

PUBLIC DISCLOSURE COPY

Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2022

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Form header section containing organization name (LIONS CLUBS INTERNATIONAL FOUNDATION), EIN (23-7030455), and other identifying information.

Part I Summary

Table with 22 rows detailing financial and operational data, including mission statement, revenue, expenses, and net assets.

Part II Signature Block

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

Signature area for the officer, including name (REBECCA DAOU) and title (LCIF EXECUTIVE ADMINISTRATOR).

Paid Preparer Use Only section with fields for preparer name (NICOLE BENCIK), firm name (CROWE LLP), and contact information.

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [ ] No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: 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.

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

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

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

4a (Code: ) (Expenses \$ 23,384,766 including grants of \$ 19,414,164 ) (Revenue \$ 187,032 ) 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 VISION OF MORE THAN 450,252 ATHLETES IN MORE THAN 100 COUNTRIES.

4b (Code: ) (Expenses \$ 8,557,232 including grants of \$ 6,855,546 ) (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 5,455 EMERGENCY GRANTS HAVE BEEN AWARDED WORLDWIDE.

4c (Code: ) (Expenses \$ 7,966,264 including grants of \$ 6,991,463 ) (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 \$382 MILLION IN 1,437 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)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 39,908,262

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>4</b> <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 "Yes," complete Schedule C, Part II . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>5</b> 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? <i>If "Yes," complete Schedule C, Part III . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>6</b> 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? <i>If "Yes," complete Schedule D, Part I . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>7</b> 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 "Yes," complete Schedule D, Part II . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>9</b> 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 "Yes," complete Schedule D, Part IV . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</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? <i>If "Yes," complete Schedule D, Part VII . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>c</b> 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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>d</b> 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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>f</b> 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>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>15</b> 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? <i>If "Yes," complete Schedule F, Parts II and IV . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>16</b> 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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>17</b> 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. See instructions . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>18</b> 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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Part IV Checklist of Required Schedules** *(continued)*

	Yes	No
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i>		✓
<b>23</b> 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? <i>If "Yes," complete Schedule J</i>	✓	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		✓
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> 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>		✓
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i>		✓
<b>26</b> 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>		✓
<b>27</b> 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? <i>If "Yes," complete Schedule L, Part III</i>		✓
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		✓
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		✓
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		✓
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		✓
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		✓
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		✓
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		✓
<b>33</b> 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 "Yes," complete Schedule R, Part I</i>		✓
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	✓	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?	✓	
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		✓
<b>36</b> <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>		✓
<b>37</b> 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>		✓
<b>38</b> 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	✓	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

	Yes	No
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	✓	

<b>Part V Statements Regarding Other IRS Filings and Tax Compliance</b> <i>(continued)</i>		Yes	No		
<b>2a</b>	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	<b>2a</b>	78		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2b</b>		✓	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>		✓	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	<b>3b</b>		✓	
<b>4a</b>	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)?	<b>4a</b>		✓	
<b>b</b>	If "Yes," enter the name of the foreign country <u>IN</u> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>			✓
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>			✓
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>			
<b>6a</b>	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?	<b>6a</b>			✓
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>			
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>				
<b>a</b>	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?	<b>7a</b>			✓
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>			
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>			✓
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>			
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>			✓
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>			✓
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>			
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>			
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>			
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>				
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>			
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>			
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:				
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>			
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>			
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:				
<b>a</b>	Gross income from members or shareholders	<b>11a</b>			
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>			
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>			
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>			
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>				
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>			
<b>b</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	<b>13b</b>			
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>			
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>			✓
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	<b>14b</b>			
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	<b>15</b>			✓
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>			✓
<b>17</b>	<b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	<b>17</b>			

**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. Check if Schedule O contains a response or note to any line in this Part VI

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year . . . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	<b>1a</b> 22		
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent . . . . .		
	<b>1b</b> 22		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .		<input checked="" type="checkbox"/>
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? . . . . .		<input checked="" type="checkbox"/>
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .		<input checked="" type="checkbox"/>
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .		<input checked="" type="checkbox"/>
<b>6</b>	Did the organization have members or stockholders? . . . . .		<input checked="" type="checkbox"/>
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .		<input checked="" type="checkbox"/>
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .		<input checked="" type="checkbox"/>
<b>7b</b>			
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body? . . . . .	<input checked="" type="checkbox"/>	
<b>8a</b>			
<b>b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	<input checked="" type="checkbox"/>	
<b>8b</b>			
<b>9</b>	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 . . . . .		<input checked="" type="checkbox"/>

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates? . . . . .		<input checked="" type="checkbox"/>
<b>10b</b>	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? . . . . .		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	<input checked="" type="checkbox"/>	
<b>b</b>	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	<input checked="" type="checkbox"/>	
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<input checked="" type="checkbox"/>	
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done . . . . .	<input checked="" type="checkbox"/>	
<b>13</b>	Did the organization have a written whistleblower policy? . . . . .	<input checked="" type="checkbox"/>	
<b>14</b>	Did the organization have a written document retention and destruction policy? . . . . .	<input checked="" type="checkbox"/>	
<b>15</b>	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?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official . . . . .		<input checked="" type="checkbox"/>
<b>15b</b>	Other officers or key employees of the organization . . . . .		<input checked="" type="checkbox"/>
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .		<input checked="" type="checkbox"/>
<b>16b</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 organization's exempt status with respect to such arrangements? . . . . .		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, CO, (CONTINUED ON SCHEDULE O)
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records.  
REBECCA DAOU, 300 WEST 22ND STREET, OAK BROOK, IL 60523-8842, (630) 468-6901

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

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

**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, box 6 of 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 trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) REBECCA DAOU LCIF EXECUTIVE ADMINISTRATOR	40.0 0.0			✓				246,183	0	41,568
(2) CHRISTOPHER PLUNKETT DIV. MGR., LCIF DEVELOPMENT	40.0 0.0					✓		145,567	0	16,703
(3) KASONDRA BYRD DIV. MGR., GLOBAL GRANTS	40.0 0.0					✓		119,211	0	39,195
(4) ERIK BREJLA GLOBAL CSR AND STRATEGIC PARTNERSHIP MANAGER	40.0 0.0					✓		115,727	0	33,927
(5) CHRISTINE HASTINGS LCIF CONTROLLER AND FINANCIAL ANALYSIS MANAGER	40.0 0.0					✓		121,519	0	7,283
(6) DOUGLAS X. ALEXANDER LCIF CHAIRPERSON	20.0 0.0	✓		✓				0	0	0
(7) GARY F. BROWN TREASURER	2.0 0.0	✓		✓				0	0	0
(8) GUDRUN YNGVADOTTIR SECRETARY	2.0 0.0	✓		✓				0	0	0
(9) JUNG-YUL CHOI VICE CHAIRPERSON	2.0 0.0	✓		✓				0	0	0
(10) A.P. SINGH INTERNATIONAL THIRD VICE PRESIDENT	5.0 0.0	✓						0	0	0
(11) ARUNA ABHEY OSWAL TRUSTEE	2.0 0.0	✓						0	0	0
(12) BRIAN E SHEEHAN LCI INTERNATIONAL PRESIDENT	5.0 0.0	✓						0	0	0
(13) CHIKAO SUZUKI TRUSTEE	2.0 0.0	✓						0	0	0
(14) DR NICOLAS EDUARDO ORELLANA TRUSTEE	2.0 0.0	✓						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) DR TA-LUNG CHIANG TRUSTEE	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(16) DR. JITSUHIRO YAMADA TRUSTEE	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(17) DR. MANOJ SHAH TRUSTEE	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(18) DR. PATTI HILL INTERNATIONAL FIRST VICE PRESIDENT	5.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(19) DR. SANDRO CASTELLANA TRUSTEE	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(20) FABRICIO OLIVEIRA INTERNATIONAL SECOND VICE-PRESIDENT	5.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(21) GARNET E DAVIS TRUSTEE	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(22) IN-KYO OH TRUSTEE	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(23) JAMES E ERVIN TRUSTEE	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(24) JENNIFER WARE TRUSTEE	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(25) (SEE STATEMENT)										
<b>1b Subtotal</b>								748,207	0	138,676
<b>c Total from continuation sheets to Part VII, Section A</b>								0	0	0
<b>d Total (add lines 1b and 1c)</b>								748,207	0	138,676

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 5

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
INTERNATIONAL ASSOCIATION OF LIONS CLUBS , 300 W. 22ND STREET , OAK BROOK, IL 60523	PROFESSIONAL SERVICES	4,654,123
RKD GROUP, P.O. BOX 843595, DALLAS, TX 75284-3595	PROFESSIONAL SERVICES	822,000
3-C INSTITUTE FOR SOCIAL DEVELOPMENT, 4364 S. ALSTON AVE., SUITE 300, DURHAM, NC 27713	LQ PROGRAM DEVELOPMENT	633,250
WORLD HEALTH ORGANIZATION, 20 AVENUE APPIA, 1211 GENEVA 27, SW	TECHNICAL SUPPORT	586,058
JPMORGAN, 10 S DEARBORN ST, FLOOR 08, CHICAGO, IL 60603	INVESTMENT ADVISORS	564,774

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 8

**Part VIII Statement of Revenue**

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants, and Other Similar Amounts</b>	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b>					
	<b>b</b>	Membership dues . . . . .	<b>1b</b>					
	<b>c</b>	Fundraising events . . . . .	<b>1c</b>					
	<b>d</b>	Related organizations . . . . .	<b>1d</b>					
	<b>e</b>	Government grants (contributions)	<b>1e</b>					
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	53,938,812				
	<b>g</b>	Noncash contributions included in lines 1a-1f . . . . .	<b>1g</b>	\$ 21,175				
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . .		53,938,812				
	<b>Program Service Revenue</b>	<b>2a</b>	----- Business Code					
<b>b</b>		-----						
<b>c</b>		-----						
<b>d</b>		-----						
<b>e</b>		-----						
<b>f</b>		All other program service revenue . .		0	0	0	0	
<b>g</b>		<b>Total.</b> Add lines 2a-2f . . . . .		0				
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) . . . . .		7,379,912		(3,346)	7,383,258	
	<b>4</b>	Income from investment of tax-exempt bond proceeds						
	<b>5</b>	Royalties . . . . .						
	<b>6a</b>	Gross rents . . . . .	(i) Real					
			(ii) Personal					
	<b>b</b>	Less: rental expenses	<b>6b</b>					
	<b>c</b>	Rental income or (loss)	<b>6c</b>	0	0			
	<b>d</b>	Net rental income or (loss) . . . . .						
	<b>7a</b>	Gross amount from sales of assets other than inventory	(i) Securities					
			(ii) Other					
				119,185,702				
	<b>b</b>	Less: cost or other basis and sales expenses . . . . .	<b>7b</b>	118,039,449				
	<b>c</b>	Gain or (loss) . . . . .	<b>7c</b>	1,146,253	0			
	<b>d</b>	Net gain or (loss) . . . . .		1,146,253		(5,392)	1,151,645	
	<b>8a</b>	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>8a</b>					
	<b>b</b>	Less: direct expenses . . . . .	<b>8b</b>					
	<b>c</b>	Net income or (loss) from fundraising events . . . . .						
<b>9a</b>	Gross income from gaming activities. See Part IV, line 19 . . . . .							
<b>b</b>	Less: direct expenses . . . . .	<b>9b</b>						
<b>c</b>	Net income or (loss) from gaming activities . . . . .							
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .							
			72,056					
<b>b</b>	Less: cost of goods sold . . . . .	<b>10b</b>	14,013					
<b>c</b>	Net income or (loss) from sales of inventory . . . . .		58,043	58,043				
<b>Miscellaneous Revenue</b>	<b>11a</b>	LIONS QUEST ONLINE LICENSES, NET OF COSTS	900099	87,936	87,936			
	<b>b</b>	LIONS QUEST TRAINING WORKSHOPS, NET OF COST	900099	41,053	41,053			
	<b>c</b>	CURRENCY EXCHANGE LOSS	900099	(137,316)		(137,316)		
	<b>d</b>	All other revenue . . . . .		0	0	0	0	
	<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . .		(8,327)				
<b>12</b>	<b>Total revenue.</b> See instructions . . . . .		62,514,693	187,032	(8,738)	8,397,587		

**Part IX Statement of Functional Expenses**

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

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

**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	5,946,112	5,946,112		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .	27,315,061	27,315,061		
<b>4</b> Benefits paid to or for members . . . . .				
<b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .	336,573	183,765	76,404	76,404
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
<b>7</b> Other salaries and wages . . . . .	5,336,894	1,842,277	1,512,029	1,982,588
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	349,492	121,294	96,458	131,740
<b>9</b> Other employee benefits . . . . .	754,895	261,993	208,347	284,555
<b>10</b> Payroll taxes . . . . .	419,115	145,458	115,673	157,984
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management . . . . .				
<b>b</b> Legal . . . . .	3,083	1,173	1,910	
<b>c</b> Accounting . . . . .	93,230		93,230	
<b>d</b> Lobbying . . . . .				
<b>e</b> Professional fundraising services. See Part IV, line 17 . . . . .				
<b>f</b> Investment management fees . . . . .	620,547		620,547	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) . . . . .	6,288,397	3,105,593	1,930,215	1,252,589
<b>12</b> Advertising and promotion . . . . .	551,742	371,341		180,401
<b>13</b> Office expenses . . . . .	1,418,694	57,474	207,719	1,153,501
<b>14</b> Information technology . . . . .				
<b>15</b> Royalties . . . . .				
<b>16</b> Occupancy . . . . .				
<b>17</b> Travel . . . . .	2,466,145	411,919	450,079	1,604,147
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
<b>19</b> Conferences, conventions, and meetings . . . . .	195,601	44,042	58,387	93,172
<b>20</b> Interest . . . . .				
<b>21</b> Payments to affiliates . . . . .				
<b>22</b> Depreciation, depletion, and amortization . . . . .	106,417	2,843	101,868	1,706
<b>23</b> Insurance . . . . .				
<b>24</b> 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.) . . . . .				
<b>a</b> <u>RECOGNITION</u> . . . . .	3,435,090	44,592	26,856	3,363,642
<b>b</b> <u>SPONSORSHIP FEES</u> . . . . .	73,081	73,081		
<b>c</b> <u>GIFTS AND ENTERTAINMENT</u> . . . . .	44,101	226		43,875
<b>d</b> <u>SUBSCRIPTION AND MEMBERSHIP FEES</u> . . . . .	20,009	6,389		13,620
<b>e</b> All other expenses . . . . .	(7,078)	(26,371)	2,982	16,311
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e . . . . .	55,767,201	39,908,262	5,502,704	10,356,235
<b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .		<b>1</b>	
	<b>2</b> Savings and temporary cash investments . . . . .	6,694,461	<b>2</b>	6,696,850
	<b>3</b> Pledges and grants receivable, net . . . . .	8,054,789	<b>3</b>	9,870,303
	<b>4</b> Accounts receivable, net . . . . .	53,650	<b>4</b>	4,519
	<b>5</b> 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 . . . . .	0	<b>5</b>	0
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . . . .	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	942,630	<b>9</b>	1,548,985
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	<b>10a</b> 5,487,739		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b> 5,103,029	320,441	<b>10c</b> 384,710
	<b>11</b> Investments—publicly traded securities . . . . .	270,529,194	<b>11</b>	293,521,323
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .	55,879,384	<b>12</b>	55,397,946
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .	0	<b>13</b>	0
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	8,908,753	<b>15</b>	6,637,831
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) . . . . .	351,383,302	<b>16</b>	374,062,467	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	1,367,774	<b>17</b>	927,820
	<b>18</b> Grants payable . . . . .	16,206,276	<b>18</b>	14,633,567
	<b>19</b> Deferred revenue . . . . .	419,251	<b>19</b>	477,679
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> 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	<b>22</b>	0
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> 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 . . . . .	67,339	<b>25</b>	64,310
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	18,060,640	<b>26</b>	16,103,376
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions . . . . .	290,258,620	<b>27</b>	308,760,226
	<b>28</b> Net assets with donor restrictions . . . . .	43,064,042	<b>28</b>	49,198,865
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds . . . . .		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>31</b>	
<b>32</b> Total net assets or fund balances . . . . .	333,322,662	<b>32</b>	357,959,091	
<b>33</b> Total liabilities and net assets/fund balances . . . . .	351,383,302	<b>33</b>	374,062,467	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	62,514,693
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	55,767,201
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	6,747,492
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	333,322,662
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	14,648,329
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	3,240,608
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	357,959,091

**Part XII Financial Statements and Reporting**

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

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<input checked="" type="checkbox"/>
<b>b</b> Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<input checked="" type="checkbox"/>	
<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	<input checked="" type="checkbox"/>	
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		<input checked="" type="checkbox"/>
<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 (list any hours for related organizations below dotted line)	(C) Position (Check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(25) N.S. SANKAR ----- TRUSTEE	2.0 ----- 0.0	✓						0	0	0
(26) RONAL ARTHUR LUXTON ----- TRUSTEE	2.0 ----- 0.0	✓						0	0	0
(27) VIJAY KUMAR RAJU ----- TRUSTEE	2.0 ----- 0.0	✓						0	0	0

**SCHEDULE A  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

**Open to Public  
Inspection**

Name of the organization <b>LIONS CLUBS INTERNATIONAL FOUNDATION</b>	Employer identification number <b>23-7030455</b>
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**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

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

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

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

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	50,960,795	44,596,468	44,688,565	60,836,017	53,938,812	255,020,657
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						0
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						0
<b>4 Total.</b> Add lines 1 through 3 . . . . .	50,960,795	44,596,468	44,688,565	60,836,017	53,938,812	255,020,657
<b>5</b> 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
<b>6 Public support.</b> Subtract line 5 from line 4						255,020,657

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>7</b> Amounts from line 4 . . . . .	50,960,795	44,596,468	44,688,565	60,836,017	53,938,812	255,020,657
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . .	3,865,982	6,160,775	5,844,554	7,163,466	7,379,912	30,414,689
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .	0	123,375	0	45,570	0	168,945
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .	3,173	637	0	0	0	3,810
<b>11 Total support.</b> Add lines 7 through 10						285,608,101
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					12	2,679,829
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . .						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) . . . . .	<b>14</b>	89.29 %
<b>15</b> Public support percentage from 2021 Schedule A, Part II, line 14 . . . . .	<b>15</b>	90.34 %
<b>16a 33 1/3% support test—2022.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . .		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test—2021.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>17a 10%-facts-and-circumstances test—2022.</b> 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 <b>stop here</b> . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b 10%-facts-and-circumstances test—2021.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here</b> . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .		<input type="checkbox"/>

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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 . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
<b>b</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 . . . . .						
<b>c</b> Add lines 7a and 7b . . . . .						
<b>8 Public support.</b> (Subtract line 7c from line 6.) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>9</b> Amounts from line 6 . . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on . . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . .

