARAN AFRICA	J & J SIGHT FOR KIDS - KENYA SUPPLEMENTAL (AUTOREFRACTO RS)	10,000	WIRE			
(542)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(543)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(544)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(545)		SUB-SAHARAN AFRICA	SCHOOL SCREENING PROJECT, WESTERN CAPE PROVINCE AND CAPE WINELANDS	10,000	WIRE			
(546)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(547)		SUB-SAHARAN AFRICA	CYCLONE RELIEF	10,000	WIRE			
(548)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(549)		SUB-SAHARAN AFRICA	DIABETES SCREENING AND AWARENESS IN OUAGADOUGOU AND BOBO- DIOULASSO, BURKINA FASO (LOCAL MATCH)	6,251	WIRE			
(550)		SUB-SAHARAN AFRICA	VISION SCREEN IN KWARA, NIGERIA	6,140	WIRE			
(551)		SUB-SAHARAN AFRICA	VISION SCREENING & AWARENESS IN IBADAN	5,206	WIRE			

## Part V

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

Return Reference - Identifier	Explanation
SCHEDULE F, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS	GRANT AWARDS ARE SUBJECT TO BOARD APPROVAL AND RECIPIENTS MUST MEET REQUIREMENTS NECESSARY TO RECEIVE SAID GRANT. LCIF STAFF MONITORS THE REQUIREMENTS ON A REGULAR BASIS TO ENSURE ALL AWARDS ARE PROPER. AFTER GRANTS ARE DISBURSED IN PART OR IN FULL, THE RECIPIENT MUST PROVIDE AN INTERIM OR FINAL REPORT, WHICH INCLUDES FINANCIAL DOCUMENTATION OF THE USE OF GRANT FUNDS AND LOCAL MATCHING FUNDS AND A NARRATIVE OF THE ACTIONS TAKEN IN DEVELOPING THE PROJECT. THE INTERIM OR FINAL REPORT IS INITIALLY REVIEWED AND APPROVED BY THE GRANT ADMINISTRATOR. THE REPORT IS THEN REVIEWED AND APPROVED BY THE DISTRICT CABINET (OR MULTIPLE DISTRICT COUNCIL) BEFORE SUBMISSION TO LCIF.
3 - METHOD ÚSED TÓ ACCOUNT FOR	CENTRAL AMERICA AND THE CARIBBEAN -ACCRUAL EAST ASIA AND THE PACIFIC -ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) -ACCRUAL MIDDLE EAST AND NORTH AFRICA -ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY) -ACCRUAL RUSSIA AND NEIGHBORING STATES -ACCRUAL SOUTH AMERICA -ACCRUAL SOUTH ASIA -ACCRUAL SUB-SAHARAN AFRICA -ACCRUAL
SCHEDULE F, PART II, LINE 1 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	CENTRAL AMERICA AND THE CARIBBEAN -ACCRUAL EAST ASIA AND THE PACIFIC -ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) -ACCRUAL MIDDLE EAST AND NORTH AFRICA -ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY) -ACCRUAL RUSSIA AND NEIGHBORING STATES -ACCRUAL SOUTH AMERICA -ACCRUAL SOUTH ASIA -ACCRUAL SUB-SAHARAN AFRICA -ACCRUAL

### **SCHEDULE I** (Form 990)

### **Grants and Other Assistance to Organizations. Governments. and Individuals in the United States** Complete if the organization answered "Yes" on Form 990. Part IV. line 21 or 22.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990.

Open to Public Inspection

Name of the organization **Employer identification number** LIONS CLUBS INTERNATIONAL FOUNDATION 23-7030455 **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ✓ Yes No Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990. Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of (g) Description of (h) Purpose of grant (book, FMV, appraisal, or government (if applicable) grant noncash assistance noncash assistance or assistance other) (1) SPECIAL OLYMPICS 1133 19TH ST NW, WASHINGTON, DC 20036 52-0889518 501 (C) 3 1,744,200 (SEE STATEMENT) (SEE STATEMENT) 31-1682275 501 (C) 3 250,000 (SEE STATEMENT) (3) LOUISIANA LIONS EYE FOUNDATION 1104 LORI DRIVE, SLIDELL, LA 70461 23-7384897 501 (C) 3 200,000 (SEE STATEMENT) (4) LIONS CLUBS INTERNATIONAL 300 W 22ND ST, OAK BROOK, IL 50263 36-1263962 501 (C) 4 175,000 AFGHAN ALLY RESETTLEMENT (5) RESEARCH TO PREVENT BLINDNESS, INC 150 S. POPLAR AVE, ELMHURST, IL 60126 13-3471559 501 (C) 3 150,000 (SEE STATEMENT) (6) GLOBAL HOPE 1102 BATES AVE., HOUSTON, TX 77023 74-1100555 501 (C) 3 100,000 GLOBAL HOPE PARTNERSHIP (7) DISTRICT 2 X1 408 GREENRIDGE DR., COPPELL, TX 75019-5714 23-7099350 501 (C) 4 100.000 MOBILE FOOD PANTRY (8) DISTRICT 26 M6 3633 W MORNINGSIDE PL, SPRINGFIELD, MO 65807 26-3305095 501 (C) 4 100.000 ALL INCLUSIVE PLAYGROUND (9) DISTRICT 5M 6 12408 SKYLINE DR, BURNSVILLE, MN 55337 23-7327790 501 (C) 4 100,000 EYE SURGERY SIMULATOR (10) MULTIPLE DISTRICT 33 43 STEWART TERRACE, BELMONT, MA 02478 83-0504460 501 (C) 4 100,000 (SEE STATEMENT) (11) DISTRICT 4 C5 5544 DALHART WAY, SACRAMENTO, CA 95835 94-2525213 501 (C) 4 100,000 (SEE STATEMENT) (SEE STATEMENT) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . . . . 12

