

BUILT TO ENDURE

ReSurge International
2026 ANNUAL REPORT



Claire Lachance with a ReSurge patient in Kathmandu, Nepal

Letter from the president and CEO

Dear ReSurge Community,

On behalf of the ReSurge staff and board of directors, we are honored to share our ReSurge International Fiscal Year 2026 Annual Report. This continues to be a challenging time for global health, as cuts to international aid force many programs around the world to scale back. Amid that uncertainty, one thing has become abundantly clear: ReSurge's model is working, and it is growing.

In May, I had the opportunity to represent ReSurge alongside hundreds of practitioners, policymakers, funders, and advocates at the World Health Organization's 79th World Health Assembly. The dominant theme at the Assembly was a welcome shift away from short-term, "fly-in, fly-out" models and toward a locally led model, which ReSurge has championed for decades which centers local leaders, lasting systems, and integrated teams delivering transformative, measurable impact.

What I heard confirmed what we have long believed: ReSurge is built for this moment, and our model is built to endure.

Lasting access to reconstructive surgery depends not on short-term interventions, but on strong local surgical systems that can withstand crises, funding shifts, and changing needs. This year offered powerful reminders of why that matters. Our partners and programs faced civil unrest in Nepal, an Ebola outbreak in Uganda, and political instability in Ecuador. Yet through these challenges, local surgical teams remained in their communities, continuing to provide care. This is intentional. ReSurge is not a disaster-response or emergency medical organization; our role is to help countries build the surgical capacity to care for their own communities, in times of stability and crisis.

You will see that idea throughout this report. In Vietnam, you'll meet Nam, who was injured by an unexploded landmine, a legacy of a brutal war that ended decades ago. His story is a reminder that the need for reconstructive surgery persists long after a crisis has left the world's attention. After more than 30 years of partnership in Vietnam, ReSurge-supported surgical teams and institutions are there to provide the specialized care patients like Nam need.

And the evidence of this model is not only in the stories, but in the numbers. In FY26, ReSurge impacted a record-breaking 32,261 patients and trained 3,523 medical professionals in low-income countries.

Our expansion in East Africa shows what building for the future looks like. Despite the loss of USAID funding and broader uncertainty across the global health sector, ReSurge expanded our investment in Uganda and Tanzania, strengthening not only access to surgical care, but the multidisciplinary teams, training programs, and local institutions required to sustain it.

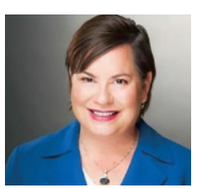
That is what "Built to Endure" means to us. It is not simply about responding to the challenges of today. It is about investing in local expertise and systems that will be there for patients tomorrow—and for generations to come.

Thank you for believing in this work and for helping us build something that lasts.

With gratitude,



Claire Lachance



Claire Lachance
President & CEO



Manisha Shetty Gulati
Board Chair
Fiscal Year 2026



John Cochrane
Incoming Board Chair
Fiscal Year 2027

ReSurge International

BUILT TO ENDURE
ANNUAL REPORT FOR FISCAL YEAR 2026

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OUR WORK

ReSurge patients and breast cancer survivors await microsurgery in Hué, Vietnam

ReSurge patient Nhu Le and anesthesiologist Dr. Hien Nguyen in Huế, Vietnam

Transforming Lives Through Reconstructive Surgery

Burns. Road-traffic injuries. Congenital conditions. Cancer. These aren't cosmetic problems. They can mean chronic pain, lost mobility, the inability to work, dependence on others, and lives permanently limited by conditions that are treatable. Reconstructive surgery doesn't just repair bodies, it restores possibilities.

FUNCTION
The ability to walk, work, wash, eat, hold a child, and use a tool.

INDEPENDENCE
The freedom to care for yourself, earn a living, and take part fully in family, school, and community life.

DIGNITY
The chance to move through the world without being defined by an injury or condition.

The Challenge

Five billion people lack access to safe, timely, or affordable surgery.

The gap is especially profound in low- and middle-income countries (LMICs), where shortages of specialized surgeons, trained surgical teams, equipment, and facilities can make reconstructive surgery effectively unavailable.

90% of the global burden of surgical disease occurs in low-income countries



The Opportunity

Performing one surgery changes a life. Training one surgeon can change more than 400,000. Here's the study that quantified our impact.

A Multiplier Effect: One Trained Surgeon Impacts 400,000 Patients Over Time*

A recent ReSurge and Stanford study found that a single ReSurge-trained reconstructive surgeon will go on to impact an average of 10,000 patients over their career. When that surgeon becomes a trainer, they are projected to impact more than 400,000 patients through the surgeons and clinical teams they mentor.