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) . . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2021 Schedule A, Part III, line 15 . . . . .	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2022</b> (line 10c, column (f), divided by line 13, column (f)) . . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2021</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	%

**19a 33 1/3% support tests—2022.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . . .

**b 33 1/3% support tests—2021.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . . .

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

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked 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.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> 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)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<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?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</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? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

		Yes	No
<b>11</b>	Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b>	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?		
	<b>11a</b>		
<b>b</b>	A family member of a person described on line 11a above?		
	<b>11b</b>		
<b>c</b>	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> .		
	<b>11c</b>		

**Section B. Type I Supporting Organizations**

		Yes	No
<b>1</b>	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.		
	<b>1</b>		
<b>2</b>	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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
	<b>2</b>		

**Section C. Type II Supporting Organizations**

		Yes	No
<b>1</b>	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).		
	<b>1</b>		

**Section D. All Type III Supporting Organizations**

		Yes	No
<b>1</b>	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
	<b>1</b>		
<b>2</b>	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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
	<b>2</b>		
<b>3</b>	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 supported organizations played in this regard.		
	<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b>	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b>	<input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b>	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b>	<input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).		
<b>2</b>	Activities Test. Answer lines 2a and 2b below.		
<b>a</b>	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</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
	<b>2a</b>		
<b>b</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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
	<b>2b</b>		
<b>3</b>	Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b>	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 <b>Part VI</b> .		
	<b>3a</b>		
<b>b</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.		
	<b>3b</b>		

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

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

<b>Section A—Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3.	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	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)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	<b>8</b>	

<b>Section B—Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
<b>2</b>	Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by 0.035.	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	

<b>Section C—Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, column A)	<b>1</b>	
<b>2</b>	Enter 0.85 of line 1.	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3.	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D—Distributions		Current Year
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required—provide details in <b>Part VI</b> )	<b>5</b>
<b>6</b>	Other distributions (describe in <b>Part VI</b> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2022 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
<b>1</b> Distributable amount for 2022 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2022 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2022			
<b>a</b> From 2017 . . . . .			
<b>b</b> From 2018 . . . . .			
<b>c</b> From 2019 . . . . .			
<b>d</b> From 2020 . . . . .			
<b>e</b> From 2021 . . . . .			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2022 distributable amount			
<b>i</b> Carryover from 2017 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2022 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2022 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2023.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2018 . . . . .			
<b>b</b> Excess from 2019 . . . . .			
<b>c</b> Excess from 2020 . . . . .			
<b>d</b> Excess from 2021 . . . . .			
<b>e</b> Excess from 2022 . . . . .			



**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, LINE 10 - OTHER INCOME	Description	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	(1) MISCELLANEOUS	3,173	637	0	0		3,810
	Total	3,173	637	0	0	0	3,810

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization LIONS CLUBS INTERNATIONAL FOUNDATION

Employer identification number 23-7030455

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ [checked] 501(c)( 3 ) (enter number) organization
[ ] 4947(a)(1) nonexempt charitable trust not treated as a private foundation
[ ] 527 political organization
Form 990-PF [ ] 501(c)(3) exempt private foundation
[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- [ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- [checked] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . \$ \_\_\_\_\_

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization <b>LIONS CLUBS INTERNATIONAL FOUNDATION</b>	Employer identification number <b>23-7030455</b>
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**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	----- ----- -----	\$ 2,787,129	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>LIONS CLUBS INTERNATIONAL FOUNDATION</b>	Employer identification number <b>23-7030455</b>
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**Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) <small>(See instructions.)</small>	(d) Date received
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) <small>(See instructions.)</small>	(d) Date received
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) <small>(See instructions.)</small>	(d) Date received
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) <small>(See instructions.)</small>	(d) Date received
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) <small>(See instructions.)</small>	(d) Date received
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) <small>(See instructions.)</small>	(d) Date received
-----	----- ----- -----	\$-----	-----

Name of organization <b>LIONS CLUBS INTERNATIONAL FOUNDATION</b>	Employer identification number <b>23-7030455</b>
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**Part III** **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ \_\_\_\_\_  
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

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.

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for values, 5-6 for Yes/No questions.

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

Form with multiple rows for questions 1-9 regarding conservation easements, including a table for 'Held at the End of the Tax Year'.

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

Form with rows 1a-2 for questions regarding art and historical treasures collections.

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

**3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a**  Public exhibition
- b**  Scholarly research
- c**  Preservation for future generations
- d**  Loan or exchange program
- e**  Other .....

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

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

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
<b>1c</b> Beginning balance	
<b>1d</b> Additions during the year	
<b>1e</b> Distributions during the year	
<b>1f</b> Ending balance	

**2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.**

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	969,992	1,393,347	1,161,320	1,139,473	606,700
<b>b</b> Contributions					515,876
<b>c</b> Net investment earnings, gains, and losses	71,284	(167,066)	246,198	21,847	29,557
<b>d</b> Grants or scholarships		256,289	14,171		12,660
<b>e</b> Other expenditures for facilities and programs					
<b>f</b> Administrative expenses					
<b>g</b> End of year balance	1,041,276	969,992	1,393,347	1,161,320	1,139,473

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment 0.00 %
- b** Permanent endowment 98.00 %
- c** Term endowment 2.00 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
<b>(i)</b> Unrelated organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>(ii)</b> Related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input type="checkbox"/>

**4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land				
<b>b</b> Buildings				
<b>c</b> Leasehold improvements		170,686	7,402	163,284
<b>d</b> Equipment		5,317,053	5,095,627	221,426
<b>e</b> Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				384,710

**Part VII Investments—Other Securities.**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely held equity interests . . . . .		
(3) Other		
(A) HEDGE FUNDS	31,607,029	END OF YEAR MARKET VALUE
(B) PRIVATE EQUITY FUNDS	23,790,917	END OF YEAR MARKET VALUE
(C) . . . . .		
(D) . . . . .		
(E) . . . . .		
(F) . . . . .		
(G) . . . . .		
(H) . . . . .		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) . . . . .	<b>55,397,946</b>	

**Part VIII Investments—Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CHARITABLE GIFT ANNUITIES	64,310
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) . . . . .	<b>64,310</b>

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



**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 AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	(a) Description	(b) Amount
	LCIF INDIA REVENUE - CONSOLIDATED IN AUDITED FINANCIAL STATEMENTS	2,957,298
SCHEDULE D, PART XII, LINE 2(D) - OTHER EXPENSES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	(a) Description	(b) Amount
	RECOVERIES OF PRIOR YEAR GRANTS - NETTED AGAINST GRANT EXPENSE ON AUDITED FINANCIAL STATEMENTS	- 3,240,608
	LCIF INDIA EXPENSES - CONSOLIDATED IN AUDITED FINANCIAL STATEMENTS	3,981,013

**Part XIII**

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

Return Reference - 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	<p>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.</p> <p>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.</p>

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2022**

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](http://www.irs.gov/Form990) for instructions and the latest information.

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization

LIONS CLUBS INTERNATIONAL FOUNDATION

Employer identification number

23-7030455

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

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in 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	432,562
(2) EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	GRANTMAKING	7,197,358
(3) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	GRANTMAKING	6,805,094
(4) MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	GRANTMAKING	328,679
(5) NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	PROGRAM SERVICES	GRANTMAKING	689,155
(6) RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	GRANTMAKING	1,234,672
(7) SOUTH AMERICA	0	0	PROGRAM SERVICES	GRANTMAKING	2,259,359
(8) SOUTH ASIA	1	0	PROGRAM SERVICES	GRANTMAKING	1,822,801
(9) SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	GRANTMAKING	6,545,381
(10) EAST ASIA AND THE PACIFIC	0	1	PROGRAM SERVICES	PROJECT CONSULTING	18,885
(11) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	PROJECT CONSULTING	48,456
(12) RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	PROJECT CONSULTING	29,610
(13) SOUTH AMERICA	0	1	PROGRAM SERVICES	PROJECT CONSULTING	24,245
(14) SOUTH ASIA	0	1	PROGRAM SERVICES	PROJECT CONSULTING	21,942
(15) SUB-SAHARAN AFRICA	0	2	PROGRAM SERVICES	PROJECT CONSULTING	48,391
(16) EAST ASIA AND THE PACIFIC	0	4	ADMINISTRATIVE SUPPORT		130,594
(17) (SEE STATEMENT)					
<b>3a Subtotal</b>	<b>1</b>	<b>9</b>			<b>27,637,184</b>
<b>b Total from continuation sheets to Part I</b>	<b>0</b>	<b>0</b>			<b>44,255,223</b>
<b>c Totals (add lines 3a and 3b)</b>	<b>1</b>	<b>9</b>			<b>71,892,407</b>

**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.

<b>1</b>	<b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	<b>(h)</b> Description of noncash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
(1)			(SEE STATEMENT)						
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

**2** 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

**3** Enter total number of other organizations or entities . . . ▶ 566

**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)							

**Part IV Foreign Forms**

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

**Part I****Activities per Region** (continued)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., 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 region	(f) Total expenditures for and investments in region
(17) CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		40,645,309
(18) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS		3,609,914

