



International Medical Corps



INTERNATIONAL MEDICAL CORPS (UK)
2024/2025 ANNUAL REPORT

Company Registration No. 04474904



INTERNATIONAL MEDICAL CORPS (UK)

2024/2025 ANNUAL REPORT

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International Medical Corps (UK) is an international humanitarian non-governmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a US-registered non-profit organisation, and International Medical Corps Croatia, a Croatian non-profit association that share the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes in accordance with the terms and conditions of its grants.

Throughout the document, where references to "affiliates" (in plural) are made, they refer to International Medical Corps and International Medical Corps Croatia.

Unless otherwise stated, projects and their statistics referred to in the first part of this report (pages 1-27) are the results of combined International Medical Corps (UK), International Medical Corps and International Medical Corps Croatia global efforts in calendar year 2024 and do not form part of the statutory annual report. Projects and their statistics referred to in the second part of this report (pages 28-73) represent the work of International Medical Corps (UK) only, and covers the 12-month period to 30 June 2025 and forms part of the statutory financial statements and trustees report.



TO OUR SUPPORTERS

Last year, we celebrated a significant milestone—with the founding of International Medical Corps in the United States 40 years ago, we have been saving lives and relieving suffering in countries around the world ever since. With your support, we have provided lifesaving healthcare to millions worldwide, from our first programmes in Afghanistan in 1984 to our global reach today. Thank you for making this journey possible.

With your help, we reach communities struck by conflict, disaster and disease when they need us most. Over the past four-plus decades, we have worked in more than 85 countries and delivered more than \$5 billion in services and training to millions worldwide through our global International Medical Corps team. In 2024 alone, your support enabled us to directly help more than 15.1 million people.

For example, you helped us provide lifesaving nutrition services to millions across Sudan, where conflict has created the world's largest displacement crisis, and where more than half the population is experiencing acute hunger. We also offered critical maternal health and nutrition services, as well as training, in countries with high maternal and infant mortality rates—for example, in the Central African Republic, the Democratic Republic of the Congo, Somalia, South Sudan and elsewhere.

In South Sudan, our women's and girls' safe spaces (WGSSs) and community-led initiatives helped women and girls feel safe and supported. Through the South Sudan Humanitarian and Resilience Programme, in the first half of 2025, we engaged with more than 65,000 women and girls across our 17 WGSSs. In these safe spaces, we offered case management, psychosocial support, skills training and opportunities to build strong peer networks. We also continued to foster resilience and independence through village savings schemes, loan associations and livelihood programmes that strengthen women's economic participation and leadership in their communities. We engaged men and

boys as allies and worked with local leaders and the government to shift harmful social norms and build systems that protect women's rights. Together, these efforts have created safer, more inclusive communities where women and girls can realise their full potential.

And we continued providing essential services to conflict-affected communities across the Middle East. In Gaza, through our two field hospitals, International Medical Corps has delivered lifesaving care—including emergency, trauma, surgical, nutrition, maternal and newborn health, clean water and sanitation services—to more than 400,000 civilians affected by the war. Our dedicated teams also delivered vital health services and training in Iraq, Jordan, Lebanon, Syria and Yemen.

Training continues to be the cornerstone of our mission, enabling us to help communities survive today's challenges whilst preparing them for future ones. For example, in Ukraine, we continued our seven-part emergency- and trauma-care training programme. We also trained family doctors and general practitioners to address chronic diseases that are often neglected in times of war, and provided psychological first-aid training to civilians, as well as the health workers who care for them—enabling these caregivers to continue their work during difficult times.

Thanks to your generous support, our teams are providing lifesaving care in some of the most difficult and dangerous environments around the world. Because of you, we can continue our lifesaving work, and bring hope and healing to vulnerable families worldwide. For that, we're forever grateful.



Andrew W. Géczy
Chairman
International Medical Corps (UK)



David Eastman
Managing Director
International Medical Corps (UK)

WE ARE A GLOBAL FIRST RESPONDER

We deliver emergency healthcare and other essential services to those affected by conflict, natural disaster or disease. We do this no matter where they are in the world or what the conditions may be. We also train people in their own communities, providing them with the skills they need to recover, build self-reliance and shape their future—enabling them to become effective first responders themselves.



CAMEROON



OUR APPROACH

SPEED SAVES LIVES



Our emergency response teams deploy quickly to help those in great need—often arriving within hours, even in the most remote and challenging environments.

We draw on our experience gained over 40+ years of responding to disasters in more than 85 countries on six continents. Our staff includes physicians and nurses trained in emergency medicine, supported by specialists in vital healthcare services that range from women and children's health, to nutrition, to mental health and psychosocial support, to protection, to water, sanitation and hygiene, and more.

Our emergency response teams mobilise in the initial hours following a disaster, because speed saves lives. As conditions improve in the weeks that follow, we remain and partner with local communities to help them build a better future. The key to our approach is training, which we use to transfer the latest knowledge and skills into local hands. We strengthen local health systems and work with community leaders, hire and train local staff, develop partnerships and constantly evaluate our progress to ensure quality outcomes.

With thousands of staff members worldwide, 96% of whom are recruited locally, our approach ensures that the knowledge and tools required to prepare for—and respond to—future emergencies are deeply rooted in the community. We work to ensure that if disaster strikes again, residents can be their own first responders.

In 2024–25, our teams worldwide continued to respond to conflicts and disasters. In the face of these challenges, we delivered lifesaving services and training to affected communities in hard-to-reach areas and under challenging conditions.





Emergency Response and Preparedness

Escalating conflict, economic crises and mass displacement have intensified humanitarian needs across the Middle East and Europe. International Medical Corps continued large-scale emergency responses across the region. In Gaza, we operated two field hospitals offering trauma, surgical and maternal care, and offered mobile triage near displacement sites. Our teams reached 477,468 patients in these field hospitals with lifesaving services amidst the ongoing conflict and displacement. In Syria, mobile medical teams provided emergency care to 425,097 people and supported referrals to fixed facilities. Additionally, we provided immediate medical assistance and non-food items to hundreds of thousands of people across the region.



Nutrition and Food Security

In Cameroon, Ethiopia, Jordan, Mali, Nigeria and Syria, we screened 273,937 children under 5 for malnutrition, whilst in Ethiopia and Jordan, we also screened 24,625 pregnant and lactating women for malnutrition. In Syria and Yemen, we admitted 20,177 children under 5 to our therapeutic and supplementary-feeding programme. In Cameroon, Chad, Ethiopia, Nigeria, Syria and Yemen, we provided infant and young-child feeding counselling to 475,185 caregivers. In Venezuela, we delivered 92,613 food baskets to more than 46,300 people across 55 schools in Delta Amacuro state, strengthening food security and improving school attendance.



Health Services Support

In Cameroon, Jordan, Lebanon and Mali, we provided primary healthcare consultations to 243,513 people. Additionally, in Jordan's Azraq and Zaatari refugee camps, we conducted 630 surgeries and 69,350 laboratory tests whilst providing 25,981 paediatric consultations. In Ukraine, we provided 11 health facilities with 7,584 items of medical supplies and essential pharmaceutical equipment and operated four mobile medical teams to restore services in frontline areas. In the Central African Republic, we conducted 2,872,934 malaria tests and treated 1,984,495 cases of uncomplicated malaria.



Mental Health and Psychosocial Support (MHPSS)

We integrated MHPSS into primary healthcare across Cameroon, Jordan, Lebanon and Ukraine, providing more than 63,000 mental health consultations. In Afghanistan, we reached 23,531 people with MHPSS awareness messaging, and in Mali, 5,536 women participated in psychosocial support activities in safe spaces for women and girls.



Water, Sanitation and Hygiene

In Syria, we repaired and rehabilitated water systems, delivering 25 million litres of safe water. This intervention, paired with infection prevention and control support in field hospitals and health centres, helped prevent disease outbreaks. In Gaza, Yemen and Zimbabwe, rehabilitation of water systems helped 89,016 people access safe water, whilst in Cameroon, Gaza, Yemen and Zimbabwe, we reached 115,763 people with hygiene-promotion activities.



Maternal and Child Health

In Cameroon, Gaza, the Central African Republic and Yemen, we supported 12,631 deliveries through skilled birth attendants, and provided antenatal consultations to 23,347 women. In both countries, we vaccinated 56,958 children against common childhood illnesses, such as polio and measles. In the Central African Republic, we supported 69 students in a two-year Auxiliary Midwifery Certification program, providing them with uniforms and classroom supplies.