This groundbreaking research, which won the PRS Global Open Award for best paper of 2025, quantifies what we've long known: our train-the-trainer model is built to scale.

*Cai, L, Meyers, N, Chang, J. Modeling the Lifetime Impact of Reconstructive Plastic Surgery Training: Implications for Building Capacity in Global Surgery. Plast Reconstr Surg Glob Open. 2024 Feb 5;12(2):e5577. https://doi.org/10.1097/GOX.0000000000005577

ReSurge Surgical Team Training in Kampala, Uganda

The Solution

Build local capacity to care for tomorrow's patients—and the patients who come after them.

Here's how ReSurge will do it.

The Plan

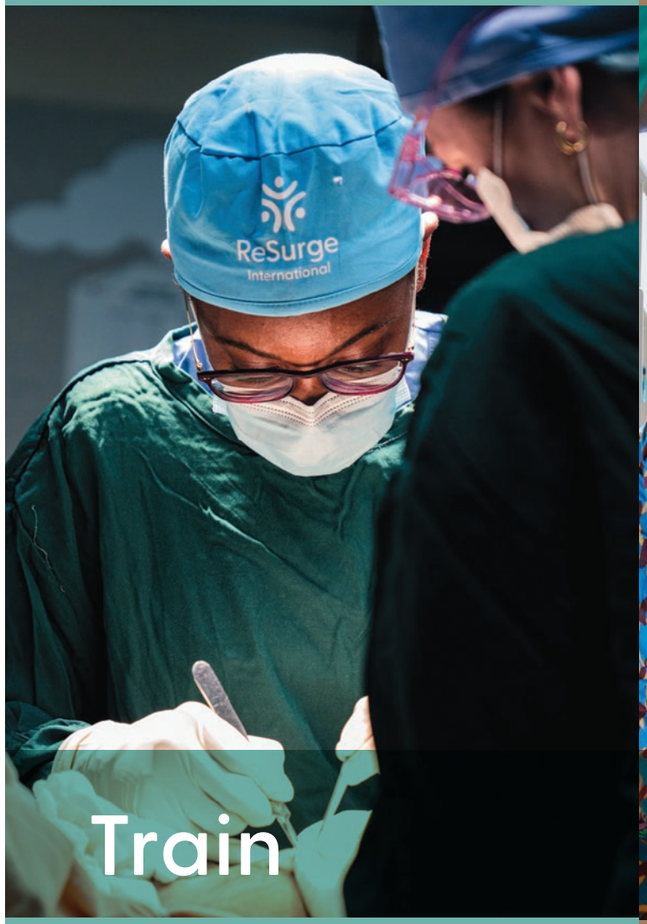
Our model for sustainable change

We don't just bring care to communities, we help communities build the skills and capacity to provide that care for themselves.

ReSurge International

Theory of Change

This is how we structure our work and resources to achieve our vision.



Train

HOW WE DO IT:

- → Training hubs
- → Hands-on / virtual Training
- → Residency, fellowship, and scholarship programs

OUR GOAL:

The next generation of surgical teams are trained in reconstructive surgical care, increasing patient access



Treat

HOW WE DO IT:

- → Partner with local Surgical Outreach Partners to provide free surgical care

OUR GOAL:

Patients in LMIC (low- and middle-income countries) communities receive free reconstructive surgical care, for improved quality of life



Transform

HOW WE DO IT:

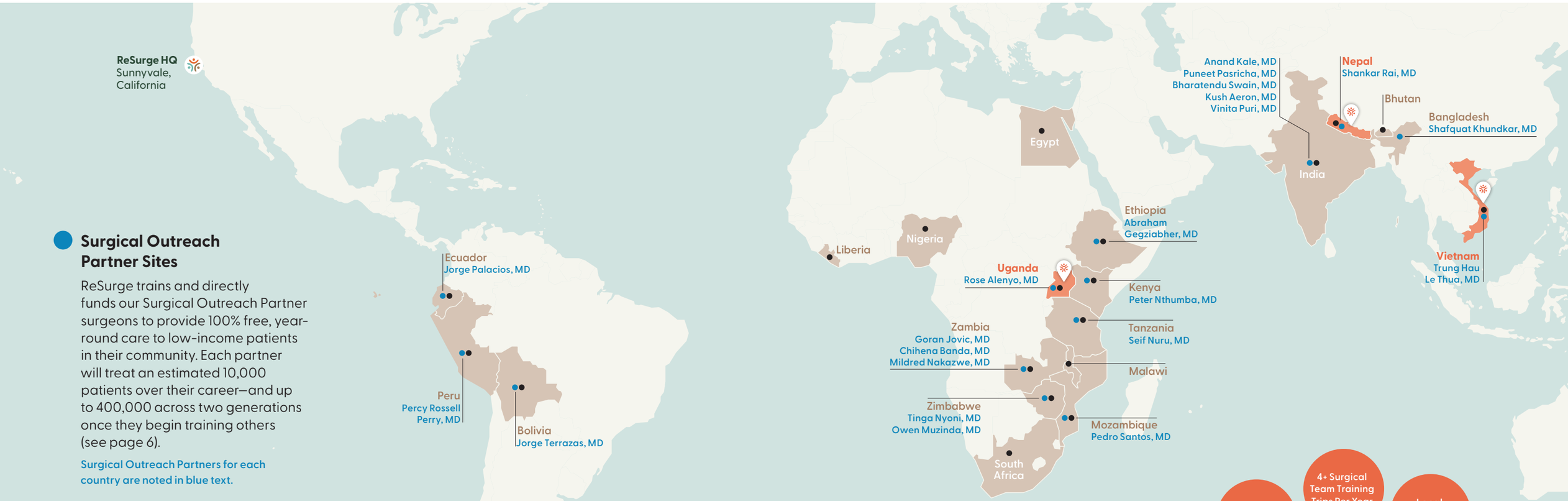
- → Global surgical advocacy
- → Hospital equipment provision and maintenance

OUR GOAL:

Every level of the surgical system is strengthened to increase capacity for high-quality reconstructive surgical care

Where We Work

ReSurge International



Surgical Outreach Partner Sites

ReSurge trains and directly funds our Surgical Outreach Partner surgeons to provide 100% free, year-round care to low-income patients in their community. Each partner will treat an estimated 10,000 patients over their career—and up to 400,000 across two generations once they begin training others (see page 6).

Surgical Outreach Partners for each country are noted in blue text.

Pioneering Women in Reconstructive Surgery (PWRS) and Matolase Scholarship Sites

Sponsored by our SkinCeuticals partners, the PWRS and Matolase Mtonga scholarship programs are training the next generation of women surgeons in low-income countries through surgical training, leadership development, and mentorship.

PWRS PIONEERING WOMEN IN RECONSTRUCTIVE SURGERY
SkinCeuticals + ReSurge International

ReSurge Hubs

A ReSurge training hub is a hospital-based anchor site that trains the next generation of surgical teams through year-round, hands-on and virtual training.

Each hub brings together nine essential elements, all designed to build and scale surgical capacity.



OUR IMPACT

ReSurge patient Razia with Dr. Daphine Ezati Ayikoru in Kampala, Uganda

Our Impact by the Numbers

2026 Fiscal Year



Patients impacted through direct care and training:

32,261

Local medical professionals trained:

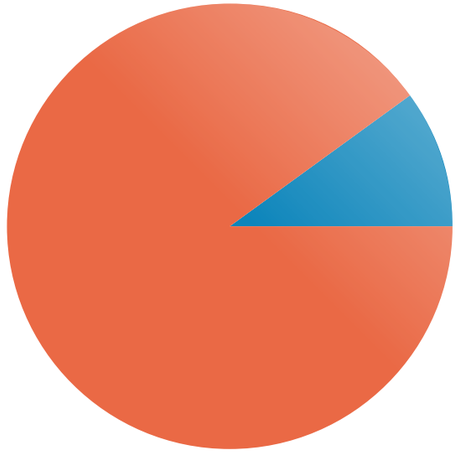
3,523



112 medical volunteers donated 5,388 training hours valued at $3,757,017

21

Trained and certified local Surgical Outreach Partners across 14 countries



90%
of surgeries are performed by local Surgical Partners

10%
of surgeries are hands-on training cases done on ReSurge Surgical Team Training Trips

Inside the 90%

Local surgeons in action

The majority of ReSurge surgeries are performed by locally trained surgical partners who provide free care, primarily to children, thanks to the support of ReSurge donors. This model ensures patients can access care close to home, year-round, while building lasting local surgical capacity.

- 62% of patients are under 18
- 48% of procedures treat burn injuries
- 18% treat cleft lip and palate
- 16% treat other congenital conditions, such as fused fingers and missing or underdeveloped ears

Inside the 10%

Advancing local surgical capacity

ReSurge medical volunteer trainers work alongside local surgical teams to provide hands-on teaching for complex procedures such as craniofacial reconstruction and microsurgery. Local surgeons learn the skills to perform these procedures independently in the future.