**Part II**

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

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		CENTRAL AMERICA AND THE CARIBBEAN	RECONSTRUCT 5 SCHOOLS IN HAITI	250,000	WIRE			
(2)		CENTRAL AMERICA AND THE CARIBBEAN	CONTINUING DIABETES INITIATIVES IN PANAMA	39,080	WIRE			
(3)		CENTRAL AMERICA AND THE CARIBBEAN	CORNEAL TOPOGRAPHY MACHINE FOR CLINIC	37,500	WIRE			
(4)		CENTRAL AMERICA AND THE CARIBBEAN	TYPE 1 DIABETES INITIATIVES PANAMA	33,683	CHECK			
(5)		CENTRAL AMERICA AND THE CARIBBEAN	HURRICANE RELIEF IN BELIZE	10,000	WIRE			
(6)		CENTRAL AMERICA AND THE CARIBBEAN	HURRICANE RELIEF	10,000	WIRE			
(7)		CENTRAL AMERICA AND THE CARIBBEAN	HURRICANE RELIEF	10,000	WIRE			
(8)		CENTRAL AMERICA AND THE CARIBBEAN	HURRICANE RELIEF	10,000	WIRE			
(9)		CENTRAL AMERICA AND THE CARIBBEAN	HURRICANE JULIA RELIEF	10,000	WIRE			
(10)		CENTRAL AMERICA AND THE CARIBBEAN	MUDSLIDE RELIEF	10,000	WIRE			
(11)		CENTRAL AMERICA AND THE CARIBBEAN	PURCHASE AUTOCLAVE FOR VISION CENTER	6,804	WIRE			
(12)		CENTRAL AMERICA AND THE CARIBBEAN	CONSTRUCTION OF SCHOOL'S CAFETERIA	5,495	WIRE			
(13)		EAST ASIA AND THE PACIFIC	RENOVATE DIABETES CARE CENTER	150,000	CHECK			
(14)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	100,000	CHECK			
(15)		EAST ASIA AND THE PACIFIC	EQUIP FIRE DEPARTMENT WITH FIRE TRUCK	100,000	CHECK			
(16)		EAST ASIA AND THE PACIFIC	DONATE BUS AND ELEVATOR TO THE ROC JOYCE WELFARE PROMOTION ASSOCIATION	100,000	CHECK			
(17)		EAST ASIA AND THE PACIFIC	MOBILE DIABETES AND DEMENTIA SERVICE VEHICLE	100,000	CHECK			
(18)		EAST ASIA AND THE PACIFIC	EQUIP THE NANTOU COUNTY RESCUE AND PROTECTION ASSOCIATION	100,000	CHECK			
(19)		EAST ASIA AND THE PACIFIC	RENOVATE AND EQUIP CENTER FOR THE DISABLED AND DISABLED CHILDREN	100,000	CHECK			
(20)		EAST ASIA AND THE PACIFIC	EQUIP CHILDREN'S BRAIN TUMOR TESTING LAB	100,000	CHECK			
(21)		EAST ASIA AND THE PACIFIC	INSTALL AIR-CONDITIONING FOR TSZ-AI	100,000	CHECK			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			MERCY HOSPICE OF TAICHUNG DIOCESAN BODY CORPORATE					
(22)		EAST ASIA AND THE PACIFIC	DONATE BLOOD DRIVE BUS TO DAEGU AND GYEONGBUK BLOOD CENTER	100,000	CHECK			
(23)		EAST ASIA AND THE PACIFIC	EFFECTIVENESS OF OPTICAL WORKSHOP MODELS IN PAKISTAN	98,500	WIRE			
(24)		EAST ASIA AND THE PACIFIC	PURCHASE VISION SCREENING VEHICLE AND EQUIPMENT FOR TAIWAN VISION CARE ASSOCIATION	97,923	CHECK			
(25)		EAST ASIA AND THE PACIFIC	EXPAND FOOD BANK FOOD RECLAMATION AND PREPARED MEAL PROGRAM	97,318	CHECK			
(26)		EAST ASIA AND THE PACIFIC	EQUIP VISION CENTER FOR VISION ASSESSMENT AND LOW VISION REHABILITATION	93,768	CHECK			
(27)		EAST ASIA AND THE PACIFIC	REHABILITATION EQUIPMENT FOR CEREBRAL PALSY ASSOCIATION	92,572	CHECK			
(28)		EAST ASIA AND THE PACIFIC	EXPAND ELEMENTARY SCHOOL IN THAILAND	89,000	CHECK			
(29)		EAST ASIA AND THE PACIFIC	J & J SIGHT FOR KIDS - THAILAND 2022	83,752	WIRE			
(30)		EAST ASIA AND THE PACIFIC	EQUIP WALAILAK UNIVERSITY HOSPITAL IN NAKHON SI THAMMARAT PROVINCE	81,500	WIRE			
(31)		EAST ASIA AND THE PACIFIC	PROVIDE UNIVERSITY WITH EQUIPMENT FOR VISION EXAMINATION	74,704	CHECK			
(32)		EAST ASIA AND THE PACIFIC	PURCHASE VEHICLE FOR MOBILE SKIN CANCER SCREENING PROGRAM	73,529	ACH			
(33)		EAST ASIA AND THE PACIFIC	PROVIDE PROSTHETIC LIMB FOR PEOPLE WITH DISABILITIES	71,399	CHECK			
(34)		EAST ASIA AND THE PACIFIC	PURCHASE & EQUIP MOBILE MEDICAL VEHICLE	66,505	CHECK			
(35)		EAST ASIA AND THE PACIFIC	EQUIP FOOD BANK NETWORK WITH REFRIGERATED TRUCK	65,445	CHECK			
(36)		EAST ASIA AND	PURCHASE	64,090	CHECK			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		THE PACIFIC	REFRIGERATED VAN FOR HUNGER PROGRAM					
(37)		EAST ASIA AND THE PACIFIC	PURCHASE AND EQUIP MOBILE DIABETES VISION SCREENING VEHICLE	64,032	CHECK			
(38)		EAST ASIA AND THE PACIFIC	EQUIP CHAIBADAN HOSPITAL IN LOPBURI PROVINCE	62,500	WIRE			
(39)		EAST ASIA AND THE PACIFIC	PURCHASE AMBULANCE FOR BUACHED HOSPITAL IN SURIN PROVINCE	62,500	WIRE			
(40)		EAST ASIA AND THE PACIFIC	MOBILE HEALTH EDUCATION AND YOUTH DEVELOPMENT	61,000	CHECK			
(41)		EAST ASIA AND THE PACIFIC	PURCHASE MOBILE BATHING SERVICE VEHICLE FOR PEOPLE WITH DISABILITIES	60,000	CHECK			
(42)		EAST ASIA AND THE PACIFIC	EQUIP DEMENTIA ASSOCIATION WITH HEATH SCREENING VEHICLE	59,084	CHECK			
(43)		EAST ASIA AND THE PACIFIC	EQUIP FOODBANK WITH REFRIGERATED VAN	58,843	CHECK			
(44)		EAST ASIA AND THE PACIFIC	EQUIP TAIWAN VOLUNTEER COAST GUARDS ORGANIZATION	57,967	CHECK			
(45)		EAST ASIA AND THE PACIFIC	PURCHASE MOBILE LAUNDRY VEHICLE	55,638	CHECK			
(46)		EAST ASIA AND THE PACIFIC	EQUIP NAKORNPING CANCER CENTER WITH AMBULANCE	55,147	WIRE			
(47)		EAST ASIA AND THE PACIFIC	PURCHASE AMBULANCE FOR KHLUNG HOSPITAL	55,147	WIRE			
(48)		EAST ASIA AND THE PACIFIC	PURCHASE VISION PROTECTION AND SCREENING EQUIPMENT	54,000	CHECK			
(49)		EAST ASIA AND THE PACIFIC	RENOVATE SCHOOL IN VIETNAM	50,000	CHECK			
(50)		EAST ASIA AND THE PACIFIC	EQUIP NANTOU COUNTY CANAAN SPIRITUAL NURSING HOME	48,500	CHECK			
(51)		EAST ASIA AND THE PACIFIC	EQUIP THACHALOM CITY HOSPITAL	48,293	WIRE			
(52)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT VEHICLE WITH WHEELCHAIR LIFT FOR PEOPLE WITH	47,871	CHECK			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			DISABILITIES					
(53)		EAST ASIA AND THE PACIFIC	EQUIP BANG MUN NAK HOSPITAL WITH ELECTROSURGICAL SYSTEM	46,875	WIRE			
(54)		EAST ASIA AND THE PACIFIC	EQUIP DANCHANG HOSPITAL	46,324	CHECK			
(55)		EAST ASIA AND THE PACIFIC	PURCHASE ULTRASOUND MACHINE TO SUPPORT LOW-INCOME FAMILIES	44,510	CHECK			
(56)		EAST ASIA AND THE PACIFIC	EQUIP SENIOR HOME WITH EMERGENCY RESPONSE VEHICLE	44,486	CHECK			
(57)		EAST ASIA AND THE PACIFIC	A 10-YEAR FOLLOW UP SURVEY OF REFRACTIVE ERROR AMONGST SCHOOL CHILDREN FROM LAO PEOPLE'S DEMOCRATIC REPUBLIC	44,083	CHECK			
(58)		EAST ASIA AND THE PACIFIC	LIONS QUEST	44,000	CHECK			
(59)		EAST ASIA AND THE PACIFIC	EQUIP HOSPITAL PEDIATRIC ICU ROOM	43,227	CHECK			
(60)		EAST ASIA AND THE PACIFIC	CATARACT SURGERY FOR LOW-INCOME ELDERLY	42,160	CHECK			
(61)		EAST ASIA AND THE PACIFIC	RENOVATE SCHOOL FOR CHILDREN WITH HEARING IMPAIRMENT	40,000	CHECK			
(62)		EAST ASIA AND THE PACIFIC	PURCHASE ULTRASOUND MACHINE FOR MEDICAL EXAMINATION CENTER	38,772	CHECK			
(63)		EAST ASIA AND THE PACIFIC	EQUIP REHABILITATION CENTER WITH WHEELCHAIR ASSESSABLE VEHICLE	37,590	CHECK			
(64)		EAST ASIA AND THE PACIFIC	TRAINING TEACHERS FOR MORAL AND ETHIC EDUCATION FOR CHILDREN	35,940	CHECK			
(65)		EAST ASIA AND THE PACIFIC	PURCHASE VEHICLE FOR PEOPLE WITH DISABILITY AND EQUIP A CARPENTRY CLASS FOR LOCAL ELEMENTARY SCHOOL	35,700	CHECK			
(66)		EAST ASIA AND THE PACIFIC	DONATION OF BLOOD DELIVERY VEHICLES	35,557	CHECK			
(67)		EAST ASIA AND THE PACIFIC	PURCHASE DAILY	35,481	CHECK			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NECESSITIES FOR THE NEEDY					
(68)		EAST ASIA AND THE PACIFIC	SUPPLY LO LIN FOOD BANK WITH A TRANSPORT VEHICLE AND KITCHEN EQUIPMENT	35,000	CHECK			
(69)		EAST ASIA AND THE PACIFIC	EQUIP SENIOR CARE CENTER WITH SERVICE VEHICLE.	33,904	CHECK			
(70)		EAST ASIA AND THE PACIFIC	DONATE REHABILITATION BUS TO CHIAYI SPINAL CORD INJURY ASSOCIATION	33,855	CHECK			
(71)		EAST ASIA AND THE PACIFIC	EQUIP DISASTER RESCUE ORGANIZATION WITH RAPID RESPONSE VEHICLE	33,500	CHECK			
(72)		EAST ASIA AND THE PACIFIC	MEDICAL EQUIPMENT FOR THE PHRAE HOSPITAL	33,089	WIRE			
(73)		EAST ASIA AND THE PACIFIC	LIONS QUEST	32,500	CHECK			
(74)		EAST ASIA AND THE PACIFIC	UPGRADE LIONS LICOLA WILDERNESS VILLAGE	32,032	CHECK			
(75)		EAST ASIA AND THE PACIFIC	EQUIP CHILDREN'S BRAIN TUMOR TESTING LAB	28,333	CHECK			
(76)		EAST ASIA AND THE PACIFIC	RECONSTRUCT TANQUIGAN ELEMENTARY SCHOOL IN THE PHILIPPINES	27,354	CHECK			
(77)		EAST ASIA AND THE PACIFIC	EQUIP HOSPITAL WITH CORNEAL TRANSPLANT SPECULAR MICROSCOPE	26,908	CHECK			
(78)		EAST ASIA AND THE PACIFIC	PROVIDE DIGITAL FUNDUS CAMERA FOR RATSADA HOSPITAL	26,471	WIRE			
(79)		EAST ASIA AND THE PACIFIC	EQUIP AIR PURIFIER FOR SAMOENG HOSPITAL IN CHIANG MAI PROVINCE	26,028	WIRE			
(80)		EAST ASIA AND THE PACIFIC	LIONS QUEST	26,000	CHECK			
(81)		EAST ASIA AND THE PACIFIC	PURCHASE A VEHICLE FOR SHIH TSO COMMUNITY DEVELOPMENT ASSOCIATION	25,932	CHECK			
(82)		EAST ASIA AND THE PACIFIC	BUILD CANTEEN FOR BAN NONG SONG HONG SCHOOL	25,555	WIRE			
(83)		EAST ASIA AND THE PACIFIC	VEHICLE FOR STUDENTS WITH DISABILITIES	23,575	CHECK			
(84)		EAST ASIA AND THE PACIFIC	DONATE FIRE TRUCK TO THE VOLUNTEER	23,163	CHECK			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			MINOH CITY FIRE DEPARTMENT					
(85)		EAST ASIA AND THE PACIFIC	PURCHASE AND EQUIP MOBILE BATH UNIT FOR DISABLED AND SENIORS	23,000	CHECK			
(86)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT VEHICLE WITH WHEELCHAIR LIFT FOR PEOPLE WITH DISABILITIES	22,940	CHECK			
(87)		EAST ASIA AND THE PACIFIC	EQUIP ASSOCIATION FOR PEOPLE WITH DISABILITIES WITH VEHICLE	22,738	CHECK			
(88)		EAST ASIA AND THE PACIFIC	SPECULAR MICROSCOPE DONATION TO HOSPITAL	22,404	CHECK			
(89)		EAST ASIA AND THE PACIFIC	LIONS QUEST	21,600	CHECK			
(90)		EAST ASIA AND THE PACIFIC	DENTAL CLINIC IMPROVEMENT PROJECT FOR DISABLED STUDENTS	21,400	CHECK			
(91)		EAST ASIA AND THE PACIFIC	EQUIP CHILD WELFARE ORGANIZATION WITH FOOD DELIVERY VEHICLE	21,393	CHECK			
(92)		EAST ASIA AND THE PACIFIC	BICYCLE HELMETS FOR ELEMENTARY SCHOOL STUDENTS	21,176	CHECK			
(93)		EAST ASIA AND THE PACIFIC	PURCHASE WHEELCHAIR LIFT VEHICLE FOR PEOPLE WITH SPINAL CORD INJURIES	21,157	CHECK			
(94)		EAST ASIA AND THE PACIFIC	SCHOLARSHIPS FOR DISADVANTAGED STUDENTS	20,691	CHECK			
(95)		EAST ASIA AND THE PACIFIC	WALKING TRAIL FOR HITSUZAN PARK	20,221	CHECK			
(96)		EAST ASIA AND THE PACIFIC	LIONS QUEST	20,000	CHECK			
(97)		EAST ASIA AND THE PACIFIC	LIONS QUEST	20,000	CHECK			
(98)		EAST ASIA AND THE PACIFIC	EARTHQUAKE COMMUNITY RECOVERY GRANT	20,000	WIRE			
(99)		EAST ASIA AND THE PACIFIC	DONATION OF A REHAB BUS FOR ELDER CITIZENS	20,000	CHECK			
(100)		EAST ASIA AND THE PACIFIC	EQUIP THE SUWON SPORTS ASSOCIATION FOR THE DISABLED WITH A VEHICLE	19,809	CHECK			
(101)		EAST ASIA AND THE PACIFIC	MOBILE BEDS FOR FIRE DEPARTMENT	19,600	CHECK			
(102)		EAST ASIA AND	PURCHASE A	19,364	CHECK			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		THE PACIFIC	VEHICLE FOR RELEASED PRISONERS TRAINING CENTER					
(103)		EAST ASIA AND THE PACIFIC	TREE PLANTING AT TOUNAN HSIAO TUNG INDUSTRY ZONE PARK	19,200	CHECK			
(104)		EAST ASIA AND THE PACIFIC	COMMUNITY RECOVERY	18,996	CHECK			
(105)		EAST ASIA AND THE PACIFIC	EQUIP LOCAL GOVERNMENT WITH VEHICLE	18,967	CHECK			
(106)		EAST ASIA AND THE PACIFIC	EQUIP ELDERLY CARE ASSOCIATION WITH SERVICE VEHICLE (SUPPLEMENTAL FUNDS)	18,129	CHECK			
(107)		EAST ASIA AND THE PACIFIC	EQUIP ELDERLY CARE ASSOCIATION WITH SERVICE VEHICLE	18,129	CHECK			
(108)		EAST ASIA AND THE PACIFIC	CONSTRUCT FOOD SERVICE CENTER FOR TAKSHINSUKUSA SCHOOL	18,000	CHECK			
(109)		EAST ASIA AND THE PACIFIC	EQUIP HOSPITAL WITH MOBILE FIBROSCAN MACHINE	17,828	CHECK			
(110)		EAST ASIA AND THE PACIFIC	MAKE TOY BLOCKS FROM DRIFTWOOD FOR CHILDREN	17,439	CHECK			
(111)		EAST ASIA AND THE PACIFIC	FIVE GLOBAL CAUSES EVENT	17,000	CHECK			
(112)		EAST ASIA AND THE PACIFIC	TREE PLANTING PROJECT TO REDUCE CARBON EMISSIONS	16,441	CHECK			
(113)		EAST ASIA AND THE PACIFIC	LIONS QUEST GRANT	16,300	CHECK			
(114)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT VEHICLE FOR PEOPLE WITH DISABILITIES	15,794	CHECK			
(115)		EAST ASIA AND THE PACIFIC	SCHOLARSHIP SUPPORT FOR 1 HIGH SCHOOL STUDENT AND 10 COLLEGE STUDENTS	15,564	CHECK			
(116)		EAST ASIA AND THE PACIFIC	TREE PLANTING	15,132	CHECK			
(117)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT FOR CEREBELLAR ATROPHY PATIENTS	14,924	CHECK			
(118)		EAST ASIA AND THE PACIFIC	REPAIR COMMUNITY PARK	14,319	WIRE			
(119)		EAST ASIA AND THE PACIFIC	VEHICLE FOR GUIDE DOG ASSOCIATION	13,917	CHECK			
(120)		EAST ASIA AND THE PACIFIC	LIONS QUEST	13,800	CHECK			
(121)		EAST ASIA AND	PURCHASE	13,793	CHECK			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		THE PACIFIC	RESCUE SUPPORT VEHICLE FOR CHIAYI CITY FIRE DEPARTMENT					
(122)		EAST ASIA AND THE PACIFIC	PLAYGROUND FOR ORPHANAGE	13,698	CHECK			
(123)		EAST ASIA AND THE PACIFIC	EXPAND OUTREACH SERVICES FOR CHILD WELFARE ORGANIZATION	13,570	CHECK			
(124)		EAST ASIA AND THE PACIFIC	WHEELCHAIRS AND RICE FOR LOW-INCOME HOUSEHOLDS AND ELDERLY	13,500	CHECK			
(125)		EAST ASIA AND THE PACIFIC	SCHOLARSHIP FOR UNDERPRIVILEGED STUDENTS	13,200	CHECK			
(126)		EAST ASIA AND THE PACIFIC	COMPUTERS FOR THE ANUBAN WAT PHRAPHUTTHABAT SCHOOL	13,144	WIRE			
(127)		EAST ASIA AND THE PACIFIC	BUILD BUS WAITING AREA	12,800	CHECK			
(128)		EAST ASIA AND THE PACIFIC	UPGRADE MOBILE SHOWER & LAUNDRY UNIT FOR THE HOMELESS	12,580	CHECK			
(129)		EAST ASIA AND THE PACIFIC	EQUIP WELFARE SERVICE ORG WITH VEHICLE TO TRANSPORT PEOPLE WITH DISABILITIES	12,172	CHECK			
(130)		EAST ASIA AND THE PACIFIC	THERMOMETERS FOR HEALTH CENTER	12,096	CHECK			
(131)		EAST ASIA AND THE PACIFIC	TEACH VISUALLY IMPAIRED HOW TO USE SMART PHONES	12,047	WIRE			
(132)		EAST ASIA AND THE PACIFIC	SUPPLY KITCHEN EQUIPMENT TO NISHINARI CHILD CARE CENTER	12,046	CHECK			
(133)		EAST ASIA AND THE PACIFIC	LIONS QUEST	12,000	CHECK			
(134)		EAST ASIA AND THE PACIFIC	DONATE SHUTTLE BUS TO SERVE ELDERLY, YOUTH, WOMEN, AND CHILDREN IN JIANSHI TOWNSHIP	12,000	CHECK			
(135)		EAST ASIA AND THE PACIFIC	DONATE VEHICLE TO TAITUNG TAIWAN FUND FOR CHILDREN AND FAMILIES	11,939	CHECK			
(136)		EAST ASIA AND THE PACIFIC	INSTALL SEPTIC TANKS AND TOILETS	11,883	WIRE			
(137)		EAST ASIA AND THE PACIFIC	EQUIP AICHI DEVELOPMENTAL DISABILITY CENTER	11,761	CHECK			
(138)		EAST ASIA AND THE PACIFIC	EQUIP SPECIAL EDUCATION SCHOOL FOR STUDENTS WITH	11,714	CHECK			

