Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Α	For the	2023 calendar year, or tax year beginning JUL 1, 2023 and ending	JUN 30, 2024	
В	Check if	C Name of organization	D Employer ident	tification number
,	applicable	AMERICAN NATIONAL RED CROSS & ITS		
	Addres			
	Name change	Doing business as	53-019660)5
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite E Telephone num	ber
	Final return/	431 18TH STREET, NW	(202) 303-	4498
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	4,400,554,903.
	Amend	WASHINGTON, DC 20006-5009	H(a) Is this a group	
	Applica tion pendin	F Name and address of principal officer: GATH MCGOVERN	for subordinate	tes? Yes X No
_		430 17TH ST, NW, WASHINGTON, DC 20006	H(b) Are all subordinate	es included? Yes No
<u>T</u>	Tax-exe			a list. See instructions
	Websit		H(c) Group exemp	
			rear of formation: 1900	M State of legal domicile; DC
P	art I	Summary		
ė	1 1	Briefly describe the organization's mission or most significant activities: SEE SCHEDULE	. 0	
anc	.		050/ 611	
Activities & Governance	2	Check this box if the organization discontinued its operations or disposed of m	1	1
9	3			3 13 4 12
8	4	Number of independent voting members of the governing body (Part VI, line 1b)		5 17967
ties	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)		6 300000
ξį	6	Total number of volunteers (estimate if necessary)		7a 6,973,320.
Ac	l 'a	Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, Part I, line 11		7b 0.
_		Net differed business taxable income from 10111 01111 990-1, 1 at 1, life 11	Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	919,126,379	
Jue	9	Program service revenue (Part VIII, line 2g)	2,167,924,872	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	82,218,159	
Be	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	47,808,203	
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,217,077,613	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	264,552,438	
		Benefits paid to or for members (Part IX, column (A), line 4)		0.
S	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,528,393,622	1,611,418,035.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	452,216	644,002.
ē	b	Total fundraising expenses (Part IX, column (D), line 25) 191,613,473.		
û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,177,708,613	1,259,745,882.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,971,106,889	
_	19	Revenue less expenses. Subtract line 18 from line 12	245,970,722	2. 273,888,220.
Net Assets or	9		Beginning of Current Yea	r End of Year
sets	20	Total assets (Part X, line 16)	4,028,321,133	
t As	21	Total liabilities (Part X, line 26)	1,008,326,202	
		Net assets or fund balances. Subtract line 21 from line 20	3,019,994,933	1. 3,422,583,841.
	art II	Signature Block		
		lties of perjury, I declare that I have examined this return, including accompanying schedules and sta		my knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep		7/0005
		Signature of officer	4/2: Date	5/2025
Sig		· O	Date	
He	re	CARMEL DARCY, CFO Type or print name and title		
			Date Check	PTIN
De!	,	Print/Type preparer's name RAYMOND LY Preparer's signature	if	201005643
Pai			4-10-25 self-em	13-5565207
	parer	Third matter	Firm's EIN	T2-2202701
USE	Only	Firm's address 8350 BROAD STREET, SUITE 900 MCLEAN, VA 22102	Dhana na 7	03-286-8000
Ma	v tha IE	S discuss this return with the preparer shown above? See instructions	Pilotie no. /	X Yes No
ivia	y u io io	io dioddos and return with the preparer shown above: Occilibitudions		<u></u>

IRS Center: Ogden Product: Exempt Category: e-Postmark: 4/28/2025 2:55 PM

Name: AMERICAN NATIONAL RED CROSS &

ITS CONSTITUENT CHAPTERS AND

BRANCHES

FEIN: ****6605 Plan Number: Notification:

Bank Info:

Fiscal Year Begin Date: 7/1/2023 Fiscal Year End Date: 6/30/2024 eSigned:

IRS Message:

Return Information

Date	Return ID	Type of Activity	Submission ID	Refund/(Due)	Updated By	eSign Date
04/28/2025	23X:06583L:V1	Upload Started			Naselius,Karen	
04/28/2025	23X:06583L:V1	Ready to Release by Customer				
04/28/2025	23X:06583L:V1	Upload Started			Naselius,Karen	
04/28/2025	23X:06583L:V1	Ready to Release by Customer				
04/28/2025	23X:06583L:V1	Released for Transmission - Validation in Progress			Carey, Suzanne M	
04/28/2025	23X:06583L:V1	Ready to transmit - Validation Complete				
04/28/2025	23X:06583L:V1	Transmitted to FD	5402802025118035ae02			
04/28/2025	23X:06583L:V1	Accepted by FD on 4/28/2025				

ID **Status Date** Status State/Other State Category **FBAR FBAR BSA ID**

8868

(Rev. January 2024)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information. OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tay return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form

	o request an extension of time to file income tax return other than Form 990	3-1 (including 1120-6 lilers), partners	nips, reivilos, a	na trusts i	must use Form
Part I	- Identification				
Туре	Name of exempt organization, employer, or other filer, see	instructions.	Taxpayer ident	tification n	umber (T I N)
Print	American National Red Cross & Its Constituent Chapter	5	3-019660	5	
File by th	Number, street, and room or suite no. If a P.O. box, see in	structions.			
due date	e for 431 18th Street, NW				
filing yoι return. S		n address, see instructions.			
nstruction					
Enter t	the Return Code for the return that this application is for (file	e a separate application for each	return)		. 0 1
Appli	cation Is For Retur				Return Code
Form	990 or Form 990-EZ 01	Form 4720 (other than individ	lua l)		09
Form	4720 (individua l) 03	Form 5227			10
Form	990-PF 04	Form 6069			11
Form	990-T (sec. 401(a) or 408(a) trust) 05	Form 8870			12
Form	990-T (trust other than above) 06	Form 5330 (individual)			13
Form	990-T (corporation) 07	Form 5330 (other than individ	lua l)		14
Form	1041 - A 08				
time to	you enter your Return Code, complete either Part II or Par ofile Form 5330.			nly for an	extension of
• If this	s application is for an extension of time to file Form 5330, y Plan Name		nation. 		
	Plan Number				
	Plan Year Ending (MM/DD/YYYY)				
Part I	I — Automatic Extension of Time To File for Exem	npt Organizations (see instruc	ctions)		
	books are in the care of FINANCIAL MANAGEMENT				
		x No			
	e organization does not have an office or place of business				
	s is for a Group Return, enter the organization's four-digit G				
	whole group, check this box $$. $$. $$. $$. If it is for p	- ·		☐ and	attach
a list w	vith the names and TINs of all members the extension is for	•			
1	I request an automatic 6-month extension of time until the organization named above. The extension is for the organization representation or or tax year beginning JULY 1, 20	ganization's return for:		rganizati	
2	If the tax year entered in line 1 is for less than 12 months, ☐ Change in accounting period		☐ Final return		
3a	If this application is for Forms 990-PF, 990-T, 4720, on nonrefundable credits. See instructions.	or 6069, enter the tentative tax,	less any 3	a \$	0
b	If this application is for Forms 990-PF, 990-T, 4720, or estimated tax payments made. Include any prior year over		edits and 3I	5	0
С	Balance due. Subtract line 3b from line 3a. Include you using EFTPS (Electronic Federal Tax Payment System). See	ur payment with this form, if req	luired, by	c \$	0

Form	990 (2023) CONSTITUENT CHAPTERS AND BRANCHES	53-0196605	Page 2
Par	t 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:		
	THE AMERICAN RED CROSS PREVENTS AND ALLEVIATES HUMAN SUFFERING IN THE		
	FACE OF EMERGENCIES BY MOBILIZING THE POWER OF VOLUNTEERS AND THE		
	GENEROSITY OF DONORS.		
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? \dots		Yes 🗓 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 me		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	the total expense	es, and
	revenue, if any, for each program service reported.	2.150	075 (50)
4a	(Code:) (Expenses \$	\$	<u>,875,658.</u>)
	BIOMEDICAL SERVICES - SEE SCHEDULE O		
4b	(Code:) (Expenses \$ 920,076,978. including grants of \$ 592,620,581.) (Revenue	<u></u>	
40	DOMESTIC DISASTER SERVICES - SEE SCHEDULE O	▶	,
4c	(Code:) (Expenses \$ 138,917,396. including grants of \$ 668,009.) (Revenue	\$ 167	,871,810.)
	TRAINING SERVICES - SEE SCHEDULE O		
4d	Other program services (Describe on Schedule O.)		
		3,357,257.)	
4e	Total program service expenses 3,219,189,859.		
		Fo	rm 990 (2023)

Form 990 (2023)

CONSTITUENT CHAPTERS AND BRANCHES

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Part IV	Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			v
40	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
	Part VI	11a		
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	445	х	
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Λ	
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11c		х
Ч	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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	110		
u		11d		х
_	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	-110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		.,	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

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Page **4** Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete Х 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х 24a Schedule K. If "No," go to line 25a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete Х 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% Х controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III Х 27 28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes." complete Schedule L, Part IV 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If X 28c "Yes," complete Schedule L, Part IV 29 29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete Х 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х 36 If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Х and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Х Yes No 3021 **1a** Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 0 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

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Form **990** (2023)

(gambling) winnings to prize winners?

CONSTITUENT CHAPTERS AND BRANCHES

<u> Page</u> **5** Form 990 (2023) Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Did the organization have unrelated business gross income of \$1,000 or more during the year? Х If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a VIETNAM, KENYA If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). X Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Х Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5с Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Х Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Х Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. 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 Enter the amount of reserves on hand Х Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 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? 15 If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. 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?

Form **990** (2023) 332005 12-21-23

If "Yes," complete Form 6069

Form 990 (2023) CONSTITUENT CHAPTERS AND BRANCHES

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Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 13 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 12 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? Х 10a 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? X 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes " describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed 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 X Own website Another's website X Upon request 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. State the name, address, and telephone number of the person who possesses the organization's books and records LAUREN SULLIVAN, AMERICAN RED CROSS - (202) 303-5028

Form **990** (2023)

20006

430 17TH STREET, NW, WASHINGTON,

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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 no	or any related	orga	niza	tion	con	nper	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)							(D)	(E)	(F)
Name and title	Average	Position (do not check more than one		Reportable	Reportable	Estimated				
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		Cei ai	lu a u	II ecto	i / ii us	(66)	from	from related	other
	(list any hours for	lirecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or 0	trustee			satec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al trus		yee	mper		1099-NEC)	10001120)	and related
	below	ndividual trustee or director	Institutional t	l la	Key employee	Highest compensated employee	le.	,		organizations
	line)	Indiv	Instit	Officer	Key 6	High	Former			
(1) GAIL MCGOVERN	60.00									
PRESIDENT & CEO	0.00	Х		Х				1,296,862.	0.	16,743.
(2) CLIFFORD HOLTZ	60.00									
CHIEF OPERATING OFFICER	0.00				Х			855,665.	0.	31,863.
(3) CHRIS HROUDA	60.00									
PRESIDENT OF BIOMEDICAL SERVICES	0.00				Х			801,049.	0.	33,066.
(4) BRIAN RHOA	60.00									
CHIEF INVESTMENT OFFICER	0.00				Х			704,132.	0.	30,957.
(5) SHAUN GILMORE	60.00									
CHIEF TRANSFORMATION OFFICER	0.00					Х		622,623.	0.	34,459.
(6) PAUL SULLIVAN	60.00									
SVP, DONOR SERVICES	0.00					Х		530,146.	0.	27,568.
(7) ANNE MCKEOUGH	60.00									
CHIEF DEVELOPMENT OFFICER	0.00				Х			501,606.	0.	23,267.
(8) JACK MCMASTER	60.00									
PRESIDENT OF TRAINING SERVICES	0.00					Х		491,750.	0.	30,297.
(9) MELISSA HURST	60.00									
CHIEF HUMAN RESOURCES OFFICER	0.00				Х			470,882.	0.	37,133.
(10) CARMEL DARCY	60.00									
CHIEF FINANCIAL OFFICER	0.00			Х				466,320.	0.	24,440.
(11) ROSEMARY MCGILLAN	60.00									
CHIEF, MARKETING/COMM OFFICER	0.00					Х		451,756.	0.	27,725.
(12) DOMINICK TOLLI	60.00								_	
SVP, PRODUCT MGMNT & PLATFORM DEV	0.00					Х		432,184.	0.	35,201.
(13) TREVOR RIGGEN	60.00									
PRESIDENT OF HUMANITARIAN SERVICES	0.00		_		Х			413,870.	0.	28,871.
(14) JENNIFER HAWKINS	60.00									
CORPORATE SECRETARY & CHIEF OF STAFF	0.00		_	Х				341,058.	0.	21,096.
(15) DAWN CLARKE-DOCCUVI	60.00	-						225 522	_	22.22.
GENERAL COUNSEL	0.00		_	Х		_		305,733.	0.	33,284.
(16) PHYLLIS HARRIS	60.00	-						242.742	_	64 -65
GENERAL COUNSEL	0.00		-	Х	-	-		240,713.	0.	21,708.
(17) JENNIFER BAILEY	4.00								_	_
BOARD MEMBER	0.00	Х						0.	0.	0.

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A)	(B)	(C)						(D)	(E)	(F)		
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)		Reportable compensation from	Reportable compensation from related	Estimated amount of other					
	(list any hours for related organizations below line)	Individual trustee or director	In stit utio nal tru stee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations		
(18) MARY G. BERNER	2.00											
BOARD MEMBER	0.00	Х						0.	0.	0.		
(19) DAVID A. BRANDON	4.00									_		
BOARD MEMBER	0.00	Х						0.	0.	0.		
(20) CAROLE L. BROWN	3.00											
BOARD MEMBER	0.00	Х						0.	0.	0.		
(21) HERMAN E. BULLS	2.00									_		
BOARD MEMBER	0.00	Х						0.	0.	0.		
(22) CHRISTINA CHIU	3.00									_		
BOARD MEMBER	0.00	Х						0.	0.	0.		
(23) DAVID H. CLARK	3.00											
BOARD MEMBER	0.00	Х						0.	0.	0.		
(24) STEVEN H. COLLIS	3.00											
BOARD MEMBER	0.00	Х						0.	0.	0.		
(25) ENRIQUE A. CONTERNO	4.00											
BOARD MEMBER	0.00	Х						0.	0.	0.		
(26) GUNJAN KEDIA	1.00											
BOARD MEMBER	0.00	х						0.	0.	0.		
1b Subtotal								8,926,349.	0.	457,678.		
c Total from continuation sheets to Part V								0.	0.	0.		
d Total (add lines 1b and 1c)								8,926,349.	0.	457,678.		