The model is working.

ReSurge pioneered the shift from fly-in missions to training local teams. Today, local surgeons perform nine out of ten ReSurge surgeries, while medical volunteers teach complex procedures. This approach expands access, strengthens local capacity, and equips clinicians to provide safe, affordable reconstructive care for years to come.

Meet Nam

ReSurge Patient, Vietnam

Healing the Wounds War Left Behind

Reconstructive surgery treats congenital conditions, trauma, and cancer. It also heals the wounds of war and unrest, often long after the fighting ends. More than 50 years after the Vietnam War, unexploded bombs and landmines still threaten families across central Vietnam, especially near the former DMZ. Clearance efforts have made accidents far rarer, but they still happen. ReSurge works in these communities so that when they do, surgical care is within reach.



Dr. Hien Nguyen on a home visit at Nam's family farm

On the day of the accident, Nam was conducting business as usual. He returned to Thăng Bình after driving a long-distance coach between Đà Nẵng and Ho Chi Minh City. He had two trips to complete that day, with a nice break in between. Instead of resting, Nam went to help out his family, who were working in the field planting soy.

It was here that Nam struck a landmine while digging into the ground.

Nam lives in rural Thăng Bình with his mother and father. Here, working means surviving. Families rely on every member bringing in an income, and many work a second job just to make ends meet. If someone in the household has an accident or emergency, their family carries two burdens at once: the emotional weight of caring for an injured loved one and the loss of a large portion of their household income.

For Nam's family, both burdens arrived in an instant. In the moments after the blast, nearby villagers called an ambulance, but it would take hours to arrive. The first one sent out to him couldn't make it, but thankfully, a second ambulance from a charity organization was able to pick him up and take him to the district hospital.

The injuries that Nam sustained proved to be too severe for both the district hospital and the Đà Nẵng city hospital, and Nam spent a total of 16 hours being transferred to the Hanoi burn hospital, where he would spend the next five months while he recovered from the incident.

The emotional and physical toll was devastating. What carried Nam through was the thought of home. "When I stay in the hospital, I look forward to the day when I can come home," he says. "I feel very happy to be home."



Nam with his parents Ha and Dan





ReSurge Aids Nam's Recovery

Returning home was just the start of his recovery process, and where ReSurge came in. The explosion left Nam with severe burns from head to toe; it disfigured his right hand, took his left hand completely, and left him with severe loss of vision. He was able to survive the explosion, but he was completely stripped of his independence. The severity of the injuries he sustained meant that he couldn't work anymore and that he would need intensive care after coming home. Nam worried that his condition after the accident was causing unnecessary hardships for his family to endure.

Burns and blast injuries keep changing the body long after the wound has closed. Scars tighten, hands stiffen, eyelids won't fully open. After an injury like Nam's, reconstructive surgery is often what makes recovery possible, restoring the function people need to work, care for themselves, and stay connected to the people they love. With the help of ReSurge International and the expertise of local ReSurge Surgical Outreach Partner Dr. Trung Hau Lê Thua, Nam could start the process of regaining the independence that the landmine robbed him of. Dr. Hau performed a series of operations on Nam's legs, hands, and face, paid for by ReSurge donors at no cost to Nam and his family.

These procedures restored his ability to stretch his hands and feet out completely and restructured his face, which allowed him to eat and blink more easily. Regaining the use of his hands was pivotal, and each procedure moved him another step toward independence. His vision loss, however, remained. Hong Han Thu, a ReSurge International staff member of 10 years, stepped in to advocate for Nam's continued care and connected him with a surgeon in India so he could keep moving forward. This is the ReSurge community of care in action.

The Need Continues

Cases like Nam's still happen, but they are becoming rarer. "In the past we were used to seeing 3–4 cases a month like Nam's. It was a lot. Now we see less," says Dr. Hau. ReSurge translator Tran The Thanh Toan, who previously worked for NGOs that clear unexploded bombs and landmines, explains that these injuries fall hardest on families with the fewest options. Farmers strike landmines while working their land, and scrap metal collectors dismantle munitions to sell the metal, which for many families is a main source of income. When she began her work in 2004, new accidents were reported almost weekly.