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			DISABILITIES					
(139)		EAST ASIA AND THE PACIFIC	LIONS QUEST	11,700	CHECK			
(140)		EAST ASIA AND THE PACIFIC	RENOVATE PLAYGROUND FOR CHILDREN'S SHELTER	11,363	CHECK			
(141)		EAST ASIA AND THE PACIFIC	SPONSOR STUDENTS TO PARTICIPATE IN AN ORCHESTRAL CONCERT	11,300	CHECK			
(142)		EAST ASIA AND THE PACIFIC	COMPUTER FOR SCHOOL FOR PEOPLE WITH DISABILITIES	10,688	CHECK			
(143)		EAST ASIA AND THE PACIFIC	VEHICLE FOR EDUCATIONAL SUPPORT CENTER	10,652	CHECK			
(144)		EAST ASIA AND THE PACIFIC	PURCHASE BASIC NECESSITIES FOR WELFARE CENTERS FOR ELDERLY	10,475	CHECK			
(145)		EAST ASIA AND THE PACIFIC	ENVIRONMENT CLEAN-UP AND DIABETES SCREENING EVENT	10,369	CHECK			
(146)		EAST ASIA AND THE PACIFIC	REPAIR HOUSES AND PURCHASE FOOD FOR UNDERPRIVILEGED	10,308	CHECK			
(147)		EAST ASIA AND THE PACIFIC	MEALS AND PARA SPORTS FIELD TRIP FOR DISADVANTAGED CHILDREN	10,270	CHECK			
(148)		EAST ASIA AND THE PACIFIC	COMPUTERS FOR UNDERPRIVILEGED STUDENTS	10,065	CHECK			
(149)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(150)		EAST ASIA AND THE PACIFIC	PREPARE TOY BOXES FOR YOUNG CARETAKERS	10,000	CHECK			
(151)		EAST ASIA AND THE PACIFIC	EARTHQUAKE RELIEF	10,000	WIRE			
(152)		EAST ASIA AND THE PACIFIC	EARTHQUAKE RELIEF	10,000	WIRE			
(153)		EAST ASIA AND THE PACIFIC	TYPHOON RELIEF	10,000	WIRE			
(154)		EAST ASIA AND THE PACIFIC	EARTHQUAKE RELIEF	10,000	WIRE			
(155)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(156)		EAST ASIA AND THE PACIFIC	EYE CAMP IN BANGLADESH	10,000	CHECK			
(157)		EAST ASIA AND THE PACIFIC	FLOODING CLEAN UP	10,000	CHECK			
(158)		EAST ASIA AND THE PACIFIC	TRAFFIC SAFETY SIGN FOR POLICE STATION	10,000	CHECK			
(159)		EAST ASIA AND THE PACIFIC	HEALTHY LIFE SEMINAR	10,000	CHECK			
(160)		EAST ASIA AND THE PACIFIC	LIONS QUEST	10,000	CHECK			
(161)		EAST ASIA AND THE PACIFIC	LIONS QUEST	10,000	CHECK			
(162)		EAST ASIA AND THE PACIFIC	CYCLONE RELIEF	10,000	CHECK			

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(163)		EAST ASIA AND THE PACIFIC	CYCLONE RELIEF	10,000	CHECK			
(164)		EAST ASIA AND THE PACIFIC	TYPHOON RELIEF	10,000	WIRE			
(165)		EAST ASIA AND THE PACIFIC	VOLCANO RELIEF	10,000	WIRE			
(166)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(167)		EAST ASIA AND THE PACIFIC	TYPHOON RELIEF (NORU)	10,000	WIRE			
(168)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(169)		EAST ASIA AND THE PACIFIC	DISASTER PREPAREDNESS	10,000	CHECK			
(170)		EAST ASIA AND THE PACIFIC	MEDICAL EQUIPMENT FOR LANYU HEALTH CENTER AND SPORTS EQUIPMENT FOR LANYU HIGH SCHOOL	10,000	CHECK			
(171)		EAST ASIA AND THE PACIFIC	SPONSOR AWARD CEREMONY TO RECOGNIZE UNDERPRIVILEGED MOTHERS	10,000	CHECK			
(172)		EAST ASIA AND THE PACIFIC	DONATE OFFICIAL VEHICLE TO BEINAN TOWNSHIP HEALTH CENTER FOR HEALTH EXAMINATIONS AND MEDICAL SERVICES	10,000	CHECK			
(173)		EAST ASIA AND THE PACIFIC	SPORTS EQUIPMENT FOR RURAL SCHOOLS	10,000	CHECK			
(174)		EAST ASIA AND THE PACIFIC	EQUIP FIRE DEPARTMENT WITH TRUCK	10,000	CHECK			
(175)		EAST ASIA AND THE PACIFIC	DISASTER PREPAREDNESS	10,000	CHECK			
(176)		EAST ASIA AND THE PACIFIC	DISASTER PREPAREDNESS GRANT	10,000	CHECK			
(177)		EAST ASIA AND THE PACIFIC	EARTHQUAKE RELIEF	10,000	CHECK			
(178)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(179)		EAST ASIA AND THE PACIFIC	TYPHOON RELIEF	10,000	CHECK			
(180)		EAST ASIA AND THE PACIFIC	TYPHOON RELIEF	10,000	CHECK			
(181)		EAST ASIA AND THE PACIFIC	TYPHOON RELIEF	10,000	CHECK			
(182)		EAST ASIA AND THE PACIFIC	WILDFIRE RELIEF	10,000	CHECK			
(183)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(184)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(185)		EAST ASIA AND THE PACIFIC	ELECTRIC FANS AND RICE FOR NEEDY HOMES	10,000	CHECK			
(186)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(187)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(188)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(189)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(190)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			

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(191)		EAST ASIA AND THE PACIFIC	WINDSTROM RELIEF	10,000	WIRE			
(192)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(193)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(194)		EAST ASIA AND THE PACIFIC	PURCHASE RICE FOR LOW-INCOME ELDERLY	9,881	CHECK			
(195)		EAST ASIA AND THE PACIFIC	TREE PLANTING	9,792	CHECK			
(196)		EAST ASIA AND THE PACIFIC	FOOD AND SUPPLIES FOR LOW-INCOME ELDERLY	9,480	CHECK			
(197)		EAST ASIA AND THE PACIFIC	DONATION OF A VEHICLE FOR FIRE STATION PUBLIC INFORMATION AND USE DURING DISASTERS	9,185	CHECK			
(198)		EAST ASIA AND THE PACIFIC	FIRE AND SMOKE DETECTOR ALARMS FOR HOUSEHOLDS	9,181	CHECK			
(199)		EAST ASIA AND THE PACIFIC	EQUIP WELFARE ORGANIZATION WITH SNOW REMOVAL VEHICLE FOR ELDERLY	9,100	CHECK			
(200)		EAST ASIA AND THE PACIFIC	PURCHASE PASSIVE EXERCISE EQUIPMENT FOR PEOPLE WITH DISABILITIES	9,067	CHECK			
(201)		EAST ASIA AND THE PACIFIC	WHEELCHAIRS FOR SCHOOLS	9,000	CHECK			
(202)		EAST ASIA AND THE PACIFIC	DISASTER PREPAREDNESS GRANT	9,000	CHECK			
(203)		EAST ASIA AND THE PACIFIC	DISASTER PREPAREDNESS	8,851	CHECK			
(204)		EAST ASIA AND THE PACIFIC	DISASTER RELIEF EQUIPMENT FOR COMMUNITY CENTER	8,807	CHECK			
(205)		EAST ASIA AND THE PACIFIC	DONATE A MULTI-PURPOSE SMALL TRUCK TO FENGYUAN DONGNAN COMMUNITY	8,745	CHECK			
(206)		EAST ASIA AND THE PACIFIC	DONATE VEHICLE TO TAICHUNG BLOOD DONATION CENTER	8,700	CHECK			
(207)		EAST ASIA AND THE PACIFIC	DONATE VEHICLE TO SEIKO EN CHILD FOSTER HOME	8,487	CHECK			
(208)		EAST ASIA AND THE PACIFIC	DCG MAT21661/355 E	8,459	CHECK			
(209)		EAST ASIA AND THE PACIFIC	LIONS QUEST	8,410	CHECK			
(210)		EAST ASIA AND THE PACIFIC	DONATE BRAILLE PRINTER TO WELFARE CENTER FOR THE VISUALLY IMPAIRED	8,377	CHECK			
(211)		EAST ASIA AND THE PACIFIC	LIONS QUEST	8,377	CHECK			

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(212)		EAST ASIA AND THE PACIFIC	MARBLE TABLES AND CHAIRS FOR REST AREA OF CENTENNIAL PAVILION AT THE LION GARDEN	8,237	CHECK			
(213)		EAST ASIA AND THE PACIFIC	BLOOD DONATION DRIVE, DONATE RICE AND SANITARY ITEMS TO VULNERABLE PEOPLE	8,000	CHECK			
(214)		EAST ASIA AND THE PACIFIC	DAILY NECESSITIES FOR FAMILIES OF INDIVIDUALS IN VEGETATIVE STATE	8,000	CHECK			
(215)		EAST ASIA AND THE PACIFIC	MAKE KIMCHI FOR LOW-INCOME ELDERLY AND IMMIGRANT FAMILIES	8,000	CHECK			
(216)		EAST ASIA AND THE PACIFIC	ELECTRIC BEDS FOR GENERAL HOSPITAL	7,920	CHECK			
(217)		EAST ASIA AND THE PACIFIC	TOYS FOR CHILDREN	7,694	CHECK			
(218)		EAST ASIA AND THE PACIFIC	COMMUNITY CLOCK TOWERS	7,694	CHECK			
(219)		EAST ASIA AND THE PACIFIC	MAKE KIMCHI FOR LOW-INCOME FAMILIES	7,657	CHECK			
(220)		EAST ASIA AND THE PACIFIC	EQUIPMENT FOR DISABILITY ORGANIZATION	7,590	CHECK			
(221)		EAST ASIA AND THE PACIFIC	MOVIE EVENT FOR PEOPLE WITH DISABILITIES	7,500	CHECK			
(222)		EAST ASIA AND THE PACIFIC	PURCHASE FOOD AND HYGIENE ITEMS FOR LOW-INCOME FAMILIES	7,500	CHECK			
(223)		EAST ASIA AND THE PACIFIC	SCHOOL AUDITORIUM RENOVATION PROJECT	7,499	CHECK			
(224)		EAST ASIA AND THE PACIFIC	FOOD AND BASIC NECESSITIES FOR UNDERPRIVILEGED	7,383	CHECK			
(225)		EAST ASIA AND THE PACIFIC	PURCHASE FOOD FOR LOW-INCOME ELDERLY	7,380	CHECK			
(226)		EAST ASIA AND THE PACIFIC	SCHOLARSHIP FOR LOCAL STUDENTS	7,352	CHECK			
(227)		EAST ASIA AND THE PACIFIC	SUPPORT SCHOOL BRASS BAND COMPETITION	7,207	CHECK			
(228)		EAST ASIA AND THE PACIFIC	PURCHASE FOOD FOR LIVING ALONE ELDERLY AND PEOPLE WITH DISABILITIES	7,199	CHECK			
(229)		EAST ASIA AND THE PACIFIC	EQUIP FOUNDATION WITH VEHICLE	7,065	CHECK			
(230)		EAST ASIA AND THE PACIFIC	PURCHASE	7,050	CHECK			

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			INTERIOR ITEMS FURNITURE FOR WAITING AREA FOR CHILDREN'S SHELTER					
(231)		EAST ASIA AND THE PACIFIC	SCHOLARSHIP FOR LOW-INCOME STUDENTS	7,050	CHECK			
(232)		EAST ASIA AND THE PACIFIC	SCHOLARSHIP FOR ENGLISH LANGUAGE EDUCATION IN JAPAN	7,048	CHECK			
(233)		EAST ASIA AND THE PACIFIC	JUNIOR HIGH SCHOOL WOMEN'S SOFTBALL TOURNAMENT	7,030	CHECK			
(234)		EAST ASIA AND THE PACIFIC	PROMOTIONAL EVENT AND FOOD DRIVE FOR CHILDREN'S CAFETERIA	7,000	CHECK			
(235)		EAST ASIA AND THE PACIFIC	SUPPORT FOR MUSICAL EVENT FOR CHILDREN	6,938	CHECK			
(236)		EAST ASIA AND THE PACIFIC	BOOK DONATIONS TO SCHOOLS	6,929	CHECK			
(237)		EAST ASIA AND THE PACIFIC	PURCHASE HOME APPLIANCES FOR WELFARE CENTERS	6,906	CHECK			
(238)		EAST ASIA AND THE PACIFIC	EQUIPPING TRAIN STATION WITH DISPLAY SCREEN	6,789	CHECK			
(239)		EAST ASIA AND THE PACIFIC	SCHOLARSHIP FOR CHILDREN OF POLICE OFFICERS WHO DIED ON DUTY	6,780	CHECK			
(240)		EAST ASIA AND THE PACIFIC	COMMUNITY ART AND MUSIC EVENT	6,756	CHECK			
(241)		EAST ASIA AND THE PACIFIC	EQUIP CHILDREN'S CAFETERIA	6,657	CHECK			
(242)		EAST ASIA AND THE PACIFIC	BUILD COFFEE SHOP FOR VOCATIONAL TRAINING FOR THE UNDERPRIVILEGED	6,500	CHECK			
(243)		EAST ASIA AND THE PACIFIC	DIABETES AWARENESS PROMOTION	6,477	CHECK			
(244)		EAST ASIA AND THE PACIFIC	REFRIGERATOR FOR CHILDREN'S CAFE	6,336	CHECK			
(245)		EAST ASIA AND THE PACIFIC	FUND VEHICLE FOR WELFARE CENTER TO TRANSPORT SUPPLIES TO THE UNDERPRIVILEGED	6,327	CHECK			
(246)		EAST ASIA AND THE PACIFIC	DONATION OF A FOOTBALL GOAL POST TO A LOCAL PARK	6,073	CHECK			
(247)		EAST ASIA AND THE PACIFIC	MEALS FOR SCHOOL CHILDREN	6,051	CHECK			

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(248)		EAST ASIA AND THE PACIFIC	EQUIP SCHOOLS WITH COMPUTERS	6,038	CHECK			
(249)		EAST ASIA AND THE PACIFIC	WRESTLING COMPETITION FOR ELEMENTARY SCHOOL STUDENTS	6,000	CHECK			
(250)		EAST ASIA AND THE PACIFIC	PURCHASE BEDS FOR PEOPLE WITH DISABILITIES	6,000	CHECK			
(251)		EAST ASIA AND THE PACIFIC	PARALYMPIC SPORT EQUIPMENT FOR ATHLETIC CENTER	5,970	CHECK			
(252)		EAST ASIA AND THE PACIFIC	DIABETES SEMINAR FOR THE GENERAL PUBLIC	5,913	CHECK			
(253)		EAST ASIA AND THE PACIFIC	FOOD BANK SUPPORT PROJECT	5,850	CHECK			
(254)		EAST ASIA AND THE PACIFIC	SUPPORT VULNERABLE PEOPLE WITH FOOD AND BASIC NECESSITIES	5,845	CHECK			
(255)		EAST ASIA AND THE PACIFIC	E-BOOKS FOR CHILDREN'S LIBRARY	5,770	CHECK			
(256)		EAST ASIA AND THE PACIFIC	DISINFECTING PUBLIC AREAS ON SCHOOL CAMPUSES	5,700	CHECK			
(257)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	5,677	CHECK			
(258)		EAST ASIA AND THE PACIFIC	SUPPORT LOCAL SCHOOLS WITH SUPPLIES AND SCHOLARSHIP	5,640	CHECK			
(259)		EAST ASIA AND THE PACIFIC	PURCHASE FEMININE HYGIENE FOR HIGH SCHOOL STUDENTS	5,595	CHECK			
(260)		EAST ASIA AND THE PACIFIC	EQUIP LIBRARY AND MUSEUM	5,500	CHECK			
(261)		EAST ASIA AND THE PACIFIC	HOLIDAY SUPPORT FOR CHILDREN'S WELFARE CENTER	5,496	CHECK			
(262)		EAST ASIA AND THE PACIFIC	PURCHASE BLANKETS AND FOOD FOR WELFARE CENTER FOR PEOPLE WITH DISABILITIES	5,400	CHECK			
(263)		EAST ASIA AND THE PACIFIC	PURCHASE COAL BRIQUETTES AND SUPPORT CATARACT SURGERY FOR LOW-INCOME FAMILIES	5,386	CHECK			
(264)		EAST ASIA AND THE PACIFIC	SUPPORT FOR CHILDREN'S CAFETERIA	5,381	CHECK			
(265)		EAST ASIA AND THE PACIFIC	PURCHASE BRIQUETTES, FOOD, AND BASIC	5,317	CHECK			