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

Cat. No. 50055P

80 Schedule I (Form 990) 2021 Schedule I (Form 990) 2021

Part III	Grants and Other Assistance t Part III can be duplicated if addit	tional space is needed		o organization and	voica roo on ronn ooo,	
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1						
2						
3						
4						
5						
6						
7						
Part IV	Supplemental Information. Pro	vide the information re	equired in Part I. li	ne 2: Part III. colum	n (b): and any other additi	onal information.
SEE STAT	LINENT)					

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(12) DISTRICT 5M 4 516 N 10TH ST, MONTEVIDEO, MN 56265- 1619	41-1280401	501 (C) 4	100,000				CONSTRUCT GREENHOUSE FOR FOOD PRODUCTION AND EDUCATION
(13) DISTRICT 12 N 112 SKIATOOK WAY, LOUDON, TN 37774- 3171	23-7215448	501 (C) 4	100,000				CONSTRUCT ADULT DAY CENTER
(14) DISTRICT 1 H 1175 N BROAD ST, GALESBURG, IL 61401- 2728	36-3559600	501 (C) 4	100,000				CONSTRUCT A COLD STORAGE WAREHOUSE
(15) MULTIPLE DISTRICT 7 223 W. THIRD STREET, WEINER, AR 72479	23-7052631	501 (C) 4	100,000				RENOVATE WORLD SERVICES FOR THE BLIND GROUP HOME
(16) PANHANDLE OF TEXAS LIONS FOUNDATION PO BOX 489, WHEELER, TX 79096	75-2598929	501 (C) 3	100,000				KYLIE HINER MEMORIAL PLAYGROUND FOR CHILDREN WITH DISABILITIES
(17) DISTRICT 13 OH1 3003 FREYER RD., ELIDA, OH 45807	36-4839441	501 (C) 4	98,427				ALL INCLUSIVE PLAYGROUND
(18) DISTRICT 26 M1 212 ASH ST. PERRYVILLE, PERRYVILLE, MO 63775	43-6051716	501 (C) 4	84,000				EQUIP MISSOURI DELTA MEDICAL CENTER
(19) DISTRICT 43-K 203 W. WHITE OAK STREET, LIECTCHFIELD, KY 42577	31-0919835	501 (C) 4	81,270				MIDWESTERN WINTER TORNADO OUTBREAK
(20) DISTRICT 4 L2 11736 RANCHO VERDE DRIVE, WHITTIER, CA 90601-1907	23-7298664	501 (C) 4	80,270				EXPANSION OF WOMEN'S CRISIS CENTER
(21) DISTRICT 5M 8 320 AUGUSTA AVE., PAYNESVILLE, MN 56362	41-1390009	501 (C) 4	75,000				ALL INCLUSIVE PLAYGROUND
(22) DISTRICT 37 PO BOX 357, DENTON, MT 59430	38-3951273	501 (C) 4	75,000				PURCHASE AMBULANCE
(23) SPECIAL OLYMPICS 1133 19TH ST NW, WASHINGTON, DC 20036	52-0889518	501 (C) 3	66,667				AAOT AND SPECIAL OLYMPICS CARIBBEAN
(24) DISTRICT 4 C6 46133 MEADOWBROOK DR., KING CITY, CA 93930	77-0324761	501 (C) 4	66,000				MOBILE HEALTH UNIT
(25) DISTRICT 14 C 1236 WHITE BIRCH LN, CARLISLE, PA 17013-3580	23-7333013	501 (C) 4	60,000				EXPAND COLD STORAGE CAPACITY IN FOOD BANK NETWORK
(26) DISTRICT 1 M 2533 GEORGETOWN RD, DANVILLE, IL 61832	47-5499262	501 (C) 4	58,446				ALL INCLUSIVE PLAYGROUND
(27) QUARRY LIONS CLUBS P O BOX 561, SANDSTONE, MN 55072-0561	41-6038030	501 (C) 4	54,761				PANTHER PARK COMMUNITY DEVELOPMENT
(28) DISTRICT 27 B1 1901 S 8TH STREET, SHEBOYGAN, WI 53081	23-7159372	501 (C) 4	50,000				ALL INCLUSIVE PLAYGROUND (SURFACING)