ReSurge International was one of the first American nonprofit organizations to work in Vietnam after the war, operating for over 30 years in the country, training local reconstructive surgeons. Today, 90% of all surgeries provided by ReSurge International are performed by local surgical partners like Dr. Hau. Building a specialized care team on a local level in countries like Vietnam builds long-lasting medical infrastructure so countries are ready to care for their own when tragedies arise. What this means for the citizens is that they don't have to wait for outside relief to come and help them. The care they need is already available to them, and they can receive that care from someone in their own community, without a language barrier, and at no cost to them.

When war, crisis, or disaster strikes, its consequences are felt long after the initial blow, and long after the world's attention has moved on. That is why ReSurge invests in local surgical teams rather than short-term relief. When care depends on visiting teams, much of it leaves when they do. When local surgeons are trained, the skills stay, and they keep growing. Every surgeon ReSurge trains puts down roots that sustain care in their country for generations.

Nam is one of the 32,261 patients that ReSurge has impacted this past year through direct care and training.

When asked how he feels about war and how it affected him, Nam's answer is simple. "It is better to use medicine to heal people rather than weapons to hurt them."



Dramatically Growing Impact
in Sub-Saharan Africa



Meet Gloria to see what access to reconstructive surgery and rehabilitation can make possible.

Uganda and Tanzania

This year, ReSurge announced a major expansion across East Africa, increasing access to reconstructive surgery in Uganda and Tanzania nearly sevenfold –from approximately 300 patients annually to more than 2,000.

Supported by the Michael & Susan Dell Foundation, the expansion pairs immediate access to free reconstructive surgery and comprehensive rehabilitative occupational therapy with an investment in the local surgical workforce. Surgeons, anesthesiologists, nurses, pediatricians, and occupational therapists will receive specialized training to strengthen care for years to come.

Halfway through our first year, we are on track to impact more than 2,000 patients.

An estimated five billion people worldwide lack access to safe, affordable, and timely surgical care. In Sub-Saharan Africa, that gap affects 93% of the population.

In Uganda, Kiruddu National Referral Hospital is home to the country's only national burn center, making its capacity critical as Uganda responds to both existing needs and a changing landscape of industrial and workplace injuries. In Tanzania, the shortage is particularly acute in rural areas, where vast regions have no resident reconstructive surgeon.

"This project is a lifeline for marginalized patients in rural Tanzania," says Dr. Seif Nuru, Head of Surgery, St. Gaspar Referral and Teaching Hospital. "It will break down the barrier of poverty to access surgery today, and train the next generation of local surgeons to ensure this life-changing care continues tomorrow."



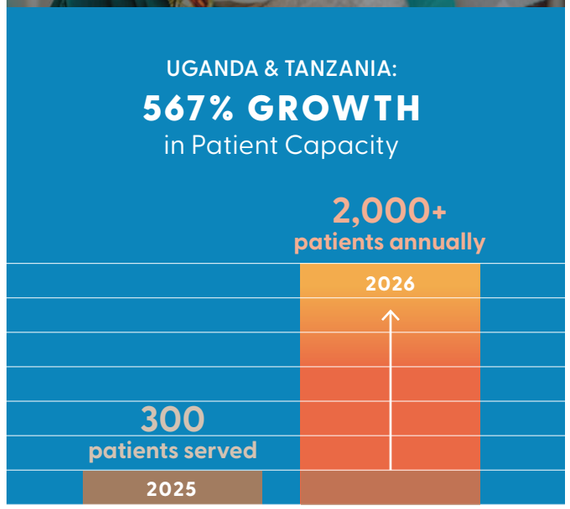
Pioneering Women in Reconstructive Surgery (PWRS) Scholar, Dr. Daphine Ezati Ayikoru, Kampala, Uganda



Pioneering Women in Reconstructive Surgery (PWRS) Scholar, Dr. Taonga Kim Mbewe from Zambia



ReSurge patient Gloria, from Lake Albert, Uganda, jumps rope after surgery on her leg



Zambia
Building the First Plastic Surgery Residency

In 2023, ReSurge joined Zambia's Ministry of Health, the University of Zambia, the College of Surgeons of East, Central and Southern Africa (COSECSA), and international partners to help establish the country's first plastic and reconstructive surgery residency. Two years later, the first cohort enrolled.

Today, five residents are completing a five-year curriculum under Program Director Dr. Chihena Banda, supported by a growing local faculty. Plastic surgery has also gained formal national accreditation—establishing the specialty within Zambia's medical training system for the first time.

The impact is already reaching beyond Zambia. During the 2024/25 academic year, its microsurgery center trained more than 70 surgeons through basic and advanced courses.

In just two years, Zambia has gone from having no formal microsurgery training infrastructure to becoming an emerging regional training hub—building expertise designed to endure at home and across the region.