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			NECESSITIES FOR LOW-INCOME FAMILIES					
(266)		EAST ASIA AND THE PACIFIC	DRUG PREVENTION PANEL	5,300	CHECK			
(267)		EAST ASIA AND THE PACIFIC	PURCHASE COMPUTERS FOR SHELTER FOR ELDERLY	5,300	CHECK			
(268)		EAST ASIA AND THE PACIFIC	SUPPORT FOR LOW-INCOME STUDENTS	5,259	CHECK			
(269)		EAST ASIA AND THE PACIFIC	FOOD AND SUPPLIES FOR CHILDREN WITH DISABILITIES	5,250	CHECK			
(270)		EAST ASIA AND THE PACIFIC	SUICIDE PREVENTION TRAINING	5,203	CHECK			
(271)		EAST ASIA AND THE PACIFIC	BASEBALL CLINIC FOR CHILDREN	5,121	CHECK			
(272)		EAST ASIA AND THE PACIFIC	REPLACE WINDOWS IN ELEMENTARY SCHOOL IN UKRAINE	5,100	CHECK			
(273)		EAST ASIA AND THE PACIFIC	LIONS QUEST	5,082	CHECK			
(274)		EUROPE (INCLUDING ICELAND AND GREENLAND)	UNODC LIONS QUEST PARTNERSHIP - 2023	826,493	ACH			
(275)		EUROPE (INCLUDING ICELAND AND GREENLAND)	UNODC LIONS QUEST PARTNERSHIP - 2023	672,283	ACH			
(276)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	610,113	WIRE			
(277)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	463,939	WIRE			
(278)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EARTHQUAKE RELIEF	360,045	CHECK			
(279)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	331,162	WIRE			
(280)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EARTHQUAKE RELIEF	200,000	WIRE			
(281)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST NORWAY	150,000	WIRE			
(282)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	106,851	WIRE			
(283)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CLEAN WATER PROJECT IN TAJIKISTAN - AYNI	101,729	WIRE			
(284)		EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPLY EQUIPMENT FOR PEDIATRIC BRAIN CANCER TREATMENT	100,000	ACH			
(285)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE DIGITAL MICROSCOPE FOR PEDIATRIC ONCOLOGY DEPARTMENT	100,000	ACH			
(286)		EUROPE (INCLUDING	SWEDISH TENT	100,000	WIRE			

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		ICELAND AND GREENLAND)	PROJECT					
(287)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP SWEDISH LIONS TENTS PROGRAM	100,000	ACH			
(288)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ZANZIBAR ARTS FOR CHILDREN'S EYESIGHT (ZANZI-ACE) - UTILIZING TRADITIONAL AND MODERN MUSIC PERFORMANCE IN EYE HEALTH EDUCATION TO IMPROVE CHILD EYE HEALTH SERVICE UPTAKE IN ZANZIBAR	99,228	WIRE			
(289)		EUROPE (INCLUDING ICELAND AND GREENLAND)	UPGRADE HOSPITAL GYNECOLOGY EQUIPMENT	94,965	ACH			
(290)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EARTHQUAKE RELIEF	92,500	CHECK			
(291)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CLEAN WATER IN TAJIKISTAN - HISSOR	81,982	WIRE			
(292)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CLEAN WATER IN TAJIKISTAN - SARVODA	78,489	WIRE			
(293)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CLEAN WATER IN TAJIKISTAN - AYNI	78,322	WIRE			
(294)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	71,000	ACH			
(295)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE SPECIALIZED BARIATRIC AMBULANCE	70,000	ACH			
(296)		EUROPE (INCLUDING ICELAND AND GREENLAND)	INSTALL POTABLE WATER SYSTEMS IN TANZANIA	68,657	WIRE			
(297)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE VEHICLE FOR MOBILE OPHTHALMIC CLINIC	64,646	ACH			
(298)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE VEHICLES FOR FOOD KITCHEN	57,734	WIRE			
(299)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RENOVATE & EQUIP KITCHEN FOR STUDENTS WITH DISABILITIES	57,324	WIRE			
(300)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	57,291	WIRE			
(301)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RENOVATE SCHOOL IN DEMOCRATIC REPUBLIC OF CONGO	52,079	ACH			
(302)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EXPAND LIONS QUEST IN KOSOVO	51,750	WIRE			
(303)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP UROLOGY & SURGICAL CENTER IN GHANA	45,242	ACH			
(304)		EUROPE	REFUGEE RELIEF	43,430	ACH			

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		(INCLUDING ICELAND AND GREENLAND)						
(305)		EUROPE (INCLUDING ICELAND AND GREENLAND)	UPGRADE SCHOOL IN BURKINA FASO	42,820	ACH			
(306)		EUROPE (INCLUDING ICELAND AND GREENLAND)	SENSORY GARDEN AT INSTITUTE FOR THE BLIND	42,207	ACH			
(307)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	41,835	WIRE			
(308)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	39,877	ACH			
(309)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	39,600	ACH			
(310)		EUROPE (INCLUDING ICELAND AND GREENLAND)	STRENGTHEN NETWORK OF DIABETIC SUPPORT FOR CHILDREN	36,000	ACH			
(311)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	33,000	ACH			
(312)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ESTABLISH DIABETES CENTER AT GENERAL HOSPITAL OF RHODES	32,065	ACH			
(313)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REPLACE TRANSPORT BUS FOR DISABLED DAMAGED IN FLOODS	30,415	ACH			
(314)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	30,330	ACH			
(315)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	30,000	ACH			
(316)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	30,000	ACH			
(317)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	30,000	ACH			
(318)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RENOVATE KITCHENS SERVING THE HOMELESS	29,850	ACH			
(319)		EUROPE (INCLUDING ICELAND AND GREENLAND)	INSTALL MULIT-SENSORY ROOM	28,972	ACH			
(320)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CREATE REFLECTION GARDEN AT CHILDREN'S HOSPICE	27,559	ACH			
(321)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ALL-INCLUSIVE PLAYGROUND	25,910	ACH			
(322)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ESTABLISH MULTI-SENSORY ROOM FOR CHILDREN IN HOSPITAL	23,671	ACH			
(323)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE MICROSCOPE FOR CHILDREN'S HOSPITAL (LOCAL	21,853	ACH			

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			MATCH)					
(324)		EUROPE (INCLUDING ICELAND AND GREENLAND)	UPGRADE VISITOR SPACE FOR IMMUNOCOMPROMISED CHILDREN	21,659	ACH			
(325)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	20,900	WIRE			
(326)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CLEAR DEBRIS FROM SEPT. 2ND FLOOD	20,000	ACH			
(327)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ESTABLISH BEREAVEMENT ROOM IN MATERNITY WARD	20,000	ACH			
(328)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	20,000	ACH			
(329)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	20,000	ACH			
(330)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	20,000	ACH			
(331)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	20,000	ACH			
(332)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	20,000	ACH			
(333)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE EXCAVATOR FOR SEPT 15 FLOOD CLEAN-UP	20,000	ACH			
(334)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	20,000	ACH			
(335)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE ASSISTANCE	20,000	ACH			
(336)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	20,000	ACH			
(337)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CONSTRUCT SCHOOL IN SENEGAL	19,755	ACH			
(338)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE TRANSPORT VAN	18,875	ACH			
(339)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE AMBULANCE FOR CHILDREN'S HOSPICE	17,200	WIRE			
(340)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ESTABLISH ANNUAL DIABETES SUMMER CAMP IN SIAULIAI, LITHUANIA	17,026	ACH			
(341)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE EQUIPMENT FOR PEDIATRIC CYSTIC FIBROSIS TREATMENT	16,357	ACH			
(342)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	16,165	ACH			
(343)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE TRANSPORT VEHICLE FOR CITY MISSION	15,084	WIRE			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(344)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EST MOBILE VISION SCREENING AT CANCER CHARITY IN INDIA	15,005	ACH			
(345)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ACH			
(346)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ACH			
(347)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ACH			
(348)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ACH			
(349)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ACH			
(350)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	ACH			
(351)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE VEHICLE FOR BASEBALL TEAM FOR THE BLIND	15,000	ACH			
(352)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REFUGEE RELIEF	15,000	WIRE			
(353)		EUROPE (INCLUDING ICELAND AND GREENLAND)	INSTALL THERAPEUTIC BATHTUB FOR DISABLED CHILDREN	13,835	ACH			
(354)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CROATIA EARTHQUAKE - PURCHASE TRANSPORT VAN FOR ORGAN DONATION DEPT.	13,361	WIRE			
(355)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CREATE 3D PRINTING LAB FOR DISABLED	11,785	ACH			
(356)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE MEDICAL BEDS FOR NURSING HOME	11,490	ACH			
(357)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST	10,419	WIRE			
(358)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FLOOD RELIEF	10,000	WIRE			
(359)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FLOOD RELIEF	10,000	ACH			
(360)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FLOOD RELIEF	10,000	ACH			
(361)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LANDSLIDE RELIEF	10,000	ACH			
(362)		EUROPE (INCLUDING ICELAND AND GREENLAND)	VATICAN VISIT 2022	10,000	CHECK			
(363)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ESTABLISH TEACHING FARM IN UGANDA	10,000	CHECK			
(364)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FLOOD RELIEF	10,000	WIRE			
(365)		EUROPE	FLOOD RELIEF	10,000	WIRE			

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		(INCLUDING ICELAND AND GREENLAND)						
(366)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TREE PLANTING	9,492	ACH			
(367)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ESTABLISH ACCESSIBLE EXERCISE & SENSORY STATIONS	9,039	ACH			
(368)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST	8,500	ACH			
(369)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ESTABLISH INCLUSIVE PLAYGROUND EQUIPMENT	7,796	ACH			
(370)		EUROPE (INCLUDING ICELAND AND GREENLAND)	SENSORY GARDEN	7,546	ACH			
(371)		EUROPE (INCLUDING ICELAND AND GREENLAND)	REDEVELOPMENT OF SPORTS FIELD FOR THE DISABLED	7,453	ACH			
(372)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE VISION SCREENER FOR LIONS SCREENING PROGRAM IN UMBRIA	5,850	ACH			
(373)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GARDEN FOR THE ELDERLY	5,354	ACH			
(374)		EUROPE (INCLUDING ICELAND AND GREENLAND)	INSTALL OUTDOOR MUSIC EQUIPMENT IN PARK	5,249	ACH			
(375)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CREATE A DISABLED ACCESSIBLE PATH IN CENTO ITALY	5,200	ACH			
(376)		EUROPE (INCLUDING ICELAND AND GREENLAND)	DOCTORS INSURANCE FOR BREAST CANCER SCREENING PROGRAM	5,019	ACH			
(377)		MIDDLE EAST AND NORTH AFRICA	PEDIATRIC MRI ROOM	100,000	WIRE			
(378)		MIDDLE EAST AND NORTH AFRICA	EQUIP CARDIOLOGY DEPARTMENT	99,650	WIRE			
(379)		MIDDLE EAST AND NORTH AFRICA	LEBANON EXPLOSION	47,733	WIRE			
(380)		MIDDLE EAST AND NORTH AFRICA	BRILLE PRINTER FOR AL-SHUROOQ SCHOOL	36,200	WIRE			
(381)		MIDDLE EAST AND NORTH AFRICA	J & J SIGHT FOR KIDS - EGYPT	25,000	WIRE			
(382)		MIDDLE EAST AND NORTH AFRICA	PURCHASE VISION SCREENERS FOR LIONS' SCREENING PROJECT	10,124	ACH			
(383)		MIDDLE EAST AND NORTH AFRICA	WILDFIRE RELIEF	9,972	WIRE			
(384)		NORTH AMERICA (CANADA & MEXICO ONLY)	EQUIP OPHTHALMOLOGY CLINIC	100,000	WIRE			

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(385)		NORTH AMERICA (CANADA & MEXICO ONLY)	PURCHASE OPHTHALMIC OPERATING MICROSCOPE FOR THE THUNDER BAY REGIONAL HEALTH SCIENCES CENTRE	97,949	CHECK			
(386)		NORTH AMERICA (CANADA & MEXICO ONLY)	EQUIP ACCESSIBLE PLAYGROUND	84,630	CHECK			
(387)		NORTH AMERICA (CANADA & MEXICO ONLY)	EQUIP CHILDREN'S CANCER CLINIC WITH ANESTHESIA MACHINE AND ANESTHETIC MONITORING SYSTEM	46,931	CHECK			
(388)		NORTH AMERICA (CANADA & MEXICO ONLY)	KIDSIGHT VISION SCREENING PROGRAM	45,346	WIRE			
(389)		NORTH AMERICA (CANADA & MEXICO ONLY)	FURNISH TRANSITIONAL HOUSING	41,600	CHECK			
(390)		NORTH AMERICA (CANADA & MEXICO ONLY)	VISION SCREENING PROGRAM (COWAN FOUNDATION)	34,567	ACH			
(391)		NORTH AMERICA (CANADA & MEXICO ONLY)	UKRAINIAN REFUGEE SUPPORT	22,694	CHECK			
(392)		NORTH AMERICA (CANADA & MEXICO ONLY)	EXPAND LIONS QUEST	21,000	CHECK			
(393)		NORTH AMERICA (CANADA & MEXICO ONLY)	STRENGTHENING EVIDENCE-BASED DECISION-MAKING AND TRAINING IN THE RAAB7 METHODOLOGY AND EVALUATING THE 7-YEAR IMPACT OF ACTIONS TAKEN SINCE THE FIRST RAAB STUDY IN QUERETARO, MEXICO	20,410	WIRE			
(394)		NORTH AMERICA (CANADA & MEXICO ONLY)	COMMUNITY CLEAN UP AFTER HURRICANE ROSLYN	20,000	WIRE			
(395)		NORTH AMERICA (CANADA & MEXICO ONLY)	EQUIP HOSPITAL WITH BEDS	12,175	CHECK			
(396)		NORTH AMERICA (CANADA & MEXICO ONLY)	VISION SCREENING PROGRAM (COWAN FOUNDATION)	12,072	CHECK			
(397)		NORTH AMERICA (CANADA & MEXICO ONLY)	WILDFIRE RELIEF	10,000	ACH			
(398)		NORTH AMERICA (CANADA & MEXICO ONLY)	HURRICANE RELIEF	10,000	ACH			
(399)		NORTH AMERICA (CANADA & MEXICO ONLY)	WILDFIRE RELIEF	10,000	ACH			
(400)		NORTH AMERICA (CANADA & MEXICO ONLY)	FOREST FIRE RELIEF	10,000	ACH			
(401)		NORTH AMERICA (CANADA & MEXICO ONLY)	HURRICANE RELIEF	10,000	ACH			

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		MEXICO ONLY)						
(402)		NORTH AMERICA (CANADA & MEXICO ONLY)	HURRICANE RELIEF	10,000	WIRE			
(403)		NORTH AMERICA (CANADA & MEXICO ONLY)	FLOOD RELIEF	10,000	WIRE			
(404)		NORTH AMERICA (CANADA & MEXICO ONLY)	FLOOD RELIEF	10,000	WIRE			
(405)		NORTH AMERICA (CANADA & MEXICO ONLY)	WHEELCHAIRS AND CANES FOR DISABLED PEOPLE	9,654	WIRE			
(406)		NORTH AMERICA (CANADA & MEXICO ONLY)	SUPPORT SELBY STREET MISSION	8,566	ACH			
(407)		NORTH AMERICA (CANADA & MEXICO ONLY)	TORNADO RELIEF	7,016	ACH			
(408)		NORTH AMERICA (CANADA & MEXICO ONLY)	PURCHASE SUPPLIES TO MAKE ONCOLOGY WIGS	6,554	WIRE			
(409)		NORTH AMERICA (CANADA & MEXICO ONLY)	PURCHASE KIDS VISION SCREENERS	5,828	ACH			
(410)		RUSSIA AND NEIGHBORING STATES	INTERNALLY DISPLACED PERSONS RELIEF	250,000	WIRE			
(411)		RUSSIA AND NEIGHBORING STATES	INTERNALLY DISPLACED PERSONS RELIEF	250,000	WIRE			
(412)		RUSSIA AND NEIGHBORING STATES	INTERNALLY DISPLACED PERSONS RELIEF	202,055	WIRE			
(413)		RUSSIA AND NEIGHBORING STATES	INTERNALLY DISPLACED PERSONS RELIEF	150,000	WIRE			
(414)		RUSSIA AND NEIGHBORING STATES	INTERNALLY DISPLACED PERSONS RELIEF	150,000	WIRE			
(415)		RUSSIA AND NEIGHBORING STATES	EXPAND LIONS QUEST	150,000	WIRE			
(416)		RUSSIA AND NEIGHBORING STATES	EXPAND LIONS QUEST	82,617	WIRE			
(417)		SOUTH AMERICA	BUILD SCHOOL FOR THE HEARING IMPAIRED	100,000	CHECK			
(418)		SOUTH AMERICA	EQUIP CHILDHOOD CANCER DEPARTMENT OF HOSPITAL	100,000	CHECK			
(419)		SOUTH AMERICA	PURCHASE FIRE TRUCK FOR VOLUNTEER FIRE BRIGADE	100,000	CHECK			
(420)		SOUTH AMERICA	EXPAND ELDERLY HOME	100,000	CHECK			
(421)		SOUTH AMERICA	CONSTRUCT HOSPITAL WING FOR CHILDREN WITH CANCER	100,000	WIRE			
(422)		SOUTH AMERICA	EQUIP CHILDHOOD CANCER HOSPITAL	93,957	CHECK			
(423)		SOUTH AMERICA	CONSTRUCT SHELTER FOR FAMILIES OF CANCER PATIENTS	92,663	CHECK			
(424)		SOUTH AMERICA	CATARACT	90,903	CHECK			