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(29) DISTRICT 29 I P.O. BOX 988, FORT ASHBY, WV 26719	31-1077296	501 (C) 4	31,980				VEHICLE FOR FOOD PANTRY
(30) DISTRICT 20 Y 3 WEST ST, WINDSOR, NY 13865	82-2262906	501 (C) 4	29,625				UPGRADE TWO FOOD PANTRIES WITH COLD STORAGE
(31) DISTRICT 20 Y 3 WEST ST, WINDSOR, NY 13865-4330	82-2262906	501 (C) 4	26,546				EQUIP WAITING ROOM WITH CHILD FRIENDLY PLAYGROUND AND GAMES
(32) DISTRICT 1 M 621 W JASPER ST., PARIS, IL 61944	47-5499262	501 (C) 4	25,000				ALL INCLUSIVE PLAYGROUND
(33) MULTIPLE DISTRICT 20 6532 WILLS HOLLOW, LOCKPORT, NY 14094	16-6099328	501 (C) 4	21,030				EXPANSION OF PROJECT IDEAS
(34) DISTRICT 14 F 13301 N WATSON RUN RD, CONNEAUT LAKE, PA 16316-7015	23-7326285	501 (C) 4	20,244				MEADVILLE PROJECTS FOR THE BLIND
(35) DISTRICT 2 A3 5810 HITCHING POST, BROWNSVILLE, TX 78526-4253	23-7151923	501 (C) 4	20,000				ALL INCLUSIVE PLAYGROUND
(36) MULTIPLE DISTRICT 25 5100 W. CHURCHHILL CT., MUNCIE, IN 47304	23-7007876	501 (C) 4	20,000				EQUIP LIONS SPEECH AND HEARING LOANER LIBRARIES
(37) DISTRICT 43 K 203 J P CAMPBELL RD, HOPKINSVILLE, KY 42240	31-0919835	501 (C) 4	20,000				COMMUNITY RECOVERY
(38) DISTRICT 11 E2 300 W 22ND ST, OAK BROOK, IL 60523	38-2117493	501 (C) 4	20,000				TORNADO RECOVERY
(39) CONEJO VALLEY LIONS CLUB PO BOX 1537 , THOUSAND OAKS, CA 91358	82-4479968	501 (C) 4	19,594				LIONS-ANTHEM VOLUNTEER DAYS (2021)
(40) LOUISIANA LIONS EYE FOUNDAITON 1104 LORI DRIVE, SLIDELL, LA 70461	23-7384897	501 (C) 3	18,960				J & J SIGHT FOR KIDS - LOUISIANA
(41) DISTRICT 14 F 13301 N WATSON RUN RD, CONNEAUT LAKE, PA 16316-7015	23-7326285	501 (C) 4	18,861				MEADVILLE PROJECTS FOR THE BLIND
(42) DISTRICT 5M 8 PO BOX 165, CLARISSA, MN 56440	41-1390009	501 (C) 4	18,250				VISION SCREENINGS FOR KIDS
(43) VARINA LIONS CLUB FOUNDATION INC. 10003 FALCONBRIDGE DR., HENRICO, VA 23238	26-1249123	501 (C) 3	18,194				LIONS-ANTHEM VOLUNTEER DAYS (2021)
(44) LOUISIANA LIONS EYE FOUNDAITON 1104 LORI DRIVE, SLIDELL, LA 70461	23-7384897	501 (C) 3	16,668				BALDRIDGE ENDOWMENT FUND FOR SIGHT 2021
(45) MULTIPLE DISTRICT 12 709 SHANNONDALE WAY, MARYVILLE, TN 37803	58-1721334	501 (C) 4	16,457				PURCHASE VISION SCREENING EQUIPMENT
(46) DISTRICT 11 D1 9417 W. PIERSON RD., FLUSHING, MI 48433-9717	51-0199787	501 (C) 4	16,235				COMMUNITY RECOVERY
(47) LOUISIANA LIONS EYE FOUNDATION 1104 LORI DRIVE, SLIDELL, LA 70461-5379	23-7384897	501 (C) 3	15,184				BALDRIDGE ENDOWMENT FUND FOR SIGHT

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(48) INTERNATIONAL ASSOCIATION OF LIONS DISTRICT 34A 28164 J. YARBROUGH ROAD, ATHENS, AL 35613	23-7050708	501 (C) 4	15,000				LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2021
(49) DISTRICT 26 M3 709 ROUTE C, LAGRANGE, MO 63448	26-2780017	501 (C) 4	13,500				EQUIP SENIOR NUTRITION CENTER
(50) DISTRICT 51 O 28 CALLE MERCURIO REPARTO SANTA ANA, SABANA GRANDE, PR 00637	66-0791672	501 (C) 4	13,274				HOST A YOUTH SOFTBALL LEAGUE
(51) DISTRICT 32 S 1721 GROCE MEADOW RD, TAYLORS, SC 29687	57-0963906	501 (C) 4	13,000				YOUTH VISION SCREENING CAMERAS
(52) DISTRICT 5M-8 3160 181ST AVE NW, ANDOVER, MN 55304	41-6153383	501 (C) 4	12,893				PERONI ENDOWMENT 2021
(53) DISTRICT 4 C5 21014 CLIVUS DRIVE, GRASS VALLEY, CA 95949	94-2525213	501 (C) 4	12,000				FOOD FOR LOCAL FOOD BANK
(54) LEADER DOGS FOR THE BLIND 3232 INDIAN LAKE RD., OXFORD, MI 48370	38-1366931	501 (C) 3	11,544				PERONI ENDOWMENT – LEADER DOGS FOR THE BLIND
(55) DISTRICT 2 S3 P O BOX 1091, TAYLOR, TX 76574	23-7151924	501 (C) 4	11,297				ADA ACCESSIBLE PARK TRAIL
(56) DISTRICT 22 D 1400 FORREST RD, WILMINGTON, DE 19810	51-0325033	501 (C) 4	10,890				SLIT LAMP FOR LIONS EYE BANK OF DELAWARE VALLEY
(57) DISTRICT 27 A2 4435 W LAVERNA AVENUE, MEQUON, WI 53092-2113	23-7301404	501 (C) 4	10,726				PURCHASE VISION SCREENING EQUIPMENT
(58) DISTRICT 23 B PO BOX 380393, EAST HARTFORD, CT 06138-0393	06-0964500	501 (C) 4	10,000				FOOD FOR LOCAL FOOD PANTRIES
(59) DISTRICT 23 B PO BOX 380393, EAST HARTFORD, CT 06138-0393	06-0964500	501 (C) 4	10,000				GAMING CARTS FOR CHILDREN'S MEDICAL CENTER
(60) DISTRICT 23 B PO BOX 380393, EAST HARTFORD, CT 06138-0393	06-0964500	501 (C) 4	10,000				MATCHING FUNDS FOR GAMING CARTS FOR CHILDREN'S MEDICAL CENTER
(61) DISTRICT 19 H 2908 MONTGOMERY PLACE, MOUNT VERNON, WA 98274	23-7330295	501 (C) 4	10,000				FLOOD RELIEF (USA)
(62) DISTRICT 4 C1 14146 SKYWAY #843, MAGALIA, CA 95954	23-7327243	501 (C) 4	10,000				WILDFIRE RELIEF
(63) DISTRICT 8 S 1108 ORCHID DR., HARVEY, LA 70058	20-5245690	501 (C) 4	10,000				HURRICANE RELIEF
(64) DISTRICT 4 C5 21014 CLIVUS DRIVE, GRASS VALLEY, CA 95949	94-2525213	501 (C) 4	10,000				WILDFIRE RELIEF
(65) DISTRICT 2 S4 108 PERDIDO OAKS DR., VICTORIA, TX 77905	74-6107079	501 (C) 4	10,000				HURRICANE NICHOLAS RELIEF

