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| <p>Form 5500</p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p> | <p>Annual Return/Report of Employee Benefit Plan</p> <p>This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).</p> <p>▶ Complete all entries in accordance with the instructions to the Form 5500.</p> | <p>OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: 24pt; font-weight: bold;">2023</p> <hr/> <p>This Form is Open to Public Inspection</p> |
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Part I Annual Report Identification Information

For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024

A This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)

a single-employer plan a DFE (specify) _____

B This return/report is: the first return/report the final return/report

an amended return/report a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. ▶

D Check box if filing under: Form 5558 automatic extension the DFVC program

special extension (enter description) _____

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶

Part II Basic Plan Information—enter all requested information

| | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>1a Name of plan <u>THE CORPS NETWORK ACCIDENTAL DEATH & DISMEMBERMENT PLAN</u></p> | <p>1b Three-digit plan number (PN) ▶ <u>503</u></p> |
| <p>2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>THE CORPS NETWORK</u></p> <p><u>1275 K STREET, NW</u> <u>SUITE 1050</u> <u>WASHINGTON, DC 20005</u></p> | <p>1c Effective date of plan <u>07/01/2022</u></p> <p>2b Employer Identification Number (EIN) <u>52-1480202</u></p> <p>2c Plan Sponsor's telephone number <u>202-737-6272</u></p> <p>2d Business code (see instructions) <u>813000</u></p> |

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

| | | | |
|------------------|---------------------------------------------------|------------|--------------------------------------------------------------|
| SIGN HERE | Filed with authorized/valid electronic signature. | 01/24/2025 | MARY ELLEN SPRENKEL |
| | Signature of plan administrator | Date | Enter name of individual signing as plan administrator |
| SIGN HERE | | | |
| | Signature of employer/plan sponsor | Date | Enter name of individual signing as employer or plan sponsor |
| SIGN HERE | | | |
| | Signature of DFE | Date | Enter name of individual signing as DFE |

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|------|
| 3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor | 3b Administrator's EIN | |
| | 3c Administrator's telephone number | |
| | | |
| 4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name | 4b EIN | |
| | 4d PN | |
| 5 Total number of participants at the beginning of the plan year | 5 | 2611 |
| 6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested..... | 6a(1) | 2611 |
| | 6a(2) | 3905 |
| | 6b | 0 |
| | 6c | 0 |
| | 6d | 3905 |
| | 6e | |
| | 6f | |
| | 6g(1) | |
| 6g(2) | | |
| 6h | | |
| 7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)..... | 7 | |

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:
4L

| | |
|-------------------------------------------------------------------------|-------------------------------------------------------------------------|
| 9a Plan funding arrangement (check all that apply) | 9b Plan benefit arrangement (check all that apply) |
| (1) <input checked="" type="checkbox"/> Insurance | (1) <input checked="" type="checkbox"/> Insurance |
| (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts | (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts |
| (3) <input type="checkbox"/> Trust | (3) <input type="checkbox"/> Trust |
| (4) <input type="checkbox"/> General assets of the sponsor | (4) <input type="checkbox"/> General assets of the sponsor |

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

| | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------|--|
| a Pension Schedules | | b General Schedules | |
| (1) <input type="checkbox"/> R (Retirement Plan Information) | | (1) <input type="checkbox"/> H (Financial Information) | |
| (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary | | (2) <input type="checkbox"/> I (Financial Information – Small Plan) | |
| (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary | | (3) <input checked="" type="checkbox"/> A (Insurance Information) – Number Attached <u> 1 </u> | |
| (4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____ | | (4) <input type="checkbox"/> C (Service Provider Information) | |
| (5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information) | | (5) <input type="checkbox"/> D (DFE/Participating Plan Information) | |
| | | (6) <input type="checkbox"/> G (Financial Transaction Schedules) | |

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) Yes No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) Yes No

11c Enter the Receipt Confirmation Code for the 2023 Form M-1 annual report. If the plan was not required to file the 2023 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

**SCHEDULE A
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2023

This Form is Open to Public Inspection

For calendar plan year 2023 or fiscal plan year beginning **07/01/2023** and ending **06/30/2024**

| | |
|---------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| A Name of plan THE CORPS NETWORK ACCIDENTAL DEATH & DISMEMBERMENT PLAN | B Three-digit plan number (PN) ▶ 503 |
| C Plan sponsor's name as shown on line 2a of Form 5500 THE CORPS NETWORK | D Employer Identification Number (EIN) 52-1480202 |

Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier

GERBER LIFE

| (b) EIN | (c) NAIC code | (d) Contract or identification number | (e) Approximate number of persons covered at end of policy or contract year | Policy or contract year | |
|-------------------|----------------------|----------------------------------------------|------------------------------------------------------------------------------------|--------------------------------|-------------------|
| | | | | (f) From | (g) To |
| 13-2611847 | 70939 | TCN_GER_14 | 3905 | 07/01/2023 | 06/30/2024 |

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

| | |
|---------------------------------------------|--------------------------------------|
| (a) Total amount of commissions paid | (b) Total amount of fees paid |
|---------------------------------------------|--------------------------------------|

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

| (b) Amount of sales and base commissions paid | Fees and other commissions paid | | (e) Organization code |
|------------------------------------------------------|----------------------------------------|--------------------|------------------------------|
| | (c) Amount | (d) Purpose | |
| | | | |

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

| (b) Amount of sales and base commissions paid | Fees and other commissions paid | | (e) Organization code |
|------------------------------------------------------|----------------------------------------|--------------------|------------------------------|
| | (c) Amount | (d) Purpose | |
| | | | |

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

| (b) Amount of sales and base commissions paid | Fees and other commissions paid | | (e) Organization code |
|-----------------------------------------------|---------------------------------|-------------|-----------------------|
| | (c) Amount | (d) Purpose | |
| | | | |

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

| (b) Amount of sales and base commissions paid | Fees and other commissions paid | | (e) Organization code |
|-----------------------------------------------|---------------------------------|-------------|-----------------------|
| | (c) Amount | (d) Purpose | |
| | | | |

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

| (b) Amount of sales and base commissions paid | Fees and other commissions paid | | (e) Organization code |
|-----------------------------------------------|---------------------------------|-------------|-----------------------|
| | (c) Amount | (d) Purpose | |
| | | | |

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

| (b) Amount of sales and base commissions paid | Fees and other commissions paid | | (e) Organization code |
|-----------------------------------------------|---------------------------------|-------------|-----------------------|
| | (c) Amount | (d) Purpose | |
| | | | |

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

| (b) Amount of sales and base commissions paid | Fees and other commissions paid | | (e) Organization code |
|-----------------------------------------------|---------------------------------|-------------|-----------------------|
| | (c) Amount | (d) Purpose | |
| | | | |

Part II Investment and Annuity Contract Information
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

| | | |
|--------------------------------------------------------------------------------------------------------|----------|--|
| 4 Current value of plan's interest under this contract in the general account at year end | 4 | |
| 5 Current value of plan's interest under this contract in separate accounts at year end..... | 5 | |

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier **6b**

c Premiums due but unpaid at the end of the year..... **6c**

d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
 Specify nature of costs ▶

e Type of contract: (1) individual policies (2) group deferred annuity
 (3) other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) deposit administration (2) immediate participation guarantee
 (3) guaranteed investment (4) other ▶

b Balance at the end of the previous year **7b** 0

c Additions: (1) Contributions deposited during the year **7c(1)**
 (2) Dividends and credits **7c(2)**
 (3) Interest credited during the year **7c(3)**
 (4) Transferred from separate account..... **7c(4)**
 (5) Other (specify below) **7c(5)**
 ▶

(6) Total additions **7c(6)** 0

d Total of balance and additions (add lines **7b** and **7c(6)**) **7d** 0

e Deductions:
 (1) Disbursed from fund to pay benefits or purchase annuities during year **7e(1)**
 (2) Administration charge made by carrier **7e(2)**
 (3) Transferred to separate account..... **7e(3)**
 (4) Other (specify below) **7e(4)**
 ▶

(5) Total deductions **7e(5)** 0

f Balance at the end of the current year (subtract line **7e(5)** from line **7d**) **7f** 0

Part III Welfare Benefit Contract Information
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

- 8** Benefit and contract type (check all applicable boxes)
- | | | | |
|----------------------------------------------------------------------------------------------------------|--------------------------------------------------------|-------------------------------------------------------------|------------------------------------------------------|
| a <input type="checkbox"/> Health (other than dental or vision) | b <input type="checkbox"/> Dental | c <input type="checkbox"/> Vision | d <input type="checkbox"/> Life insurance |
| e <input type="checkbox"/> Temporary disability (accident and sickness) | f <input type="checkbox"/> Long-term disability | g <input type="checkbox"/> Supplemental unemployment | h <input type="checkbox"/> Prescription drug |
| i <input type="checkbox"/> Stop loss (large deductible) | j <input type="checkbox"/> HMO contract | k <input type="checkbox"/> PPO contract | l <input type="checkbox"/> Indemnity contract |
| m <input checked="" type="checkbox"/> Other (specify) ▶ ACCIDENTAL DEATH AND DISMEMBERMENT | | | |