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			EQUIPMENT FOR HOSPITAL DA CRUZ VERMELHA					
(425)		SOUTH AMERICA	PURCHASE REHAB EQUIPMENT FOR SANTA TEREZINHA UNIVERSITY HOSPITAL	90,382	CHECK			
(426)		SOUTH AMERICA	EQUIP SCHLATTER DE FELIZ HOSPITAL	84,914	CHECK			
(427)		SOUTH AMERICA	EXPAND SURGICAL CENTER AT HOSPITAL DE MISERICORDIA DE SANTOS	83,373	CHECK			
(428)		SOUTH AMERICA	FACILITY UPGRADES FOR HOSPITAL	80,315	CHECK			
(429)		SOUTH AMERICA	UPDATE HOSPITAL EQUIPMENT	77,162	CHECK			
(430)		SOUTH AMERICA	ELDERLY HOME CONSTRUCTION PROJECT	75,000	WIRE			
(431)		SOUTH AMERICA	UPDATE AND EQUIP MEDICAL CENTER	74,880	CHECK			
(432)		SOUTH AMERICA	EQUIP HOSPITAL	72,471	CHECK			
(433)		SOUTH AMERICA	EQUIP SANTISTA SCHOOL	52,500	CHECK			
(434)		SOUTH AMERICA	EQUIP BLOOD BANK IN TATUI	43,930	CHECK			
(435)		SOUTH AMERICA	PURCHASE AUTOMATIC BIOCHEMISTRY ANALYZER FOR HOSPITAL REGIONAL TEREZINHA GAIO BASSO	39,474	CHECK			
(436)		SOUTH AMERICA	EQUIP AND CONSTRUCTION OF SAO PATRICIO HOSPITAL	36,764	CHECK			
(437)		SOUTH AMERICA	EQUIP REHAB ROOM AT ONCOLOGY HOSPITAL	34,701	WIRE			
(438)		SOUTH AMERICA	RENOVATE CENTER FOR THE ELDERLY	30,329	CHECK			
(439)		SOUTH AMERICA	EQUIP CLINIC WITH IMAGING SERVICES	27,391	CHECK			
(440)		SOUTH AMERICA	EQUIP THE APAE PHYSIOTHERAPY ROOM	24,911	CHECK			
(441)		SOUTH AMERICA	EQUIP DERMATOLOGY INSTITUTE	23,250	CHECK			
(442)		SOUTH AMERICA	FLOOD RELIEF	20,000	WIRE			
(443)		SOUTH AMERICA	UPDATE HOSPITAL ICU EQUIPMENT	19,193	CHECK			
(444)		SOUTH AMERICA	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2023	15,000	WIRE			
(445)		SOUTH AMERICA	LIONS QUEST	15,000	WIRE			

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			COMMUNITY PARTNERSHIP GRANT 2023					
(446)		SOUTH AMERICA	LIONS QUEST	13,100	CHECK			
(447)		SOUTH AMERICA	EQUIP ELDERLY UNIT	10,564	CHECK			
(448)		SOUTH AMERICA	WILDFIRE RELIEF	10,000	CHECK			
(449)		SOUTH AMERICA	STORM RELIEF	10,000	CHECK			
(450)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(451)		SOUTH AMERICA	MUDSLIDE RELIEF	10,000	CHECK			
(452)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(453)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(454)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(455)		SOUTH AMERICA	STORM RELIEF	10,000	CHECK			
(456)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(457)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(458)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(459)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(460)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(461)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(462)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(463)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(464)		SOUTH AMERICA	LANDSLIDE RELIEF	10,000	CHECK			
(465)		SOUTH AMERICA	FLOOD RELIEF	10,000	CHECK			
(466)		SOUTH AMERICA	WILDFIRE RELIEF	10,000	WIRE			
(467)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(468)		SOUTH AMERICA	STORM RELIEF	10,000	WIRE			
(469)		SOUTH AMERICA	MUDSLIDE RELIEF	10,000	WIRE			
(470)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(471)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(472)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(473)		SOUTH AMERICA	EARTHQUAKE RELIEF	10,000	WIRE			
(474)		SOUTH AMERICA	STORM RELIEF	10,000	WIRE			
(475)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(476)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(477)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(478)		SOUTH AMERICA	LANDSLIDE RELIEF	10,000	WIRE			
(479)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(480)		SOUTH AMERICA	LANDSLIDE RELIEF	10,000	WIRE			
(481)		SOUTH AMERICA	STORM RELIEF	10,000	WIRE			
(482)		SOUTH AMERICA	STORM RELIEF	10,000	ACH			
(483)		SOUTH AMERICA	OCULAR PROSTHESIS FOR CHILDREN	9,169	CHECK			
(484)		SOUTH AMERICA	RENOVATE COMMUNITY SPORTS PARK	7,066	CHECK			
(485)		SOUTH AMERICA	EQUIP AND UPDATE SCHOOL FOR CHILDREN WITH DISABILITIES	6,419	WIRE			
(486)		SOUTH AMERICA	VOLCANO PREPAREDNESS AWARENESS	5,791	WIRE			
(487)		SOUTH AMERICA	DISTRIBUTE	5,102	CHECK			

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			EYEGASSES TO SCHOOLCHILDREN					
(488)		SOUTH ASIA	MAT20203/325: DESIGNATED DONATION TO TULIONS BLOOD BANK	261,000	CHECK			
(489)		SOUTH ASIA	FLOOD RECONSTRUCTION	200,000	CHECK			
(490)		SOUTH ASIA	MD-DESIGNATED DONATION - CHILD NUTRITION PROGRAM	170,000	CHECK			
(491)		SOUTH ASIA	COVID-19 RELIEF: NEPAL	165,300	CHECK			
(492)		SOUTH ASIA	EXPAND LIONS SATYA SAI SCHOOL IN NEPAL	100,000	CHECK			
(493)		SOUTH ASIA	CONSTRUCT DINING HALL AND KITCHEN AT POKHARA SCHOOL	100,000	CHECK			
(494)		SOUTH ASIA	EQUIP LIONS BLOOD BANK IN KATHMANDU	100,000	CHECK			
(495)		SOUTH ASIA	CONSTRUCT KITCHEN AND DINING HALL FOR UNDERPRIVILEGED PEOPLE IN POKHARA	100,000	CHECK			
(496)		SOUTH ASIA	CONSTRUCT KITCHEN AND DINING HALL IN CHITWAN	99,134	CHECK			
(497)		SOUTH ASIA	SCIENCE LAB FOR MYAGDI MULTIPLE CAMPUS	91,922	CHECK			
(498)		SOUTH ASIA	EQUIP RM KEDIA HOSPITAL WITH RETINAL EQUIPMENT	63,900	CHECK			
(499)		SOUTH ASIA	EMERGENCY MEDICINES FOR MINISTRY OF HEALTH	56,800	WIRE			
(500)		SOUTH ASIA	EQUIP RAPTI EYE HOSPITAL IN NEPAL	46,635	CHECK			
(501)		SOUTH ASIA	MR CAMPAIGN 2023 - WEST BENGAL	40,905	WIRE			
(502)		SOUTH ASIA	EQUIP JAFFNA CANCER HOSPITAL IN SRI LANKA	36,511	CHECK			
(503)		SOUTH ASIA	UPGRADE PEDIATRIC ONCOLOGY DEP. IN TRIVANDRUM (LM)	23,885	CHECK			
(504)		SOUTH ASIA	FLOOD RELIEF	10,000	CHECK			
(505)		SOUTH ASIA	FLOOD RELIEF	10,000	CHECK			
(506)		SOUTH ASIA	FLOOD RELIEF	10,000	CHECK			
(507)		SOUTH ASIA	FLOOD RELIEF	10,000	WIRE			
(508)		SOUTH ASIA	FLOOD RELIEF	10,000	WIRE			
(509)		SOUTH ASIA	CYCLONE RELIEF	10,000	CHECK			

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(510)		SOUTH ASIA	CYCLONE RELIEF	10,000	CHECK			
(511)		SOUTH ASIA	CYCLONE RELIEF	10,000	CHECK			
(512)		SOUTH ASIA	CYCLONE RELIEF	10,000	CHECK			
(513)		SOUTH ASIA	CYCLONE RELIEF	10,000	CHECK			
(514)		SOUTH ASIA	CYCLONE RELIEF	10,000	CHECK			
(515)		SOUTH ASIA	FLOOD RELIEF	10,000	CHECK			
(516)		SOUTH ASIA	FLOOD RELIEF	10,000	CHECK			
(517)		SOUTH ASIA	FLOOD RELIEF	9,531	CHECK			
(518)		SUB-SAHARAN AFRICA	RIVER BLINDNESS ELIMINATION, ETHIOPIA	1,000,000	ACH			
(519)		SUB-SAHARAN AFRICA	TRACHOMA ELIMINATION IN AMHARA REGIONAL STATE, ETHIOPIA	1,000,000	ACH			
(520)		SUB-SAHARAN AFRICA	RIVER BLINDNESS ELIMINATION, ETHIOPIA	500,000	ACH			
(521)		SUB-SAHARAN AFRICA	TRACHOMA ELIMINATION IN AMHARA REGIONAL STATE, ETHIOPIA	500,000	ACH			
(522)		SUB-SAHARAN AFRICA	OPHTHALMIC NURSE TRAINING AT THE OPHTHALMOLOGY TRAINING CENTER FOR CENTRAL AFRICA (CFOAC)	456,388	WIRE			
(523)		SUB-SAHARAN AFRICA	COMPREHENSIVE EYE CARE FOR TCHAD	436,486	WIRE			
(524)		SUB-SAHARAN AFRICA	EYE CARE SYSTEM DEVELOPMENT	406,799	WIRE			
(525)		SUB-SAHARAN AFRICA	KABAROLE LIONS SECONDARY EYE CENTER	233,090	WIRE			
(526)		SUB-SAHARAN AFRICA	CENTRAL PROVINCE COMPREHENSIVE EYE CARE	200,011	WIRE			
(527)		SUB-SAHARAN AFRICA	KAANI PRIMARY SCHOOL EXPANSION	180,000	WIRE			
(528)		SUB-SAHARAN AFRICA	EXPAND LAGOS STATE UNIVERISTY TEACHING HOSPITAL	179,921	WIRE			
(529)		SUB-SAHARAN AFRICA	CAREGIVER HOME	147,043	WIRE			
(530)		SUB-SAHARAN AFRICA	AMMA PRIMARY SCHOOL CONSTRUCTION	120,000	WIRE			
(531)		SUB-SAHARAN AFRICA	EXPAND DIABETES SERVICES	112,500	WIRE			
(532)		SUB-SAHARAN AFRICA	ESTABLISH THE DIAB-ESPACE AT LOANDJILI GENERAL HOSPITAL	109,078	WIRE			
(533)		SUB-SAHARAN AFRICA	KILI FOR KIDS AMMA SCHOOL CONSTRUCTION	104,245	WIRE			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(534)		SUB-SAHARAN AFRICA	RENOVATE AGBALA PEDIATRIC CENTER	97,155	WIRE			
(535)		SUB-SAHARAN AFRICA	WATER IS LIFE KENYA BOREHOLE	90,000	WIRE			
(536)		SUB-SAHARAN AFRICA	REPEAT RAAB AND ASSESSMENT OF CHILDHOOD BLINDNESS IN THE ANALAMANGA REGION, MADAGASCAR	89,944	WIRE			
(537)		SUB-SAHARAN AFRICA	CONSTRUCT LIONS VHIMBA POLY CLINIC IN ZIMBABWE	75,000	WIRE			
(538)		SUB-SAHARAN AFRICA	EXPAND PRIMARY SCHOOL AT SOKODE, TOGO	56,250	WIRE			
(539)		SUB-SAHARAN AFRICA	DAYS OF SERVICE	50,000	WIRE			
(540)		SUB-SAHARAN AFRICA	EXPAND LIONS QUEST	50,000	WIRE			
(541)		SUB-SAHARAN AFRICA	DIABETES MANAGEMENT SUPPORT	48,603	WIRE			
(542)		SUB-SAHARAN AFRICA	RENOVATE ZINGA DISPENSARY	25,000	WIRE			
(543)		SUB-SAHARAN AFRICA	DIABETES AWARENESS, SCREENING AND TREATMENT IN IGANDO, LAGOS STATE	18,943	WIRE			
(544)		SUB-SAHARAN AFRICA	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2023	15,000	WIRE			
(545)		SUB-SAHARAN AFRICA	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2023	15,000	WIRE			
(546)		SUB-SAHARAN AFRICA	SFP2087/413: SUPPLEMENTAL GRANT (DAVID AND MOLLY PYOTT), 2023	14,839	WIRE			
(547)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(548)		SUB-SAHARAN AFRICA	MUDSLIDE AND FLOOD RELIEF	10,000	WIRE			
(549)		SUB-SAHARAN AFRICA	FAMINE RELIEF	10,000	WIRE			
(550)		SUB-SAHARAN AFRICA	HUNGER RELIEF	10,000	WIRE			
(551)		SUB-SAHARAN AFRICA	TREE PLANTING THIMBA DAM	10,000	WIRE			
(552)		SUB-SAHARAN AFRICA	CYCLONE RELIEF	10,000	WIRE			
(553)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(554)		SUB-SAHARAN AFRICA	CYCLONE RELIEF	10,000	WIRE			
(555)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(556)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(557)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(558)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(559)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(560)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(561)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(562)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(563)		SUB-SAHARAN AFRICA	FLOOD RELIEF NIGER	10,000	WIRE			
(564)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(565)		SUB-SAHARAN AFRICA	UPGRADE BLIND SCHOOL LIBRARY IN IVORY COAST	9,728	WIRE			
(566)		SUB-SAHARAN AFRICA	EXPAND LIONS QUEST (LOCAL MATCH)	5,722	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 PHOTOS OF THE COMPLETED PROJECT, 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.
SCHEDULE F, PART I, LINE 3 - 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 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)**

Department of the Treasury  
Internal Revenue Service

**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.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

**Open to Public  
Inspection**

Name of the organization

LIONS CLUBS INTERNATIONAL FOUNDATION

Employer identification number

23-7030455

**Part I General Information on Grants and Assistance**

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
<b>(1) SPECIAL OLYMPICS</b> 1101 PENNSYLVANIA AVE, WASHINGTON, DC 20004	52-0889518	501 (C) 3	1,869,200				(SEE STATEMENT)
<b>(2) (SEE STATEMENT)</b>	27-3521132	501 (C) 3	250,000				(SEE STATEMENT)
<b>(3) N/A</b> 300 W. 22ND STREET, OAK BROOK, IL 60523	N/A	N/A	195,000				(SEE STATEMENT)
<b>(4) DISTRICT 35 N</b> 2030 S DOUGLAS RD, CORAL GABLES, FL 33134	46-1671664	501 (C) 3	150,000				(SEE STATEMENT)
<b>(5) (SEE STATEMENT)</b>	13-3471559	501 (C) 3	150,000				(SEE STATEMENT)
<b>(6) (SEE STATEMENT)</b>	83-0504460	501 (C) 4	130,257				(SEE STATEMENT)
<b>(7) DISTRICT 2 A2</b> 212 CR. 347, LA VERNIA, TX 78121	74-2422528	501 (C) 4	110,021				(SEE STATEMENT)
<b>(8) DISTRICT 20 R1</b> 11 REVERE COURT, SUFFERN, NY 10901	13-3876121	501 (C) 4	100,000				(SEE STATEMENT)
<b>(9) MULTIPLE DISTRICT 35</b> 4163 WATOVA AVE., NORTH PORT, FL 34286	59-1148519	501 (C) 4	100,000				(SEE STATEMENT)
<b>(10) DISTRICT 5M 8</b> 6555 31ST AVE SE, ST CLOUD, MN 56304-8519	41-1390009	501 (C) 4	100,000				(SEE STATEMENT)
<b>(11) DISTRICT 5M 6</b> 2290 BUFFALO, WHITE BEAR LAKE, MN 55110-2333	23-7327790	501 (C) 4	100,000				ALL INCLUSIVE PLAYGROUND
<b>(12) (SEE STATEMENT)</b>							