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(66) DISTRICT 2 X1 8705 BALTUSROL DR, FLOWER MOUND, TX 75022	23-7099350	501 (C) 4	10,000				DIABETES SCREENING AND AWARENESS
(67) DISTRICT 40 N 107 CR 5018, BLOOMFIELD, NM 87413	23-7357862	501 (C) 4	10,000				WILDFIRE RELIEF
(68) DISTRICT 31 L 200 DULA SPRINGS RD., WEAVERVILLE, NC 28787	47-2946988	501 (C) 4	10,000				FLOOD RELIEF
(69) DISTRICT 24 L 1123 MITCHELL POINT ROAD, MINERAL, VA 23117	83-1219361	501 (C) 4	10,000				BUS FOR DISADVANTAGED CHILDREN
(70) DISTRICT 8-N 15239 SALERNO DRIVE, PRAIRIEVILLE, LA 70769	13-4994650	501 (C) 4	10,000				HURRICANE IDA 2021
(71) DISTRICT 22-D 107 W. SHELDRAKE CIRCLE, DOVER, DE 19904	51-0325033	501 (C) 4	10,000				HURRICANE IDA 2021
(72) DISTRICT 14-P 402 MEGAN COURT, KENNETT SQUARE, PA 19348	90-0421565	501 (C) 4	10,000				HURRICANE IDA 2021
(73) DISTRICT 8-S 1108 ORCHID DR., HARVEY, LA 70058	20-5245690	501 (C) 4	10,000				HURRICANE IDA 2021
(74) DISTRICT 12-L 1912 E. MAIN ST, HUMBOLDT, TN 38343	23-7240556	501 (C) 4	10,000				MIDWESTERN WINTER TORNADO OUTBREAK
(75) DISTRICT 17 N 4609 E. FALCON COURT, WICHITA, KS 67220	48-1899585	501 (C) 4	10,000				TORNADO RELIEF
(76) DISTRICT 11 A1 40384 EMERALD LANE WEST, CLINTON TOWNSHIP, MI 48038	23-7077189	501 (C) 4	10,000				FLOOD RELIEF
(77) DISTRICT 6 C 4490 YUKON COURT # 96, WHEAT RIDGE, CO 80033	23-7313425	501 (C) 4	10,000				WILDFIRE RELIEF
(78) DISTRICT 51 C URB JARDINES DE BAYAMONTE, BAYAMON, PR 00956	66-0359767	501 (C) 4	10,000				FLOOD RELIEF
(79) DISTRICT 9 SW 1119 N DIVISION ST, AUDUBON, IA 50025- 1441	33-1205931	501 (C) 4	10,000				TORNADO RELIEF
(80) DISTRICT 16 J 12 SAGMORE AVE, EDISON, NJ 08820	47-1326015	501 (C) 4	10,000				HURRICANE RELIEF
(81) DISTRICT 35 O 935 HIGHGATE BLVD, WINTER GARDEN, FL 34787	46-0684975	501 (C) 4	9,135				DISASTER PREPAREDNESS
(82) DISTRICT 20 N 56 VIA DONATO E, DEPEW, NY 14043-4550	23-7248810	501 (C) 4	8,000				WESTERN NY LIONS VISION PROGRAM
(83) DISTRICT 12 I 1012 CLAREMONT DRIVE, COLUMBIA, TN 38401	58-1452525	501 (C) 4	7,447				FLOOD RELIEF
(84) DISTRICT 10 W4472 OLD 352 RD, STEPHENSON, MI 49887-9108	38-3614110	501 (C) 4	6,935				FOOD AND EDUCATION MATERIALS TO ADDRESS FOOD INSECURITY

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(85) DISTRICT 24 L 1123 MITCHELL POINT ROAD, MINERAL, VA 23117	83-1219361	501 (C) 4	6,500				RENOVATE NORTHERN VIRGINIA LIONS EYEGLASS RECYCLING CENTER
(86) DISTRICT 35 O 935 HIGHGATE BLVD, WINTER GARDEN, FL 34787	46-0684975	501 (C) 4	6,040				EQUIPPING SATELLITE BEACH KIDSIGHT PROGRAM WITH VISION SCREENER
(87) DISTRICT 18 L 4458 PARKHURST ST SW, POWDER SPRINGS, GA 30127	20-8734734	501 (C) 4	6,000				CARROLL COUNTY SOUP KITCHEN (ANTHEM)
(88) DISTRICT 21 S P O BOX 233, BUCKEYE, AZ 85326	86-6053121	501 (C) 4	5,844				FLOOD RELIEF
(89) DISTRICT 35 O 935 HIGHGATE BLVD, WINTER GARDEN, FL 34787	46-0684975	501 (C) 4	5,657				EQUIPPING PROJECT RIGHT TO SIGHT WITH LENS ANALYZERS
(90) ZIONSVILLE LIONS CLUB 750 PINEVIEW DRIVE, ZIONSVILLE, IN 46077	35-6063916	501 (C) 4	5,600				KIDSIGHT SCREENING PROGRAM
(91) DALLASTOWN LIONS CLUB 2864 S QUEEN STREET, DALLASTOWN, PA 17313	23-6296413	501 (C) 4	5,500				TREE PLANTING (ENEL ENERGY)
(92) DISTRICT 12 N 709 SHANNONDALE WAY, MARYVILLE, TN 37803	23-7215448	501 (C) 4	5,423				WILDFIRE RELIEF