Violence Against Women and Girls (VAWG)

In Cameroon, Gaza, Lebanon, Nigeria and Yemen, we provided awareness sessions on prevention of VAWG to 183,920 people, and in Cameroon, Lebanon and Nigeria, we provided dignity kits to 1,116 women and girls. In South Sudan, we engaged with more than 65,000 women and girls across 17 women's and girls' safe spaces between January and June 2025. In Nigeria, 180 girls completed a 12-week life-skills session to build their confidence and interpersonal skills, whilst we engaged with 100 men and 120 adolescent boys to foster behavioural change.



**GLOBALLY,
IN 2024,
WE TRAINED:**

145,240

people through 1,365 training sessions
covering a range of health-related issues.



DECades of Providing Training

For more than 40 years, we've provided training to help communities move from relief to self-reliance. For example, we train nurses and midwives in countries with high maternal and newborn mortality rates to help ensure that the next generation arrives in our world safely.



8,382

people in infection prevention
and control measures.



1,054

people in maternal and newborn
healthcare strategies.



Sudan

Sudan is in crisis. The country is consumed by a civil war, and 25.6 million people—more than half of its population—are experiencing acute hunger. Ongoing fighting has led to mass displacement, indiscriminate bombardment of civilian areas, and widespread damage and destruction of civilian infrastructure, compounded by outbreaks of disease and impending famine. In response, International Medical Corps has broadened the scope of the training we provide there, ensuring that frontline service providers—including community leaders—can better support their communities in the face of these challenges. Last year, we provided training on

how to diagnose and treat malnutrition and common diseases, including life-threatening cases of diarrhoea, pneumonia and malaria among children. We trained local health workers in disease surveillance and outbreak response, conducted psychological first-aid training for hundreds of participants across seven states, and trained community leaders, local partners and health workers on how to prevent and respond to violence against women and girls—including how to help survivors and provide ongoing case management. Thanks to these vital training sessions, more people are able to access urgently needed services, despite the country's fractured healthcare system.



Ukraine

As the conflict in Ukraine escalated after February 2022, International Medical Corps increased its training and capacity-building in response. As attacks have battered cities, causing destruction that harms civilians, the number of trauma patients has grown. To help ensure that frontline healthcare workers know the latest lifesaving techniques for responding to such emergencies, International Medical Corps has conducted a seven-part emergency- and trauma-care training program.

We have also provided training to doctors facing a new problem: patients in the Kherson and Mykolaiv regions whose chronic diseases were neglected during conflict, leading to an increase in heart attacks and strokes. In response, International Medical Corps trained doctors to help them address such chronic conditions—and save lives—in a war zone. Finally, our team has also provided psychological first-aid training to health workers and civilians across the country.



Central African Republic (CAR)

International Medical Corps is training the next generation of midwives in CAR. In partnership with the Ministries of Health and Higher Education, we opened the Bria Annex Institute in 2024 to train health professionals in this lifesaving role. The school will increase the number of skilled birth attendants—especially in remote areas—whilst improving access to maternal health services and critical care for women and children, leading to reduced mortality rates in CAR.

In 2024, International Medical Corps responded directly to the needs of more than 15.1 million people in some 30 countries on five continents.



GAZA

AMONG THE RESULTS OF OUR WORK



15.1 MILLION

DIRECT BENEFICIARIES

Of these, more than 3 MILLION were children under 5. Our work also reached more than 50 MILLION others who benefited indirectly from our programs.



145,240

PARTICIPANTS TRAINED

This included clinical and non-clinical health staff, community health workers and volunteers, and government and non-government staff.



8.7 MILLION

PRIMARY HEALTH CONSULTATIONS

Of these, more than 2 MILLION were children under 5.



1,766

HEALTH FACILITIES SUPPORTED

In 2024, we provided vital assistance to 1,324 primary health facilities and 138 hospitals, and helped 257 mobile clinics reach people in vulnerable and remote areas.



178,513

CHILDREN VACCINATED AGAINST DIPHTHERIA, PERTUSSIS (AKA WHOOPING COUGH) AND TETANUS

Vaccinating children protects future generations from the dangers of these diseases and builds more resilient immune systems.

BY THE NUMBERS



Maternal and Child Health

The key to our future

Ensured that 175,588 births were assisted by a trained birth attendant.



Nutrition

The foundation of life

Provided 2.6 million people with lifesaving nutrition support and screened more than 4.1 million for malnutrition.



SOMALIA



Water, Sanitation and Hygiene

The essence of good health

Helped more than 3.4 million people with water, sanitation and hygiene needs, and supported the delivery of nearly 400 million litres of clean, safe water.



Violence Against Women and Girls

A violation of rights

Offered protection and support to more than 1.7 million people living with the threat or reality of violence in their daily lives.



Mental Health and Psychosocial Support

The invisible wounds

Provided services to 797,328 people through hundreds of facilities, mobile teams and other means of delivery.



WHERE WE WORK



**In 2024, we provided
urgently needed healthcare
and related services to
more than 15.1 million
people in some 30 countries
on five continents.**

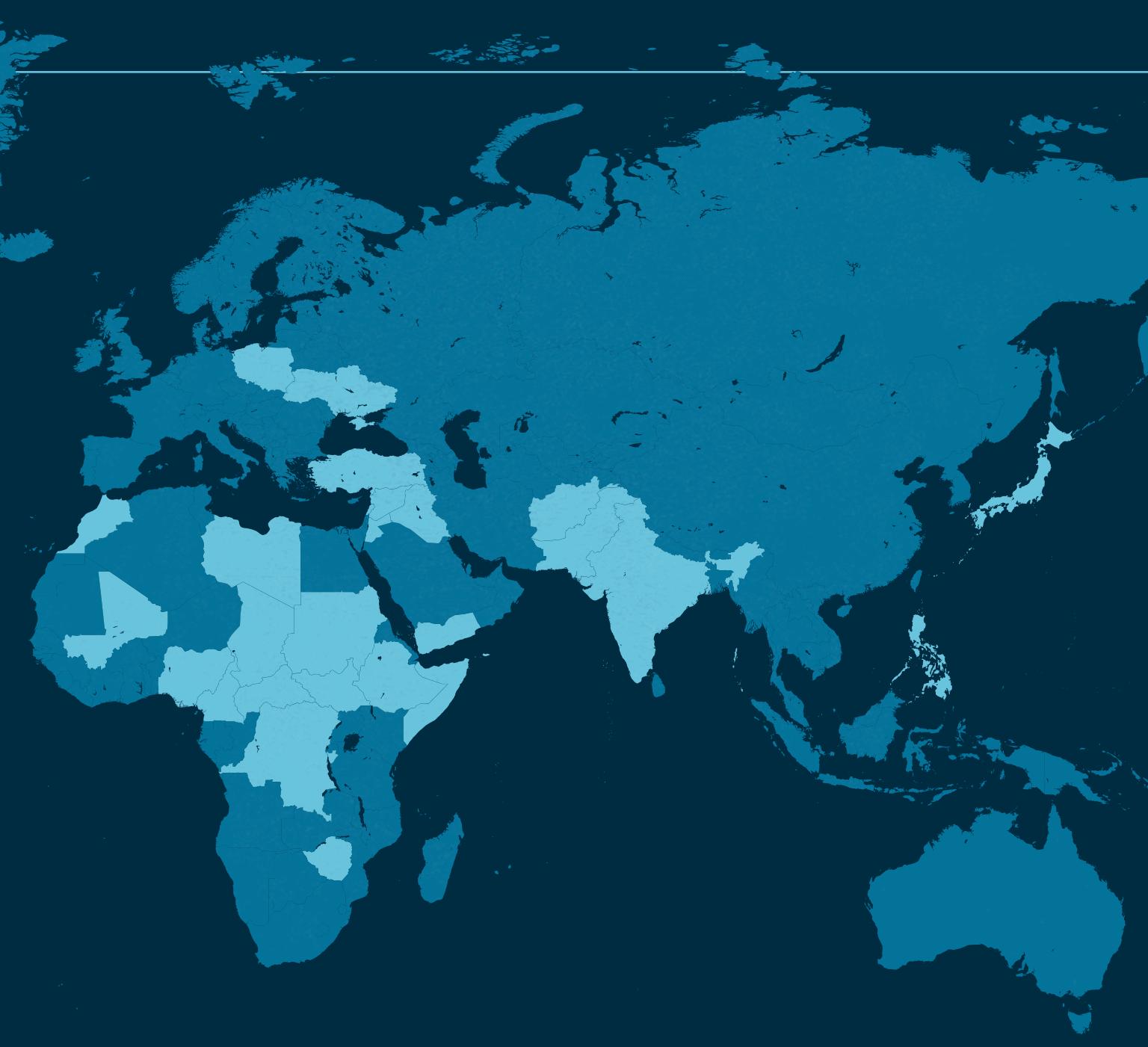
AMERICAS

Jamaica*
United States & Territories*
Venezuela*

AFRICA

Cameroon*
Central African Republic*
Chad*
Democratic Republic of the Congo*
Ethiopia*
Libya*

Mali*
Morocco*
Nigeria*
Somalia*
South Sudan*
Sudan*
Zimbabwe*



EUROPE

Poland
Ukraine*

MIDDLE EAST

Gaza and the West Bank*
Iraq*
Jordan*

Lebanon*
Syria*
Türkiye
Yemen*

ASIA

Afghanistan*
India
Japan
Myanmar*
Pakistan*
Philippines

*Countries where International Medical Corps (UK) programmes were funded during the 12 months to 30 June 2025.