9 Experience-rated contracts:

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------|-------|
| a Premiums: (1) Amount received | 9a(1) | | |
| (2) Increase (decrease) in amount due but unpaid..... | 9a(2) | | |
| (3) Increase (decrease) in unearned premium reserve | 9a(3) | | |
| (4) Earned ((1) + (2) - (3))..... | | 9a(4) | 0 |
| b Benefit charges (1) Claims paid..... | 9b(1) | | |
| (2) Increase (decrease) in claim reserves | 9b(2) | | |
| (3) Incurred claims (add (1) and (2))..... | | 9b(3) | 0 |
| (4) Claims charged | | 9b(4) | |
| c Remainder of premium: (1) Retention charges (on an accrual basis) -- | | | |
| (A) Commissions | 9c(1)(A) | | |
| (B) Administrative service or other fees | 9c(1)(B) | | |
| (C) Other specific acquisition costs | 9c(1)(C) | | |
| (D) Other expenses | 9c(1)(D) | | |
| (E) Taxes | 9c(1)(E) | | |
| (F) Charges for risks or other contingencies..... | 9c(1)(F) | | |
| (G) Other retention charges | 9c(1)(G) | | |
| (H) Total retention | | 9c(1)(H) | 0 |
| (2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.)..... | | 9c(2) | |
| d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement | | 9d(1) | |
| (2) Claim reserves | | 9d(2) | |
| (3) Other reserves..... | | 9d(3) | |
| e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).) | | 9e | |
| 10 Nonexperience-rated contracts: | | | |
| a Total premiums or subscription charges paid to carrier | | 10a | 17416 |
| b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount | | 10b | |
| Specify nature of costs. | | | |

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A?..... Yes No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

Plan Sponsor: The Corps Network
Plan Name: The Corps Network Accidental Death & Dismemberment Plan
EIN: 52-1480202
Plan Number: 503
Plan Year Ending: June 30, 2024

| (a) Name of Participating Employer | (b) EIN |
|--------------------------------------------------------------|------------|
| 2Gen Job Readiness | 38-1976979 |
| 826 Boston, Inc | 20-8065915 |
| A Million Stars, Inc. dba College Bound | 20-4768985 |
| Achievement Connections | 39-0817532 |
| AdviseMI/MSUCAC | 36-4619621 |
| Afterschool AmeriCorps | 91-765129 |
| AgCorps | 81-0302402 |
| Nazareth Farm Inc | 55-0739518 |
| Alaska Public Defender Agency, SAME Justice Program | 92-6001185 |
| Alpine Achievers Initiative | 27-2363901 |
| American Red Cross New York State | 53-0196605 |
| American YouthWorks | 53-0196605 |
| AmeriCorps at MACOG | 35-1186167 |
| AmeriCorps Best Program | 93-0397825 |
| AmeriCorps Borderlands Program | 95-6001665 |
| AmeriCorps CRUSH | 34-0714681 |
| AmeriCorps Duval Reads | 59-3027893 |
| AmeriCorps Eldon | 44-6002437 |
| AmeriCorps Farm to School | 39-6028867 |
| AmeriCorps Holistic Advocate Program | 88-4111954 |
| AmeriCorps Improving Educational Outcomes in Carbo | 23-2657933 |
| AmeriCorps Ohio College & Career Guides | 34-6580096 |
| AmeriCorps Parents As Teachers | 74-1291051 |
| AmeriCorps Polk Reads | 59-2956529 |
| AmeriCorps RISE Program | 47-0491233 |
| AmeriCorps Urban Safety | 38-6028429 |
| Ancestral Lands Conservation Corps | 84-1450808 |
| Ann Arbor Climate Corps | 38-6004534 |
| Salesian Volunteers | 94-1642297 |
| App State Public Health Program | 56-1176030 |
| Appalachian Conservation Corps | 84-1450808 |
| Appalachian State University | 56-1176030 |
| Arizona Conservation Corps | 84-1450808 |
| Arizona State University - Public Allies Arizona | 86-0196696 |
| Association House of Chicago-Public Health AmeriCorps | 36-2166961 |
| Quaker Voluntary Service | 38-3858580 |
| ASTAR AmeriCorps | 52-6002033 |
| Casa Juan Diego | 76-0003018 |
| Avodah JCFS Chicago | 36-2167757 |
| Avodah Jewish Service Corps-National Immigrant Justice Cente | 36-1877640 |
| AVODAH: Inspiration Corps | 36-3673980 |
| Colorado Episcopal Corps | 11-1111111 |
| Bay Area JusticeCorps | 74-057238 |
| Be Well Fox Valley | 39-0912985 |
| Birmingham AmeriCorps | 87-1142175 |
| Birth and Beyond | 94-2833431 |
| St. Francis School | 85-0354856 |