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 7

**3** Enter total number of other organizations listed in the line 1 table 96

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

Cat. No. 50055P

Schedule I (Form 990) 2022



**Part II**

**Grants and Other Assistance to Governments and Organizations in the United States (continued)**

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(12) DISTRICT 2 T3 2642 MELODY LANE, ODESSA, TX 79762	45-5476984	501 (C) 4	100,000				EQUIP FOOD BANK MOBILE PANTRY
(13) MULTIPLE DISTRICT 51 322 MANSIONES DE BAIROA, CAGUAS, PR 00727-1174	60-0612118	501 (C) 4	100,000				PUERTO RICO - HURRICANE FIONA RELIEF 2022
(14) MULTIPLE DISTRICT 1 17324 HIGHWOOD DRIVE, ORLAND PARK, IL 60467	36-6212580	501 (C) 4	100,000				MULTIUSE MOBILE SCREENING UNIT
(15) DISTRICT 33 S 123 STONEBRIDGE DR, HANSON, MA 02341	85-2010728	501 (C) 4	100,000				BUILD COMMUNITY PANTRY
(16) DISTRICT 5M 11 508 CLEVELAND AVE E, KARLSTAD, MN 56732	41-1346825	501 (C) 4	100,000				RENOVATE GOODRIDGE PLAYGROUND
(17) MULTIPLE DISTRICT 35 4163 WATOVA AVE., NORTH PORT, FL 34286	59-1148519	501 (C) 4	95,888				SPECIAL OLYMPICS FLORIDA
(18) DISTRICT 37 744 ARBOR HILLS DRIVE, BILLINGS, MT 59105	38-3951273	501 (C) 4	93,856				EQUIP GALLATIN VALLEY FOOD BANK
(19) DISTRICT 12 N 709 SHANNONDALE WAY, MAYVILLE, TN 37803	23-7215448	501 (C) 4	90,000				CARYVILLE CARES PLAYGROUND FOR CHILDREN WITH DISABILITIES
(20) DISTRICT 2 X1 513 PALCREST RD, COPPELL, TX 75019	23-7099350	501 (C) 4	75,000				PURCHASE TRUCK FOR FOOD BANK
(21) CHICAGO EAGLES WINGS 4535 N MARMORA AVE, CHICAGO, IL 60630	92-0622353	501 (C) 4	75,000				MEDICAL MISSION TRIP TO PHILIPPINES (LEAD GIFT DESIGNATION)
(22) MULTIPLE DISTRICT 51 322 MANSIONES DE BAIROA, CAGUAS, PR 00727-1174	60-0612118	501 (C) 4	67,750				PUERTO RICO HOMES RECONSTRUCTION -PHASE II (SUPPLEMENTAL)
(23) DISTRICT 26 M4 1205 W CRESTVIEW, MARYVILLE, MO 64468-2249	31-0841368	501 (C) 3	62,832				EQUIP SENIOR FEEDING CENTER WITH INDUSTRIAL FREEZER
(24) MULTIPLE DISTRICT 20 102 BROOK ST, GARDEN CITY, NY 11530	16-6099328	501 (C) 4	62,042				LIONS CAMP BADGER
(25) DISTRICT 13 OH2 4871 S TOWNSHIP ROAD 197, ATTICA, OH 44807-9525	34-1196352	501 (C) 4	60,029				PURCHASE KITCHEN EQUIPMENT
(26) DISTRICT 36 O 3411 NE 126TH AVE., PORTLAND, OR 97230	23-7048601	501 (C) 4	51,880				RENOVATE HULL FOUNDATION KITCHEN AND POOL
(27) DISTRICT 2 E2 111500 CRYSTAL FALLS, FORT WORTH, TX 76244	23-7389237	501 (C) 4	50,000				ALL INCLUSIVE PLAYGROUND
(28) DISTRICT 30 M 1350 RURAL DEMPSEY RD, LOUISVILLE, MS 39339	64-6027945	501 (C) 4	50,000				MISSISSIPPI - TORNADO RELIEF 2023

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(29) MULTIPLE DISTRICT 3 1705 SPRUCE CIRCLE, SHAWNEE, OK 74804	23-7050631	501 (C) 4	50,000				ALL INCLUSIVE PLAYGROUND
(30) MULTIPLE DISTRICT 12 709 SHANNONDALE WAY, MARYVILLE, TN 37803	58-1721334	501 (C) 4	49,910				KIDSSIGHT VISION SCREENING EQUIPMENT
(31) DISTRICT 26 M5 9235 MITCHELL TRAIL, LEXINGTON, MO 64067	83-3921401	501 (C) 4	48,291				PURCHASE KIDSSIGHT VISION SCREENING EQUIPMENT
(32) DISTRICT 42 136 COTTAGE GROVE AVE, WARWICK, RI 02889	23-7052949	501 (C) 4	47,995				SECURE VEHICLE FOR HOPE'S HARVEST
(33) DISTRICT 34 C 308 S. TRAMMEL ST., ATMORE, AL 36502	47-2090807	501 (C) 4	46,392				EQUIP EYE RESEARCH INSTITUTE
(34) DISTRICT 24 C 400 N ST., BLUEFIELD, WV 24701	36-5021719	501 (C) 4	31,976				SECURE VAN FOR STEPPING STONE MISSION
(35) DISTRICT 33 A 2 BRIAN CIRCLE, GRAFTON, MA 01519-1033	82-2337530	501 (C) 4	26,250				EQUIP MOBILE CANTEEN FOR VETERANS
(36) DISTRICT 22 D 1012 GRANDVIEW AVE, BELLEFONTE, DE 19809	51-0325033	501 (C) 4	25,000				A BALL FOR ALL
(37) DISTRICT 5M 9 13281 BERRYWOOD DRIVE, 213, BAXTER, MN 56425	36-3362490	501 (C) 4	24,997				FOOD PACKING EVENT
(38) DISTRICT 2 E2 10712 GOODLAND DRIVE, DENTON, TX 76207	23-7389237	501 (C) 4	24,987				FURNISH COOK CHILDREN'S HEMATOLOGY AND ONCOLOGY
(39) DISTRICT 4 L5 13491 LA PAZ COURT, YUCAIPA, CA 92399	95-6133182	501 (C) 4	23,904				PURCHASE VISION SCREENING EQUIPMENT
(40) DISTRICT 18 L 6196 BRAIDWOOD TRAIL, ACWORTH, GA 30101	20-8734734	501 (C) 4	23,473				EQUIP CARROLL COUNTY SOUP KITCHEN WITH INDUSTRIAL FREEZER
(41) DISTRICT 2 X1 513 OAKCREST ROAD, COPPELL, TX 75019-4029	23-7099350	501 (C) 4	21,875				CONSTRUCT BEDS FOR TEXAS LIONS CAMP
(42) DISTRICT 11 A1 37637 FIVE MILE ROAD #262, LIVONIA, MI 48154	23-7077189	501 (C) 4	20,000				DIABETIC RETINOPATHY SCREENING PROJECT
(43) SEYMOUR NOON 5417 ROSE BOWL LANE, EVANSVILLE, IN 47720	35-1491714	501 (C) 4	20,000				STORM RELIEF
(44) DISTRICT 26 M1 10425 SUMMERFIELD DRIVE, ROLLA, MO 65401	43-6051716	501 (C) 4	20,000				TORNADO RECOVERY RELIEF
(45) DISTRICT 14 F 13301 N WATSON RUN RD, CONNEAUT LAKE, PA 16316-7015	23-7326285	501 (C) 4	19,807				MEADVILLE PROJECTS FOR THE BLIND
(46) DISTRICT 5M 4 832 ASH STREET S, SAUK CENTRE, MN 56378-1625	41-1280401	501 (C) 4	18,123				TORNADO RELIEF

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(47) DISTRICT 32 C 11 FISHERMENS BEND COURT, HILTON HEAD ISLAND, SC 29926-2652	57-0761379	501 (C) 4	15,835				PURCHASE VISION SCREENING DEVICE
(48) DISTRICT 20 Y 5608 RIDGE VIEW TER, LOWVILLE, NY 13367-1619	82-2262906	501 (C) 4	15,000				PURCHASE CAMERAS FOR DIABETIC SCREENING
(49) INDIANA LIONS DISTRICT 25-C 8805 E. 200 STREET, ZIONSVILLE, IN 46077	45-4380265	501 (C) 4	15,000				LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2023
(50) LIONS DISTRICT 43-K 2629 THOMPSON DRIVE , BOWLING GREEN, KY 42104	31-0919835	501 (C) 4	15,000				LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2023
(51) DISTRICT 5 NW 209 CHEYENNE AVE., BISMARCK, ND 58501	45-0456177	501 (C) 4	15,000				MOBILE VISION STEM EXHIBIT
(52) LIONS QUEST PROJECT INC. 3305 INDIAN LANE, RENO, NV 89506	94-3121982	501 (C) 3	15,000				LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2023
(53) MULTIPLE DISTRICT 51 URB SANTA MARIA D 34, SABANA GRANDE, PR 00637	60-0612118	501 (C) 4	14,885				EQUIPMENT FOR CORNEAL TISSUE TRANSPLANT
(54) DISTRICT 13 OH2 4871 S TOWNSHIP RD 197, ATTICA, OH 44807	34-1196352	501 (C) 4	13,479				PURCHASE KITCHEN EQUIPMENT (LOCAL MATCH)
(55) MULTIPLE DISTRICT 1 17324 HIGHWOOD DRIVE, ORLAND PARK, IL 60467	36-6212580	501 (C) 4	12,029				EQUIP MOBILE SCREENING UNIT
(56) DISTRICT 5M 11 508 CLEVELAND AVE E, KARLSTAD, MN 56732	41-1346825	501 (C) 4	11,660				KIDS SIGHT PROGRAM
(57) DISTRICT 20 K1 1157 E 101ST ST, BROOKLYN, NY 11236	11-3388295	501 (C) 4	11,450				PURCHASE RETINAVUE 700 IMAGER
(58) DISTRICT 30 M 1350 RURAL DEMPSEY RD, LOUISVILLE, MS 39339	64-6027945	501 (C) 4	11,232				EQUIP SCHOOL VISION SCREENING PROGRAM
(59) DISTRICT 27 A1 343 WEST MILWAUKEE AVE, FORT ATKINSON, WI 53538	39-1447361	501 (C) 4	11,043				EQUIP SCHOOL VISION SCREENING PROGRAM
(60) DISTRICT 5M 7 72 170TH AVENUE NW, ANDOVER, MN 55304	41-1361379	501 (C) 4	10,200				SPONSOR A VETERAN
(61) DISTRICT 4 C6 PO BOX 1050, BOULDER CREEK, CA 95006	77-0324761	501 (C) 4	10,159				VISION AND GLUCOSE SCREENING EQUIPMENT
(62) DISTRICT 25 E 5417 ROSE BOWL LANE, EVANSVILLE, IN 47720	46-1983200	501 (C) 4	10,000				TORNADO RELIEF
(63) DISTRICT 5M 2 67194 COUNTY ROAD 46, ALDEN, MN 56009	41-6039926	501 (C) 4	10,000				BUDDY BAGS FOR SICK CHILDREN
(64) DISTRICT 25 F 5224 HONEY COMB LANE, INDIANAPOLIS, IN 46221	31-0949224	501 (C) 4	10,000				TORNADO RELIEF
(65) DISTRICT 34 B 1301 VALLEY ST, PELL CITY, AL 35128	63-0892764	501 (C) 4	10,000				TORNADO RELIEF

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(66) DISTRICT 4 A2 PO BOX 652, LEMOORE, CA 93245	23-7086254	501 (C) 4	10,000				FLOOD RELIEF
(67) DISTRICT 30 M 1350 RURAL DEMPSEY RD, LOUISVILLE, MS 39339	64-6027945	501 (C) 4	10,000				TORNADO RELIEF
(68) DISTRICT 7 O 1600 KYLE COVE, JONESBORO, AR 72401-4667	51-0177276	501 (C) 4	10,000				TORNADO RELIEF
(69) DISTRICT 35 O 3020 PALERMO CT, MOUNT DORA, FL 32757	46-0684975	501 (C) 4	10,000				HURRICANE RELIEF
(70) DISTRICT 204 P.O. BOX 20207, BARRIGADA G M F, GU 96921	66-0634946	501 (C) 4	10,000				TYPHOON RELIEF
(71) DISTRICT 5M 4 832 ASH STREET S, SAUK CENTRE, MN 56378-1625	41-1280401	501 (C) 4	10,000				RELIEF FOR UKRAINE
(72) DISTRICT 20 N 6 NORTH HILL DRIVE, WEST SENECA, NY 14224	23-7248810	501 (C) 4	10,000				BLIZZARD RELIEF
(73) DISTRICT 13 OH6 5371 CUBA RD. , WILMINGTON, OH 45177	31-1181905	501 (C) 4	10,000				BASIC SUPPLIES FOR FAMILIES AFFECTED BY TORNADO
(74) DISTRICT 12 S 1114 HATTIE STREET, LAFAYETTE, TN 37083	46-1298726	501 (C) 4	10,000				TORNADO RELIEF
(75) DISTRICT 34 C 308 S. TRAMMEL ST., ATMORE, AL 36502	47-2090807	501 (C) 4	10,000				TORNADO RELIEF
(76) DISTRICT 30 S 264 HIDDEN HILLS PKY, BRANDON, MS 39047	26-2492853	501 (C) 4	10,000				TORNADO RELIEF
(77) DISTRICT 51 C 6 COTTA RINCON, CIDRA, 739, RQ	66-0359767	501 (C) 4	10,000				HURRICANE RELIEF
(78) DISTRICT 51 E ESTANCIAS DEL PARQUE ST-A NUMERO E- , GUAYNABO, 969, RQ	66-0357992	501 (C) 4	10,000				HURRICANE RELIEF
(79) DISTRICT 12 L 785 GRAYSON LANE, JACKSON, TN 38305	23-7240556	501 (C) 4	10,000				TORNADO RELIEF
(80) DISTRICT 3 NW 1612 S. WESTRIDGE, STILLWATER, OK 74074	82-3111524	501 (C) 4	10,000				WILDFIRE RELIEF
(81) DISTRICT 29 C 138 SPLIT RAIL DRIVE, SOUTH CHARLESTON, WV 25309	81-3156182	501 (C) 4	10,000				FLOOD RELIEF
(82) DISTRICT 7 N 12416 EAGLE POINTE PLACE, LITTLE ROCK, AR 72211	51-0177275	501 (C) 4	10,000				TORNADO RELIEF
(83) DISTRICT 43 Y 202 JANE HILL ROAD, ASHLAND, KY 41101	61-6025371	501 (C) 4	10,000				FLOOD RELIEF
(84) DISTRICT 51 O HC 02 BOX 4580, VILLALBA, PR 00766	66-0791672	501 (C) 3	10,000				HURRICANE RELIEF