Influencers Step Up

Throughout 2024, influential supporters helped to raise our profile by posting about our ongoing work and emergency responses and encouraging donations.

- Academy Award-winning actress and activist **Marlee Matlin** became our newest Global Ambassador, helping to raise awareness of International Medical Corps' mission.
- Global Ambassador **Sienna Miller** promoted us on Ruthie's Table 4 Podcast, sharing her experience seeing our work firsthand when she travelled to South Sudan.
- **Judy Greer** travelled to Jordan to learn about our lifesaving work with women and children, meeting with our teams and the people we serve, and posted about her experiences there.
- **Kevin Curry** met with Syrian refugees whom we support in Jordan, sharing a cross-cultural experience as he cooked Texas chili and they showed him how to make a local recipe, delighting his 1 million+ online followers.
- To mark International Medical Corps' 40th Anniversary, **Kevin Curry, Judy Greer, Maz Jobrani, Sanaa Lathan, Sienna Miller** and **Ashley Park** contributed to a video celebrating the milestone.
- To support our response to the LA wildfires, several of our supporters created videos and shared our content on their platforms—including YouTube legend **Mr. Beast**, Beyoncé's hair-care brand **Cecred**, actress **Alice Hewkin** and Global Ambassadors **Judy Greer, Sanaa Lathan** and **Kevin Curry**.

Judy Greer ▾



Kevin Curry ▾



Online Impact

As we responded to emergencies abroad and at home in 2024, our committed supporters promoted our work and fundraised for our efforts to deliver essential services, supplies and training worldwide.

- In April, Oakland-based supporter **Yasmin B.** partnered with local restaurants to raise awareness and funds for International Medical Corps' Gaza relief efforts. Her multi-day efforts raised nearly \$4,000.
- International Medical Corps continued to partner with **Novica** for our online Artisan Shop (shop.internationalmedicalcorps.org), which features beautiful, handmade crafts from around the world that help to support artisans and their communities. International Medical Corps receives 25% of the net proceeds for every purchase.
- Influencers **Caroline Arapoglou, Michelle Marie Colon, Kevin Curry, Alice Hewkin, Georgina Miranda, Priyanka Shah** and **Megan Mimi Williams** promoted our Artisan Shop on Giving Tuesday.

PARTNERSHIPS





Providing Passenger Transport and Cargo Shipments of Critical Supplies

Airlink

Airlink has been a trusted partner of International Medical Corps since 2015, supporting emergency response operations through donated cargo and passenger transportation. In 2024, Airlink facilitated the transportation of 74,817 kilos of cargo for International Medical Corps and coordinated 19 passenger flights to support humanitarian response efforts in the US, Gaza and Brazil.

As part of our response to Hurricane Helene, Airlink provided passenger flights to transport critically needed volunteers to the Southeast US. It also supported 11 cargo shipments to Israel, Egypt and Jordan for our response in Gaza, including shipments that contained our field hospital, additional operating theatres, essential medicines, and medical supplies and equipment. Airlink also coordinated passenger flights to the Middle East for staff members supporting the response. And it helped transport more than 9,600 hygiene and wound-care kits that we donated in response to a request from the International Federation of the Red Cross after flooding struck Brazil.

Hulo

In 2024, International Medical Corps partnered with Hulo, the humanitarian logistics cooperative, to provide free cargo shipments via 11 flights to our emergency responses in Afghanistan, Gaza and Lebanon. Hulo works with the European Union Humanitarian Airbridge programme to help humanitarian organisations organise shared flights, enabling humanitarians to reach remote areas with lifesaving medicines, supplies and equipment. For example, last year, International Medical Corps' partnership with Hulo enabled us to deliver critical supplies to our field hospitals in Gaza, despite the logistical challenges of reaching those areas during an active conflict. The ongoing partnership will continue to help us supply teams operating in difficult environments.

LEADERSHIP

International Medical Corps (UK) is an international humanitarian nongovernmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a non-profit organisation, and International Medical Corps Croatia, a Croatian non-profit association that share the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes in accordance with the terms and conditions of its grants.

INTERNATIONAL MEDICAL CORPS-UK BOARD OF DIRECTORS

Andrew W. Geczy
CHAIRMAN

Hendrik Cornelis
SECRETARY

Nancy A. Aossey
Member

Reto Braun
Member

Dominic J. O'Hagan
Member

C. William Sundblad
Member





▲ Global Ambassador Kevin Curry

GLOBAL AMBASSADORS

Kevin Curry
Influencer, Activist

Lily Donaldson
Model, Activist

Judy Greer
Actress, Activist

Maz Jobrani
Comedian, Actor

Sanaa Lathan
Actress, Humanitarian

Marlee Matlin
Actress, Activist

Sienna Miller
Actress, Activist

Ashley Park
Actress, Humanitarian

Inanna Sarkis
Actress, Activist

ADMINISTRATIVE DETAILS OF THE CHARITY, THE TRUSTEES AND ADVISORS

TRUSTEES

Andrew W. Géczy
CHAIRMAN

Nancy A. Aossey

Reto Braun

Hendrik Cornelis
SECRETARY

Dominic J. O'Hagan

C. William Sundblad

MANAGING DIRECTOR

David Eastman

FINANCE DIRECTOR

Fahmida Wadud-Muhit

REGISTERED OFFICE

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Oval Road, Camden
London
NW1 7EP

TELEPHONE

WEBSITE

0207 253 0001

<https://www.internationalmedicalcorps.org.uk>

COMPANY REGISTRATION NUMBER

04474904 (England and Wales)

CHARITY REGISTRATION NUMBER

1093861

AUDITOR

Buzzacott Audit LLP
130 Wood Street London
EC2V 6DL

BANKERS

Barclays Bank PLC
5th Floor
Level 27
1 Churchill Place London
E14 5HP

TRUSTEES' REPORT (INCLUDING STRATEGIC REPORT)

30 JUNE 2025

The trustees, who are also directors of the company for the purposes of the Companies Act 2006, present their report along with the financial statements of the charity for the year ended 30 June 2025. The financial statements have been prepared under the accounting policies set out therein and comply with applicable law and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102).

The report as a whole has been prepared in accordance with Part 8 of the Charities Act 2011. The information in the sections headed 'Strategic Report' constitutes the strategic report as required by the Companies Act 2006 (strategic report and directors' report) Regulations 2013.

The required information to be presented in a directors' report under the Companies Act 2006 is incorporated in the remaining sections of the report.

STRUCTURE, GOVERNANCE AND MANAGEMENT

TRUSTEES AND ORGANISATIONAL STRUCTURE

International Medical Corps (UK) ('the Charity') was incorporated as a company limited by guarantee in England and Wales on 2 July 2002 and registered as a charitable organisation with the Charity Commission on 19 September 2002. Activities commenced on 1 November 2002.

International Medical Corps (UK) is an international humanitarian non-governmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a US-registered non-profit organisation that shares the same mission, and International Medical Corps Croatia, an association registered in Croatia. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes on the ground in accordance with the terms and conditions of its grants. During the year, more than \$164 million of the Charity's programmes were delivered in partnership with International Medical Corps (2024: \$135 million). This represents an 11% increase (2024: 11% increase compared to 2023) in activities worldwide over the previous year. International Medical Corps (UK) also maintains an Administrative Services Agreement with International Medical Corps Croatia to share certain services in connection with its operation.

For ease of reference, International Medical Corps (the non-profit organisation registered in California) will be referred

to as International Medical Corps. The UK charity will be referred to as International Medical Corps (UK).

The trustees govern in accordance with the Memorandum and Articles of Association of International Medical Corps (UK) and all subsequent amendments.