| | |
|-------------------------------------------------------------|------------------|
| Mount Tabor Center | 39-1536251 |
| Boys & Girls Club of North Central Florida | 59-2973927 |
| Boys & Girls Clubs in Indiana, Inc | 81-4118364 |
| Boys & Girls Clubs of Indianapolis | 35-0888754 |
| Boys and Girls Club of Pharr | 75-2258513 |
| Boy's and Girl's Clubs of Martin County | 65-0253002 |
| BPE | 81-3213571 |
| Branches | 65-0716969 |
| Breakthrough Austin | 74-2991346 |
| Glenmary Volunteer Program | 31-0537070 |
| Bridges Builders Expansion | 23-7081488 |
| Bur Oak Land Trust AmeriCorps | 42-1104058 |
| Cal Poly AmeriCorps VIP | 95-2308831 |
| California Disaster Corps | 53-0196605 |
| Camp Fire Green Country, Inc | 73-0579231 |
| Campus Climate Action Corps | 05-0493226 |
| Bon Secours Volunteer Ministry | 52-0715237 |
| Carolina College Advising Corps | 56-6001393 |
| CASA De Maryland-Legal | 52-1372972 |
| CASA De Maryland-Maryland New Americans Opportunity Program | 52-1372972 |
| CASA De Maryland-Workforce and Economic Empowerment | 52-1372972 |
| Aid For Women | 36-2988483 |
| CEDAM's AmeriCorps | 38-3445097 |
| CEISMC Academic Mentoring Program | 58-6002023 |
| Central Ohio Collaborative for Conservation | 31-0847446 |
| Central Valley Health Network | 68-0429643 |
| Chelan-Douglas Community Action Council | 91-6064514 |
| Cherry Street Health Services AmeriCorps | 38-2853534 |
| Young Adult Volunteers | 11-1111111 |
| CHRISTUS Health HEART Work | 76-0590551 |
| Cincinnati Zoo and Others | 31-0537171 |
| City of Dubuque AmeriCorps | 42-6004596 |
| Capuchin Franciscan Volunteer Corps - OH | 52-1889629 |
| City of Orlando-Operation AmeriCorps | 85-8015427957C-9 |
| College Advising Corps at University of Connecticut | 06-0772160 |
| College Completion Corps | 36-4619621 |
| College Forward | 43-2003552 |
| College Possible | 41-1968798 |
| College Success Foundation | 91-2036088 |
| Collegiate Edu-Nation AmeriCorps Program | 83-2468060 |
| Lalanne | 31-0536715 |
| Annunciation House, Inc. | 11-1111111 |
| Colorado Youth For A Change | 20-1501002 |
| Common Threads Farm | 20-5163417 |
| Communities in Action | 81-6001419 |
| Communities in Schools - Central Texas AmeriCorps | 74-2369020 |
| Community Art Collaborative | 52-0591661 |
| Brethren Volunteer Service-Int'l | 36-2167026 |
| Community Health Corps Association of NYS | 13-2690296 |
| Community Mediation MD | 52-2226553 |
| Community Mediation Service Corps (CMSC) | 16-1266087 |
| Community Resource Corps | 52-1480202 |
| Colorado Vincentian Volunteers | 84-1286894 |
| Confluence Environmental Center | 45-2739722 |
| Conservation Corps North Carolina | 84-1450808 |