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

2,402

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

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)	(B)	(C)
Name and business address	Description of services	Compensation
CAPITAL COURIER SERVICES LLC, 2100 BARRETT		
PARK DRIVE SUITE 505, KENNESAW, GA 30144	COURIER SERVICE	14,511,787.
GENERATOR MEDIA ANALYTICS INC.		
353 LEXINGTON AVE, 11TH FL, NY, NY 10016	MARKETING	12,523,132.
MINDTREE LIMITED, 25 INDEPENDENCE BLVD,		
SUITE 401, WARREN, NJ 07059	CONSULTANT-IT	8,192,279.
ONE & ALL		
2 N LAKE SUITE 600, PASADENA, CA 91101	PRINTER	7,716,325.
RUMSEY CONSTRUCTION LLC		
4770 DUCKHORN DRIVE, SACRAMENTO, CA 95834	CONSTRUCTION	7,155,569.
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	400	
GER DADE VIT GEGETON A GOVERNMANTON GURREN		- 000 ()

SEE PART VII, SECTION A CONTINUATION SHEETS

CONSTITUENT CHAPTERS AND BRANCHES 53-0196605 Form 990

Form 990 CONSTITUENT	CHAPTERS AN	D B	RAN	CHE	S				53-01966	505
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, a	nd H	lighe	est (Compensated Employe	es (continued)	
(A) Name and title	(B) Average hours	(C) Position (check all that apply)					ly)	(D) Reportable compensation	(F) Estimated amount of	
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
27) LORENCE KIM	4.00								•	
BOARD MEMBER	0.00	Х						0.	0.	0
(28) BONNIE MCELVEEN-HUNTER BOARD MEMBER	0.00	х						0.	0.	
(29) KATHRYN MCLAY	3.00	^						٠.	0.	C
30ARD MEMBER	0.00	х						0.	0.	(
(30) ARADHANA SARIN	3.00	Λ	\vdash			\vdash		0.	٠.	
BOARD MEMBER	0.00	Х						0.	0.	(
(31) KIRT A. WALKER	4.00									
BOARD MEMBER	0.00	Х						0.	0.	(
	1									

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Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Related or exempt Revenuè excluded Total revenue Unrelated from tax under function revenue business revenue sections 512 - 514 15,441,313 Contributions, Gifts, Grants and Other Similar Amounts 1a **1 a** Federated campaigns 1b **b** Membership dues 13,665,774. c Fundraising events 1c d Related organizations 1d 539,610,554 e Government grants (contributions) 1e f All other contributions, gifts, grants, and 763,228,207 1f similar amounts not included above 14,060,237 g Noncash contributions included in lines 1a-1f 1,331,945,848. h Total. Add lines 1a-1f **Business Code** 2 a BIOMEDICAL PRODUCTS/SR 541900 2,158,875,658. 2,158,875,658. Program Service Revenue OTHER PRODUCTS/SRVCS 900099 167,871,810 167,871,810 С f All other program service revenue 2,326,747,468. g Total. Add lines 2a-2f Investment income (including dividends, interest, and -853,680. 71,872,112 72,725,792 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real 25,783,421 6 a Gross rents **b** Less: rental expenses 25,783,421. **c** Rental income or (loss) 25,783,421 25,783,421. d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 7a\$84,665,991. 14,801,238. assets other than inventory **b** Less: cost or other basis 7b\$84,679,398. 7,503,745. and sales expenses Other Revenue -13,407. 7,297,493. c Gain or (loss) 7,284,086. 7,284,086. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 13,665,774. of contributions reported on line 1c). See Part IV, line 18 3,554,568. 3,994,416. **b** Less: direct expenses 439,848 439,848 c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10a **b** Less: cost of goods sold Net income or (loss) from sales of inventory **Business Code** 11 a OTHER MISC. REVENUE 900099 33,357,257, 41,184,257. 7,827,000 d All other revenue 41,184,257. e Total. Add lines 11a-11d 3,804,377,344. 2,360,104,725. 6,973,320. 105,353,451. Total revenue. See instructions

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AMERICAN NATIONAL RED CROSS & ITS

Form 990 (2023) CONSTITUENT CHAPTERS AND BRANCHES

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 (D) Do not include amounts reported on lines 6b. Management and general expenses Total expenses Program service Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 597,241,647. 597,241,647. individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign 61,439,558 61,439,558. individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 1,364,645. 4,966,456. trustees, and key employees 6,873,699. 542,598. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,258,437,042. 1,111,613,051. 53,757,339. 93,066,652. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 75,027,419 66,027,510. 3,450,492. 5,549,417. 177,484,769 156,194,595 8,162,480 13,127,694. 9 Other employee benefits 93,595,106. 82,367,912 4,304,415 6,922,779. 10 Payroll taxes Fees for services (nonemployees): Management 7,687,353. 1,969,914. 5,488,668. 228,771. Legal 2,376,686. 1,758,831. 520,546 97,309. Accounting 160,297 108,543 6,759 44,995. Lobbying 644,002. 644,002. Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 269,422,451 201,798,654. 17,229,517 50,394,280. column (A), amount, list line 11g expenses on Sch O.) 18,590,363, 17,689,502 211,702 689,159. Advertising and promotion 12 111,057,799 1,779,608 1,185,657. 114,023,064 13 Office expenses 55,398,220, 45,094,210 8,007,577. 2,296,433. 14 Information technology Royalties 15 74,894,306 65,034,640. 6,015,036 3,844,630. 16 Occupancy 69,014,412. 64,963,411. 1,472,326 2,578,675. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 6,579,238, 1,100,559. Conferences, conventions, and meetings 5,178,550. 300,129 19 20,167,935. 18,616,252, 558,028 993,655. 20 Payments to affiliates 21 69,522,100 64,562,904 806,966 4,152,230. 22 Depreciation, depletion, and amortization 43,785,320. 39,924,569 1,484,350 2,376,401. 23 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) BIOMED SUP/BLOOD TESTS 478,420,042. 478,420,042 24,190,391 OTHER PROGRAM SUPPLIES 26,083,874 584,534 1,308,949. OTHER ASSISTANCE 3,620,221. 2,572,729. 578,864. 468,628. С d All other expenses 3,530,489,124, 191,613,473. 3,219,189,859 119,685,792 Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

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	rt X	Balance Sheet			Page II
. a		Check if Schedule O contains a response or note to any line in this Part X			
		CHECK II Schedule O Contains a response of flote to any line in this Part X	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	61,909,246.	1	174,015,916.
	2	Savings and temporary cash investments		2	795,948,554.
	3	Pledges and grants receivable, net			65,080,997.
	4	Accounts receivable, net		4	388,066,116.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	l .	8	58,396,963.
As	9	Prepaid expenses and deferred charges	122 200 260	9	394,007,696.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 1,839,030,84	2.		
	b	Less: accumulated depreciation 10b 1,031,904,20	0. 727,358,888.	10c	807,126,642.
	11	Investments - publicly traded securities	989,702,660.	11	1,149,522,540.
	12	Investments - other securities. See Part IV, line 11			583,199,000.
	13	Investments - program-related. See Part IV, line 11	"	13	
	14	Intangible assets	1	14	
	15	Other assets. See Part IV, line 11		15	149,779,305.
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	4,565,143,729.
	17	Accounts payable and accrued expenses		17	438,159,876.
	18	Grants payable	l .	18	
	19	Deferred revenue	l .	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
abil		controlled entity or family member of any of these persons		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	512,708,726.	24	531,173,609.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	178,020,074.	25	173,226,403.
	26	Total liabilities. Add lines 17 through 25	1,008,326,202.	26	1,142,559,888.
		Organizations that follow FASB ASC 958, check here			
ces		and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions		27	1,718,747,661.
Ва	28	Net assets with donor restrictions	1,649,537,837.	28	1,703,836,180.
ဋ		Organizations that do not follow FASB ASC 958, check here			
Ę		and complete lines 29 through 33.			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
t As	31	Retained earnings, endowment, accumulated income, or other funds	**	31	
Š	32	Total net assets or fund balances	3,019,994,931.	32	3,422,583,841.
	33	Total liabilities and net assets/fund balances	4,028,321,133.	33	4,565,143,729.

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form	1990 (2023) CONSTITUENT CHAPTERS AND BRANCHES	53-0196	605	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,804	,377,	344.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,530	,489,	124.
3	Revenue less expenses. Subtract line 2 from line 1	3		,888,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,019	,994,	931.
5	Net unrealized gains (losses) on investments	5	145	,677,	060.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-16	,976,	370.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
_	column (B))	10	3,422	,583,	841.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>Ш</u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	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?		. 3a	Х	
b	If "Yes " did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			

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SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

AMERICAN NATIONAL RED CROSS & ITS

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

OMB No. 1545-0047

Employer identification number

2023

Open to Public Inspection

		CONSTI	TUENT CHAPTERS	AND BRANCHES					53-0196605	
Pa	rt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.		
Γhe	orgar	ization is not a private found	ation because it is: (F	or lines 1 through 12, cl	heck only	one box.)				
1		A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).			
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	n 990).)					
3		A hospital or a cooperative	hospital service orga	nization described in se	ection 170	(b)(1)(A)(ii	i).			
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)	(iii). Enter	the hospital's name	е,
		city, and state:								
5		An organization operated for	or the benefit of a col	lege or university owned	l or operate	ed by a go	vernmental ur	nit describe	ed in	
		section 170(b)(1)(A)(iv). (C	Complete Part II.)							
6		A federal, state, or local government	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).			
7	X	An organization that norma	lly receives a substar	ntial part of its support fr	rom a gove	ernmental i	unit or from th	e general p	oublic described in	
	_	section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8	Щ	A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Part	t II.)					
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college	
		or university or a non-land-o	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of	the college	or	
	$\overline{}$	university:								
10		An organization that norma								
		activities related to its exen	•	•				• •	•	
		income and unrelated busin		(less section 511 tax) fro	m busines	sses acquii	red by the org	anization a	itter June 30, 1975.	
		See section 509(a)(2). (Co	•				201 111			
11	H	An organization organized	•	•	•					
12		An organization organized a	•	•	-			-	• •	
		more publicly supported or	•						Sheck the box on	
_		lines 12a through 12d that	* *					-	aivina	
а		Type I. A supporting orga the supported organization	· · · · · · · · · · · · · · · · · · ·		•	-				
		organization. You must o		• • • •	majority o	i the direc	iois or trustee	55 01 1116 51	apporting	
b		Type II. A supporting org			tion with its	s sunnorte	nd organization	n(s) by bay	vina	
b		control or management o	•				-	•	-	
		organization(s). You mus			arric perso	110 11141 001	introl of manag	jo ti io oupp	Sortou	
С		☐ Type III functionally inte			in connect	tion with. a	and functional	v integrate	ed with.	
		its supported organization	-					,	,	
d		Type III non-functionally						ted organiz	zation(s)	
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distri	ibution rec	uirement and	an attentiv	/eness	
		requirement (see instruct	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.			
е		Check this box if the orga	anization received a v	vritten determination fro	m the IRS	that it is a	Type I, Type I	I, Type III		
		functionally integrated, or	r Type III non-function	nally integrated supporting	ng organiz	ation.				
f		er the number of supported o	•							
g		vide the following information (i) Name of supported	about the supporte	d organization(s). (iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount of	monotony	(vi) Amount of oth	
	,	organization	(ii) Liiv	(described on lines 1-10	in your governi	ng document?	support (see in	•	support (see instruct	
				above (see instructions))	Yes	No				
F - 4 -										

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Schedule A (Form 990) 2023

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

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

Sec	tion A. Public Support						
Caler	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	887,785,755.	962,942,913.	1060031161.	919,126,378.	1331945848.	5161832055.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	887,785,755.	962,942,913.	1060031161.	919,126,378.	1331945848.	5161832055.
	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)						36,791,977.
6	Public support. Subtract line 5 from line 4.						5125040078.
	tion B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	887,785,755.	962,942,913.	1060031161.	919,126,378.	1331945848.	5161832055.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	69,704,977.	89,187,158.	74,342,075.	102,126,378.	97,655,533.	433,016,121.
	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	2,092,433.	3,241,475.	2,175,535.	3,103,039.	3,554,568.	14,167,050.
	Total support. Add lines 7 through 10						5609015226.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 10	,458,469,427.
	First 5 years. If the Form 990 is for th	•		ourth, or fifth tax y	ear as a section 50	D1(c)(3)	
	organization, check this box and stor			•			
Sec	tion C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2023 (I	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	91.37 %
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	90.96 %
16a	33 1/3% support test - 2023. If the o	organization did no	t check the box or	line 13, and line	14 is 33 1/3% or me	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				X
b	33 1/3% support test - 2022. If the o						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	tion			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pul	olicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2022. If the org	anization did not c	heck a box on line			
	more, and if the organization meets th	_					
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation	
		n did not check a					

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

CONSTITUENT CHAPTERS AND BRANCHES

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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.)

Calledary part (or fiscally set registring in) 1 Gilfs, grants, contributions, and membeship feet received (i)on not include any "unusual grants.") 2 Gines received (i)on not include any "unusual grants.") 2 Gines received (i)on not include any "unusual grants.") 2 Gines received (i)on not include any "unusual grants.") 3 Gines received from admissions, firm, and the set of the organization is transported in any activity that is related to the organization's tax-exempt purpose of gross received from admissions that are not an unrelated trade or business under section 513 4 Tax revenues leved for the organization's travelent and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7 A Amounts included on lines 1, 2, and 3 received from disqualified persons b Amoretis included on lines 1, 2, and 3 received from disqualified persons b Amoretis included on lines 1, 2, and 3 received from disqualified persons b Amoretis included on lines 1, 2, and 3 received from disqualified persons b Amoretis included on lines 1, 2, and 3 received from disqualified persons b Amoretis included on lines 1, 2, and 3 received from disqualified persons b Amoretis included on lines 1, 2, and 3 received from disqualified persons b Amoretis from lines 6 10 Gines income from interest, dividended, payments received on securities loans, rents, royallies, and notine from similar socurces b Umidelated business location income (less section 51 flavor) from businesses acquired after June 30, 1975 c Add lines 12 flavor) from businesses acquired after June 30, 1975 c Add lines 13 flavory from 40 section from 10 flavory fla	Section A. Public Support	now, please comp	Diete Fart II.)				
1 Giffs, grants, contributions, and membership beer received. (Do not include any "unusual grants.") 2 Gross neepls from admissions, common and production of a califies furnished in any activity that is related to the organization's trave-empt purpose 3 Gross receipts from admissions are received from the organization's trave-empt purpose 3 Gross receipts from admissions with the organization's trave-empt purpose 3 Gross receipts from admission and the paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7 A mountain facilities on the 2 and 1 received for the organization without charge 6 Total. Add lines 1 through 5 8 A mountain facilities on the 2 and 1 received for the first organization of the third dispatities present the ascend third great of the first organization of the third dispatities present the ascend third great of the first organization of the third dispatities present the ascend third great of the first organization of the third great organization of the third dispatities present the ascend third great or the first organization organization organization or securities bears, rorts, royalties, and the first organization organization or securities bears, rorts, royalties, and the first organization organ	Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
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17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) 18 Investment income percentage from 2022 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2023. 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 - 2022. 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						16	(
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18 Investment income percentage from 2022 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2023. 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 - 2022. 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	17 Investment income percentage for 20	23 (line 10c, colu	mn (f), divided by I	ine 13, column (f))		17	C
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line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							 nd

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Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

CONSTITUENT CHAPTERS AND BRANCHES

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Page 4

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

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

	V	NI -
	Yes	No
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2		
За		
3b		
3c		
4a		
4b		
10		
4c		
<u>5a</u>		
5b		
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9с		
10a		
10b		

CONSTITUENT CHAPTERS AND BRANCHES 53-0196605 Schedule A (Form 990) 2023 Page 5 Part IV Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide <u>detail in Par</u>t VI 11c Section B. Type I Supporting Organizations Yes No 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 Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove 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. Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, upervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No 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 Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) Section D. All Type III Supporting Organizations N<u>o</u> Yes 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? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how 2 the organization maintained a close and continuous working relationship with the supported organization(s). 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 Part VI the role the organization's 3 <u>supported organizations played in this regard</u> Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below. а b The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) С No 2 Activities Test. Answer lines 2a and 2b below. Yes a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in 2b these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI. За 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 Part VI the role played by the organization in this regard.