The trustees of the Charity have the powers to appoint and remove a trustee. The Board of Directors of International Medical Corps has the right to appoint one trustee (and any successor) by notice in writing addressed to the Secretary of the Charity, and any person so appointed shall become a trustee immediately upon receipt by the Secretary of such notice.

International Medical Corps (UK) adheres to and supports the development of the Sphere Project's Minimum Standards in any disaster response. International Medical Corps (UK) is also informed by the guiding principles of CHS Alliance's Code of Good Practice for the Management and Support of Field Staff.

The Board of Trustees is the governing body for International Medical Corps (UK) and currently comprises six members who aim to meet several times each year. Additional meetings can be called at the request of the Chair. For the 2024–25 financial year, the board of trustees met in December 2024 and June 2025. The list of trustees who served in the year is shown on page 28.

Risk, compliance and external audit functions sit with the board.

As the governing body for the Charity, the trustees take decisions and approvals on a board level regarding strategic and operational risks, as follows:

- **Strategy.** Determine and approve International Medical Corps (UK)'s strategic direction and annual business plan, scrutinising the extent to which the Charity has been able to meet its charitable objectives.
- **Management.** Review and provide oversight of the implementation of the Charity's country programmes.
- **Financial Management and Compliance Requirements.** Review and approve annual budgets, statutory statements and ensure full compliance with all constitutional, legal, regulatory and statutory requirements.
- **Risk.** Review and approve International Medical Corps (UK)'s procedures for risk management, and ensure there is a framework of structures, policies and processes in place for the organisation and the board of trustees.

STATEMENT ON APPROACH TO SAFEGUARDING

International Medical Corps (UK) and its affiliates are committed to delivering programming that is safe, accountable, and inclusive in order to address the inherent inequities of power that can exist in humanitarian settings, by putting the people affected by crisis at the centre of assistance and ensuring there are systems in place to elevate the needs of people and communities affected by crises. Safeguarding is a means of risk prevention and mitigation, which reflects our responsibility to ensure our personnel, operations, and programmes do no harm to the people with whom we work, with a particular focus on protecting those people who may be most vulnerable to exploitation and/or abuse. International Medical Corps (UK) receives all relevant reports of safeguarding violations from its US affiliate. As per the Charity's governance structure, the Managing Director and senior staff oversee the charity's responsibilities in regard to safeguarding.

The Charity's US affiliate continues to reinforce its safeguarding capacity and capability through an organisation-wide approach, which includes incorporation of guidance received from the Foreign, Commonwealth & Development Office (FCDO) of the UK Government, other donors, and the Charity Commission.

The following policies of International Medical Corps (UK) outline the Charity's approach to managing safeguarding matters. The policies are reviewed and updated periodically.

- Code of Conduct and Ethics
- Safeguarding Policy, encompassing child safeguarding, protection from sexual exploitation and abuse, safeguarding adults at risk, prevention of trafficking in persons
- Whistleblower Policy
- Guidance on Sub-Recipient Safeguarding and Ethical Conduct requirements
- Anti-Harassment and Bullying Policy
- Conflict of Interest Policy/Staff Integrity Policy
- Disciplinary Rules, including grievance procedures
- Recruitment and Selection Process
- Health and Safety Policy
- Modern Slavery Statement

In addition to the policies, staff are also required to complete mandatory training and awareness-raising courses that include:

- Code of Conduct and Ethics
- Prevention of Trafficking in Persons
- Child Safeguarding
- Preventing Harassment in the Workplace
- Prevention of Sexual Exploitation and Abuse

This training is completed at induction, and refresher training is completed on an annual basis.

The Charity's US affiliate continues to reinforce the following key safeguarding actions taken during the recent years.

THE SAFEGUARDING TASK FORCE

The Safeguarding Task Force provides focus, leadership and oversight over all global safeguarding initiatives. The Safeguarding Task Force is a multi-disciplinary team comprising staff from key departments, including Domestic and International Affairs, Legal, Human Resources, Ethics and Compliance, Technical Unit and International Programmes. The Safeguarding Task Force workplan covers the development and implementation of safeguarding initiatives, including policy review and updates, prevention and protection, survivor assistance guidance, capacity strengthening, training and country support.

POLICY DEVELOPMENT AND IMPLEMENTATION

The umbrella Safeguarding Policy encompasses:

- child safeguarding
- protection from sexual exploitation and abuse
- safeguarding adults at risk
- prevention of trafficking in persons

Sexual harassment in the workplace is covered under the Policy for Protection from Harassment, Bullying and Sexual Misconduct. All policies are reviewed and updated periodically.

SAFEGUARDING POLICY IMPLEMENTATION GUIDE AND TOOLKIT

The Safeguarding Policy Implementation Guide and Toolkit, developed by the Safeguarding Task Force, supports understanding and implementation of the International Medical Corps Safeguarding Policy. The guide describes priority actions that need to be undertaken by country teams to ensure the full implementation of the Safeguarding Policy at the country and programme/project level.

Each priority action has a brief explanation of its importance, an overview of the action itself, how to document or demonstrate that an action has been completed, and guidance on where further tools and information can be found within the accompanying Safeguarding Implementation Toolkit, in order to implement the actions.

The accompanying Toolkit contains tools, information and guidance to support the implementation of the Safeguarding Policy. Examples of the tools include a Safeguarding Action Plan Template, the Terms of Reference for the Safeguarding Focal Points and the Survivor Support Guidelines.

TALENT ACQUISITION

Safeguarding is included in the corporate staff-recruitment process, from advertisement to hiring.

Key actions include the following steps:

- safeguarding risks are considered for each role.
- behavioural-based safeguarding questions are included in the headquarters level interview process for all positions, including field recruitments.
- managers' responsibilities for ensuring safeguarding measures for volunteers, employees and partners are routinely included in job descriptions for international staff and are part of the management and staff performance-appraisal process.

International Medical Corps (UK) and its affiliate International Medical Corps participate in the Inter-Agency Misconduct Disclosure Scheme, facilitated by the Steering Committee for Humanitarian Response. In accordance with this, we will request information from an applicant's previous employers about any findings of sexual exploitation, sexual abuse and/or sexual harassment during employment, or incidents under investigation when the applicant left employment.

SAFEGUARDING FOCAL POINTS

More than 100 Safeguarding Focal Points are identified at the country level. Safeguarding Focal Points are nominated by the Country Director. Training resources, materials and support include regular orientation sessions, terms of reference, extensive trainings and regular webinars, and a resource library on our intranet.

Safeguarding Focal Points' responsibilities include training, programme support as related to Safeguarding (e.g. proposal development), coordinating with the Headquarters Safeguarding Taskforce, and liaising with other focal points from partner agencies and working groups.

Staff globally receive an annual refresher training that covers Safeguarding. Our Safeguarding Focal Points are responsible for ensuring that this training is completed, in coordination with our Learning & Development team at Headquarters.

SAFEGUARDING VIOLATIONS—CASE MANAGEMENT

Reports of violations of International Medical Corps' safeguarding policies are referred to the Ethics and Compliance Department, which conducts investigations in consultation with the Safeguarding Case Team, an interdisciplinary group of senior leaders. Individuals who are found to have violated International Medical Corps' policies are subject to disciplinary action, up to and including termination. In addition to this, the Safeguarding Task Force, also consisting of senior leaders from the departments most involved, analyses safeguarding data over time to identify risks and emerging themes. Key lessons learned through

this process inform future safeguarding policy updates and practice, as part of an institutional culture of constantly striving to improve.

SURVIVOR/VICTIM SUPPORT

International Medical Corps works to ensure that survivors of safeguarding violations receive appropriate and timely support, including medical, psychosocial and other services, according to their needs and wishes. Survivors are also informed of their rights to report incidents to police and/or other relevant authorities. In contexts where reporting to authorities may be indicated, International Medical Corps' Safeguarding Case Team advises survivors and consults with Legal Counsel to determine the best course of action. To the extent possible, survivors' wishes guide decisions about the types of support received, and survivors are fully informed of their options and rights.

SAFEGUARDING RISKS OF DOWNSTREAM PARTNERS

Downstream partners are required to conduct all activities under sub-agreements in a manner consistent with international laws, humanitarian principles and donor regulations. Subrecipients are prohibited from engaging in any type of harmful misconduct, including but not limited to sexual exploitation, abuse, harassment and trafficking. Subrecipients are required to inform International Medical Corps of any safeguarding issues that arise under the sub-agreement. Safeguarding-specific requirements are included in the downstream partner risk-assessment guidelines.

DEFINING RISK OWNERS

Ownership of safeguarding risks is documented in the organisational risk register of the Charity and its US affiliate, explicitly stating that the risks are owned by executive staff. The Charity's trustees are updated at least twice a year.