Meet Dr. Nuru

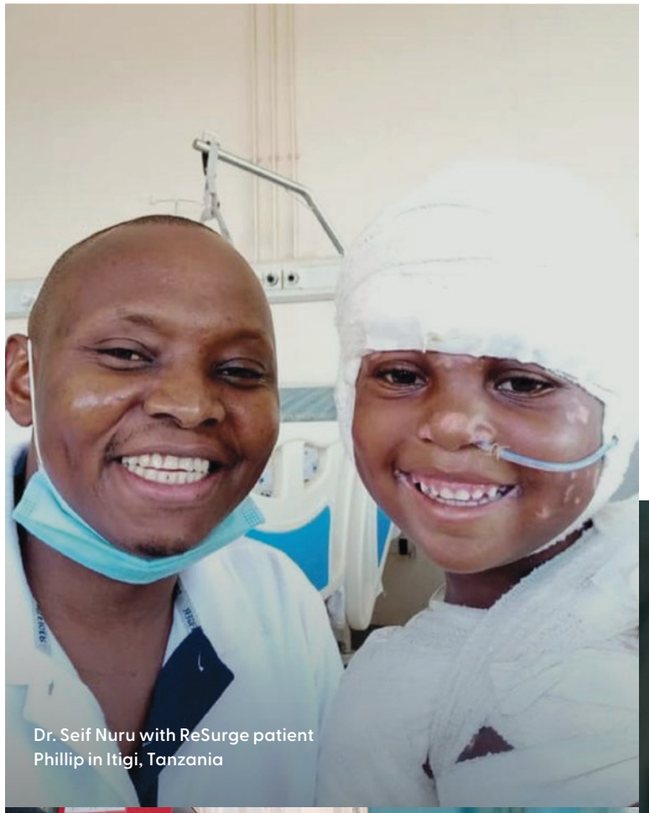
Surgical Outreach Partner, Tanzania

When Dr. Seif Nuru first met ReSurge International in 2016, there was no reconstructive surgery training program in his home country of Tanzania. The need, however, was everywhere.

Growing up in rural Tanzania, Dr. Nuru became the first person in his family to attend college. As a general surgeon at St. Gaspar Referral and Teaching Hospital in Itigi, he regularly encountered patients with complex injuries—particularly burns, which are common in rural communities where families often cook over open fires. Yet specialized reconstructive care was extraordinarily difficult to access. Dr. Nuru wanted to change that.

In 2021, ReSurge selected him as its first annual Reconstructive Surgery Scholar, supporting him to leave Tanzania for a year of advanced training at Kiruddu Hospital in neighboring Uganda. There, he trained under ReSurge Surgical Outreach Partner Dr. Rose Alenyo and alongside other surgeons from across the region.

"I never imagined that people thousands of kilometers away could see my potential and look for ways to help me," Dr. Nuru said at the time. "It was a great experience learning with Dr. Rose Alenyo, and I continue to communicate with her to this day. She understands what it is like to work out of an environment similar to ours, she can help offer an African perspective."



Dr. Seif Nuru with ReSurge patient Phillip in Itigi, Tanzania



Dr. Nuru returned home a year later, but his ReSurge story did not end there. Today, he is Head of Surgery at St. Gaspar and a ReSurge Surgical Outreach Partner himself, helping expand access to reconstructive surgery across a vast rural catchment area. He has also conducted outreach in neighboring Burundi, contributing to efforts to train the country's first generation of plastic surgeons.

His journey—from trainee to surgical leader, and increasingly, from student to teacher—is exactly what ReSurge's model is designed to make possible. For Dr. Nuru, that means reaching patients who may have lived for years with treatable conditions simply because specialized surgery was too far away or too expensive to access. That is what it means to build a surgical system that endures: one generation of local surgical leaders preparing the next. And it is now helping shape ReSurge's expansion across East Africa.



"ReSurge's expansion in Tanzania means that patients who have suffered for years due to complex conditions and could never afford the journey or the procedure at a tertiary hospital will now receive the life-changing care they need to regain dignity and function."

Dr. Seif Nuru, Head of Surgery, St. Gaspar Referral and Teaching Hospital

Meet Dr. Lin

ReSurge Volunteer, California

For Dr. Carole Lin, the power of safe surgical care is deeply personal. At nine years old, she underwent major, life-saving surgery—an experience that shaped her belief in what the right care, at the right moment, can make possible for a child.