Schedule A (Form 990) 2023

Sche	edule A (Form 990) 2023 CONSTITUENT CHAPTERS AND BRANCHES			53-0196605	Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgar	nizations		
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970 (explain in	Part VI). See instr	uctions.
	All other Type III non-functionally integrated supporting organizations mus			·	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current (optiona	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
_ 7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current (optiona	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
a	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
c	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
_2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
_ 7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Y	'ear
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	omorganey temperary reduction (see instructions)	6			

Schedule A (Form 990) 2023

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

instructions)

AMERICAN NATIONAL RED CROSS & ITS

CONSTITUENT CHAPTERS AND BRANCHES 53-0196605 Schedule A (Form 990) 2023 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 6 7 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 9 Distributable amount for 2023 from Section C, line 6 10 10 Line 8 amount divided by line 9 amount (i) (ii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2023 **a** From 2018 **b** From 2019 **c** From 2020 d From 2021 e From 2022 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2023 distributable amount i Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2023 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2023 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2024. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2019 **b** Excess from 2020 c Excess from 2021 d Excess from 2022

Schedule A (Form 990) 2023

e Excess from 2023

CONSTITUENT CHAPTERS AND BRANCHES

Schedule A (Form 990) 2023 CONSTITUENT CHAPTERS AND BRANCHES	53-0196605	Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, 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; Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any a (See instructions.)	lines 1 and 2; Part IV, Section Part V, Section B, line 1e; Part V	n C,
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:		
FUNDRAISING AND MISC.		
2019 AMOUNT: \$ 2,092,433.		
2020 AMOUNT: \$ 3,241,475.		
2021 AMOUNT: \$ 2,175,535.		
2022 AMOUNT: \$ 3,103,039.		
2023 AMOUNT: \$ 3,554,568.		

Schedule A (Form 990) 2023

53-0196605

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.

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

AMERICAN NATIONAL RED CROSS & ITS

OMB No. 1545-0047

2023

Schedule B (Form 990) (2023)

Employer identification number

CON	STITUENT CHAPTERS AND BRANCHES	53-0196605
Organization type (check or	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	X 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	
	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.
General Rule		
~	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's	· · · · · · · · · · · · · · · · · · ·
Special Rules		
sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) F line 1. Complete Parts I and II.	d that received from any one
contributor, during literary, or educatio	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a the year, total contributions of more than \$1,000 exclusively for religious, charitable, so nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (elinstead of the contributor name and address), II, and III.	ientific,
year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled more the total contributions that were received during the year for an exclusively religious applete any of the parts unless the General Rule applies to this organization because it is etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc., received <i>nonexclusively</i>
Caution: An organization tha answer "No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, requirements of Schedule B (Form 990).	orm 990), but it must

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023) Page **2**

Name of organization

AMERICAN NATIONAL RED CROSS & ITS

CONSTITUENT CHAPTERS AND BRANCHES

Employer identification number

53-0196605

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution X 1 Person **Payroll** 38,805,000. Noncash (Complete Part II for noncash contributions.) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 X Person **Payroll** Noncash 25,203,502. (Complete Part II for noncash contributions.) (a) (c) Name, address, and ZIP + 4 **Total contributions** No. Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.)

323452 12-26-23

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023) Page **3**

Name of organization

AMERICAN NATIONAL RED CROSS & ITS

CONSTITUENT CHAPTERS AND BRANCHES

53-0196605

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	

323453 12-26-23

Schedule I	B (Form 990) (2023)			Page ⁴
	rganization			Employer identification number
	NATIONAL RED CROSS & ITS			F3. 010660F
Part III	JENT CHAPTERS AND BRANCHES Exclusively religious, charitable, etc., contribution	ons to organizations described in se	ction 501(c)(7), (8), or	53-0196605
	from any one contributor. Complete columns (a)	through (e) and the following line enti	v. For organizations	
	completing Part III, enter the total of exclusively religious, cl Use duplicate copies of Part III if additional s	pace is needed.	ess for the year. (Enter the	nis into. once.) Ψ
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d	l) Description of how gift is held
				<u> </u>
-		(e) Transfer of gift	 	
		(c) Transfer of girl	•	
	Transferee's name, address, ar	nd ZIP + 4	Relationship	of transferor to transferee
(a) No. from				
Part I	(b) Purpose of gift	(c) Use of gift	(c	l) Description of how gift is held
-		(e) Transfer of gift	I :	
		()		
_	Transferee's name, address, ar	nd ZIP + 4	Relationship	of transferor to transferee
	-			
(a) No. from	(h) Diverges of wift	(a) Upp of wift	(4	N Description of how wift is hold
Part I	(b) Purpose of gift	(c) Use of gift	(0	l) Description of how gift is held
			_	
•	•	(e) Transfer of gift	'	
-	Transferee's name, address, ar	nd ZIP + 4	Relationship	of transferor to transferee
	-			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d	l) Description of how gift is held
Part I				
		(e) Transfer of gift	:	
	Transferee's name, address, ar	nd 7 ID + 4	Dolotionski-	of transferor to transferor
-	n ansieree's name, address, ar	N 41F T T	neiauonsiiip	of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

	(see separate instructions), then:	biones Commisto Bost III			
	Section 501(c)(4), (5), or (6) organization AMERICAN N.	· · · · · · · · · · · · · · · · · · ·		Em	player identification number
INAIII	•	ATIONAL RED CROSS & ITS T CHAPTERS AND BRANCHES		="	ployer identification number 53-0196605
Da		janization is exempt und	ler section 501(c)	or is a section 527 o	
га	oniplete il tile org	janization is exempt und	iei section son(c)	or is a section 327 C	n gariization.
	Provide a description of the organiz	ration's direct and indirect politic	aal aampaign aativitias	in Dort IV	
	Political campaign activity expendit	•	. •		¢
	Volunteer hours for political campai				Ψ
Ü	Volunteer flours for political campai	gir activities			
Pa	rt I-B Complete if the org	janization is exempt und	ler section 501(c)(3).	
	Enter the amount of any excise tax				
	Enter the amount of any excise tax				
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				() ()
Pa	rt I-C Complete if the org	janization is exempt und	ler section 501(c),	except section 501	(c)(3).
	Enter the amount directly expended		•		\$
2	Enter the amount of the filing organ	ization's funds contributed to of	ther organizations for se	ection 527	
	exempt function activities				\$
	Total exempt function expenditures				
	line 17b				\$
	Did the filing organization file Form				
5	Enter the names, addresses, and en	. ,	,	•	0 0
	made payments. For each organiza	· · · · · · · · · · · · · · · · · · ·			·
	contributions received that were propolitical action committee (PAC). If			· · · · · · · · · · · · · · · · · · ·	ate segregated fund or a
		· · · · · · · · · · · · · · · · · · ·	1		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	
				·	delivered to a separate
					political organization. If none, enter -0
					,

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

Schedule C (Form 990) 2023

/						
Schedule C (Form 990) 2023			TERS AND BRANCHE			0196605 Page 2
	organizatio	n is exen	npt under sectio	n 501(c)(3) and file	d Form 5768 (el	ection under
section 501(h)).						
A Check if the filing orga	nization belon	gs to an affil	iated group (and list ir	n Part IV each affiliated o	group member's nam	ne, address, EIN,
expenses, and	share of exces	s lobbying e	expenditures).			
B Check if the filing orga	nization check	ed box A ar	nd "limited control" pro	ovisions apply.		
	Limits on Lobl penditures" m		nditures nts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to	influence pub	lic opinion (d	arassroots lobbying)			
b Total lobbying expenditures to	•					
c Total lobbying expenditures (ac	•	•				
d Other exempt purpose expend						
e Total exempt purpose expendi						
f Lobbying nontaxable amount.	Enter the amo	unt from the				
If the amount on line 1e, column			bying nontaxable am			
not over \$500,000,	` , , ,		the amount on line 1e			
over \$500,000 but not over \$1	,000,000,		00 plus 15% of the exc	ess over \$500,000.		
over \$1,000,000 but not over \$			00 plus 10% of the exc	I		
over \$1,500,000 but not over \$			00 plus 5% of the exce			
over \$17,000,000,	, , ,	\$1,000,0		. , . ,		
g Grassroots nontaxable amount	t (enter 25% of	11. 46				
h Subtract line 1g from line 1a. If	•	,				
i Subtract line 1f from line 1c. If						
j If there is an amount other than	n zero on eithe			_		
reporting section 4911 tax for	this year?					Yes No
(Some organization		a section 50	eraging Period Under D1(h) election do not ate instructions for li	have to complete all o	f the five columns b	elow.
	Lobi	oying Exper	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount (150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount	t					

Schedule C (Form 990) 2023

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990) 2023

CONSTITUENT CHAPTERS AND BRANCHES

53-0196605

Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)			(b)	
	of the lobbying activity.				Am	ount
1 [During the year, did the filing organization attempt to influence foreign, national, state, or					
ŀ	ocal legislation, including any attempt to influence public opinion on a legislative matter					
	or referendum, through the use of:					
	Volunteers?	X		_		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х				
	Media advertisements?		Х			2.5
	Mailings to members, legislators, or the public?	X	X			35.
	Publications, or published or broadcast statements?		X			
	Grants to other organizations for lobbying purposes?	x	^			150 651
	Direct contact with legislators, their staffs, government officials, or a legislative body?		x			159,651.
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	x	^			610.
	Other activities?					160,296.
	Total. Add lines 1c through 1i		x			100,250.
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912		- 1			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			-		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or	sec	tion	
	501(c)(6).	`				
	,				Yes	No
	Were substantially all (90% or more) dues received nondeductible by members?		Г	1		
1 \	Wele substantially all (30/0 of filole) dues received hondeductible by filefilbers:		- 1			
				2		
2 [3 [Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from th	e prior year n 501(c)(? 5), or	2 3 sec		3, is
2 [3 [Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	e prior year n 501(c)("No" OR	? 5), or (b) Pa	2 3 sec		3, is
2 [3 [Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lili-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year n 501(c)("No" OR	? 5), or (b) Pa	2 3 sect		3, is
2 [3 [Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lili-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members	e prior year n 501(c)("No" OR	? 5), or (b) Pa	2 3 sect		3, is
2 [3 [Part 1 [2 5	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	e prior year n 501(c)("No" OR	5), or (b) Pa	2 3 sect		3, is
2 [3 [Part 1 [2 (6 a (Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	e prior year n 501(c)("No" OR	? 5), or (b) Pa	2 3 sectart II		3, is
2 [3 [Part 1 [2 3 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	e prior year n 501(c)("No" OR	? 5), or (b) Pa	2 3 sectart II		3, is
2 [3 [Part 1 [2 3 6 6 6 6 6 6 6 7 3 7 7 7 7 7 7 7 7	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	e prior year n 501(c)("No" OR	? 5), or (b) Pa	2 3 sectart II 1 2a 2b		3, is
2 [3 [Part 2 3 6 6 6 6 6 6 6 6 6	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	e prior year n 501(c)("No" OR	? 5), or (b) Pa	sectart II		3, is
2 [3 [Part 2 3 6 6 6 6 6 6 6 6 6	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures of non	e prior year n 501(c)("No" OR	? 5), or (b) Pa	sectart II		3, is
2 [3 [Part 2 3 6 6 6 6 6 6 6 6 6	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues for notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable the organization agree to carryover to the reasonable estimate of nondeductible lobbying and preexpenditures next year?	e prior year n 501(c)("No" OR	? 5), or (b) Pa	sectart II		3, is
2 [3 [Part 2 5 6 6 6 6 6 6 6 6 6	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues for notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable the organization agree to carryover to the reasonable estimate of nondeductible lobbying and preexpenditures next year? Taxable amount of lobbying and political expenditures. See instructions	e prior year n 501(c)("No" OR	? 5), or (b) Pa	2 3 sec art II 1 2a 2b 2c 3		3, is
2 [3 [Part 1 [2 3 4 4 4 4 5]	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues are sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditures next year? Taxable amount of lobbying and political expenditures. See instructions IV Supplemental Information	e prior year n 501(c)("No" OR cal	? 5), or (b) Pa	2 3 sectart II 1 2a 2b 2c 3	I-A, line	3, is
2 [3 [Part 1	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lili-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues are sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded she organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? Taxable amount of lobbying and political expenditures. See instructions IV Supplemental Information e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year n 501(c)("No" OR cal	? 5), or (b) Pa	2 3 sectart II 1 2a 2b 2c 3	I-A, line	3, is
2 [3 [Part 1 [2 5 1]	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lili-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? Taxable amount of lobbying and political expenditures. See instructions IV Supplemental Information e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group etions); and Part II-B, line 1. Also, complete this part for any additional information.	e prior year n 501(c)("No" OR cal	? 5), or (b) Pa	2 3 sectart II 1 2a 2b 2c 3	I-A, line	3, is
2 [3 [Part 1 [2 5 1]	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lili-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues are sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded she organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? Taxable amount of lobbying and political expenditures. See instructions IV Supplemental Information e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year n 501(c)("No" OR cal	? 5), or (b) Pa	2 3 sectart II 1 2a 2b 2c 3	I-A, line	3, is
2 [3 [Part 1 [2 3 4 4 4 4 5 7 7 7 7 7 7 7 7 7	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lili-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? Taxable amount of lobbying and political expenditures. See instructions IV Supplemental Information e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group etions); and Part II-B, line 1. Also, complete this part for any additional information.	e prior year n 501(c)("No" OR cal	? 5), or (b) Pa	2 3 sectart II 1 2a 2b 2c 3	I-A, line	3, is
Part 1 [2 3 4 5 Part Provide instruction of the part of	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedance the organization agree to carryover to the reasonable estimate of nondeductible lobbying and presexpenditures next year? Taxable amount of lobbying and political expenditures. See instructions IV Supplemental Information e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group estions); and Part II-B, line 1. Also, complete this part for any additional information. II-B, LINE 1, LOBBYING ACTIVITIES:	e prior year n 501(c)("No" OR cal	? 5), or (b) Pa	2 3 sectart II 1 2a 2b 2c 3	I-A, line	3, is
Part 1 [2 3 6 6 7 7 7 7 7 7 7 7 7 7	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedages the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? Taxable amount of lobbying and political expenditures. See instructions IV Supplemental Information e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group etions); and Part II-B, line 1. Also, complete this part for any additional information. II-B, LINE 1, LOBBYING ACTIVITIES:	e prior year n 501(c)("No" OR cal	? 5), or (b) Pa	2 3 sectart II 1 2a 2b 2c 3	I-A, line	3, is