SAFEGUARDING—PREVENTION MEASURES

A comprehensive approach to maintaining and strengthening prevention measures includes incorporating protection mainstreaming into programme design and implementation and training of staff to enhance this approach, as well as the utilisation of a risk mitigation approach to dealing with safeguarding violations.

THE ENVIRONMENT

International Medical Corps (UK) adheres to and promotes policies geared towards environmental protection.

Examples of these policies include:

- co-signing the global pledge on Energy and Infrastructure
- conducting risk and impact assessments for the safe disposal of healthcare waste and expired medicine.

- implementing alternative energy and green initiatives, such as solar-powered communal water systems, resulting in sustained access to water for more than 432,626 community members, preserving over 54,259 litres of fuel in 2024.
- replacing diesel pumps with solar systems in several WASH programmes, reducing carbon emissions.

The Charity is dedicated to upholding high environmental compliance standards and will persist in supporting a cautious approach to environmental challenges. The organisation will undertake initiatives to encourage greater environmental responsibility and promote developing and disseminating environmentally friendly technologies. The organisation contributed to the development of donor minimum environmental requirements, and implemented environmental assessment guidance for the International Medical Corps (UK) donors of Global Affairs Canada and UNICEF for Climate Resilience. International Medical Corps' strategy is designed to comply with various policies, global standards, and management practices. It addresses explicitly environmentally sensitive activities such as water supply, sanitation, and biomedical waste management.

The International Medical Corps has developed comprehensive guidelines to reduce its environmental impact, especially in logistics, the supply chain, and WASH infrastructure interventions. This includes transporting goods and staff, sourcing, packaging, and power supply. The organisation is committed to implementing best practices and recommendations from esteemed agencies such as Groupe URD, IFRC, WHO, and WFP. Additionally, International Medical Corps is actively involved in initiatives like "WREC" (Waste Management And Measuring, Reverse Logistics, Environmentally Sustainable Procurement And Transport, And Circular Economy) and WORM (the "Joint Initiative") that involves collaborating with other humanitarian organisations to review, develop, and share tools and methodologies aimed at reducing the carbon footprint of operations. The Waste in Humanitarian Operations: Reduction and Minimisation (WORM) EU-funded project focuses on waste management during emergencies. International Medical Corps is leading efforts to identify best practices for waste management during Emergency Medical Team deployments.

Since 2022, International Medical Corps measure its CO2 emissions generated globally by transport (international shipment and vehicles) and power production (including since 2023 power grid – scope 2 emissions), and also international travels emissions. The results are used to identify improvement opportunities and initiatives to be

developed in close collaboration with country teams (such as carpooling or solarization of facilities).

International Medical Corps, as member of the Fleet Forum, has committed to report fleet related emissions on annual basis (enabling comparison with other organisations), promote vehicle sharing with other INGO and transition to vehicles with lower negative impact on the environment (i.e., EURO 3 or higher).

International Medical Corps continues to develop and disseminate eLearning to improve awareness and provide solutions for emissions reduction. In 2024, an additional training module was developed promoting sustainable practices in warehouse and stock management.

The Charity offers staff environmentally friendly initiatives such as the Cycle to Work Scheme, which is about promoting an alternative way to travel to work and allowing staff to work from home on some days as part of its flexible working policy, contributing to staff welfare and less pollution due to reduced daily commute to work.

The Charity was a low-energy user during the reported period and is not reporting under the UK Government's Streamlined Energy and Carbon Reporting (SECR) requirements.

STATEMENT ON MODERN SLAVERY

International Medical Corps (UK) publishes its modern slavery statement every year, committing to prevent modern-day slavery and human trafficking within the organisation and its supply chains. The Charity actively and continuously works with its affiliates to reduce and eliminate this risk. New employees are informed about organisational policies that contribute towards eliminating modern day slavery by the Human Resources function during staff onboarding orientation. Additionally, all employees are provided with annual training about the prevention of trafficking in persons, sexual exploitation and abuse, and child labour. Related information is made available to employees on the organisation's intranet, as well as through posters displayed in all field and headquarters offices. In addition, International Medical Corps' Global Safeguarding Policy has been updated, made pursuant to section 54(1) of the Modern Slavery Act 2015 (UK). It mandates that all suspicions are reported and are then reviewed and investigated by the Ethics and Compliance Investigation Unit and the Safeguarding Case Team.

In 2017 International Medical Corps revised the vendor Code of Conduct which must be signed by any supplier before entering into business with International Medical Corps. It includes a chapter on the prohibition of human trafficking. Provisions are also inserted in procurement Master Terms and Conditions. Failure to comply constitutes a breach of an essential term of the Contract, leading to revoking the

vendor's registration with International Medical Corps and inclusion of the company on the watch list maintained by our Ethics & Compliance department.

KEY MANAGEMENT PERSONNEL

The key management team of the Charity consists of the trustees, the Managing Director and the senior management team. The trustees have delegated management of the Charity's operations to the Managing Director, who is supported by the senior management team as follows:

International Medical Corps (UK)-contracted staff:

- Senior Director of International Programmes
- Senior Director of Finance, Grants and Contracts
- Senior Director of Human Resources

International Medical Corps-contracted staff:

- Chief Operating Officer
- Vice President, Finance and Administration
- Chief Advancement Officer
- Vice President, Humanitarian Leadership and Partnerships, Domestic and International Affairs

For the purposes of setting employee remuneration, delegation has been given to the Charity's Managing Director, who is also the Administrative Director for this purpose. In setting the pay and benefits of the UK-contracted senior management team, the Managing Director refers to the company's pay policy, which is periodically reviewed. Salaries and benefits are benchmarked against reliable industry data. The salary scale, including the pay policy, is approved by the Managing Director and in line with the Charity's pay policy.

The remuneration of the Managing Director is set by the trustees and in line with the Charity's pay policy and scale.

TRUSTEES' RESPONSIBILITIES

The Trustees, who are also Directors of International Medical Corps (UK) for the purposes of company law, are responsible for preparing the Trustees' Report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practices, or GAAP).

Company law requires the trustees to prepare financial statements for each financial year that give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of such resources, including the income and expenditure of the charitable company for that period. Under company law, the trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charitable company and of the incoming

resources and application of resources, including the income and expenditure of the charitable company for that period.

In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and apply them consistently;
- observe the methods and principles in the Statement of Recommended Practice Accounting and Reporting by Charities;
- make judgements and estimates that are reasonable and prudent; state whether applicable United Kingdom Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going-concern basis unless it is inappropriate to presume that the charity will continue in operation.

The trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Each trustee confirms that:

- so far as the trustee is aware, there is no relevant audit information of which the charitable company's auditor is unaware; and,
- the trustee has taken all the steps that they ought to have taken as a trustee to make themselves aware of any relevant audit information, and to establish that the charitable company's auditor is aware of that information.

This confirmation is given and should be interpreted in accordance with the provisions of S418 of the Companies Act 2006.

The trustees are responsible for the maintenance and integrity of financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

OBJECTIVES AND ACTIVITIES

PUBLIC BENEFIT

In reviewing the Charity's aims and in planning future activities, the trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit. The trustees believe that the Charity

benefits the public through the achievement of its goals and objectives by:

- providing timely and appropriate humanitarian aid to vulnerable victims of wars and disasters;
- building the capacity of local healthcare providers to improve the standards of healthcare for local communities and create more sustainable systems;
- contributing to the UK's agenda for international development and, in particular, the achievement of the Sustainable Development Goals, including the prevention of and response to violence against women and girls;
- contributing to the containment and reduction of infectious diseases globally; and
- contributing to the understanding of the impact of various health issues affecting the vulnerable, through the UK/EU media and humanitarian networks.

INTERNATIONAL MEDICAL CORPS (UK)'S GOALS

To mobilise sufficient resources to realise International Medical Corps (UK)'s charitable objectives and humanitarian mission.

As per International Medical Corps (UK)'s Memorandum of Association, the objectives of the organisation are to:

- a. relieve suffering, sickness and poverty throughout the world by providing medical aid, healthcare training and programmes, and to promote good health and preserve lives by providing medical supplies and trained medical professionals particularly, in areas that have suffered through war and conflict; and
- b. further the activities of International Medical Corps, a non-profit corporation registered in California USA, as are exclusively charitable and that may advance the objective set in to (a) above.

International Medical Corps (UK)'s mission is to provide humanitarian assistance, healthcare and training to communities affected by disasters, conflict and poverty, so they can return to self-reliance.