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|--------------------------------------------------------------|------------|
| Seton Teaching Fellows | 26-2782492 |
| Core Susquehanna AmeriCorps | 23-2112682 |
| Franciscan Volunteer Ministry | 13-3520501 |
| CSU Extension | 84-6000545 |
| DIAL/SELF AmeriCorps | 04-2619617 |
| Digital Navigator Grant Program | 98-03478 |
| Digital Service Fellowship | 23-2410538 |
| Assumption Mission Associates | 59-6136106 |
| Cooperative Baptist Fellowship | 58-1960860 |
| EarthCorps | 91-1592071 |
| Eastern Sierra Conservation Corps | 81-2456264 |
| ECO Vermont | 03-6000274 |
| EcoServants | 20-1272940 |
| ECPAT-USA Inc | 52-1480202 |
| Enchanted Circle Corps (Taos County Nonprofit Collective) | 85-0462470 |
| Ending the Epidemic - Healthy Futures AmeriCorps | 356203550 |
| Environment for the Americas | 20-584470 |
| Environment, Education, & Community Outreach | 22-75-0050 |
| Tucson MVS | 86-0932999 |
| Lutheran Volunteer Corps | 02-0702016 |
| Envisioneers ELT Program | 86-2828543 |
| Equity Talent Solutions, LLC | 88-3169478 |
| Erie Family Health Centers | 52-1480202 |
| EXCELth,Inc- Avodah New Orleans | 72-1193464 |
| Extension Public Health AmeriCorps | 31-6025986 |
| Extra Special People | 58-1710803 |
| First 5 Service Corps | 94-2833431 |
| Flint Urban Safety and Health Corps | 38-1359516 |
| Florida Conservation Corps Project A.N.T. | 59-6007353 |
| FoodCorps Inc | 27-3990987 |
| Wyoming Service Corps | 83-6015705 |
| Plainsong Farm & Ministry | 83-3277047 |
| Franklin's Promise Coalition, Conservation Corps of the Forg | 30-0115977 |
| Generations AmeriCorps | 58-1409385 |
| Georgia 4-H AmeriCorps Program | 58-6001998 |
| Georgia College Advising Corps | 58-6001998 |
| Georgia State University College Advising Corp | 58-6002050 |
| Girl Scouts of Northeast Texas | 75-1101571 |
| Girl Scouts of Western Washington AmeriCorps Program | 91-6060940 |
| Life Together Community | 31-1629166 |
| Goodwill Industries of Northern New England | 01-0284340 |
| Goodwill Industries of the Southern Rivers | 52-1480202 |
| Greater Pittsburgh Literacy Council | 25-1392652 |
| Greater Portland Council of Governments | 01-0238864 |
| Green Bay Conservation Corps | 39-6005458 |
| Green Iowa AmeriCorps | 42-6004333 |
| Green spaces | 27-2113695 |
| Greening Youth Foundation | 26-1211569 |
| Grenada School District AmeriCorps Program | 64-6008811 |
| Grid Alternatives | 26-0043353 |
| GrizzlyCorps - Rural Climate Solutions | 94-6002123 |
| HabiCorps | 52-1226188 |
| Habitat for Humanity International | 91-1914868 |
| Habitat For Humanity of Iowa | 42-1520979 |
| So Others Might Eat | 23-7098123 |