Dr. Carole Lin at Stanford Medicine Children's Health

Today, Dr. Lin is a pediatric regional anesthesiologist at Stanford Medicine Children's Health and Clinical Associate Professor at Stanford, as well as a proud ReSurge Medical Volunteer. Dr. Lin was drawn to pediatric anesthesiology because of the profound responsibility it carries not only to the patient but also to their families. "There is something incredibly meaningful about guiding a child safely through surgery and being part of that turning point in their health journey," she says.

Anesthesia is fundamental to safe surgery. And expanding access to safe surgery requires strong teams of anesthesiologists, nurses, physical therapists, and other professionals working together to keep patients safe before, during, and after an operation.

That is why safe anesthesia is a major organizational priority for ReSurge. Through our Anesthesia Safety Program, ReSurge is working with partners to strengthen anesthesia training and safety alongside its broader investments in reconstructive surgical capacity.

Dr. Lin is helping advance that work. She co-hosts the College of Anesthesiologists of East, Central and Southern Africa (CANECSA) and ReSurge International Lecture Series alongside Dr. Dora Rusin Gomez and Dr. George Gregory, connecting anesthesia providers across countries to learn from one another and expand access to continuing education.

Her contributions also extend to another challenge facing global healthcare: how to expand access while using resources more responsibly. Dr. Lin founded AWISH—Addressing World Inequity via Sustainable Healthcare—which works to reduce perioperative waste and explore responsible ways to redirect usable medical resources to places where they are needed.

For Dr. Lin, these efforts are all connected. The future of global health volunteering is not simply about traveling somewhere to provide care. It is about listening to local partners, sharing expertise, strengthening systems, and building relationships that continue long after a particular trip or project ends. That is what Dr. Lin loves about volunteering with ReSurge.

"The goal is not just to show up and help in the moment, but to build lasting partnerships where we can learn from each other and create sustainable improvements together," she says.

It is a vision that reflects ReSurge's model of enduring healthcare, building stronger surgical teams and safer systems of care so that more patients, especially children, can access the surgery they need, wherever they live.

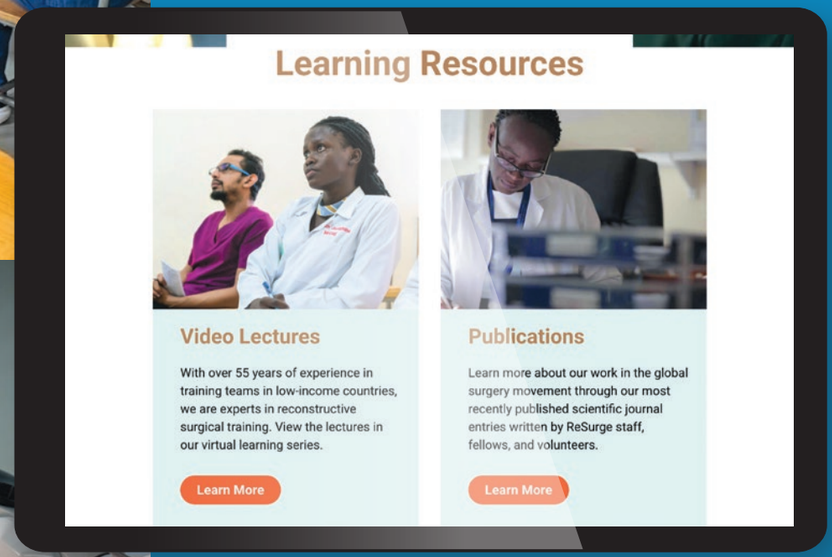




A Legacy of Learning

Read our publications, lectures, and thought leadership.

For more than 55 years, ReSurge has been at the forefront of reconstructive surgical training, building the expertise of surgical teams in low-income countries and advancing the field of global surgery. Explore our latest scientific publications, authored by ReSurge staff, fellows, and volunteers, and access our video lectures and courses featured on the United Nations' SURGhub.