Schedule C (Form 990) 2023

Schedule C (Form 990) 2023 CONSTITUENT CHAPTERS AND BRANCHES	53-0196605	Page 4
Part IV Supplemental Information (continued)		
THE AMERICAN RED CROSS PARTICIPATES IN LOBBYING AND OTHER PUBLIC POLICY		
ADVOCACY ACTIVITIES AT THE FEDERAL AND STATE LEVELS (WITHIN THE LIMITS		
SET BY IRS REGULATIONS) ON ISSUES THAT ARE RELATED TO THE		
ORGANIZATION'S MISSION INCLUDING: BIOMEDICAL SERVICES; HOMELAND		
SECURITY, ALL HAZARDS PREPAREDNESS AND RESPONSE; PUBLIC HEALTH AND		
SAFETY; EMERGENCY COMMUNICATION SERVICES TO THE ARMED FORCES;		
INTERNATIONAL SERVICES; AND THE REGULATION OF NONPROFIT ORGANIZATIONS.		
THESE ACTIVITIES INCLUDE PREPARING AND PRESENTING WRITTEN AND ORAL		
TESTIMONY AT LEGISLATIVE HEARINGS AT THE FEDERAL AND STATE LEVEL;		
COMMUNICATING WITH POLICYMAKERS AND THEIR STAFFS THROUGH MEETINGS AND		
BRIEFINGS, AND ISSUING PUBLIC STATEMENTS RELATED TO PENDING LEGISLATION		
AND REGULATION.		

Schedule C (Form 990) 2023

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

AMERICAN NATIONAL RED CROSS & ITS CONSTITUENT CHAPTERS AND BRANCHES

Employer identification number 53-0196605

Pai			or Accounts. Complete if the			
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at and of year	(a) Bonor advised funds	(b) i dilas and other accounts			
2	Total number at end of year					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds			
_	are the organization's property, subject to the organization's	_				
6	Did the organization inform all grantees, donors, and donor a					
	for charitable purposes and not for the benefit of the donor of					
	impermissible private benefit?		Yes No			
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990,	Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).				
	Preservation of land for public use (for example, recrea	ation or education) Preservation o	f a historically important land area			
	Protection of natural habitat	Preservation o	f a certified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form				
	day of the tax year.		Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
	Number of conservation easements on a certified historic str		2c			
d	Number of conservation easements included on line 2c acqu					
_	on a historic structure listed in the National Register					
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the	e organization during the tax			
	year					
4	Number of states where property subject to conservation eas					
5	Does the organization have a written policy regarding the per violations, and enforcement of the conservation easements in		Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,					
Ū	otan and volunteer hours devoted to monitoring, inspecting,	Training of violations, and emoroting con-	servation easements during the year			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	ation easements during the year			
-	,		err edeermente dannig mie year			
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170(r	n)(4)(B)(i)			
9	In Part XIII, describe how the organization reports conservati					
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statem	ents that describes the			
	organization's accounting for conservation easements.					
Par	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or O	ther Similar Assets.			
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement a	and balance sheet works			
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in f	urtherance of public			
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.					
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of					
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,					
	provide the following amounts relating to these items.					
	(i) Revenue included on Form 990, Part VIII, line 1					
2	If the organization received or held works of art, historical tre		al gain, provide			
	the following amounts required to be reported under FASB A					
	Revenue included on Form 990, Part VIII, line 1					
	Assets included in Form 990, Part X					
LHA	For Paperwork Reduction Act Notice, see the Instructions	s tor Form 990.	Schedule D (Form 990) 2023			

	dalo B (i oiiii 000) 2020	CHAPTERS AND				196605	Page 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tre	asures, or Othe	er Similar Asse	ts (contin	nued)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the f	ollowing that make	significant use of it	s	
	collection items (check all that apply).						
а	Public exhibition	C	l Loan or exc	hange program			
b	Scholarly research	•	e Dther				
С	Preservation for future generations						
4	Provide a description of the organization's co	ollections and explain	n how they further th	ne organization's exe	empt purpose in Pa	ırt XIII.	
5	During the year, did the organization solicit of	r receive donations	of art, historical treas	sures, or other simila	ar assets		
	to be sold to raise funds rather than to be ma					Yes	No
Par	t IV Escrow and Custodial Arran		ete if the organization	n answered "Yes" or	n Form 990, Part IV	, line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.					
1a	Is the organization an agent, trustee, custod	an, or other intermed	diary for contribution	s or other assets no	ot included		
	on Form 990, Part X?				[Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:				
						Amount	t
С	Beginning balance				1c		
d	Additions during the year				1d		
е	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or cu	ıstodial account liab	oility?L	Yes	No
	If "Yes," explain the arrangement in Part XIII.						
Par	t V Endowment Funds Complete if						
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years bad	- ' '	years back
1a	Beginning of year balance		1,236,904,039.				
b	Contributions	16,181,000.	· · ·				587,000.
С	Net investment earnings, gains, and losses	136,062,000.	20,319,000.	-863,000.	273,039,000	34,	653,000.
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs	27,575,000.	47,151,000.	47,026,000.	63,259,000	37,	899,000.
f	Administrative expenses					 	
g	End of year balance		1,224,404,039.	•	1,272,232,039	1,034,	439,039.
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1g, column (a)) held as:			
а	Board designated or quasi-endowment		%				
b	Permanent endowment100	%					
С		%					
	The percentages on lines 2a, 2b, and 2c sho	•					
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held ar	nd administered for t	the	Г	- N
	organization by:						Yes No
	(i) Unrelated organizations?						X
	(ii) Related organizations?					3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza					3b	
Do:	Describe in Part XIII the intended uses of the		wment funds.				
Fai	t VI Land, Buildings, and Equipm		Dort IV line 11e C	on Form 000 Dort V	/ line 10		
	Complete if the organization answere		<u> </u>	T T			
	Description of property	(a) Cost or o	, ,	1 ' '	Accumulated	(d) Bool	k value
		basis (investr	,	` '	epreciation		660 272
	Land	I		,669,272.	ECE 177 000		669,272.
	Buildings			,401,396.	565,177,260.		224,136.
	Leasehold improvements			,072,947.	78,581,195.		491,752.
	Equipment			,631,922.	388,145,745.		486,177.
	Other			,255,305.			255,305.
Total	. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Part	X. line 10c. column	(B))		80/,	126,642.

Schedule D (Form 990) 2023

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

Schedule D (Form 990) 2023 CONSTIT

CONSTITUENT CHAPTERS AND BRANCHES

53-0196605

Page 3

Part VII Investments - Other Securities			r age o
Complete if the organization answered "Yes" of			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-or	f-year market value
(1) Financial derivatives	43,431,000.	END-OF-YEAR MARKET VALUE	
(2) Closely held equity interests			
(3) Other			
(A) ALTERNATIVE INVESTMENTS	445,164,000.	END-OF-YEAR MARKET VALUE	
(B) EQUITY METHOD INVESTMENTS	94,604,000.	COST	
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.	583,199,000.		
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-or	f-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets	l		
Complete if the organization answered "Yes" of	on Form 990. Part IV. line 1	1d. See Form 990. Part X. line 15.	
	Description		(b) Book value
			(2) 20011 10100
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) POST-RETIREMENT BENEFIT			35,567,092.
(3) INSURANCE (LOSS RESERVES & CLAIMS)			87,617,000.
(4) SPLIT INTEREST AGREEMENT LIABILITY			32,000,000.
(5) MISC LIABILITIES			18,042,311.
(6)			
(8)			
(9)			
	(D))		173,226,403.
 Total. (Column (b) must equal Form 990, Part X, line 25, col. Liability for uncertain tax positions. In Part XIII, provide 	· //		· · · · · · · · · · · · · · · · · · ·
organization's liability for uncertain tax positions. In Part XIII, provide		· ·	· —

Schedule D (Form 990) 2023

CONSTITUENT CHAPTERS AND BRANCHES 53-0196605 Schedule D (Form 990) 2023 Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2 a Net unrealized gains (losses) on investments Donated services and use of facilities 2c Recoveries of prior year grants Other (Describe in Part XIII.) Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a **b** Prior year adjustments 2b 2c d Other (Describe in Part XIII.) Add lines 2a through 2d 2e Subtract line **2e** from line **1** 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.) 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. PART III, LINE 1A: THE AMERICAN RED CROSS ELECTED NOT TO INCLUDE THE VALUE OF THE ART ON THE BALANCE SHEET UNDER FASB 116. PART V, LINE 4: ENDOWMENT FUNDS IN ACCORDANCE WITH ITS CONGRESSIONAL CHARTER, THE AMERICAN RED CROSS HAS MAINTAINED AN ENDOWMENT FUND SINCE 1905 WHICH IS KEPT AND INVESTED UNDER THE MANAGEMENT AND CONTROL OF A BOARD OF TRUSTEES ELECTED BY THE BOARD OF GOVERNORS. THE BYLAWS OF THE ORGANIZATION STATE THAT

GIFT SHALL BE RECEIVED AND HELD IN THE ENDOWMENT FUND. THE AMERICAN RED

WHENEVER A GIFT IS DESIGNATED BY THE DONOR TO BE PERMANENTLY RETAINED, THE

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 CONSTITUENT CHAPTERS AND BRANCHES	53-0196605	Page 5
Part XIII Supplemental Information (continued)		
CROSS MAKES DISTRIBUTIONS FROM INCOME EARNED ON THE ENDOWMENT		
FUND FOR CURRENT OPERATIONS.		
TOND FOR CORRENT OF ERAFFOND.		
PART X, LINE 2:		
OTHER LIABILITIES ASC 740 (FORMER FIN 48)		
THE AMERICAN RED CROSS IS A NOT-FOR-PROFIT ORGANIZATION		
INCORPORATED BY THE U.S. CONGRESS THROUGH THE ISSUANCE OF A FEDERAL		
CHARTER. THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER		
SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, EXCEPT ON NET INCOME		
SECTION SUITCH TO THE INTERNAL REVENUE CODE, EXCELL ON REL INCOME		
DERIVED FROM UNRELATED BUSINESS ACTIVITIES. AT JUNE 30, 2024 AND 2023, THE		
ORGANIZATION HAD DETERMINED THAT NO INCOME TAXES ARE DUE FOR SUCH		
ACTIVITIES. ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN RECORDED		
IN THE ACCOMPANYING FINANCIAL STATEMENTS. MANAGEMENT ANNUALLY REVIEWS ITS		
TAX POSITIONS AND HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX		
THE TOTAL THE MED BELLEVILLE THAT THERE IN TO INTERCENT OFFICERATION THE		
POSITIONS THAT REQUIRE RECOGNITION IN THE CONSOLIDATED FINANCIAL		
STATEMENTS.		

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Department of the Treasury Internal Revenue Service

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

Name of the organization					Employer identi	fication number
AMERICAN NATIONAL RED						
CONSTITUENT CHAPTERS AN		ativitias Out	aide the United States		53-0196605	
		Clivilles Out	side the United States. Comple	ete if the organ	ization answered "	Yes" on
Form 990, Part IV 1 For grantmakers. Does		maintain room	ds to substantiate the amount of its gra	ents and other	assistance	
=	-		the selection criteria used to award the			Yes No
the grantees engionity it	or the grants or a	issistarice, ariu t	the selection criteria used to award the	grants or assis	[i les NO
2 For grantmakers. Desc	rihe in Part V the	organization's	procedures for monitoring the use of its	arants and ot	her assistance outs	eide the
United States.	indo in i dit v tile	organization o	oroccarco for morniconing the acc of its	granto and ot		nae trie
	ne following Part	L line 3 table ca	an be duplicated if additional space is n	leeded.)		
(a) Region	(b) Number of		(d) Activities conducted in the region		vity listed in (d)	(f) Total
-	offices	employees, agents, and	(by type) (such as, fundraising, pro-		gram service,	expenditures
	in the region	independent	gram services, investments, grants to	1	e specific type	for and investments
		contractors in the region	recipients located in the region)	of service	(s) in the region	in the region
CENTRAL AMERICA AND						
THE CARIBBEAN	0	0	FINANCIAL ASSISTANCE	DISASTER PE	REPAREDNESS	1,340,659.
EAST ASIA AND THE				DISASTER RI	ESPONSE,	
PACIFIC	0	0	FINANCIAL ASSISTANCE	DISASTER PE	REPAREDNESS	3,021,004.
EUROPE (INCLUDING						
ICELAND AND				DISASTER RE	ESPONSE,	
GREENLAND)	0	0	FINANCIAL ASSISTANCE	DISASTER PE	REPAREDNESS	25,880,184.
VIDDIE ELGE 111D						
MIDDLE EAST AND	0	0	ETNANGTAL AGGTGMANGE	DIGAGMED DI	EGDONGE	16 500 000
NORTH AFRICA	U	0	FINANCIAL ASSISTANCE	DISASTER RE	ESPONSE	16,500,000.
				DISASTER RE	ESPONSE	
NORTH AMERICA	0	0	 FINANCIAL ASSISTANCE		REPAREDNESS	1,557,557.
						1,007,007.
RUSSIA AND				DISASTER RE	ESPONSE .	
NEIGHBORING STATES	0	0	 FINANCIAL ASSISTANCE		REPAREDNESS	575,000.
						,
				DISASTER RI	ESPONSE,	
SOUTH AMERICA	0	0	FINANCIAL ASSISTANCE	DISASTER PE	REPAREDNESS	356,086.
				DISASTER RE	ESPONSE,	
SOUTH ASIA	0	0	FINANCIAL ASSISTANCE	DISASTER PE	REPAREDNESS	2,313,168.
3 a Subtotal	0	0				51,543,658.
b Total from continuation						
sheets to Part I	101	57				41,593,824.
c Totals (add lines 3a						
and 3h)	101	57				193 137 482.