| | |
|------------------------------------------------------------|------------------|
| Hands on Atlanta | 58-1861026 |
| Hands on Central California | 94-2314572 |
| Harvesters Community Food Network | 43-1208665 |
| Health Federation of Philadelphia NHC | 94-2897258 |
| Healthy Choices AmeriCorps | 94-6000416 |
| Healthy Minds Alliance | 01-0648561 |
| HeartCorps | 13-5613797 |
| High Rocks Educational Corporation | 55-0743755 |
| Hindman Settlement School, Inc. | 61-0447248 |
| Hispanic Access Foundation | 27-2589206 |
| Holy Family Institute | 74-2282624 |
| Homeless & Housing Coalition of Kentucky | 61-1191524 |
| Homeward Bound Inc Peer Resource Navigators | 74-2127841 |
| Hope Network | 52-1480202 |
| Housing Forward | 36-3876660 |
| Huron Pines AmeriCorps | 38-2502172 |
| I KNOW ME/game loft mentor program | 90-0857900 |
| Idaho 4-H Youth Development AmeriCorps | 82-6000945 |
| Illinois Bar Foundation | 37-0810222 |
| Impact Alabama | 20-0850212 |
| Indiana ScholarCorps | 35-6000158 |
| Indy Reads Work Literacy Coach | 31-1227489 |
| Interfaith Enrichment Corps | 14-4446316 |
| Iowa Campus Compact | 42-0925013 |
| Iowa Legal Aid AmeriCorps Project | 42-1079227 |
| Iowa State University-Iowa AmeriCorps 4-H Outreach Program | 42-6004224 |
| Isles, Inc. | 22-2350832 |
| Jacksonville Teacher Residency AmeriCorps Program | 85-8012708261C-2 |
| Franciscan Mission Service - INTL | 41-2231503 |
| JusticeCorps of Los Angeles | 95-6000927 |
| Kansas eeCorps AmeriCorps Program | 48-0850919 |
| Kansas State College Advising Corps | 52-0971471 |
| Kentucky Association for Environmental Education | 61-1208924 |
| Kentucky College Coaches | 14-6013200 |
| Kern Community Mentoring | 95-6000941 |
| KEYS Service Corps AmeriCorps | 25-1884503 |
| Keystone Smiles Community Learning Center | 25-1764570 |
| KS Outdoor AmeriCorps Action Team | 481124839 |
| La Puente Home | 13-5564937 |
| Lakes Region Conservation Corps | 02-0256498 |
| Mercy Volunteer Corps | 52-1837856 |
| LibraryCorps | 39-1610233 |
| Saint Joseph Worker Program | 41-0693934 |
| LifeBridge AmeriCorps | 55-0402755 |
| LISC AmeriCorps | 13-3030229 |
| Literacy Alliance of Northeast Florida, Inc. | 23-7153919 |
| Literacy Coalition of Palm Beach County | 65-0169781 |
| Literacy Volunteers of Illinois | 36-3244036 |
| Louisiana Delta Service Corps | 72-1285695 |
| Christian Appalachian Project | 61-0661137 |
| Lyndon Economic Opportunity AmeriCorps Program | 03-0213787 |
| MA Promise Fellowship Program | 04-1679980 |
| Maggie's Place | 86-0972675 |
| Maine Conservation Corps | 01-6000001 |
| Maine Service Fellows | 01-6000001 |

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| Maplehill Schools & Farm | 03-0218716 |
| Maryland Conservation Corps | 52-6002033 |
| Massachusetts Immigrant & Refugee Advocacy Coalition | 22-3115048 |
| MCHS AmeriCorps Public Health Community Corps | 39-0452970 |
| MCHS AmeriCorps Public Health Recovery Corps | 39-0452970 |
| Mercy Health Cincinnati LLC | 52-1480202 |
| Sisters of Charity of Cincinnati Associate in Volunteer Mini | 31-0537158 |
| Metropolitan Council on Jewish Poverty | 52-1480202 |
| Metropolitan Ministries | 59-1477001 |
| MI Healthy Climate Corps | 38-3445097 |
| Michigan Coalition Against Homelessness | 38-2960348 |
| Michigan College Advising Corps | 38-6006309 |
| Mile High Youth Corps | 84-1182631 |
| Milwaukee Christian Center YouthBuild/AmeriCorps | 39-0807066 |
| Minnesota Alliance With Youth | 45-3774063 |
| Minnesota Conservation Corps | 41-1881102 |
| Mission: St. Louis Beyond School | 20-269536 |
| Missouri College Advising Corps | 43-6003859 |
| MN GreenCorps | 19-7276306 |
| Mobile Baykeeper, Inc | 63-1190615 |
| MobilizeGreen | 27-3968567 |
| Montana Campus Compact | 81-6001713 |
| Montana Conservation Corps | 81-0467431 |
| Montana Legal Services Association | 81-0298262 |
| Montana State Parks AmeriCorps | 81-0302402 |
| Monterey County Preschool Service Corps | 94-1322169 |
| Monterey County United for Literacy | 59-0808854 |
| Johnson Service Corps | 20-2000965 |
| Mt. Adams Institute | 45-3308913 |
| Napa County Office of Education | 94-6002406 |
| National Health Corps Chicago | 36-3959353 |
| National Health Corps Delaware | 51-6000160 |
| National Health Corps Florida | 59-3139801 |
| National Health Corps Philadelphia | 23-2244355 |
| National Health Corps Pittsburgh | 25-6001017 |
| National Health Corps: Community Health Fellowship | 52-1480202 |
| Black Womens Leadership Experience | 43-0653377 |
| National Lead For America | 83-1839530 |
| North State Rural AmeriCorps Project | 68-0151867 |
| Public Allies Milwaukee | 52-1759564 |
| NC State College Advising Corps | 56-6000756 |
| NCA Community | 34-0714688 |
| NCCAP AmeriCorps Team – Greater Wausau Area | 39-1080179 |
| Neighbor to Neighbor of South Carolina, Inc. | 20-3314190 |
| NEO Skill Corps | 34-0714776 |
| Nevada Outdoor School AmeriCorps | 90-0087367 |
| New American Pathways | 30-0130066 |
| New England Science & Sailing Foundation | 30-0245251 |
| Public Allies Eagle Rock | 33-0447685 |
| New Jersey Watershed Ambassadors | 21-6000928 |
| Next Steps AmeriCorps | 23-1352685 |
| Public Allies Cincinnati | 52-1759564 |
| Northern Ohio Watershed Corps (NOWCorps) | 20-5465233 |
| Northwest Youth Corps | 93-0818160 |
| Norwescap | 22-1777156 |