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(85) DISTRICT 35 I 11440 PENNSVILLE COURT, NEW PORT RICHEY, FL 34654	65-0718435	501 (C) 4	9,943				HURRICANE RELIEF
(86) DISTRICT 4 L5 13491 LA PAZ COURT, YUCAIPA, CA 92399	95-6133182	501 (C) 4	9,907				SNOW STORM RELIEF
(87) DISTRICT 19 C 1527 VISTA DRIVE, PUYALLUP, WA 98372-5104	37-1611850	501 (C) 4	9,292				EXPAND LIONS LOW VISION RESOURCE CENTER
(88) DISTRICT 32 C 11 FISHERMENS BEND COURT, HILTON HEAD ISLAND, SC 29926-2652	30-0327084	501 (C) 4	9,043				REQUEST FOR DISASTER TRAILER
(89) DISTRICT 8 O 502 CHENEAU RD, KAPLAN, LA 70548	46-3408569	501 (C) 4	9,000				RESTOCK DISASTER RELIEF TRAILER
(90) PARKERS PRAIRIE 325 DAYTON AVE, PARKERS PRAIRIE, MN 56361-9611	41-6053927	501 (C) 4	8,884				PARKERS PRAIRIE VETERANS MEMORIAL PARK
(91) DISTRICT 7 N 12416 EAGLE POINTE PLACE, LITTLE ROCK, AR 72211	51-0177275	501 (C) 4	8,800				PURCHASE SUPPLIES FOR ALERT TRAILER
(92) DISTRICT 19 G 30305 J PL, OCEAN PARK, WA 98640	23-7312560	501 (C) 4	8,088				PURCHASE TWO PLUSOPTIX VISION SCREENERS
(93) DISTRICT 3 E 3504 WOODLAND RD, BARTLESVILLE, OK 74006	82-3871209	501 (C) 4	7,990				TORNADO RELIEF
(94) DISTRICT 7 I 6732 LEISURE LOOP, OZARK, AR 72949-9873	23-7083895	501 (C) 4	7,000				RESTOCK ALERT TRAILER
(95) DISTRICT 14 K 1305 JOHNSON STREET, EASTON, PA 18040	23-1979422	501 (C) 4	6,600				REPLACE THE ROOF AT BEACON LODGE CAMP
(96) DISTRICT 27 E2 N5635 MOSS HILL RD., BLACK RIVER FALLS, WI 54615	39-1912519	501 (C) 4	6,500				WHEELCHAIR ACCESSIBLE VAN FOR THE DISABLED
(97) DISTRICT 12 N 322 MERIWETHER STREET, PIGEON FORGE, TN 37863	23-7215448	501 (C) 4	6,500				FOOD PACKAGING EVENT
(98) NEW FREEDOM 37 SOUTH 3RD ST., NEW FREEDOM, PA 17349	23-7192177	501 (C) 4	6,250				TREE PLANTING (ENEL ENERGY)
(99) DISTRICT 33 K 45 EASTSIDE ROAD, WRENTHAM, MA 02093	23-7328862	501 (C) 4	6,135				EQUIP EYEGLASSES RECYCLING PROGRAM
(100) DISTRICT 24 C 400 N ST., BLUEFIELD, WV 24701	36-5021719	501 (C) 4	6,000				SECURE VAN FOR STEPPING STONE MISSION (LOCAL MATCH)
(101) DISTRICT 13 OH1 1676 MARIETTA RD, LANCASTER, OH 43130	36-4839441	501 (C) 4	5,899				PURCHASE EQUIPMENT FOR CHILDREN'S HOSPITAL
(102) DISTRICT 4 A1 10419 CLARIBEL RD., OAKDALE, CA 95361	23-7426310	501 (C) 4	5,410				FLOOD RELIEF
(103) DALLASTOWN 430 DARTHA DRIVE, DALLASTOWN, PA 17313	23-6296413	501 (C) 4	5,250				TREE PLANTING (ENEL ENERGY)

Part IV

**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 PHOTOS OF THE COMPLETED PROJECT, 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	WORLD CENTRAL KITCHEN, INC. 200 MASSACHUSETTS AVE NW, WASHINGTON, DC 20001
(5) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	RESEARCH TO PREVENT BLINDNESS, INC. 360 LEXINGTON AVE. 22ND FLOOR, NEW YORK, NY 10017
(6) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	MULTIPLE DISTRICT 33 11 ADDINGTON CIRCLE, EAST WEYMOUTH, MA 02189-3001
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	SPECIAL OLYMPICS: LCIF SPECIAL OLYMPICS PARTNERSHIP (2022-2023)
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	WORLD CENTRAL KITCHEN, INC. : HUMANITARIAN AWARD 2022-2023
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	N/A: LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2023
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	DISTRICT 35 N: J & J SIGHT FOR KIDS - SOUTH FLORIDA: YEAR 2
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: TEACHING KITCHEN FOR YOUTH DIABETES CAMP
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	DISTRICT 2 A2: SUPPORT DIABETES PREVENTION IN SAN ANTONIO
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	DISTRICT 20 R1: POOL RENOVATION FOR VCB VISIONS CENTER ON BLINDNESS
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	MULTIPLE DISTRICT 35: FLORIDA - HURRICANE IAN RELIEF 2022
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	DISTRICT 5M 8: SARTELL LIONS INCLUSIVE PLAYGROUND

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

**Open to Public Inspection**

LIONS CLUBS INTERNATIONAL FOUNDATION

Employer identification number

23-7030455

**Part I Questions Regarding Compensation**

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

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input checked="" type="checkbox"/> Travel for companions          | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> 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 or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain . . . . .

	Yes	No
<b>1b</b>	✓	

**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? . . . . .

<b>2</b>	✓	
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**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.

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

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

- a** Receive a severance payment or change-of-control payment? . . . . .
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? . . . . .
- c** Participate in or receive payment from an equity-based compensation arrangement? . . . . .
- If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

<b>4a</b>		✓
<b>4b</b>		✓
<b>4c</b>		✓

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

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

- a** The organization? . . . . .
- b** Any related organization? . . . . .
- If "Yes" on line 5a or 5b, describe in Part III.

<b>5a</b>		✓
<b>5b</b>		✓

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

- a** The organization? . . . . .
- b** Any related organization? . . . . .
- If "Yes" on line 6a or 6b, describe in Part III.

<b>6a</b>		✓
<b>6b</b>		✓

**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 . . . . .

<b>7</b>		✓
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**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III . . . . .

<b>8</b>		✓
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**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? . . . . .

<b>9</b>		
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**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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	REBECCA DAOU LCIF EXECUTIVE ADMINISTRATOR	(i) 246,045	0	138	16,333	25,235	287,751	0
	(ii)	0	0	0	0	0	0	0
2	CHRISTOPHER PLUNKETT DIV. MGR., LCIF DEVELOPMENT	(i) 140,429	5,000	138	8,544	8,159	162,270	0
	(ii)	0	0	0	0	0	0	0
3	KASONDRA BYRD DIV. MGR., GLOBAL GRANTS	(i) 119,073	0	138	12,445	26,750	158,406	0
	(ii)	0	0	0	0	0	0	0
4		(i)						
	(ii)							
5		(i)						
	(ii)							
6		(i)						
	(ii)							
7		(i)						
	(ii)							
8		(i)						
	(ii)							
9		(i)						
	(ii)							
10		(i)						
	(ii)							
11		(i)						
	(ii)							
12		(i)						
	(ii)							
13		(i)						
	(ii)							
14		(i)						
	(ii)							
15		(i)						
	(ii)							
16		(i)						
	(ii)							

Part III

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

Return Reference - Identifier	Explanation
<p>SCHEDULE J, PART I, LINE 1A - TRAVEL FOR COMPANIONS</p>	<p>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 LCIF 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.</p> <p>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.</p> <p>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.</p>

**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

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 4C - 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 78 EMPLOYEES, THE INTERNATIONAL ASSOCIATION OF LIONS CLUBS, THE COMMON PAYING AGENT, REPORTED 321 EMPLOYEES ON FORM W-3 FOR 2022.
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 FOUR 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	<p>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 CHIEF FINANCIAL OFFICER ALSO REVIEW.</p> <p>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.</p>
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	<p>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.</p> <p>PROCEDURES:</p> <p>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.</p> <p>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.</p> <p>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</p>

Return Reference - Identifier	Explanation																																													
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	<p>SALARY REVIEW IS ADMINISTERED BY LIONS CLUBS INTERNATIONAL ON BEHALF OF LIONS CLUBS INTERNATIONAL FOUNDATION. LINE 15A IS MARKED "NO" SINCE SALARY ADMINISTRATION IS NOT DIRECTLY HANDLED BY THE FILING ORGANIZATION.</p> <ol style="list-style-type: none"> <li>SALARY SURVEYS ARE CONDUCTED ANNUALLY TO ASSURE THE SALARY RANGES AND SALARY INCREASE FIGURES USED ARE COMPARABLE TO SALARIES PAID BY THE EXISTING LABOR MARKET.</li> <li>A PERFORMANCE REVIEW OF THE EXECUTIVE ADMINISTRATOR IS CONDUCTED ANNUALLY BY THE LIONS CLUBS INTERNATIONAL FOUNDATION EXECUTIVE COMMITTEE. SALARY INCREASE AND/OR BONUS FOR THE EXECUTIVE ADMINISTRATOR SHALL BE DETERMINED INDIVIDUALLY BY THE EXECUTIVE COMMITTEE, ACTING IN CAPACITY OF THE COMPENSATION COMMITTEE.</li> <li>FORM 990 OF SIMILAR ORGANIZATIONS ARE REVIEWED PERIODICALLY IN DETERMINING THE EXECUTIVE ADMINISTRATOR'S SALARY.</li> <li>THE SALARY REVIEW PROCESS IS CONTEMPORANEOUSLY DOCUMENTED</li> </ol>																																													
FORM 990, PART VI, LINE 15B - PROCESS FOR ESTABLISHING COMPENSATION	THE FOUNDATION DOES NOT COMPENSATE ANY OTHER OFFICERS OR KEY EMPLOYEES; THEREFORE, THIS QUESTION HAS BEEN INTENTIONALLY CHECKED "NO."																																													
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 AVAILABLE TO THE PUBLIC	<p>LIONS CLUBS INTERNATIONAL FOUNDATION'S FORM 990 IS AVAILABLE BY USING THE SEARCH ENGINE ON THE WEBSITE AT WWW.LIONSCLUBS.ORG.</p> <p>THE FOUNDATION'S FORM 990-T AND UNSIGNED FORM 1023 ARE AVAILABLE UPON REQUEST.</p> <p>A CURRENT COPY OF THE FOUNDATION'S 501(C)(3) DETERMINATION LETTER FROM THE IRS IS ALSO AVAILABLE UPON REQUEST.</p>																																													
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	<p>LIONS CLUBS INTERNATIONAL FOUNDATION'S AUDITED FINANCIAL STATEMENTS ARE AVAILABLE BY USING THE SEARCH ENGINE ON THE WEBSITE AT WWW.LIONSCLUBS.ORG.</p> <p>THE FOUNDATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT MADE AVAILABLE TO THE PUBLIC.</p>																																													
FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES	<table border="1"> <thead> <tr> <th data-bbox="467 1016 751 1087">(a) Description</th> <th data-bbox="760 1016 943 1087">(b) Total Expenses</th> <th data-bbox="951 1016 1135 1087">(c) Program Service Expenses</th> <th data-bbox="1143 1016 1326 1087">(d) Management and General Expenses</th> <th data-bbox="1334 1016 1513 1087">(e) Fundraising Expenses</th> </tr> </thead> <tbody> <tr> <td data-bbox="467 1098 751 1142">HEADQUARTERS' COST ALLOCATION</td> <td data-bbox="760 1098 943 1142">4,313,892</td> <td data-bbox="951 1098 1135 1142">1,488,332</td> <td data-bbox="1143 1098 1326 1142">1,865,545</td> <td data-bbox="1334 1098 1513 1142">960,015</td> </tr> <tr> <td data-bbox="467 1152 751 1176">PROFESSIONAL FEES</td> <td data-bbox="760 1152 943 1176">1,163,906</td> <td data-bbox="951 1152 1135 1176">920,884</td> <td data-bbox="1143 1152 1326 1176">-1,144</td> <td data-bbox="1334 1152 1513 1176">244,166</td> </tr> <tr> <td data-bbox="467 1186 751 1230">LIONS QUEST PROGRAM DEVELOPMENT</td> <td data-bbox="760 1186 943 1230">597,797</td> <td data-bbox="951 1186 1135 1230">597,797</td> <td data-bbox="1143 1186 1326 1230"></td> <td data-bbox="1334 1186 1513 1230"></td> </tr> <tr> <td data-bbox="467 1241 751 1302">LIONS QUEST FULFILLMENT/WAREHOUSE SERVICES</td> <td data-bbox="760 1241 943 1302">77,107</td> <td data-bbox="951 1241 1135 1302">77,107</td> <td data-bbox="1143 1241 1326 1302"></td> <td data-bbox="1334 1241 1513 1302"></td> </tr> <tr> <td data-bbox="467 1312 751 1356">AUXILIARY STAFF EXPENSES</td> <td data-bbox="760 1312 943 1356">12,000</td> <td data-bbox="951 1312 1135 1356"></td> <td data-bbox="1143 1312 1326 1356"></td> <td data-bbox="1334 1312 1513 1356">12,000</td> </tr> <tr> <td data-bbox="467 1367 751 1390">TRANSLATION EXPENSE</td> <td data-bbox="760 1367 943 1390">60,574</td> <td data-bbox="951 1367 1135 1390">21,473</td> <td data-bbox="1143 1367 1326 1390">2,693</td> <td data-bbox="1334 1367 1513 1390">36,408</td> </tr> <tr> <td data-bbox="467 1400 751 1444">DONOR RECOGNITION FULFILLMENT</td> <td data-bbox="760 1400 943 1444">63,121</td> <td data-bbox="951 1400 1135 1444"></td> <td data-bbox="1143 1400 1326 1444">63,121</td> <td data-bbox="1334 1400 1513 1444"></td> </tr> <tr> <td data-bbox="467 1455 751 1478"><b>Total</b></td> <td data-bbox="760 1455 943 1478"><b>6,288,397</b></td> <td data-bbox="951 1455 1135 1478"><b>3,105,593</b></td> <td data-bbox="1143 1455 1326 1478"><b>1,930,215</b></td> <td data-bbox="1334 1455 1513 1478"><b>1,252,589</b></td> </tr> </tbody> </table>	(a) Description	(b) Total Expenses	(c) Program Service Expenses	(d) Management and General Expenses	(e) Fundraising Expenses	HEADQUARTERS' COST ALLOCATION	4,313,892	1,488,332	1,865,545	960,015	PROFESSIONAL FEES	1,163,906	920,884	-1,144	244,166	LIONS QUEST PROGRAM DEVELOPMENT	597,797	597,797			LIONS QUEST FULFILLMENT/WAREHOUSE SERVICES	77,107	77,107			AUXILIARY STAFF EXPENSES	12,000			12,000	TRANSLATION EXPENSE	60,574	21,473	2,693	36,408	DONOR RECOGNITION FULFILLMENT	63,121		63,121		<b>Total</b>	<b>6,288,397</b>	<b>3,105,593</b>	<b>1,930,215</b>	<b>1,252,589</b>
(a) Description	(b) Total Expenses	(c) Program Service Expenses	(d) Management and General Expenses	(e) Fundraising Expenses																																										
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FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES	<table border="1"> <thead> <tr> <th data-bbox="467 1503 1304 1533">(a) Description</th> <th data-bbox="1312 1503 1513 1533">(b) Amount</th> </tr> </thead> <tbody> <tr> <td data-bbox="467 1543 1304 1583">RECOVERIES OF PRIOR YEAR GRANTS NETTED AGAINST GRANT EXPENSE ON AUDITED FINANCIAL STATEMENTS</td> <td data-bbox="1312 1543 1513 1583">3,240,608</td> </tr> </tbody> </table>	(a) Description	(b) Amount	RECOVERIES OF PRIOR YEAR GRANTS NETTED AGAINST GRANT EXPENSE ON AUDITED FINANCIAL STATEMENTS	3,240,608																																									
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**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

LIONS CLUBS INTERNATIONAL FOUNDATION

**Related Organizations and Unrelated Partnerships**

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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

**Open to Public Inspection**

Employer identification number

23-7030455

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) .....					
(2) .....					
(3) .....					
(4) .....					
(5) .....					
(6) .....					

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) (SEE STATEMENT) .....							
(2) .....							
(3) .....							
(4) .....							
(5) .....							
(6) .....							
(7) .....							

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

Cat. No. 50135Y

Schedule R (Form 990) 2022

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512–514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)(SEE STATEMENT)-----									
(2)-----									
(3)-----									
(4)-----									
(5)-----									
(6)-----									
(7)-----									

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

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?		
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .		✓
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .		✓
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .		✓
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .		✓
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .		✓
<b>f</b> Dividends from related organization(s) . . . . .		✓
<b>g</b> Sale of assets to related organization(s) . . . . .		✓
<b>h</b> Purchase of assets from related organization(s) . . . . .		✓
<b>i</b> Exchange of assets with related organization(s) . . . . .		✓
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .		✓
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .		✓
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .		✓
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .		✓
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .		✓
<b>o</b> Sharing of paid employees with related organization(s) . . . . .		✓
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .		✓
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .		✓
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .		✓
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .		✓

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

**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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512–514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) .....													
(2) .....													
(3) .....													
(4) .....													
(5) .....													
(6) .....													
(7) .....													
(8) .....													
(9) .....													
(10) .....													
(11) .....													
(12) .....													
(13) .....													
(14) .....													
(15) .....													
(16) .....													

**Part II****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) Section 512(b)(13) controlled 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	✓	

**Part IV****Identification of Related Organizations Taxable as a Corporation or Trust** (continued)

(a) Name, address and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C-corp, S-corp or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) PERPETUAL TRUST (2) BENEFICIAL INTEREST IN DONOR TRUSTS, C/O LCIF 300 WEST 22ND STREET, OAK BROOK, IL 60523	DISTRIBUTION OF TRUST ASSETS TO BENEFICIARIES			TRUST					