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

AMERICAN NATIONAL RED CROSS & ITS CONSTITUENT CHAPTERS AND BRANCHES 53-0196605 Schedule F (Form 990) Page 1 Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3) Part I (b) Number of (a) Region (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total offices expenditures employees or (by type) (i.e., fundraising, is a program service, in the region agents in program services, grants to describe specific type for region region recipients located in the region) of service(s) in region DISASTER RESPONSE, DISASTER PREPAREDNESS, SUB-SAHARAN AFRICA 0 0 FINANCIAL ASSISTANCE MEASLES 5,089,967. CENTRAL AMERICA AND THE CARIBBEAN 1 1 PROGRAM SERVICES DISASTER PREPAREDNESS 973,367. EAST ASIA AND THE DISASTER RESPONSE, 36 19 PROGRAM SERVICES DISASTER PREPAREDNESS PACIFIC 5,533,963. EUROPE (INCLUDING ICELAND AND DISASTER RESPONSE, DISASTER PREPAREDNESS GREENLAND) 51 30 PROGRAM SERVICES 6,374,695. MIDDLE EAST AND NORTH AFRICA 5 10 PROGRAM SERVICES DISASTER RESPONSE 1,041,274. DISASTER RESPONSE, SOUTH AMERICA 0 0 PROGRAM SERVICES DISASTER PREPAREDNESS 47,418. DISASTER RESPONSE, SOUTH ASIA 1 PROGRAM SERVICES DISASTER PREPAREDNESS 811,417. DISASTER RESPONSE, DISASTER PREPAREDNESS, 555,812. SUB-SAHARAN AFRICA 2 1 PROGRAM SERVICES MEASLES EUROPE (INCLUDING ICELAND AND INVESTMENTS GREENLAND) 21,165,911.

Totals

101

57

41,593,824.

Schedule F (Form 990) 2023

CONSTITUENT CHAPTERS AND BRANCHES

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Page 2

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.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		CENTRAL AMERICA						
		AND THE CARIBBEAN	DISASTER PREPAREDNESS	629,548.	WIRE	0.		
		CENTRAL AMERICA		472 172	NATE OF THE PARTY	0.		
		AND THE CARIBBEAN	DISASTER PREPAREDNESS	472,173.	WIRE	0.		
		CENTRAL AMERICA						
		AND THE CARIBBEAN	DISASTER PREPAREDNESS	238,938.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	DISASTER RESPONSE	1,000,000.	WIRE	0.		
		I NOIL IC	DIBROTHE RESTORES	1,000,000.	MIKE	0.		
		EAST ASIA AND THE						
		PACIFIC	DISASTER PREPAREDNESS	762,498.	WIRE	0.		
		EAST ASIA AND THE						
			DISASTER PREPAREDNESS	667,144.	WIRE	0.		
				, , , , , , , , , , , , , , , , , , , ,				
		EAST ASIA AND THE						
		PACIFIC	DISASTER PREPAREDNESS	174,609.	WIRE	0.		
		EAST ASIA AND THE						
			DISASTER PREPAREDNESS	83,965.	 WIRE	0.		

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	

33

³ Enter total number of other organizations or entities

AMERICAN NATIONAL RED CROSS & ITS

Schedule F (Form 990) CONSTITUENT CHAPTERS AND BRANCHES 53-0196605 Page 2

Part II Continuation of	of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	
l a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FN appraisal, other)
		EAST ASIA AND THE						
		PACIFIC	DISASTER PREPAREDNESS	74,503.	WIRE	0.		
				,				
		EAST ASIA AND THE						
		PACIFIC	DISASTER PREPAREDNESS	54,939.	WIRE	0.		
		EAST ASIA AND THE						
		PACIFIC	DISASTER PREPAREDNESS	52,865.	WIRE	0.		
		EAST ASIA AND THE						
		PACIFIC	DISASTER PREPAREDNESS	43,402.	WIRE	0.		
				·				
		EAST ASIA AND THE PACIFIC	DISASTER PREPAREDNESS	35,917.	MIDE	0.		
		PACIFIC	DISASIER PREPAREDNESS	33,917.	WIKE	0.		
		EAST ASIA AND THE						
		PACIFIC	DISASTER PREPAREDNESS	27,155.	WIRE	0.		
		EAST ASIA AND THE						
		PACIFIC	DISASTER PREPAREDNESS	22,608.	WIRE	0.		
		EAST ASIA AND THE						
		PACIFIC	DISASTER RESPONSE	19,716.	 WIRE	0.		
		EUROPE (INCLUDING						
		ICELAND AND	D. G. GEED DE ST.	12 007 522				
		GREENLAND)	DISASTER RESPONSE	13,897,539.	MTKE	0.		

AMERICAN NATIONAL RED CROSS & ITS

Schedule F (Form 990) CONSTITUENT CHAPTERS AND BRANCHES 53-0196605 Page 2

Schedule F (Form 990)	CONSTIT	UENT CHAPTERS AND	BRANCHES		53-019	0003		Page 2
Part II Continuation of	of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.				
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM' appraisal, other)
		EUROPE (INCLUDING						
		ICELAND AND						
		GREENLAND)	DISASTER RESPONSE	3,058,694.	 WIRE	0.		
		EUROPE (INCLUDING						
		ICELAND AND						
		GREENLAND)	DISASTER RESPONSE	2,634,680.	WIRE	0.		
		EUROPE (INCLUDING						
		ICELAND AND						
		GREENLAND)	DISASTER RESPONSE	2,288,414.	WIRE	0.		
		EUROPE (INCLUDING						
		ICELAND AND		4 000 744				
		GREENLAND)	DISASTER RESPONSE	1,298,741.	WIRE	0.		
		EUROPE (INCLUDING						
		ICELAND AND						
		GREENLAND)	DISASTER PREPAREDNESS	1,086,806.	WIRE	0.		
		EUROPE (INCLUDING						
		ICELAND AND GREENLAND)	DISASTER RESPONSE	640,140.	MIDE	0.		
		GREENLAND)	DISASIER RESPONSE	040,140.	WIKE	0.		
		EUROPE (INCLUDING						
		ICELAND AND						
		GREENLAND)	DISASTER RESPONSE	458,958.	WIRE	0.		
		EUROPE (INCLUDING						
		ICELAND AND	DIGAGMED DEEDADEDAGG	220,000.	MIDE			
		GREENLAND)	DISASTER PREPAREDNESS	220,000.	WIKE	0.		
		EUROPE (INCLUDING						
		ICELAND AND						
		GREENLAND)	DISASTER PREPAREDNESS	134,913.	WIRE	0.		

AMERICAN NATIONAL RED CROSS & ITS

Schedule F (Form 990) CONSTITUENT CHAPTERS AND BRANCHES 53-0196605 Page 2

Schedule F (Form 990)	CONSTIT	UENT CHAPTERS AND	BRANCHES		53-019	3003		Page 2	
Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	ne United States. (Schedule F (Form 990), Part II, line 1)					
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM) appraisal, other)	
		EUROPE (INCLUDING							
		GREENLAND)	DISASTER PREPAREDNESS	78,275.	WIRE	0.		+	
		EUROPE (INCLUDING							
		GREENLAND)	DISASTER RESPONSE	10,787.	WIRE	0.			
		MIDDLE EAST AND							
		NORTH AFRICA	DISASTER RESPONSE	10,000,000.	WIRE	0.		+	
		MIDDLE EAST AND							
		NORTH AFRICA	DISASTER RESPONSE	6,500,000.	WIRE	0.			
		NORTH AMERICA	MEASLESS & RUBELLA	1,150,000.	WIRE	0.			
		NORTH AMERICA	DISASTER PREPAREDNESS	196,816.	WIRE	0.			
		NORTH AMERICA	DISASTER RESPONSE	129,000.	WIRE	0.			
		NORTH AMERICA	DISASTER PREPAREDNESS	50,000.	WIRE	0.			
		NORTH AMERICA	DISASTER RESPONSE	31,741.	WIRE	0.			

AMERICAN NATIONAL RED CROSS & ITS

Schedule F (Form 990) CONSTITUENT CHAPTERS AND BRANCHES 53-0196605 Page 2

chedule F (Form 990)		SENT CHATTERS AND			33 017			Page
Part II Continuation o	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		RUSSIA AND						
		NEIGHBORING						
		STATES	DISASTER RESPONSE	575,000.	WIRE	0.		
		SOUTH AMERICA	DISASTER RESPONSE	200,000.	WIRE	0.		
				,				
		SOUTH AMERICA	DISASTER PREPAREDNESS	107,383.	WIDE	0.		
		SOUTH AMERICA	DISASIER PREPAREDNESS	107,363.	WIRE	0.		
		SOUTH AMERICA	DISASTER RESPONSE	48,703.	WIRE	0.		
		SOUTH ASIA	DISASTER RESPONSE	1,042,925.	WIRE	0.		
		SOUTH ASIA	DISASTER PREPAREDNESS	778,936.	WIRE	0.		
				,		-		
		SOUTH ASIA	DISASTER PREPAREDNESS	491,308.	MIDE	0		
		SOUTH ASIA	DISASTER PREPAREDNESS	491,300.	WIRE	0.		
		SUB-SAHARAN						
		AFRICA	DISASTER RESPONSE	4,200,000.	WIRE	0.		
		GUD GAHADAN						
		SUB-SAHARAN AFRICA	MENCIECC C DIDELLA	E2E 211	MIDE	_		
		MEKICA	MEASLESS & RUBELLA	525,311.	MTKE	0.		

AMERICAN NATIONAL RED CROSS & ITS

Schedule F (Form 990) CONSTITUENT CHAPTERS AND BRANCHES 53-0196605 Page 2

Schedule F (Form 990)	CONSTITU	UENT CHAPTERS AND	BRANCHES		53-019	0000		Page
Part II Continuation of	of Grants and Other	Assistance to Organiza	ntions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		SUB-SAHARAN						
		AFRICA	MEASLESS & RUBELLA	274,867.	 WIRE	0.		
				,				
		SUB-SAHARAN AFRICA	MEASLESS & RUBELLA	65,853.	WIRE	0.		
						- •		
		SUB-SAHARAN AFRICA	MEASLESS & RUBELLA	23,936.	WTRE	0.		
			IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	23,330.	, , , , , , , , , , , , , , , , , , ,			

Schedule F (Form 990) 2023

CONSTITUENT CHAPTERS AND BRANCHES

53-0196605

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. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash assistance noncash assistance

Schedule F (Form 990) 2023

Page 3

CONSTITUENT CHAPTERS AND BRANCHES Schedule F (Form 990) 2023 CPart IV Foreign Forms

53-0196605

Page 4

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 the Instructions for Form 926)	X 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 the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X 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 the Instructions for Form 5471)	Yes	X 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 the Instructions for Form 8621)	X Yes	No
	Tana (See the metadone for Form GOZ1)		
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 the Instructions for Form 8865)	X Yes	No
	Toroign Furtherships (acc the manualaris for Form accopy		
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		
	the Instructions for Form 5713; don't file with Form 990)	Yes	X No
	and mediacione for 1 only of 10, don't me want only over		

CONSTITUENT CHAPTERS AND BRANCHES 53-0196605 Schedule F (Form 990) 2023 Page 5 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. PART I, LINE 2: PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS OUTSIDE THE U.S.: THE INTERNATIONAL SERVICES DEPARTMENT OF THE AMERICAN RED CROSS HAS ESTABLISHED STANDARD OPERATING PROCEDURES THAT INCLUDE DUE DILIGENCE PRIOR TO AWARDING FUNDS TO A SUB-RECIPIENT. THIS DUE DILIGENCE INCLUDES A REVIEW OF THE PROGRAMMATIC, STRUCTURAL, AND FINANCIAL HEALTH OF THE ORGANIZATION AND AN ANALYSIS OF THE RISK LEVEL OF AWARDING FUNDS. THIS RISK LEVEL DICTATES PROCEDURES TO MITIGATE THOSE RISKS. INCLUDING THE LEVEL OF DETAIL AND TIMING OF FINANCIAL AND NARRATIVE REPORTS. DURING THE TERM OF THE AWARD. THESE FINANCIAL AND NARRATIVE REPORTS ARE REVIEWED AND, IN CONJUNCTION WITH ANY OTHER IDENTIFIED MITIGATING ACTIVITIES, A DECISION IS MADE TO "ACCEPT" THE REPORTS AND WHETHER TO CONTINUE PROVIDING FUNDS FOR THE AWARD. AT THE END OF THE AWARD TERM, A FINAL REVIEW OF PROGRAMMATIC AND FINANCIAL REQUIREMENTS IS PERFORMED TO ENSURE THE SUB-RECIPIENT MET ITS OBLIGATIONS UNDER THE AWARD. THIS REVIEW FEEDS INTO FUTURE AWARD DECISIONS WITH THE SUB-RECIPIENT. THE AMERICAN RED CROSS ALWAYS RESERVES THE RIGHT TO PERFORM ADDITIONAL REVIEW AND AUDIT OF ANY GRANT FUNDS.

332075 11-29-23 Schedule F (Form 990) 2023

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

	ATIONAL RED CROSS & ITS T CHAPTERS AND BRANCHES				53-019660	ntification number
	- Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, li		
required to complete this par						
 1 Indicate whether the organization rais a X Mail solicitations b X Internet and email solicitations c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the 10 highest paid indicates 	e X Solicitate f X Solicitate g X Special or oral agreement with any individual later VII) or entity in connection with p	tion of tion of fundra (includ	non-g gover ising ling of onal fu	overnment grants nment grants events ficers, directors, trust undraising services?	X Yes	
compensated at least \$5,000 by the	organization.					
(i) Name and address of individual or entity (fundraiser)	(ii) Activity		Did aiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
MDS COMMUNICATION COPORATION		Yes	No			
- 545 W JUANITA AVE, MESA, AZ	PHONE		х	23,444,876.	544,002.	22,900,873.
ACTIVATE HQ INC AN ALLTRUI CO - PO BOX 328, PECONIC, NY	CONSULTANTS/ADVISOR		Х	0.	100,000.	0.
				23,444,876.	644 002	22,900,873.
Total 3 List all states in which the organization	on is registered or licensed to solicit o		 utions		644,002. it is exempt from req	
or licensing.						