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| Notre Dame Mission Volunteers-04-3158741 | 04-3158741 |
| NYC Service AmeriCorps | 13-3783906 |
| Ohio History Service Corps | 31-4389673 |
| Ohio OutdoorCorps | 311334820 |
| Ohio University | 31-640211 |
| Ohio Valley Educational Cooperative | 60-1904-744 |
| Oklahoma Opportunities | 46-3341733 |
| One World Link Georgia Serves AmeriCorps | 26-0459308 |
| Scott County Partnership | 35-2082074 |
| Ontario Promise Corps | 95-6000754 |
| Our City Forest | 77-0371911 |
| Palmetto Conservation Corps | 57-0907043 |
| Palouse-Clearwater Environmental Institute | 94-3038182 |
| RefugeeRISE AmeriCorps | 46-1017191 |
| Partners for Rural Impact | 87-2937264 |
| UIC AmeriCorps - Project MORE | 37-6000511 |
| Partnership 4 Kids | 47-0762798 |
| Paterson Community Schools Corps | 22-3282526 |
| PATH AmeriCorps | 94-2860387 |
| United Way of Metropolitan Chicago | 11-1111111 |
| Peckham, Inc | 38-2322117 |
| Pennsylvania Mountain Service Corps | 25-1215721 |
| Pfeifer Camp | 71-6017419 |
| United Way of Southeast Alaska | 92-0103202 |
| Port Angeles School District AmeriCorps | 91-6001549 |
| Portland YouthBuilders | 94-3123483 |
| Prescott College - Arizona Serve | 86-0294012 |
| Preserve WV AmeriCorps | 31-1028713 |
| Project Change | 04-3649724 |
| Project Transformation | 75-2930405 |
| Public Allies Central Florida | 45-2843994 |
| Public Allies Chicago | 52-1759564 |
| Trekkers, Inc | 01-0537500 |
| Public Allies Connecticut | 06-1357699 |
| National Nurse-Led Care Consortium | 10560081 |
| Public Allies Indianapolis | 35-1909230 |
| SCI AmeriCorps | 76-0703107 |
| Public Allies Pittsburgh | 31-1703402 |
| Public Allies San Antonio | 52-1759564 |
| Public Allies Wisconsin | 52-1759564 |
| Public Education Foundation | 62-1356764 |
| Public Health AmeriCorps: Community Health Workers in Training | 22-2505819 |
| Public Health Corps-New Jersey Development Corporation | 22-3282526 |
| Sixteenth Street Community HealthCorps | 39-1180475 |
| ODVN Financial Freedom Corps | 34-1622848 |
| REACH Corps | 11-1111111 |
| Reading & Math, Inc | 47-2306902 |
| Reading Assist Institute | 51-0317415 |
| Reading Partners | 77-0568469 |
| Rebuilding Together Inc | 52-1585880 |
| Red Cross Public Health Americorps | 53-0196605 |
| The Brave House | 52-148020 |
| The ARK | 52-1480202 |
| Roadrunner Food Bank | 52-1480202 |
| Robinson Community Learning Center AmeriCorps Program | 35-0868188 |