During the reporting period, the Charity continued to report on six main areas of work:

- strengthening health capacity
- emergency response and preparedness
- mental health and psychosocial support
- woman and children's health
- clean water, sanitation and hygiene
- nutrition and food security

MONITORING OF ACTIVITIES

Monitoring of project activities at International Medical Corps aims to achieve three objectives: 1) assess progress of project activities/outputs; 2) identify deviations and gaps/ weaknesses during project implementation and any problems or obstacles encountered; and 3) provide targeted and relevant monitoring data that allows International Medical Corps to develop an action plan to overcome gaps and weaknesses throughout the life of the project.

International Medical Corps (UK) continuously monitors programme activities through effective internal monitoring, supervision and reporting mechanisms. It provides regular programmatic and financial reports on project activities and progress as required by all its institutional donors and other stakeholders. Additional internal programme reports and departmental updates supplement this information for day-to-day management. The Charity also maintains automated recruitment, financial and programme records to track performance and grant compliance.

Routine project monitoring is conducted at the field levels by the project technical and Monitoring & Evaluation (M&E) teams through standard monitoring and reporting procedures and forms to monitor services and goods provided by International Medical Corps. Monitoring activities include monitoring the quantity and quality of services and goods provided, either through supportive supervision, observation, record review, alternative methods, and teams use standardised checklists and tools that are appropriate for the context. Some activities that are particularly sensitive may be monitored indirectly, such as through client satisfaction surveys or review of anonymised case management files by the appropriate and authorised personnel. The project team focuses more on the technical aspects of services provision to ensure quality and compliance with minimum international standards. However, the M&E team conducts independent monitoring of services International Medical Corps provides at various facilities, including health facilities, child friendly spaces, and women and girls safe spaces. The findings from monitoring are regularly shared with the project team for their follow-up and corrective measures. Monitoring of activities also considers issues around patient or case privacy and ensures that personal identifiable information is handled in a sensitive manner to preserve the dignity and safety of all beneficiaries.

The International Programmes team through the technical teams reinforces supportive supervision and monitoring and communications systems and procedures to track results. International Programmes collaborates with the Global Monitoring, Evaluation (M&E) unit in the collection

and analysis of programme achievements and addresses constraints to progress in real time through visits, calls and written communications. Monthly calls with country teams also review the achievement of project targets and progress, spending and procurement, as presented by project managers and their technical, financial and logistics colleagues. In addition, International Programme Senior Directors, Directors, Programme Managers and Programme Officers maintain regular communications with country teams to identify and address risks and provide support, working with regional platform department focal points.

Outcome level monitoring is conducted at the beginning or end of the projects and/or on a need basis to assess indicators such as measures of access to services, knowledge, attitude and practices, well-being and goal achievement of beneficiaries participating in services and activities. International Medical Corps (UK) uses standardised and culturally appropriate age and gender specific well-being measures and systematically gauges skill-building prior to and after interventions. In line with donor requirements, International Medical Corps (UK) also carries out internal or external evaluations to assess the effectiveness of our projects and programmes.

Staff, in various capacities, visited country programmes during the year to provide relevant technical support. During the reported period, countries visited included Afghanistan, Ethiopia, Cameroon, Central African Republic (CAR), Mali, Democratic Republic of the Congo (DRC), Chad, Venezuela, Syria, Lebanon, Gaza, Jordan, Ukraine, Yemen, Poland, Pakistan, South Sudan, and Zimbabwe where we provided field teams with programmatic and technical support.

The Charity's affiliate delivers programmes through four geographical, cross-functional platforms (Middle East and Europe, Central & Southern Africa, North & East Africa and Asia, and Global), which include dedicated interdisciplinary teams of specialists in programmes, technical, finance, resource development, communications, logistics and supply chains, human resources and security. Functional specialists provide effective and efficient business support to field programmes and facilitate speedy and effective responses to disasters in the respective regions.

International Medical Corps (UK)'s Managing Director is a member of the global executive leadership team, and advises and helps evaluate opportunities, challenges and risks associated with implementation of programmes undertaken by the Charity's US affiliate. In addition, International Medical Corps (UK) relies on its US affiliate's Internal Audit, Compliance and Safeguarding Task Force's independent field reviews, evaluations and reports. Risk assessment and compliance issues are flagged in various functional units' regular reviews, and critical issues are

reported back to the senior leadership team. Senior International Medical Corps' staff brief the trustees during board meetings on key developments and on risk mitigation measures that have been put in place.

STATEMENT ON CONTRIBUTIONS BY VOLUNTEERS

International Medical Corps (UK) continues to actively encourage members of the public to become involved in its work, both in the UK, to raise awareness of international development issues, and overseas, to support its operations.

STRATEGIC REPORT

ACHIEVEMENTS AND PERFORMANCE

Organisational Performance

Over the course of the financial year to June 2025, International Medical Corps (UK) provided assistance valued at \$164,733,296 (2024: \$135,518,451) to vulnerable populations in 26 countries (2024: 23). This included the donated medical and other supplies received for distribution.

International Medical Corps (UK) supported, through its US affiliate, 1,541 staff positions in 26 countries (2024: 2,538 staff positions in 23 countries), providing essential services to beneficiaries. Globally, International Medical Corps' activities served 15,185,025 unique beneficiaries in 2024. Globally, International Medical Corps' activities served 6,678,728 direct beneficiaries between 1 July 2024 and 31 December 2024 and 8,037,937 direct beneficiaries between 1 January 2025 and 30 June 2025.*

International Medical Corps (UK) contributed 37% of global funding to this mutual achievement.

*Please note that beneficiary totals may overlap across calendar years

SUMMARY OF MEASURES USED TO ASSESS INTERNATIONAL MEDICAL CORPS (UK)'S PERFORMANCE

International Medical Corps (UK) continues to use a Balanced Business Scorecard specifying the following main objectives.

GOAL	COMMENT
Timely and efficient delivery of programme activities	The Charity successfully delivered activities of the value of \$164M (2024: \$135M).
Control over corporate costs	The Charity has managed corporate expenditure within the provisions of its annual budget and according to the terms specified by its donors.
Diversification of income	The Charity continued to be funded by a wide range of government and UN agencies, as well as private sector donors.

PEOPLE: 'Always supporting its people to develop professionally whilst delivering the Charity's mission.'

GOAL	COMMENT
Staff are motivated to achieve and exceed performance expectations	<p>Charity continues to use performance management and development system that provide a platform for managers and their employees to engage in goal setting, performance discussions and provide feedback. The Charity believes that managing employee performance effectively is fundamental to staff motivation, engagement and helping them realise their full potential.</p> <p>Staff continue to receive in-house and external trainings on donor regulations and industry best practices to ensure appropriate oversight.</p> <p>Wellbeing and engagement initiatives including flexible working and specifically remote working arrangements are in place to ensure staff safety and wellbeing.</p>
Improve on the creation of opportunities for effective intercompany collaboration and improved quality of programmes	<p>Intercompany, interdepartmental, HQ and field collaborations were enhanced to consider opportunities and challenges in wider contexts.</p> <p>Each International Medical Corps (UK) team worked closely with its peers in the US to ensure alignment where appropriate.</p>

GOAL	COMMENT
<p>Strengthened systems for identifying and raising areas of concern in a timely manner to the senior management team</p>	<p>The Charity continued to maintain its risk register and controlled the field operations through regular reviews, cross-team participation and reference to the Charity's scorecard mechanism.</p> <p>The Charity's US affiliate continues to implement, at field and HQ levels, Logistics Management Software to strengthen assets, procurement and inventory management and controls. Systems enable the creation of exception reports highlighting any potential gaps or risks to be addressed.</p> <p>In addition, HQ Logistics & Supply Chain team is maintaining, in collaboration with the field teams, a register to anticipate, map potential risks and determine / implement mitigation measures. Risks identified as major are elevated to the appropriate management group.</p> <p>Procurement above set thresholds are reviewed through a system called PRAMS (Procurement Review & Approval Management System) at the field and HQ levels. The system enables teams to identify procurements requiring corrections or improvements prior to signing contracts with vendors, and support the analysis of potential capacity building requirements, or business clarifications.</p> <p>In addition, the Charity has worked with its US affiliate to administer and reinforce its safeguarding mechanisms.</p> <p>The Charity's implementing affiliate also implemented a Human Resources Information System (HRIS) for talent acquisition, staff performance management and training. The HRIS is a global integrated platform used to streamline recruitment, learning, performance management and compensation process and management.</p>
<p>Cyber risk is a concern as it involves the potential for data breaches, unauthorised access, and other cyber threats that can compromise systems and confidential data</p>	<p>To mitigate against these risks and limit exposure, the organisation has implemented robust security measures such as encryption, multi-factor authentication, and vulnerability scanning to safeguard and protect its cloud infrastructure. International Medical Corps (UK) has modernised its infrastructure by migrating to the cloud its applications and data.</p>
<p>Mitigate financial loss through strict controls</p> <p>Strict controls were maintained and updated as necessary to ensure adherence to internal procedures, requirements of donors and the requirements of the Charity Commission</p>	<p>Automation and strict control over the treasury platform have ensured minimisation of foreign exchange and currency exposure risks during turbulent global economic environment.</p>

OPERATIONS: 'Delivering the mission efficiently, through discipline and thoroughness.'