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

Return Reference - Identifier	Explanation
SCHEDULE I, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS.	GRANT AWARDS ARE SUBJECT TO BOARD APPROVAL AND RECIPIENTS MUST MEET REQUIREMENTS NECESSARY TO RECEIVE SAID GRANT. LCIF STAFF MONITORS THE REQUIREMENTS ON A REGULAR BASIS TO ENSURE ALL AWARDS ARE PROPER. AFTER GRANTS ARE DISBURSED IN PART OR IN FULL, THE RECIPIENT MUST PROVIDE AN INTERIM OR FINAL REPORT, WHICH INCLUDES FINANCIAL DOCUMENTATION OF THE USE OF GRANT FUNDS AND LOCAL MATCHING FUNDS AND A NARRATIVE OF THE ACTIONS TAKEN IN DEVELOPING THE PROJECT. THE INTERIM OR FINAL REPORT IS INITIALLY REVIEWED AND APPROVED BY THE GRANT ADMINISTRATOR. THE REPORT IS THEN REVIEWED AND APPROVED BY THE DISTRICT CABINET (OR MULTIPLE DISTRICT COUNCIL) BEFORE SUBMISSION TO LCIF.
(2) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	SURGICAL EYE EXPEDITIONS INTERNATIONAL, INC. 175 CREMONA DRIVE. SUITE 100, GOLETA, CA 93117
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	SPECIAL OLYMPICS: LCIF SPECIAL OLYMPICS PARTNERSHIP (2021-2022)
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	SURGICAL EYE EXPEDITIONS INTERNATIONAL, INC.: HUMANITARIAN AWARD 2021-2022
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	LOUISIANA LIONS EYE FOUNDATION: BALDRIDGE ENDOWMENT SPECIAL DISTRIBUTION 2021
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	RESEARCH TO PREVENT BLINDNESS, INC.: RESEARCH TO PREVENT BLINDNESS/LCIF LOW VISION AWARD
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	MULTIPLE DISTRICT 33: OCT FOR BOSTON MEDICAL CENTER
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	DISTRICT 4 C5:  EXPAND UC DAVIS TELE-OPHTHALMOLOGY PROGRAM

#### **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization LIONS CLUBS INTERNATIONAL FOUNDATION Employer identification number 23-7030455

Part	Questions Regarding Compensation			
_			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
b	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b	~	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line		,	
	1a?	2	•	
•				
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee ☐ Written employment contract			
	☐ Independent compensation consultant  ☐ Compensation survey or study			
	✓ Form 990 of other organizations ✓ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		~
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		~
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		~
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only and in 504/2\/0\ 504/2\/4\ and 504/2\/00\ avenue in the provided lines 5.0			
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.  For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
5	compensation contingent on the revenues of:			
•	The organization?	5a		~
a b	Any related organization?	5b		V
D	If "Yes" on line 5a or 5b, describe in Part III.	30		
	ii les on line sa or su, describe in l'art iii.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
a	The organization?	6a		V
b	Any related organization?	6b		
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
•	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		1
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject	<b>_</b>		
3	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		~
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?			

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Schedule J (Form 990) 2021

## Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Note: The sum of columns (b)(i)-(iii) id	<i>51</i> 000			1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
REBECCA DAOU	(i)	234,917	0	90	56,510	26,355	317,872	0
1LCIF EXECUTIVE ADMINISTRATOR	(ii)	0	0	0	0	0	0	0
	(i)							
2	(ii)							
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i)							
40	(ii)							
12	(i)							
40	(ii)							
13	(i)							
14	(ii)		<u></u>					<u></u>
14	(i)							
15	(ii)		<u></u>					<u></u>
15	(i)							
16	(ii)						 	
16	(")							

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

Return Reference - Identifier	Explanation
SCHEDULE J, PART I, LINE 1A - FIRST-CLASS OR CHARTER TRAVEL	FIRST CLASS TRAVEL MAY BE AUTHORIZED FOR THE CHAIRMAN AND VICE CHAIRPERSON OF THE LCIF FUNDRAISING CAMPAIGN, DUE TO THEIR EXTENSIVE TRAVEL REQUIREMENTS AND IS NOT TAXABLE TO THEM.
SCHEDULE J, PART I, LINE 1A - TRAVEL FOR COMPANIONS	TRAVEL EXPENSES FOR A COMPANION ACCOMPANYING THE FOUNDATION'S VICE CHAIRPERSON, TREASURER, SECRETARY, AND THE TWO PRESIDENTIAL APPOINTEES TO THE LCIF BOARD OF TRUSTEES, WHEN ATTENDING THE LCIF EXECUTIVE COMMITTEE MEETINGS THAT IMMEDIATELY PRECEDE THE LCI BOARD OF DIRECTORS MEETINGS, WILL BE REIMBURSED ACCORDING TO LIONS CLUBS INTERNATIONAL FOUNDATION'S GENERAL REIMBURSEMENT RULES IF THE COMPANION IS PRESENT AT SCHEDULED LIONS CLUBS INTERNATIONAL FUNCTIONS AND EVENTS, AND WILL NOT BE TAXABLE TO THEM. REIMBURSEMENT WILL NOT BE PROVIDED IF THE COMPANION DOES NOT ATTEND SCHEDULED FUNCTIONS AND EVENTS.  TRAVEL EXPENSES FOR A COMPANION ACCOMPANYING THE LCIF EXECUTIVE ADMINISTRATOR WILL BE REIMBURSED ACCORDING TO LIONS CLUBS INTERNATIONAL FOUNDATION'S GENERAL REIMBURSEMENT RULES AND IS TAXABLE TO THEM.  IN ADDITION, THE LCIF CHAIRPERSON MAY AUTHORIZE TRAVEL ON BEHALF OF LCIF, INCLUDING COMPANION TRAVEL, PROVIDED SUCH TRAVEL IS IN ACCORDANCE WITH THE GENERAL REIMBURSEMENT POLICY AND THE EXPENSE IS COVERED WITHIN THE LCIF BUDGET.

# SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

Name of the organization Employer identification number
LIONS CLUBS INTERNATIONAL FOUNDATION 23-7030455

Part	Types of Property							
		(a) Check if applicable	<b>(b)</b> Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
•	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded		12	105,454	MARKET VA	LUF		
10	Securities—Closely held stock.			100,101	W and Control			
11	Securities—Partnership, LLC,							
• •	or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation							
10	contribution—Historic							
	structures							
14	Qualified conservation							
17	contribution—Other							
15	Real estate—Residential							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	Other ► ()							
27	Other ► ()							
28	Other ► (							
29	Number of Forms 8283 received	by the org	ganization during the tax v	ear for contributions for				
	which the organization completed				29	0		
							Yes	No
30a	During the year, did the organization	tion receive	by contribution any prope	erty reported in Part I, lines	1 through			
	28, that it must hold for at least the							
	to be used for exempt purposes to					30a		~
b	If "Yes," describe the arrangemen	t in Part II.						
31	Does the organization have a		stance policy that require	es the review of any no	onstandard			
	<u> </u>					31	~	
32a	Does the organization hire or use	e third part	ies or related organization	s to solicit, process, or se	ell noncash			
	9	•		· •		32a		~
b	If "Yes," describe in Part II.							
33	If the organization didn't report an	amount in	column (c) for a type of pro	perty for which column (a) i	s checked,			
	describe in Part II.							

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-		

**Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference - Identifier	Explanation
SCHEDULE M, PART I - EXPLANATIONS OF REPORTING METHOD FOR NUMBER OF CONTRIBUTIONS	SECURITIES - PUBLICLY TRADED - NUMBER OF CONTRIBUTIONS

# SCHEDULE O (Form 990)

Department of Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the Organization LIONS CLUBS INTERNATIONAL FOUNDATION

Employer Identification Number 23-7030455

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 4A - PROGRAM SERVICE DESCRIPTION	VISION OF MORE THAN 449,057 ATHLETES IN MORE THAN 100 COUNTRIES. THROUGH INVOLVEMENT WITHIN THE MEASLES INITIATIVE AND GAVI, THE VACCINE ALLIANCE SINCE 2010, LIONS HELPED SUPPORT THE VACCINATION OF MILLIONS OF CHILDREN IN MEASLES ENDEMIC COUNTRIES.
FORM 990, PART III, LINE 4B - PROGRAM SERVICE DESCRIPTION	ONCHOCERCIASIS, AND GLAUCOMA. STRATEGIC PARTNERSHIPS WITH THE CARTER CENTER AND WORLD HEALTH ORGANIZATION HAVE STRENGTHENED SERVICES AND OUTREACH IN UNDERSERVED REGIONS AND COMMUNITIES WITH LIMITED ACCESS TO QUALITY EYE HEALTH SERVICES.
FORM 990, PART V, LINE 2 - NUMBER OF EMPLOYEES REPORTED ON W-3	THE INTERNATIONAL ASSOCIATION OF LIONS CLUBS (EIN: 36-1263962), AN AFFILIATED ORGANIZATION, IS THE COMMON PAYMASTER FOR LIONS CLUBS INTERNATIONAL FOUNDATION; THEREFORE, ALL APPLICABLE IRS TAX COMPLIANCE FILINGS RELATING TO BOTH OF THE ORGANIZATION'S EMPLOYEES ARE REPORTED BY THE ASSOCIATION. THE FOUNDATION HAS 85 EMPLOYEES, THE INTERNATIONAL ASSOCIATION OF LIONS CLUBS, THE COMMON PAYING AGENT, REPORTED 356 EMPLOYEES ON FORM W-3 FOR 2021.
FORM 990, PART VI, LINE 1A - DELEGATE BROAD AUTHORITY TO A COMMITTEE	THE EXECUTIVE COMMITTEE SHALL BE COMPRISED OF NO MORE THAN TEN (10) MEMBERS. THE CHAIRPERSON OF THE FOUNDATION, THE VICE CHAIRPERSON OF THE FOUNDATION, THE TREASURER OF THE FOUNDATION, THE SECRETARY OF THE FOUNDATION, THE EXECUTIVE OFFICERS OF THE INTERNATIONAL ASSOCIATION OF LIONS CLUBS AND TWO LCIF TRUSTEES APPOINTED BY THE PRESIDENT OF THE INTERNATIONAL ASSOCIATION OF LIONS CLUBS SHALL COMPRISE THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES, BY AND WITH THE APPROVAL OF SAID BOARD OF TRUSTEES, WHICH COMMITTEE MAY ACT FOR AND ON BEHALF OF THE BOARD OF TRUSTEES ONLY WHEN THE MEMBERS OF SAID BOARD ARE NOT ASSEMBLED IN SESSION. NO BOARD ACTION SHALL BE ALTERED, AMENDED OR RESCINDED BY THE EXECUTIVE COMMITTEE. THE PRESENCE OF SIX (6) MEMBERS OF SAID COMMITTEE SHALL CONSTITUTE A QUORUM AT ANY MEETING THEREOF. THE ACT OF A MAJORITY OF SUCH MEMBERS SHALL BE THE ACT OF THE COMMITTEE. SAID COMMITTEE MAY TRANSACT BUSINESS BY TELEPHONE CONFERENCE CALL OR OTHER ELECTRONIC OR SUITABLE MEANS PROVIDED SIX (6) MEMBERS PARTICIPATE THEREIN, AND THE VOTE OF A MAJORITY OF THE MEMBERS PARTICIPATING SHALL BE CONSIDERED THE ACT OF THE COMMITTEE. THE EXECUTIVE COMMITTEE SHALL MEET IMMEDIATELY BEFORE THE OCTOBER/NOVEMBER AND MARCH/APRIL LCI BOARD OF DIRECTORS MEETINGS AND AT OTHER TIMES AS MAY BE NECESSARY, TO PREPARE RECOMMENDATIONS FOR CONSIDERATION AND ACTION BY THE BOARD OF TRUSTEES.
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	1. THE LCIF CONTROLLER AND FINANCIAL ANALYSIS MANAGER IS RESPONSIBLE FOR THE TIMELY PREPARATION OF THE FORM 990. THE LIONS CLUBS INTERNATIONAL FOUNDATION EXECUTIVE ADMINISTRATOR AND LIONS CLUBS INTERNATIONAL TREASURER ALSO REVIEW.
	2. THE LCIF FINANCE COMMITTEE REVIEWS THE DRAFT TAX RETURN AT ITS JANUARY MEETING. ALSO, A COMPLETED FORM 990 WILL BE PROVIDED TO THE FOUNDATION'S BOARD OF TRUSTEES VIA A SECURE WEBSITE. ALL QUESTIONS AND CONCERNS WILL BE ADDRESSED BY STAFF OF LIONS CLUBS INTERNATIONAL FOUNDATION PRIOR TO FILING.
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	BY BOARD POLICY, EACH MEMBER OF THE BOARD OF TRUSTEES, INCLUDING APPOINTEES, KEY MANAGEMENT PERSONNEL, AND ALL EMPLOYEES ARE REQUIRED TO SUBMIT AN ANNUAL STATEMENT ACKNOWLEDGING THE CONFLICT OF INTEREST POLICY AND THEIR INDIVIDUAL COMPLIANCE. THE ANNUAL STATEMENT IS SUBMITTED TO THE LIONS CLUBS INTERNATIONAL FINANCE AND HEADQUARTERS OPERATION COMMITTEE FOR REVIEW. PROCEDURES:
	1. IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, THE INTERESTED PERSON (AN INDIVIDUAL THAT HAS A DIRECT OR INDIRECT FINANCIAL INTEREST) MUST DISCLOSE THE EXISTENCE OF HIS OR HER FINANCIAL INTEREST AND MUST BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH BOARD DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT.
	2. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS.
	3. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ASSOCIATION'S BEST INTEREST AND FOR ITS OWN BENEFIT AND WHETHER THE TRANSACTION IS FAIR AND REASONABLE TO THE ASSOCIATION AND SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT IN CONFORMITY WITH SUCH DETERMINATION