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| Rocky Mountain Youth Corps - New Mexico | 85-0404817 |
| Rural Action Inc | 31-1124220 |
| Purdue Center for Regional Development at Purdue University | 52-1480202 |
| West Texas A&M University | 52-1480202 |
| San Diego County Office of Education | 95-6000935 |
| Environmental Education Corps (eeCorps) | 52-1480202 |
| SBP | 26-2189665 |
| SCA Student Conservation Association | 91-0880684 |
| SCFCA AmeriCorps-Public Health | 26-0122306 |
| Schools of Hope Wisconsin | 93-0844812 |
| Creative Action AmeriCorps | 11-1111111 |
| Unity of Greater New Orleans, Inc. | 11-1111111 |
| Serve Tri-Cities | 91-6001752 |
| Earth Conservation Corps | 11-1111111 |
| Habitat for Humanity of the Charlotte Region | 11-1111111 |
| ShoreCorps/PALS - AmeriCorps | 52-6002033 |
| Sierra Nevada AmeriCorps Partnership | 77-0343881 |
| National Health Corps: Community Health Fellowship, Greater | 23-2244355 |
| Sitka Americorps | 92-0132479 |
| Urban Environmental Stewardship | 11-1111111 |
| AUSL Americorps | 11-1111111 |
| South Coastal Counties Legal Services, Inc. | 04-2607691 |
| University of Oregon RARE Program | 46-4727800 |
| St. Nick's Alliance | 51-0192170 |
| Parks and Recreation Department | 11-1111111 |
| St. Paul's Neighborhood Network | 41-1500773 |
| STEP AmeriCorps | 23-1668784 |
| Stewards Individual Placements | 38-2960348 |
| Severson Dells Education Foundation | 36-2985870 |
| Tacoma Boat Builders | 46-1724422 |
| United Community Action Network | 11-1111111 |
| City of Houston-Houston Health Department | 11-1111111 |
| The Literacy Lab | 27-1777117 |
| The Scholarship Academy | 20-3721836 |
| The Service Collaborative of WNY | 16-1596462 |
| Travis County 4-H CAPITAL AmeriCorps Project | 74-6000192 |
| Avodah-Project ORE at the Educational Alliance | 11-1111111 |
| TRIAD AmeriCorps | 64-6000818 |
| Trinity Church | 26-2709973 |
| Trinity University College Advising Corps | 17-411096336 |
| Truckee Meadows Parks Foundations | 45-4837735 |
| Environmental Stewardship | 11-1111111 |
| Downeast Community Partners | 11-1111111 |
| Twin Cities Habitat for Humanity | 36-3363171 |
| UC Berkeley-Destination College Advising Corps | 94-6002123 |
| UCLA College Advising Corps | 95-6006143 |
| UCSB Destination College Advising Corps | 95-6006145 |
| OneOC Volunteer Center Orange County | 95-2021700 |
| UNC - School of Government Lead for NC | 52-1480202 |
| UNCW College Advising Corps | 52-1480202 |
| Unite Service Corps | 56-2338443 |
| United Jewish Council of the East Side, Inc. | 13-2735378 |
| United Way of Benton & Franklin Counties | 52-1480202 |
| True North AmeriCorps | 41-0693931 |
| United Way of Greenville County | 58-2474104 |

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| United Way of kaw County | 91-0565555 |
| United Way of Massachusetts Bay | 04-2382233 |
| New Jersey Bonner AmeriCorps | 22-2797398 |
| United Way of Northern Santa Barbara County | 95-6006513 |
| T.E.E.M.S. AmeriCorps | 58-6002050 |
| United Way of Southwest Colorado | 23-7113221 |
| United Ways of Iowa | 46-1216277 |
| St. Pauls Community Development Corps | 22-3075855 |
| University Corporation at Monterey Bay - CalSERVES | 77-0387459 |
| University of Chicago C4P AmeriCorps Program | 36-2177139 |
| University of Delaware Public Allies Delaware | 51-6000297 |
| Partners in After School Success - Dane County | 39-6005684 |
| UP2US Sports | 80-0535933 |
| Repair The World | 36-4524686 |
| US Forest Service Resource Assistance | 20-584470 |
| UT Austin - Charles A Dana Center | 74-6000203 |
| Vermont Housing & Conservation Board AmeriCorps | 03-0311984 |
| Vet Corps | 91-0969074 |
| Virginia College Advising Corps | 54-6001796 |
| Volunteer Maryland | 52-6002033 |
| Walker Basin Conservancy | 47-1989228 |
| Washington Association of Child Advocate Programs | 91-1535083 |
| Washington Campus Coalition for the Public Good | 91-6000562 |
| Waynesville AmeriCorps | 43-6007819 |
| Community Clinic Association of Los Angeles County | 95-4576023 |
| Wetland Restoration Project | 52-1480202 |
| Wisconsin Association for Runaway Services | 39-1370760 |
| Wisconsin Association of Free and Charitable Clinics | 47-2298281 |
| Wisconsin Conservation Corps | 27-0774779 |
| San Diego JusticeCorps | 11-1111111 |
| Youth Villages AmeriCorps | 58-1716970 |
| Youthwork Conservation Corps | 38-2534222 |
| Zufall Health Center | 22-3125397 |