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

Schedule G (Form 990) 2023

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) 2023

CONSTITUENT CHAPTERS AND BRANCHES

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Page 2

Pa	rt I					
_		of fundraising event contributions and gro		EZ, lines 1 and 6b. List e		s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			HEROES BREAKFAST	NY GALA	71	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
nue			, ,,,	, , , , , , , , , , , , , , , , , , ,	,	
Revenue	1	Gross receipts	1,744,193.	1,390,348.	14,085,801.	17,220,342.
~	2	Less: Contributions	1,677,570.	1,302,328.	10,685,876.	
_	3	Gross income (line 1 minus line 2)	66,623.	88,020.	3,399,925.	3,554,568.
	4	Cash prizes			2,463.	2,463.
"	5	Noncash prizes	3,440.	1,063.	62,857.	67,360.
seuses	6	Rent/facility costs	1,350.	127,172.	1,046,504.	1,175,026.
Direct Expenses	7	Food and beverages	57,516.	105,605.	1,471,345.	1,634,466.
Ë	8	Entertainment		8,000.	613,297.	621,297.
	9	Other direct expenses	1,024.	19,855.	472,925.	493,804.
		Direct expense summary. Add lines 4 through				3,994,416.
Pa		Net income summary. Subtract line 10 from li Gaming. Complete if the organization a		. 000 Dort IV line 10 or		-439,848.
1 6		\$15,000 on Form 990-EZ, line 6a.	answered res on Form	1990, Part IV, line 19, or	reported more than	
		,	(a) Dia sa	(b) Pull tabs/instant	(-) Ollo	(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
eve!						
	1	Gross revenue				
Se	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
		ter the state(s) in which the organization condu	_			
		the organization licensed to conduct gaming ac				Yes No
D	IT "	No," explain:				
	_					
		ere any of the organization's gaming licenses re Yes," explain:			year?	Yes No
	_					
	_					
33208	32 09	D-13-23			Sche	dule G (Form 990) 2023

Sch	edule G (Form 990) 2023	CONSTITUENT CHAPTERS AND BRANCHES	53-0196605	Page 3
11	Does the organization conduct ga	ming activities with nonmembers?	Yes	☐ No
12		eficiary or trustee of a trust, or a member of a partnership or other entity formed		
			Yes	☐ No
13	Indicate the percentage of gaming	activity conducted in:		
			13a	%
				<u></u> %
		e person who prepares the organization's gaming/special events books and records:		
	Nama			
	Adduses			
15.			Yes	□ No
		tract with a third party from whom the organization receives gaming revenue?		
k		ing revenue received by the organization \$ and the amount	unt	
	of gaming revenue retained by the			
c	If "Yes," enter name and address	of the third party:		
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation	\$		
	Garning manager compensation	\$		
	Description of services provided			
	Decempation of services provided			
	Director/officer	Employee Independent contractor		
17	Mandatory distributions:			
	•	state law to make charitable distributions from the gaming proceeds to		
٠	untain the state manning linears.	.	Yes	□ No
ŀ		required under state law to be distributed to other exempt organizations or spent in		
•	organization's own exempt activiti			
Pa		mation. Provide the explanations required by Part I, line 2b, columns (iii) and (v); a	and Part III. lines 9.	9b. 10b.
		applicable. Also provide any additional information. See instructions.	,	, , , ,
	, , ,			
PAR	T I, LINE 3			
THE	AMERICAN RED CROSS WAS CH	HARTERED BY SPECIAL ACT OF CONGRESS ON		
JAN	UARY 5, 1905, AND IS A FED	DERAL INSTRUMENTALITY OF THE UNITED STATES.		
SEE	36 U.S.C. SECTIONS 300101	300111. AS A FEDERAL INSTRUMENTALITY, IT		
тс	EAEMDM EDOW GWYWE IYM CAYD	THARLE DECICEDATION AND ITCPNCING		
		RITABLE REGISTRATION AND LICENSING		
REQ	UIREMENTS, SEE DEPARTMENT	OF EMPLOYMENT V. UNITED STATES, 385 U.S.		
355	(1966), AND IT THEREFORE	IS REGISTERED OR EXEMPT FROM REGISTRATION		
IN	ALL STATES.			

Schedule G (Form 990)	CONSTITUENT CHAPTERS AND BRANCHES	53-0196605	Page 4
Schedule G (Form 990) Part IV Supplemental	Information (continued)		
		Oakadule O.E	
		Schedule G (Fo	orm 990)

332084 04-01-23

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 for the latest information.

AMERICAN NATIONAL RED CROSS & TTS

OMB No. 1545-0047

Open to Public Inspection

Schedule I (Form 990) 2023

Name of the organization AMERICAN NATIONAL RED CROSS & ITS						Employer identification numbe		
CONSTITUENT CHAPTERS AND BRANCHES								53-0196605
Part I	General Information on Grants a	nd Assistance						
1 0	oes the organization maintain records	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the select	ion
С	riteria used to award the grants or assis	stance?						X Yes No
2 [Describe in Part IV the organization's pro	ocedures for monit	oring the use of grant	funds in the United	States.			
Part I						anization answered "Y	es" on Form 990, Par	t IV, line 21, for any
	recipient that received more than s	\$5,000. Part II can	be duplicated if additi	onal space is need	ed.			
1 (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
	inter total number of section 501(c)(3) a	-						

LHA 332101 11-01-23

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

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

Schedule I (Form 990) 2023

CONSTITUENT CHAPTERS AND BRANCHES

53-0196605

Page 2

Part III can be duplicated if additional space is needed.								
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance			
DISASTER RELIEF PAYMENTS AND EMERGENCIES	0	597,241,647.	0.					
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.				
SCHEDULE I, PART I, LINE 2:								
THE AMERICAN RED CROSS RESPONDS TO ABOUT 65,000 DI	SASTERS EVERY	YEAR.						
DISASTER RESPONSE AT THE AMERICAN RED CROSS HAS ES	rablished pro	CEDURES						
FOR PROVIDING FINANCIAL AND MATERIAL ASSISTANCE TO	CLIENTS. DUF	RING THE						
EMERGENCY PHASE, THE AMERICAN RED CROSS PROVIDES A	SSISTANCE IN	THE FORM						
OF MASS CARE (E.G., FEEDING AND SHELTERING) BASED (ON NEEDS. AS	WE MOVE						
TOWARDS THE RECOVERY PHASE, THE AMERICAN RED CROSS	PROVIDES IN	DIVIDUAL						
ASSISTANCE BASED ON VERIFIED NEED AND IDENTIFICATION THROUGH CASE								
MANAGEMENT. THE AMERICAN RED CROSS PLACES CONTROL	PROCEDURES AF	ROUND						

AMERICAN NATIONAL RED CROSS & ITS

CONSTITUENT CHAPTERS AND BRANCHES 53-0196605 Schedule I (Form 990) Page 2 Part IV | Supplemental Information MONITORING THE USE OF FINANCIAL ASSISTANCE IN THE UNITED STATES. DURING THE RECOVERY PHASE. THE AMERICAN RED CROSS PARTNERS WITH OTHER ORGANIZATIONS TO SUPPORT THE COMMUNITY. ADDITIONALLY, THE AMERICAN RED CROSS CONDUCTS DISASTER PREPAREDNESS PROGRAMS INCLUDING THE INSTALLATION OF SMOKE ALARMS AND YOUTH PREPAREDNESS EDUCATION. SCHEDULE I, PART II: GRANTS AND ASSISTANCE TO OTHER DOMESTIC ORGANIZATIONS THE AMERICAN RED CROSS PROVIDES FINANCIAL CONTRIBUTIONS TO OTHER DOMESTIC ORGANIZATIONS IN ORDER TO LEVERAGE THE OTHER ORGANIZATIONS' EXPERTISE OR ACCESS INDIVIDUALS/CLIENTS WHO NEED OUR ASSISTANCE, AND AT TIMES, THESE PARTNERING ORGANIZATIONS ACT AS A VEHICLE TO PROVIDE ASSISTANCE TO INDIVIDUALS AFFECTED BY VICTIMS OF DOMESTIC DISASTERS/EMERGENCIES. THE AMOUNTS GIVEN TO OTHER ORGANIZATIONS ARE INCLUDED AND DISCLOSED WITHIN THE GRANTS OR OTHER ASSISTANCE TO OR FOR DOMESTIC INDIVIDUALS IN SCHEDULE I, PART III, THE AMERICAN RED CROSS GRANTS AND OTHER ASSISTANCE FOR THE VICTIMS OF DOMESTIC DISASTERS AND EMERGENCIES ARE PREDOMINANTLY GIVEN IN THE FORM OF DIRECT ASSISTANCE TO INDIVIDUALS BY THE AMERICAN RED CROSS VIA ITS OWN ESTABLISHED DISTRIBUTION CHANNELS. SCHEDULE I, PART IV: DISBURSEMENT IN FURTHERANCE OF CHARITABLE PROGRAMS AND GRANTS PURSUANT TO THE CONGRESSIONAL CHARTER OF THE AMERICAN RED CROSS (36 U.S.C. 3 FIFTH). THE ORGANIZATION CARRIES OUT A SYSTEM OF NATIONAL AND INTERNATIONAL RELIEF TO MITIGATE OR PREVENT SUFFERING CAUSED BY DISASTERS. DISASTER VICTIMS QUALIFY TO RECEIVE SUCH ASSISTANCE BASED ON EITHER OBVIOUS CIRCUMSTANCES, SUCH AS APPARENT NEED FOR FOOD, CLOTHING OR SHELTER, OR A CASEWORK PROCESS IN WHICH THE NATURE AND EXTENT OF THE

Schedule I (Form 990) CONSTITUENT CHAPTERS AND BRANCHES	53-0196605	Page 2
Part IV Supplemental Information		
DISASTER-CAUSED NEEDS FOR THE AMERICAN RED CROSS AID ARE DETERMINED IN		
LIGHT OF OTHER AVAILABLE RESOURCES. CONTRIBUTIONS TO OTHER		
ORGANIZATIONS CONSIST PRIMARILY OF THOSE MADE TO THE INTERNATIONAL		
FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES AND NATIONAL RED		
CROSS SOCIETIES OF OTHER COUNTRIES. CONTRIBUTIONS MAY BE MADE FOR A		
VARIETY OF PURPOSES, INCLUDING REGULAR FINANCIAL SUPPORT AND DISASTER		
RELIEF ASSISTANCE. THE AMERICAN RED CROSS HAS ONGOING RELATIONSHIPS		
WITH ALL SUCH RED CROSS ORGANIZATIONS WHICH ARE GOVERNED BY		
HUMANITARIAN PRINCIPLES AND QUALIFY FOR SUCH ASSISTANCE. DURING		
DOMESTIC AND INTERNATIONAL DISASTERS, THE AMERICAN RED CROSS WORKS		
CLOSELY WITH OTHER ORGANIZATIONS INCLUDING GOVERNMENT, NON-GOVERNMENT		
NON-PROFIT ORGANIZATIONS, AND CORPORATIONS. THE AMERICAN RED CROSS MAY		
WRITE GRANTS TO NON-PROFIT ORGANIZATIONS DURING LARGE DISASTERS THROUGH		
A SYSTEMATIC PROCESS. PURSUANT TO ITS CONGRESSIONAL CHARTER (36 U.S.C.		
3 FOURTH), THE AMERICAN RED CROSS ALSO ACTS IN MATTERS OF VOLUNTARY		
RELIEF AND IN ACCORD WITH THE MILITARY AUTHORITIES TO PROVIDE		
COMMUNICATIONS AND WELFARE ASSISTANCE TO MEMBERS OF THE ARMED FORCES OF		
THE UNITED STATES, THEIR FAMILIES AND VETERANS. ASSISTANCE TO THIS		
GROUP IS DETERMINED GENERALLY ON THE BASIS OF THEIR MILITARY, VETERAN		
OR DEPENDENT STATUS AND THE PARTICULAR NEEDS RELATED THERETO AS		
REVEALED THROUGH CASEWORK AND SIMILAR MEANS.		

SCHEDULE J (Form 990)

Compensation Information

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

AMERICAN NATIONAL RED CROSS & ITS CONSTITUENT CHAPTERS AND BRANCHES

Employer identification number 53-0196605

		0196603		
Pa	rt I Questions Regarding Compensation			
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization:			
а	Provide a constant of the provide and the state of the st	4a		Х
h		4.		Х
C	Delicinate in a second form and the based of the second se	4-		Х
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	The second the second and provide the applicable amounts for each item in hart in.			
	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:			
а	The organization?	<u>5a</u>		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
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	8	Х	
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	х	
_	9 //			

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

Schedule J (Form 990) 2023

CONSTITUENT CHAPTERS AND BRANCHES

53-0196605

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.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) GAIL MCGOVERN	(i)	685,738.	600,000.	11,124.	14,850.	1,893.	1,313,605.	0.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CLIFFORD HOLTZ	(i)	637,017.	215,078.	3,570.	14,850.	17,013.	887,528.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) CHRIS HROUDA	(i)	619,980.	178,605.	2,464.	14,850.	18,216.	834,115.	0.
PRESIDENT OF BIOMEDICAL SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) BRIAN RHOA	(i)	532,078.	146,077.	25,977.	13,200.	17,757.	735,089.	0.
CHIEF INVESTMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) SHAUN GILMORE	(i)	470,883.	144,500.	7,240.	13,200.	21,259.	657,082.	0.
CHIEF TRANSFORMATION OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) PAUL SULLIVAN	(i)	386,750.	119,899.	23,497.	12,197.	15,371.	557,714.	0.
SVP, DONOR SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ANNE MCKEOUGH	(i)	377,868.	100,855.	22,883.	14,257.	9,010.	524,873.	0.
CHIEF DEVELOPMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JACK MCMASTER	(i)	382,195.	104,018.	5,537.	10,866.	19,431.	522,047.	0.
PRESIDENT OF TRAINING SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MELISSA HURST	(i)	346,056.	101,450.	23,376.	14,850.	22,283.	508,015.	0.
CHIEF HUMAN RESOURCES OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) CARMEL DARCY	(i)	397,669.	67,151.	1,500.	14,850.	9,590.	490,760.	0.
CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) ROSEMARY MCGILLAN	(i)	343,138.	98,021.	10,597.	9,458.	18,267.	479,481.	0.
CHIEF, MARKETING/COMM OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) DOMINICK TOLLI	(i)	327,023.	100,306.	4,855.	14,850.	20,351.	467,385.	0.
SVP, PRODUCT MGMNT & PLATFORM DEV	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) TREVOR RIGGEN	(i)	328,817.	84,162.	891.	13,200.	15,671.	442,741.	0.
PRESIDENT OF HUMANITARIAN SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) JENNIFER HAWKINS	(i)	248,370.	71,396.	21,292.	11,849.	9,247.	362,154.	0.
CORPORATE SECRETARY & CHIEF OF STAFF	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) DAWN CLARKE-DOCCUVI	(i)	252,762.	50,000.	2,971.	10,228.	23,056.	339,017.	0.
GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) PHYLLIS HARRIS	(i)	220,523.	0.	20,190.	10,158.	11,550.	262,421.	0.
GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.