Return Reference - Identifier		E	xplanation								
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	SALARY REVIEW IS ADMINIS INTERNATIONAL FOUNDATION DIRECTLY HANDLED BY THE	ON. LINE 15A IS MA	RKED "NO" SINCE								
WANAGEWENT OF FICIAL	1. SALARY SURVEYS ARE CO										
	2. A PERFORMANCE REVIEW THE LIONS CLUBS INTERNA AND/OR BONUS FOR THE EX THE EXECUTIVE COMMITTE	TIONAL FOUNDATI (ECUTIVE ADMINIS	ON EXECUTIVE CO STRATOR SHALL B	OMMITTEE. SALARY E DETERMINED IND	' INCREASE DIVIDUALLY BY						
	3. FORM 990 OF SIMILAR OR EXECUTIVE ADMINISTRATOR		REVIEWED PERIO	ODICALLY IN DETER	RMINING THE						
	4. THE SALARY REVIEW PRO	OCESS IS CONTEM	PORANEOUSLY D	OCUMENTED							
FORM 990, PART VI, LINE 15B - PROCESS FOR ESTABLISHING COMPENSATION	THE FOUNDATION DOES NO THEREFORE, THIS QUESTIO				DYEES;						
FORM 990, PART VI, LINE 17 - STATES WITH WHICH A COPY OF THIS FORM 990 IS REQUIRED TO BE FILED	FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NY, OH, OR, PA, RI, SC, TN, UT, VA, WI, WV										
FORM 990, PART VI, LINE 18 - HOW FORMS ARE MADE	LIONS CLUBS INTERNATION ENGINE ON THE WEBSITE A			ILABLE BY USING T	HE SEARCH						
AVAILABLE TO THE PUBLIC	THE FOUNDATION'S FORM 9	90-T AND UNSIGNI	ED FORM 1023 AR	E AVAILABLE UPON	REQUEST.						
	A CURRENT COPY OF THE F ALSO AVAILABLE UPON REG		(C)(3) DETERMINA	TION LETTER FROM	M THE IRS IS						
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	LIONS CLUBS INTERNATION BY USING THE SEARCH ENG				RE AVAILABLE						
AVAILABLE TO THE POBLIC	THE FOUNDATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT MADE AVAILABLE TO THE PUBLIC.										
FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES	(a) Description	<b>(b)</b> Total Expenses	(c) Program Service Expenses	(d) Management and General Expenses	(e) Fundraising Expenses						
	HEADQUARTERS' COST ALLOCATION	4,466,683	1,436,174	1,905,769	1,124,740						
	PROFESSIONAL FEES	1,467,550	870,986	78,971	517,593						
	LIONS QUEST PROGRAM DEVELOPMENT	507,287	507,287								
	LIONS QUEST FULFILLMENT/WAREHOUS E SERVICES	76,645	76,645								
	AUXILIARY STAFF EXPENSES	45,408			45,408						
	TRANSLATION EXPENSE	2,085	-6,124	1,656	6,553						
	Total	6,565,658	2,884,968	1,986,396	1,694,294						
FORM 990, PART XI, LINE 9 -		(a) Descriptio	n		(b) Amount						
OTHER CHANGES IN NET ASSETS OR FUND BALANCES	RECOVERIES OF PRIOR YEA AUDITED FINANCIAL STATE	AR GRANTS NETTE		IT EXPENSE ON	736,505						