GOAL	COMMENT
Regular review of programme performance	<p>Programme, M&E and Technical Unit staff at all levels monitor risks to implementation on an ongoing basis through organisational systems and direct field visits with local stakeholders to ensure effective programme delivery.</p> <p>The Charity's affiliate's cross-functional platforms continue to improve the effectiveness and efficiency of operational support to field programmes, as well as facilitate speedy and effective responses to disasters in the respective regions.</p>
Increased monitoring and evaluation activities, training and programme development	<p>Programme staff collaborate with other departments within the cross-functional platforms in decision making related to country programme issues.</p> <p>During the reporting period, the Charity, in collaboration with its US affiliate, submitted 197 proposals.</p> <p>The Charity's US affiliate's Internal Audit conducted in-country audits in Somalia, Nigeria, Ethiopia.</p>
Secure multi-year grants from donors	Ongoing discussions were had with FCDO, Global Affairs Canada (GAC), Ministry of Foreign Affairs France and other donors on multi-year grants.

DONORS: 'Accountable to a growing group of donors'

The Global Programme Unit continued to provide due diligence on the Charity's grants and contracts to ensure compliance with the standards and regulations specified by its donors, with support from the US affiliate's Compliance team and the Internal Audit. Additionally, International Medical Corps continues to be a member of the Core Humanitarian Standard (CHS) Alliance and continues to monitor its compliance with the Humanitarian Accountability Framework.

GOAL	COMMENT
Improve high-level donor interaction	Robust interaction with International Medical Corps (UK)'s donors continued at all levels throughout the year.
To improve on effective donor intelligence	<p>Regular communications with donor agencies were maintained, to ensure that relevant opportunities were pursued.</p> <p>Active participation in UK NGO forums and direct communication with FCDO were prioritised, to ensure that humanitarian relief is prioritised following the UK's exit from the European Union and other governmental efforts to shape the sector.</p>
Compliance with reporting deadlines and improved performance on complementary information requests	The Charity remains compliant with donor reporting requirements.

GOAL	COMMENT
Encouraging a culture of creativity and problem solving	Organisation-wide information management systems are being used to obtain real-time reports integrating key indicators across finance, programme delivery, human resources and logistics, to ensure effective implementation of programmes. A variety of projects continue, with the aim of improving the efficiency of key areas affecting delivery of programme activities. Cross-functional platforms also ensure that real-time information is available and applied in decision making and operations.

External representation and engagement

International Medical Corps (UK)'s Technical Unit members continued to represent the Charity in forums both within the UK and abroad, and make contributions to global discussions on sectoral issues.

INTERNATIONAL MEDICAL CORPS (UK)'S HUMANITARIAN ASSISTANCE FOR THE FINANCIAL YEAR 2024/2025

EMERGENCY RESPONSE AND PREPAREDNESS

Escalating conflict, economic crises and mass displacement have intensified humanitarian needs across the Middle East and Europe. International Medical Corps continued large-scale emergency responses across the region. In Gaza, we operated two field hospitals offering trauma, surgical and maternal care, and offered mobile triage near displacement sites. Our teams reached 477,468 patients in these field hospitals with lifesaving services amidst the ongoing conflict and displacement. In Syria, mobile medical teams provided emergency care to 425,097 people and supported referrals to fixed facilities. Additionally, we provided immediate medical assistance and non-food items to hundreds of thousands of people across the region.

NUTRITION AND FOOD SECURITY

In Cameroon, Ethiopia, Jordan, Mali, Nigeria and Syria, we screened 273,937 children under 5 for malnutrition, whilst in Ethiopia and Jordan, we also screened 24,625 pregnant and lactating women for malnutrition. In Syria and Yemen, we admitted 20,177 children under 5 to our therapeutic and supplementary-feeding programme. In Cameroon, Chad, Ethiopia, Nigeria, Syria and Yemen, we provided infant and young-child feeding counselling to 475,185 caregivers. In Venezuela, we delivered 92,613 food baskets to more than 46,300 people across 55 schools in Delta Amacuro state, strengthening food security and improving school attendance. In Chad, we provided food and cash assistance to 113,242 people in 31,514 households every month, strengthening nutrition and food security for Sudanese refugees.

HEALTH SERVICES SUPPORT

In Cameroon, Jordan, Lebanon and Mali, we provided primary healthcare consultations to 243,513 people.

Additionally, in Jordan's Azraq and Zaatari refugee camps, we conducted 630 surgeries and 69,350 laboratory tests whilst providing 25,981 paediatric consultations. In Ukraine, we provided 11 health facilities with 7,584 items of medical supplies and essential pharmaceutical equipment and operated four mobile medical teams to restore services in frontline areas. In the Central African Republic, we conducted 2,872,934 malaria tests and treated 1,984,495 cases of uncomplicated malaria. In Afghanistan, we screened 2,462 people for drug addiction through outreach and drug addiction treatment centres.

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT (MHPSS)

We integrated MHPSS into primary healthcare across Cameroon, Jordan, Lebanon and Ukraine, providing more than 63,000 mental health consultations. In Afghanistan, we reached 23,531 people with MHPSS awareness messaging, and in Mali, 5,536 women participated in psychosocial support activities in safe spaces for women and girls.

WATER, SANITATION AND HYGIENE

In Syria, we repaired and rehabilitated water systems, delivering 25 million litres of safe water. This intervention, paired with infection prevention and control support in field hospitals and health centres, helped prevent disease outbreaks. In Gaza, Yemen and Zimbabwe, rehabilitation of water systems helped 89,016 people access safe water, whilst in Cameroon, Gaza, Yemen and Zimbabwe, we reached 115,763 people with hygiene-promotion activities.

MATERNAL AND CHILD HEALTH

In Cameroon, Gaza, the Central African Republic and Yemen, we supported 12,631 deliveries through skilled birth attendants, and provided antenatal consultations to

23,347 women. In both countries, we vaccinated 56,958 children against common childhood illnesses, such as polio and measles. In the Central African Republic, we supported 69 students in a two-year Auxiliary Midwifery Certification program, providing them with uniforms and classroom supplies. In Jordan and Lebanon, we strengthened access to maternal and newborn health services in primary healthcare centres and refugee settings by coordinating 17,762 referrals for secondary and tertiary services.

VIOLENCE AGAINST WOMEN AND GIRLS (VAWG)

In Cameroon, Gaza, Lebanon, Nigeria and Yemen, we

provided awareness sessions on prevention of VAWG to 183,920 people, and in Cameroon, Lebanon and Nigeria, we provided dignity kits to 1,116 women and girls. In South Sudan, we engaged with more than 65,000 women and girls across 17 women's and girls' safe spaces between January and June 2025. In Nigeria, 180 girls completed a 12-week life-skills session to build their confidence and interpersonal skills, whilst we engaged with 100 men and 120 adolescent boys to foster behavioural change. In Mali, we trained 280 women in VAWG prevention, and supported 11,686 married teenage girls and women with income-generating activities.

INSTITUTIONAL DONOR SUPPORT FOR INTERNATIONAL MEDICAL CORPS (UK) PROGRAMMES

To fulfil its mission and undertake the aforementioned activities, International Medical Corps (UK) received grants from the following private and international donor agencies during the year. The Charity gratefully acknowledges their support.