Schedule J (Form 990) 2023

Page 2

Schedule J (Form 990) 2023

CONSTITUENT CHAPTERS AND BRANCHES

53-0196605

Page 3

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. PART I, LINE 7: THE AMOUNTS SHOWN IN PART II. COLUMN B (II) FOR THE PRESIDENT & CEO. WERE PAID BASED ON A WRITTEN VARIABLE INCENTIVE PLAN, PRIOR FISCAL YEAR PERFORMANCE AND INCLUDES A CAREER RECOGNITION AWARD AND WERE APPROVED BY THE COMPENSATION COMMITTEE OF THE BOARD. THE AMOUNTS SHOWN IN PART II. COLUMN B (II) FOR THE CHIEF OPERATING OFFICER. THE PRESIDENT BIOMEDICAL SERVICES. THE CHIEF INVESTMENT OFFICER THE CHIEF DEVELOPMENT OFFICER. THE CHIEF HUMAN RESOURCES OFFICER. THE CHIEF FINANCIAL OFFICER AND THE PRESIDENT HUMANITARIAN SERVICES WERE PAID BASED ON WRITTEN VARIABLE INCENTIVE PLANS. PRIOR FISCAL YEAR PERFORMANCE AND WERE APPROVED BY THE COMPENSATION COMMITTEE OF THE BOARD. ALL VARIABLE INCENTIVE PLAN PAYOUTS WERE REVIEWED BY AN OUTSIDE INDEPENDENT COMPENSATION CONSULTANT AND WERE DOCUMENTED IN THE MINUTES OF THE COMMITTEE ALL IN ACCORDANCE WITH THE REOUIREMENTS FOR THE REBUTTABLE PRESUMPTION OF REASONABLENESS UNDER IRC SECTION 4958. THE AMOUNT SHOWN IN PART II. COLUMN B(II) FOR THE CHIEF TRANSFORMATION OFFICER THE CHIEF MARKETING/COMMUNICATIONS OFFICER AND THE CORPORATE

Schedule J (Form 990) 2023

CONSTITUENT CHAPTERS AND BRANCHES

PLATFORM DEVELOPMENT WAS BASED ON A WRITTEN INCENTIVE PLAN PRIOR FISCAL

53-0196605 Page 3 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. SECRETARY & CHIEF OF STAFF WERE PAID BASED ON A WRITTEN VARIABLE INCENTIVE PLAN PRIOR FISCAL YEAR PERFORMANCE AND WERE APPROVED BY THE PRESIDENT & CEO. THE AMOUNT SHOWN IN PART II. COLUMN B(II) FOR THE SVP DONOR SERVICES WAS BASED ON A WRITTEN INCENTIVE PLAN, PRIOR FISCAL YEAR PERFORMANCE AND WAS APPROVED BY THE PRESIDENT BIOMEDICAL SERVICES. THE AMOUNT SHOWN IN PART II. COLUMN B (II) FOR THE PRESIDENT. TRAINING SERVICES WAS PAID BASED ON A WRITTEN INCENTIVE PLAN. PRIOR FISCAL YEAR PERFORMANCE AND WAS APPROVED BY THE CHIEF OPERATING OFFICER. THE AMOUNTS SHOWN IN PART II. COLUMN B (II) FOR THE GENERAL COUNSEL (DAWN CLARKE-DOCCUVI) WHO SERVED AS THE INTERIM GENERAL COUNSEL FROM JULY 8. 2023 UNTIL HER APPOINTMENT AS GENERAL COUNSEL IN DECEMBER 2023 WERE AN INTERIM BONUS APPROVED BY THE COMPENSATION COMMITTEE. THE AMOUNT SHOWN IN PART II. COLUMN B(II) FOR THE SVP PRODUCT MANAGEMENT &

AMERICAN NATIONAL RED CROSS & ITS

Schedule J (Form 990) 2023 CONSTITUENT CHAPTERS AND BRANCHES 53-0196605 Page 3

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.
YEAR PERFORMANCE AND WAS APPROVED BY THE PRESIDENT TRAINING SERVICES.
PART I, LINE 8:
THE AMERICAN RED CROSS HAS ONE (1) EMPLOYEE LISTED ON PART VII WHO IS
COVERED BY REG. SECTION 53.4958-4 (A)(3), THE PRESIDENT & CEO. THE ORIGINAL
BASE SALARY AMOUNT PAID TO THE PRESIDENT & CEO IS COVERED BY THIS PROVISION
AND ANY SUBSEQUENT ANNUAL INCREASES OR OTHER SALARY PAYMENTS ARE DETERMINED
BY THE BOARD OF GOVERNORS FOLLOWING A REVIEW BY THE COMPENSATION COMMITTEE
OF THE BOARD, AND WERE BASED ON COMPARABLE MARKET DATA AND SUPPORTED BY THE
OPINION OF AN OUTSIDE INDEPENDENT COMPENSATION CONSULTANT AND WERE
DOCUMENTED IN THE MINUTES OF THE COMMITTEE, ALL IN ACCORDANCE WITH THE
REQUIREMENTS FOR THE REBUTTABLE PRESUMPTION OF REASONABLENESS UNDER IRC
SECTION 4958.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

Name of the organization AMERICAN NATIONAL RED CROSS & ITS CONSTITUENT CHAPTERS AND BRANCHES Employer identification number 53-0196605

Par	t I Types of Property	IN AIN DE	ANCHES		33-0	196605
ı aı	tr Types of Froperty	(a)	(b)	(c)	(d)	
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de	
		applicable		Form 990, Part VIII, line 1g	noncash contribu	ition amounts
1	Art - Works of art					
2	Art - Historical treasures					
3	Art - Fractional interests					
4	Books and publications					
5	Clothing and household goods	Х		2,362,607.	FMV	
6	Cars and other vehicles	Х		42,599.	FMV	
7	Boats and planes					
8	Intellectual property					
9	Securities - Publicly traded					
10	Securities - Closely held stock					
11	Securities - Partnership, LLC, or					
	trust interests					
12	Securities - Miscellaneous					
13	Qualified conservation contribution -					
	Historic structures					
14	Qualified conservation contribution - Other $_{\dots}$					
15	Real estate - Residential					
16	Real estate - Commercial					
17	Real estate - Other					
18	Collectibles					
19	Food inventory	X		4,986,339.		
20	Drugs and medical supplies	Х		1,335,772.	FMV	
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts	<u> </u>		5 222 222		
25	Other (VARIOUS)	X	0	5,332,920.	FMV	
26	Other ()					
27	Other ()					
28	Other (L				
29	Number of Forms 8283 received by the organia	-	•			11
	for which the organization completed Form 82	83, Part V, L	onee Acknowledg	ement 29		
20-	Demine the constitution of the constitution of the			autantin Daut I linna 4 thursus	-h-00 +h-++ :t	Yes No
30a	During the year, did the organization receive by					
	must hold for at least 3 years from the date of	_		•		30a X
h	exempt purposes for the entire holding period' If "Yes," describe the arrangement in Part II.	·				30a X
	Does the organization have a gift acceptance	oolicy that re	acuires the review	of any nonetandard contribut	tions?	31 X
31	Does the organization have a grit acceptance plant accept					31 X
o∠d	t- 'lb t' 0					32a X
h	If "Yes," describe in Part II.					32a "
33	If the organization didn't report an amount in c	olumn (c) for	r a type of property	for which column (a) is about	cked	
JJ	describe in Part II.	olullii (c) 10	a type of property	To willon column (a) is the	onou,	
	UCOUNDE III FAIL II.					

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

Schedule M (Form 990) 2023 CONSTITUENT CHAPTERS AND BRANCHES	53-0196605	Page 2
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, a is reporting in Part I, column (b), the number of contributions, the number of items received, or a this part for any additional information.	and 33, and whether the organi a combination of both. Also co	ization
SCHEDULE M, LINE 32B:		
THE AMERICAN RED CROSS ALSO USES THIRD-PARTY VENDORS FOR ITS VEHICLE,		
CLOTHING, AND HOUSEHOLD ITEM DONATION PROGRAMS. THE VENDORS SOLICIT,		
PROCESS, AND SELL THE DONATED GOODS.		

Schedule M (Form 990) 2023

332142 09-11-23

SCHEDULE O (Form 990)

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 Form 990-EZ.

OMB No. 1545-0047

2023
Open to Public

Department of the Treasury Inspection Internal Revenue Service Go to www.irs.gov/Form990 for the latest information. AMERICAN NATIONAL RED CROSS & ITS Name of the organization **Employer identification number** 53-0196605 CONSTITUENT CHAPTERS AND BRANCHES PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE AMERICAN RED CROSS PREVENTS AND ALLEVIATES HUMAN SUFFERING IN THE FACE OF EMERGENCIES BY MOBILIZING THE POWER OF VOLUNTEERS AND THE GENEROSITY OF DONORS, FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE: **BIOMEDICAL SERVICES:** THE AMERICAN RED CROSS SUPPLIES ABOUT 40% OF THE NATION'S BLOOD SUPPLY DEPENDING ON THE GENEROSITY OF DONORS TO HELP SAVE LIVES. IN FY24, MORE THAN 4.5 MILLION BLOOD DONATIONS AND 1.1 MILLION PLATELET DONATIONS WERE COLLECTED FROM MORE THAN 2.2 MILLION VOLUNTEER DONORS. IN THE AMERICAN RED CROSS DELIVERED MORE THAN 6.3 MILLION BLOOD PRODUCTS TO HELP PATIENTS AT ABOUT 2,500 HOSPITALS AND TRANSFUSION CENTERS ACROSS THE COUNTRY. FORM 990, PART III, LINE 4B, DESCRIPTION OF PROGRAM SERVICE: DOMESTIC DISASTER SERVICES: THE AMERICAN RED CROSS RESPONDS TO ABOUT 65,000 DISASTERS EVERY YEAR THE AMERICAN RED CROSS HELPS COMMUNITIES PREPARE FOR, RESPOND TO AND RECOVER FROM DISASTERS BY PROVIDING FOOD, SHELTER, RELIEF SUPPLIES EMOTIONAL COMFORT, HEALTH SERVICES, FINANCIAL ASSISTANCE AND OTHER

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

SUPPORT TO HELP PEOPLE IN THEIR TIME OF GREATEST NEED. IN FY24,

1.5 MILLION OVERNIGHT SHELTER AND HOTEL STAYS WERE PROVIDED.

THAN 52 200 HOUSEHOLDS RECEIVED OVER 307 400 RELIEF ITEMS AND MORE THAN

Schedule O (Form 990) 2023	Page 2
Name of the organization AMERICAN NATIONAL RED CROSS & ITS	Employer identification number
CONSTITUENT CHAPTERS AND BRANCHES	53-0196605
MAJOR DISASTER RESPONSES IN FY24 INCLUDE BUT ARE NOT LIMITED TO: HAWAII	
WILDFIRES, HURRICANE IDALIA, NUMEROUS TORNADOES, STORMS AND FLOODS IN	
THE MIDWEST AND THE SOUTH; AND WILDFIRES OUT WEST. THE AMERICAN RED	
CROSS LONG TERM RECOVERY EFFORTS ARE ONGOING IN MANY OF THESE	
DISASTER-IMPACTED COMMUNITIES.	
FORM 990, PART III, LINE 4C, DESCRIPTION OF PROGRAM SERVICE:	
TRAINING SERVICES:	
THE AMERICAN RED CROSS HELPS PEOPLE PREPARE FOR AND RESPOND TO HEALTH	
AND SAFETY EMERGENCIES THROUGH OUR LIFESAVING EDUCATION AND TRAINING	
PROGRAMS. IN FY24, NEARLY 8.5 MILLION PEOPLE RECEIVED RED CROSS	
TRAINING IN FIRST AID, WATER SAFETY AND OTHER SKILLS THAT HELP SAVE	
LIVES.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
INTERNATIONAL SERVICES:	
THE AMERICAN RED CROSS RESPONDS TO INTERNATIONAL DISASTERS AND HELPS	
COMMUNITIES PREPARE FOR EMERGENCIES AROUND THE WORLD. IN FY24, MORE	
THAN 2 MILLION HOUSEHOLDS WERE VISITED THROUGH THE MEASLES & RUBELLA	
PARTNERSHIP, MORE THAN 375 FAMILIES WERE RECONNECTED THROUGH THE	
RESTORING FAMILY LINKS PROGRAM, AND MORE THAN 295,000 INDIVIDUALS WERE	
REACHED THROUGH DISASTER PREPAREDNESS ACTIVITIES AROUND THE GLOBE.	
EXPENSES \$ 82,216,396. INCLUDING GRANTS OF \$ 61,439,558. REVENUE \$ 0.	
COMMUNITY SUPPORT:	
THE AMERICAN RED CROSS SUPPORTS SEVERAL FOOD BANKS AND A WIC PROGRAM IN	

Schedule O (Form 990) 2023	Page 2
Name of the organization AMERICAN NATIONAL RED CROSS & ITS	Employer identification number
CONSTITUENT CHAPTERS AND BRANCHES	53-0196605
A SMALL NUMBER OF COMMUNITIES ACROSS THE COUNTRY, ENSURING INDIVIDUALS	
AND FAMILIES HAVE ACCESS TO NUTRITIOUS FOOD. WE ALSO HAVE VARIOUS FIRST	
THE THIRD IN TO ROUDD TO NOTATION TOOD. HE MADO MINE THAT	
AID STATION PROGRAMS, PROVIDING FIRST AID AT SPORTING EVENTS, CONCERTS,	
ETC. IN SOME COMMUNITIES.	
EXPENSES \$ 14,584,717. INCLUDING GRANTS OF \$ 2,925,926. REVENUE \$ 0.	
SERVICE TO THE ARMED FORCES:	
THE AMERICAN RED CROSS SERVES THE MILITARY COMMUNITY FROM THE MOMENT A	
SERVICE MEMBER TAKES THEIR OATH TO THE TIME THEY'RE NAVIGATING LIFE AS	
A VETERAN. IN FY24, THE AMERICAN RED CROSS PROVIDED MORE THAN 460,000	
A VEIERAN. IN F124, THE AMERICAN RED CROSS PROVIDED MORE THAN 400,000	
SERVICES TO SERVICE MEMBERS, VETERANS AND THEIR FAMILIES AND BRIEFED	
MORE THAN 380,000 SERVICE MEMBERS AND THEIR FAMILIES THROUGH THE	
GENVIGE TO THE ADMED FORGER CHEREAGH PROGRAM	
SERVICE TO THE ARMED FORCES OUTREACH PROGRAM.	
EXPENSES \$ 64,573,220. INCLUDING GRANTS OF \$ 1,027,132. REVENUE \$ 0.	
EQUITY INVESTMENTS AND OTHER REVENUE:	
EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 33,357,257.	
FORM 990, PART V, LINE 3B:	
THE AMERICAN RED CROSS COMPLIES WITH ITS UNRELATED BUSINESS INCOME FORM	
990-T RETURN FILING BY THE INTERNAL REVENUE CODE PERMITTED EXTENDED DUE	
DATE OF MAY 15, 2025. PER THE FORM 990 INSTRUCTIONS FOR PART V, LINE 3B,	
THE AMERICAN RED CROSS IS REQUIRED TO ANSWER 'NO' TO FILING A FORM 990-T	
BECAUSE IT WILL NOT FILE ITS FORM 990-T BY THE TIME IT FILES ITS FORM 990	
ON APRIL 28, 2025. THE AMERICAN RED CROSS IS ANNUALLY AND TIMELY COMPLIANT	
·	
WITH ITS FORM 990-T REQUIREMENTS.	