#### SCHEDULE R (Form 990)

Part I

**Related Organizations and Unrelated Partnerships** 

OMB No. 1545-0047

Open to Public Inspection

(f)

Direct controlling

entity

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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

(b)

Primary activity

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Name of the organization

LIONS CLUBS INTERNATIONAL FOUNDATION

(a)

Name, address, and EIN (if applicable) of disregarded entity

Employer identification number 23-7030455

(e)

End-of-year assets

(4)									
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
Part II	Identification of Related Tax-Exempt Organiz one or more related tax-exempt organizations d	ations. Co	l omplete if thax year.	ne organization	answered "Yes" o	on Form 990, Part	IV, line 34, bec	ause it h	ad
	(a) Name, address, and EIN of related organization		<b>(b)</b> ry activity	(c) Legal domicile (sta or foreign country	(d) te Exempt Code section		(f) Direct controlling entity	Section	(g) 512(b)(13) trolled tity?
(1)(SEE S	TATEMENT)	-						Yes	No
(2)		-							
(3)									
(4)									
(5)									
(6)		-							
(7)									
									1

(c)

Legal domicile (state

or foreign country)

(d)

Total income

Page 2

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from	(f) Share of total income	(g) Share of end-of- year assets	Disprope alloca	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)			General or managing		General or managing		General or managing		(k) Percentage ownership
		country)		tax under sections 512-514)			Yes	No	,	Yes	No							
(1)																		
(2)																		
(3)																		
(4)																		
(5)																		
(6)																		
(7)																		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Section 5 contr ent	i) 512(b)(13) rolled ity?
								Yes	No
(1) (SEE STATEMENT)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes No
1	During the tax year, did the organization engage in any of the following transactions with one or	or more related organ	izations listed in Parts	II–IV?	
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a	V
b	Gift, grant, or capital contribution to related organization(s)			1b	V
С	Gift, grant, or capital contribution from related organization(s)			1c	V
d	Loans or loan guarantees to or for related organization(s)			1d	V
е	Loans or loan guarantees by related organization(s)				V
f	Dividends from related organization(s)			1f	V
g	Sale of assets to related organization(s)			1g	V
h	Purchase of assets from related organization(s)			1h	V
i	Exchange of assets with related organization(s)				V
i	Lease of facilities, equipment, or other assets to related organization(s)				V
•					
k	Lease of facilities, equipment, or other assets from related organization(s)			1k	V
- 1	Performance of services or membership or fundraising solicitations for related organization(s)				· /
m					V
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				V
0	Sharing of paid employees with related organization(s)				· ·
·	Thaining of paid offiphoyood with folded organization(b)				
n	Reimbursement paid to related organization(s) for expenses			1p	\ \ \ \ \ \
q	Reimbursement paid by related organization(s) for expenses				- V
ч	The initial series is paid by related organization (s) for expenses				
r	Other transfer of cash or property to related organization(s)			1r	V
ı e	Other transfer of cash or property from related organization(s)				- V
2	If the answer to any of the above is "Yes," see the instructions for information on who must cor				
		•		·	resilolas.
	(a) Name of related organization	<b>(b)</b> Transaction	(c) Amount involved	(d) Method of determining amo	unt involved
	· · · · · · · · · · · · · · · · · · ·	type (a-s)			
(1)					
(')					
(2)					
(2)					
(3)					
(0)					
(4)					
(4)					
<i>(</i> 5)					
(5)					
(e)					
(6)					

Page **4** 

# Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	unrelated, excluded from tax under	Predominant income (related, excluded from tax under 501(c)		organizations?		(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			sections 512-514)	Yes	No			Yes	No		Yes	No		
(1)														
(2)														
(3)														
<u>(4)</u>														
(5)														
<u>(6)</u>														
(7)														
(8)														
(9)														
(10)														
(11)														
(12)														
(13)														
(14)														
(15)														
(16)														

Part | Identification of Related Tax-Exempt Organizations (continued)

(a) Name, address and EIN of related organization	(b) Primary Activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) S 512(t controlle	ection o)(13) ed entity?
						Yes	No
(1) LCIF INDIA 19, NIRLON HOUSE, 4TH FLOOR, 254-B, DR. ANNIE BESANT ROAD, WORLI, MUMBAI, 400030, IN	PROMOTION OF VARIOUS LIONS PROGRAMS IN INDIA AND OTHER COUNTRIES IN THE REGION	INDIA			LIONS CLUBS INTERNATIONAL FOUNDATION	<b>✓</b>	

Part IV Identification of Related Organizations Taxable as a Corporation or 1	Trust	(continued)
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(a) Name, address and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C-corp, S-corp or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Se 512(b contr enti	o)(13) rolled
								Yes	No
(1) PERPETUAL TRUST (1) BENEFICIAL INTEREST IN DONOR TRUSTS, C/O LCIF 300 WEST 22ND STREET, OAK BROOK, IL 60523	DISTRIBUTION OF TRUST ASSETS TO BENEFICIARIES			TRUST					