Lectures and Publications

Thought Leadership and Media



STRATEGIC PARTNERSHIPS

ReSurge Medical Volunteer PACU Nurse Elise Reay-Ellers and patients, Hyderabad, India

Institutional and Corporate Partnerships

SkinCeuticals
New York Plastic Surgical Group
Allergan Aesthetics an AbbVie company
mtf biologics
intuist.ai
Fenwick
FIGS
TissueMil
Michael & Susan Dell Foundation
Integra Foundation
Heritage Bank of Commerce
Stanford Medicine Surgery
MAP Medicine for All People
CheckPoint Surgical
OUTFRONT
doximity

Academic Partners

American Society for Reconstructive Microsurgery
AAHS American Association for Hand Surgery
Johns Hopkins University
The Ohio State University
World Society for Reconstructive Microsurgery
Columbia University in the City of New York
WashU
University of Washington
The University of Chicago
UCSF University of California San Francisco
UF University of Florida
West Virginia University
Stanford University
Dartmouth Health
University of Michigan
Yale
ASSH American Society for Surgery of the Hand

Supporter Community

ReSurge Supporters Come Together

We are immensely grateful to our donors and supporters for their generosity and dedication in FY2026, and for joining us in our commitment to expanding access to reconstructive surgery. Thank you for walking this path with us! Your belief in our mission fuels our work and amplifies our impact. All of us at ReSurge International are honored to have you in our global family.



The ReSurge community came together in support of our work at Luminara, our spring fundraising event



Dr. James Chang and Dr. Thomas Davenport



Dr. Vinita Puri, Claire Lachance, Dr. Arvin Taneja, Gail Schell, Muna Joshi, Dr. Ajay Puri

How You Can Help

With continued support from our donors, the momentum from this past fiscal year will not only continue—it will build on itself and accelerate the achievement of our vision: safe, timely, and affordable reconstructive surgery for all. There is more work to be done and here's how you can help:

Become an Advocate:

Host a salon for ReSurge International. Invite a small group to join you in your living room. We bring the surgeons, the patient stories, and the program. You bring the people who trust you.

Strengthen Our Community:

Make an introduction and connect us to individuals in your professional and personal networks. One warm introduction opens a door we cannot open on our own: a foundation contact, a corporate partner, a fellow donor, a clinician who wants to teach.

Invest Directly:

Partner with ReSurge. Recommend a grant from your donor-advised fund, mail a check, or scan the QR code to give online. Make an investment in transforming surgical care and in training surgeons whose work compounds for decades.

SCAN TO DONATE

We would love to hear from you!

Schedule a call or in-person meeting with Iris Sagi, VP of Philanthropy to discuss how you can get involved.



iris@resurge.org
718.916.0817



FISCAL REPORT

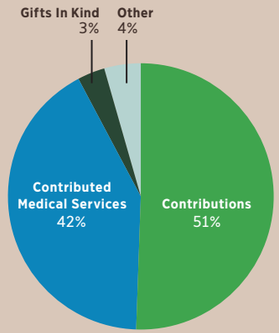
ReSurge patient Razia in Kampala, Uganda

Financials

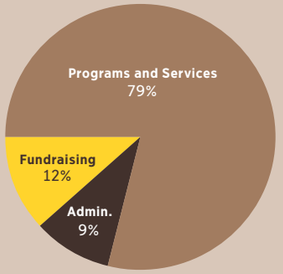
Unaudited Financial Report for Fiscal Year Ending June 30, 2026

Sources of Revenue	**FY 2026**	**FY 2025**
Contributions	6,020,816	4,836,509
Contributed Medical Services	4,941,108	2,989,347
Gifts in Kind	392,478	254,062
Other	521,046	364,012
Total Revenue	**$11,875,448**	**$8,443,930**
Allocation of Funds		
Programs and Services		
↳ Training & Capacity	6,776,773	4,635,477
↳ Direct Patient Care	1,842,873	1,472,513
Administration	1,006,330	1,134,460
Fundraising	1,270,412	1,198,382
Total Expenses	**$10,896,388**	**$8,440,832**
Year End Financial Position		
Assets		
Cash & Investments	4,642,627	4,407,490
Grants & Contribution Receivables	2,602,101	1,613,930
Operating Lease Right of Use Asset	474,340	647,918
Property & Equipment	191,546	327,939
Other Assets	268,909	242,646
Total Assets	**$8,179,523**	**$7,239,923**
Liabilities		
Current Liabilities	837,717	679,185
Long-Term Liabilities	368,308	535,683
Total Liabilities	**$1,206,025**	**$1,214,868**
Net Assets		
Without Donor Restrictions	2,390,163	2,983,717
With Donor Restrictions	4,583,335	3,041,338
Total Net Assets	**$6,973,498**	**$6,025,055**
Total Liabilities & Net Assets	**$8,179,523**	**$7,239,923**

SOURCES OF REVENUE



ALLOCATION OF FUNDS



We're proud of our proven track record of trust, transparency and responsibility with donated funds.

Platinum Transparency 2026 Candid.

BBB ACCREDITED CHARITY give.org

Charity Navigator FOUR-STAR

Leadership

Fiscal Year Board of Directors
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