FORM 990, PART VI, SECTION A, LINE 2:

Schedule O (Form 990) 2023	Page 2
Name of the organization AMERICAN NATIONAL RED CROSS & ITS CONSTITUENT CHAPTERS AND BRANCHES	Employer identification number 53-0196605
THE FOLLOWING BOARD MEMBERS HAVE BUSINESS RELATIONSHIPS AS DESCRIBED	
HEREIN: (1) DAVID BRANDON AND GAIL MCGOVERN BOTH SERVE AS BOARD DIRECTORS	
AT THE SAME PUBLIC COMPANY, AND (2) LORENCE KIM IS A BOARD MEMBER OF A	
PUBLIC COMPANY FOR WHICH STEVEN COLLIS IS THE CHAIRMAN, PRESIDENT & CHIEF	
EXECUTIVE OFFICER.	
FORM 990, PART VI, SECTION A, LINE 6:	
AS DEFINED IN THE CONGRESSIONAL CHARTER: "MEMBERSHIP IN THE CORPORATION IS	
OPEN TO ALL THE PEOPLE OF THE UNITED STATES AND ITS TERRITORIES AND	
POSSESSIONS, ON PAYMENT OF AN AMOUNT SPECIFIED, OR AS OTHERWISE PROVIDED IN	
THE BYLAWS."	
FORM 990, PART VI, SECTION A, LINE 7A:	
DELEGATES OF THE CHAPTERS ELECT ALL MEMBERS OF THE GOVERNING BODY EXCEPT	
THE CHAIRMAN OF THE BOARD OF GOVERNORS WHO IS APPOINTED BY THE PRESIDENT OF	
THE UNITED STATES.	
AS MANDATED IN THE CONGRESSIONAL CHARTER, SECTION 4(A)(3)(B)(I): "MEMBERS	
OF THE BOARD OF GOVERNORS OTHER THAN THE CHAIRMAN SHALL BE ELECTED AT THE	
ANNUAL MEETING OF THE CORPORATION IN ACCORDANCE WITH SUCH PROCEDURES AS MAY	
BE PROVIDED IN THE BYLAWS."	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE COMPENSATION AND MANAGEMENT DEVELOPMENT COMMITTEE REVIEWED THE	
COMPENSATION PORTIONS OF THE IRS FORM 990 (PART VII AND SCHEDULE J) DURING	
A MEETING HELD ON OCTOBER 23, 2024. A COPY OF THE FINAL FORM 990 WAS	
SUBMITTED TO EACH MEMBER OF THE BOARD OF GOVERNORS BEFORE IT WAS FILED WITH	
THE IRS.	

lame of the organization	AMERICAN NATIONAL RED CROSS & ITS CONSTITUENT CHAPTERS AND BRANCHES	Employer identification numbe
	CONSTITUENT CHAITERS AND BRANCIES	33 0130003
HE MANAGEMENT REVIE	W PROCESS ENTAILS THE CHIEF FINANCIAL OFFICER	
COORDINATING THE COM	PLETION OF THE IRS FORM 990 WITH THE GENERAL COUNSEL	
ND THE CHIEF HUMAN	RESOURCES OFFICER FOR FINAL REVIEW BY THE PRESIDENT AN	ND
EO.		
ORM 990 PART VI. S	SECTION B, LINE 12C:	
	ON 2.3(A) OF THE AMENDED AND RESTATED BYLAWS OF THE	
MERICAN RED CROSS,	ALL MEMBERS OF THE BOARD OF GOVERNORS MUST ANNUALLY	
EVIEW AND CERTIFY T	THE CODE OF BUSINESS ETHICS AND CONDUCT ("THE CODE").	
DDITIONALLY, TO DIS	CLOSE AND REMEDY ACTUAL OR PERCEIVED BUSINESS,	
INANCIAL OR PERSONA	L CONFLICTS OF INTEREST, EVERY MEMBER OF THE BOARD OF	
OVERNORS MUST ALSO	COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE (THE	
QUESTIONNAIRE") ANN	UALLY. OTHER OFFICERS AND KEY EMPLOYEES ARE ALSO	
EQUIRED TO ACKNOWLE	DGE RECEIPT OF THE CODE AND COMPLETE THE QUESTIONNAIRE	3
NNUALLY.		
NDER THE DIRECTION	OF THE GENERAL COUNSEL, COMPLIANCE AND ETHICS	
EPARTMENT STAFF COI	LECT THE EXECUTED QUESTIONNAIRE FORMS FROM THE MEMBERS	3
F THE BOARD OF GOVE	RNORS AND OTHER OFFICERS AND KEY EMPLOYEES. THE	
NFORMATION DISCLOSE	D IN THE QUESTIONNAIRE IS REVIEWED, ACTUAL OR PERCEIVE	ED
ONFLICTS OF INTERES	T ARE IDENTIFIED, AND ANY NECESSARY REMEDIATION OPTION	NS
RE DEVELOPED. DEPEN	DING ON THE MATTER, THE GENERAL COUNSEL OR A STAFF	
EMBER FROM THE COME	LIANCE AND ETHICS DEPARTMENT DISCUSSES THE CONFLICT AN	ND
EMEDIATION WITH THE	MEMBER OF THE BOARD OR THE OTHER OFFICER OR KEY	
MPLOYEE, AND IF NEC	ESSARY THE PRESIDENT AND CEO OR CHAIRMAN OF THE BOARD.	
HERE APPROPRIATE, T	THE CONFLICT OF INTEREST AND REMEDIATION REGARDING A	_

Name of the organization AMERICAN NATIONAL RED CROSS & ITS CONSTITUENT CHAPTERS AND BRANCHES	Employer identification number 53-0196605
COMMITTEE OR FULL BOARD MEETING. THE QUESTIONNAIRE IS ALSO INTENDED TO	·
MONITOR CONFLICTS OF INTEREST ON AN ONGOING BASIS. MEMBERS OF THE BOARD AND	
OTHER OFFICERS AND KEY EMPLOYEES ARE EXPLICITLY INSTRUCTED THAT THEY HAVE A	
CONTINUING DUTY TO UPDATE THE QUESTIONNAIRE DURING THE COURSE OF THE YEAR	
TO REFLECT CHANGES IN ANY BUSINESS, FINANCIAL OR PERSONAL CONFLICTS OF	
INTEREST. THE SAME PROCESS OF REVIEW, DISCUSSION AND FOLLOW-UP ON CONFLICTS	
OF INTEREST AND REMEDIATION WITH THE BOARD MEMBER OR OTHER OFFICER OR KEY	
EMPLOYEE WOULD OCCUR WITH INTERIM DISCLOSURES.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE BOARD OF GOVERNORS OF THE AMERICAN RED CROSS HAS DELEGATED AUTHORITY TO	
THE COMPENSATION AND MANAGEMENT DEVELOPMENT COMMITTEE (THE "COMMITTEE") OF	
THE BOARD TO (1) REVIEW THE COMPENSATION, BENEFITS, AND INCENTIVE PROGRAM	
FOR THE CEO; (2) MAKE RECOMMENDATIONS TO THE BOARD FOR THE CEO'S ANNUAL	
SALARY, BENEFITS AND INCENTIVE PROGRAM; AND, (3) REVIEW AND MAKE	
DETERMINATIONS REGARDING THE COMPENSATION, BENEFITS, AND INCENTIVE PROGRAMS	
FOR OTHER SENIOR OFFICERS AND EXECUTIVES OF THE AMERICAN RED CROSS. THE	
COMMITTEE IS COMPOSED ENTIRELY OF BOARD MEMBERS WHO DO NOT HAVE ANY	
CONFLICTS OF INTEREST. ANNUALLY, THE COMMITTEE REVIEWS AND APPROVES A LIST	
OF EXECUTIVES WHO ARE OR MIGHT BE CONSIDERED "DISQUALIFIED PERSONS"	
PURSUANT TO INTERNAL REVENUE CODE ("IRC") SECTION 4958. WITH RESPECT TO	
THOSE PERSONS, THE COMMITTEE CONDUCTS ITS ANNUAL REVIEW OF THEIR TOTAL	
COMPENSATION AND BENEFITS BASED ON COMPARABLE MARKET DATA. THE COMMITTEE	
RETAINS AN OUTSIDE, INDEPENDENT COMPENSATION CONSULTANT TO PROVIDE MARKET	
DATA AND REASONABLENESS OPINIONS FOR THE DESIGNATED EXECUTIVES AND IT	
RELIES ON SUCH MARKET DATA AND REASONABLENESS OPINIONS IN APPROVING NEW	
SALARIES, BENEFITS AND PAYMENT OF BONUSES OR INCENTIVES FOR THE DESIGNATED	
PERSONS. THE COMMITTEE ALSO THEN DOCUMENTS ITS DECISIONS AS TO ANY CHANGES	

Schedule O (Form 990) 2023	Page 2
Name of the organization AMERICAN NATIONAL RED CROSS & ITS	Employer identification number
CONSTITUENT CHAPTERS AND BRANCHES	53-0196605
TO BE IMPLEMENTED IN COMPENSATION OR BENEFITS FOR THE DESIGNATED PERSONS.	
THE COMMITTEE UNDERTOOK THIS PROCESS FOR ALL OF THE OFFICERS AND KEY	
EMPLOYEES REPORTED IN SCHEDULE J WHO ARE CONSIDERED "DISQUALIFIED PERSONS"	
PURSUANT TO IRC SECTION 4958.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE AMERICAN RED CROSS MAKES ITS GOVERNING DOCUMENTS, INCLUDING THE CODE OF	
BUSINESS ETHICS AND CONDUCT, CONFLICT OF INTEREST QUESTIONNAIRE, AND THE	
CONSOLIDATED FINANCIAL STATEMENTS, AVAILABLE TO THE PUBLIC ON THE	
GOVERNANCE PAGE OF ITS WEBSITE, WWW.REDCROSS.ORG.	
FORM 990, PART XI, LINE 9:	
PRIMARILY, THIS AMOUNT REPRESENTS EMPLOYEE RETIREMENT PENSION AND	
POST-RETIREMENT BENEFIT PLAN NET LOSS PER PROVISION OF ASC 715 (FORMER	
FASB 87 AND 106) IN THE AMOUNT OF \$-16,976,370.	

32212 11-14-23 Schedule O (Form 990) 2023

SCHEDULE R (Form 990)

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.

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

OMB No. 1545-0047

Employer identification number

	CONSTITUENT CHAPTERS	AND BRANCHES					53-0196605		
Part I	Identification of Disregarded Entities. Complete	e if the organization answered "Yes"	on Form 990, Part IV, line 33	з.					
	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	r (d) Total inco	me End-of-year		Direct c	(f) ontrolling itity)
	Identification of Related Tax-Exempt Organizat	tions. Complete if the executation of	anguared "Vee" on Form 000	Part IV line 24 h	populae it had one	or more	related toy over	nnt.	
Part II	organizations during the tax year.	- -	inswered res on Form 990	, Part IV, line 34, t	recause it riad one	or more		прі	
	(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	Dired	(f) ct controlling entity	Section 5 contr	olled
					501(c)(3))			Yes	No

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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	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	Disprop	ortionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General emanaging partner	(k) Percentage ownership

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.

	country)		or trust)	income	end-of-year assets	ownership	contr enti	b)(13) rolled tity?
	_						Yes	No
SPLIT INTR AG	DC	N/A	TRUST					Х
SPLIT INTR AG	DC	N/A	TRUST					Х
SPLIT INTR AG	DC	N/A	TRUST					Х
	SPLIT INTR AG	SPLIT INTR AG DC	SPLIT INTR AG DC N/A	SPLIT INTR AG DC N/A TRUST				

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Part V	Transactions With Related Organizations.	Complete if the organization answered	"Yes" on Form 990, Part IV, line 34, 35b, or 36.
allv	Transactions with Related Organizations.	Complete if the organization answered	163 011 0111 330,1 art 14, line 04, 030, 01 00.

No	ite: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No		
1	During the tax year, did the organization engage in any of the following transactions with one	ne or more rela	ated organizations listed ir	n Parts II-IV?					
а	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		Х		
	Gift, grant, or capital contribution to related organization(s)				1b		Х		
					1c		Х		
d	d Loans or loan guarantees to or for related organization(s)				1d		Х		
е	Loans or loan guarantees by related organization(s)				1e		X		
f	f Dividends from related organization(s)				1f		X		
g	g Sale of assets to related organization(s)				1g		X		
h	n Purchase of assets from related organization(s)				1h		X		
i	Exchange of assets with related organization(s)				1i		Х		
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		X		
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х		
					11		Х		
					1m		Х		
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
Sharing of paid employees with related organization(s)									
р	Reimbursement paid to related organization(s) for expenses				1p		X		
q	Reimbursement paid by related organization(s) for expenses				1q		X		
r	Other transfer of cash or property to related organization(s)				1r		Х		
s	S Other transfer of cash or property from related organization(s)	coganization(s)		Х					
2	If the answer to any of the above is "Yes," see the instructions for information on who must	complete this	s line, including covered re	elationships and transaction thresholds.					
	Name of related organization Tran	nsaction			ed				
1)									
2)									
,									
3)									
4)									
5)									

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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)	(b)	(c)	(d)	(e)	(f)	(g)	(ŀ	1)	(i)	(i)	(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)		Are all partners se 501(c)(3) orgs.?		Share of end-of-year assets	Dispr tion allocat Yes	opor- ate ions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	ral or laging ner?	Percentage ownership
			,	103 110			103	140	()	103	NO	
											-	

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