ACF Canada	Action Against Hunger, Canada
ACF US	Action Against Hunger, US
CDCS	REPUBLIQUE FRANÇAISE MINISTÈRE DE L'EUROPE ET DES AFFAIRES ETRANGERES - Centre de crise et de soutien
DAHW	Deutsche Lepra- und Tuberkulosehilfe e.V.
DRC	Danish Refugee Council
FCDO	Foreign, Commonwealth & Development Office
EC	European Commission
France MOFA	REPUBLIQUE FRANÇAISE MINISTÈRE DE L'EUROPE ET DES AFFAIRES ETRANGERES (France Ministry of Europe and Foreign Affairs)
GAC	Global Affairs Canada
GCC	Grand Challenges Canada
GIZ	The Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH
IOM	International Organisation for Migration
IRC	The International Rescue Committee
Islamic Development Bank	Islamic Development Bank
King Salman Humanit. Aid	King Salman Humanitarian Aid and Relief Center
MCMDO	Mothers and Children Multisectoral Development Organisation
Ministry of Health CAR	Ministry of Health Central African Republic
UAE MoFA	Ministry of Foreign Affairs and International Cooperation, UAE
Save the Children	Save the Children
RCSI	Royal College of Surgeons in Ireland
The Power of Nutrition	The Power of Nutrition
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations International Children's Emergency Fund
UNOCHA	United Nations Office for the Coordination of Humanitarian Affairs
WFP	World Food Programme
WHO	World Health Organisation
WV	World Vision
ZOA Netherlands	Stichting ZOA

PRIVATE DONOR SUPPORT OF INTERNATIONAL MEDICAL CORPS (UK) PROGRAMMES

Dr. Fahad Abdul Jabbar	GM Morrison Charitable Trust
Church of Jesus Christ Latter Day Saints (LDS)	LDS Charities Australia
Context Consulting Limited	AstraZeneca
Bloomberg	Microsoft
Fitch Group	Mr Naif AlObaid
Cvetanka Dimoska Radosavljevic	One4Humanity

FUNDRAISING, COMMUNICATIONS AND MARKETING ACTIVITIES

During the year, International Medical Corps (UK) has received donations from institutional donors, corporates, trusts and foundations, as well as private individuals. International Medical Corps (UK) and its US affiliate seek to raise funds to sustain its programmes across all countries where they work, as well as funds to fill gaps, support immediate emergency responses and implement innovative programmes.

The Charity responds to requests for proposals issued by institutional donors such as FCDO, UN agencies and by private sector donors. The Charity works closely with its affiliate to raise funds from corporations and foundations for emergency response activities and ongoing programmes. International Medical Corps (UK) undertakes due diligence on both the financial and reputational dealings of potential partners before accepting donations.

International Medical Corps (UK) also utilises multiple fundraising channels, with the goal of raising funds from as diversified a base of supporters as possible. These channels include annual giving programmes and online appeals, in addition to outreach through social media, the website and other reputable online platforms that display clear terms and conditions, including General Data Privacy Regulations (GDPR) compliance.

International Medical Corps (UK) and its affiliate did not employ any commercial fundraising firm to solicit individuals via telephone or door to door during the reported period. Protecting vulnerable people and other members of the public is a key consideration in cultivating a supporter base for the Charity's work. The Charity and its US affiliate actively monitor all efforts to raise funds from the public, in particular vulnerable people. International Medical Corps (UK) did not receive any complaints about its fundraising activities during the reported period.

Although International Medical Corps (UK) is not registered with the UK Fundraising Regulator, the Charity has regard for and adheres to the principles and practices set out in the Code of Fundraising Practices. International Medical Corps (UK) and its affiliate are in compliance with GDPR and protect individuals' personal information. The communications team of International Medical Corps (UK) monitors and moderates our email and social media accounts, and any complaints or concerns regarding fundraising activities are reviewed and responded to by senior management. Fundraising activities also are monitored by the senior leadership of International Medical Corps (UK), which shares regular reporting with trustees.

INVESTMENT POLICY

Due to the nature of the Charity's programmes and funding cycles of its major donors, the Charity keeps its financial assets liquid.

RISK MANAGEMENT

A culture of risk management and mitigation is embedded in the organisation. A risk register is used by management and the trustees to examine and monitor risks to the organisation.

The register identifies and prioritises risk in relation to the likelihood and the level of impact it would have on the organisation and outlines measures in place to safeguard the company's assets against such risk. The risk categories are defined below:

- organisational risk;
- strategic and management risk;
- operational risk;
- people;
- financial risk.

The board of trustees seeks to ensure that systems are in place to monitor, manage and mitigate International Medical

Corps (UK)'s exposure to major risks which are reviewed periodically. It is also recognised that the nature of the Charity's work requires active acceptance and management of risks when undertaking activities in order to achieve the objectives of the Charity.

The key business risks to the Charity continue to include the unexpected loss of funding from key donor organisations and major disruptions to programmes in countries resulting

from factors either within or beyond the organisation's control. The Board of Trustees for International Medical Corps (UK) continues to implement measures to mitigate these risks, including review of the reserves policy, the introduction of new technology to ensure that assets are safeguarded to the extent possible, the continued reference to a balanced business scorecard and reviews into the Charity's funding base. These are further summarised in the table below:

KEY RISKS	TRUSTEES' PLANS TO MITIGATE THE RISK
Insufficient unrestricted reserves	The Charity continues to make sustained efforts to expand its supporter base. The Charity intends to continue to work with its institutional donors to continue delivering activities in the most hard-to-reach areas, thereby receiving contributions towards its corporate costs, and work with its US affiliate to keep effective control of its cost structure.
Adverse payment terms offered by donors affecting the liquidity of the Charity	The Charity's liquidity position is closely monitored, and close collaborations are maintained with donor stakeholders to ensure life-saving activities are not impacted by liquidity issues.
Future funding opportunities affected by Brexit and developments in the UK's Foreign and Development policies	International Medical Corps (UK) continues to pursue European Union funding streams where eligible. At the same time the Charity continues to engage with FCDO & other institutional donors on existing and potential portfolios.
Inadequate assessment, resulting in poor programming decisions and implementations	International Medical Corps continues to invest in country-specific assessments, to ensure a relevant and quality orientated programme design.
Exposure to movement in foreign currency rates, affecting international operations	The Charity's principal currency exposures arise from translations of European and other donor monies received into US dollars, the main operational currency advanced to its field missions overseas. The continued fluctuations of currencies against USD can adversely affect International Medical Corps (UK)'s ability to deliver programmes sustainably. Within this context, global treasury management, consisting of International Medical Corps' and International Medical Corps (UK)'s senior staff, created in July 2018, continues to ensure effective use of donor funds.
Operations in sanctioned countries through the Charity's US affiliate	Donors and stakeholders are kept up to date with developments and emerging risks affecting programme implementation in sanctioned countries.

FINANCIAL REVIEW

Statement of Principal Financial Management Policies Adopted in the Year

It is the policy of International Medical Corps (UK) to maintain effective financial and other programmatic management systems with its US affiliate. Efficient controls, budgeting, accounting, financial reporting and auditing systems are employed throughout the organisation, to meet the management and programmatic objectives at various levels, and to be accountable to its donors and supporters.

This year, International Medical Corps (UK)'s total income was \$176,473,643 (2024: \$123,269,954). Of this, the total cash income received from institutional donors and supporter base was \$119,154,087 (2024: \$100,502,430). International Medical Corps (UK) was able to secure \$55,129,159 (2024: \$19,490,270) of gifts-in-kind, comprising food, medicines and supplies.

During the reporting period, International Medical Corps (UK) supported training and assistance programmes in 26 (2024: 23) countries through its US affiliate. The Charity's programme expenditures can be disaggregated into the following humanitarian contexts.

	FY 2025	FY 2024
Strengthening health capacity	20%	28%
Emergency response and preparedness	23%	34%
Mental health and psychosocial support	2%	4%
Women & children's health	10%	9%
Water, sanitation and hygiene	6%	5%
Nutrition & food security	39%	20%

Financial Position

The Charity had restricted funds of \$28,721,485 as of 30 June 2025 (2024: \$16,909,499) and unrestricted funds of \$1,060,017 as of the same date (2024: \$1,166,039). International Medical Corps (UK) receives relevant institutional funding in meeting its restricted charitable expenditure. The balance of free reserves as of 30 June 2025 is \$1,036,530 (2024: \$1,115,947). Free reserves are unrestricted funds less the net book value of the fixed assets.

International Medical Corps (UK) committed resources from unrestricted reserves to provide adequate support for growth in charitable activities and to ensure compliance with growing donor regulations. International Medical Corps (UK) continues to rely on its US affiliate's commitment to meet shortfalls in programmes that do not provide full overhead cost recovery.

Reserves Policy

International Medical Corps (UK) requires reserves to:

- fund working capital requirements in the event of unexpected delays in receiving donor funds, to ensure continuity in implementation in the field;
- fund unplanned expenditures arising from programme-related contingencies, such as unforeseen events delaying implementation and leading to no-cost-extensions, and to manage exposure to exchange rate fluctuations;
- finance any gap in funding for projects of strategic importance to the Charity and its US affiliate; and
- fund requirements for additional corporate costs to maintain high-quality assurance over the organisation's programmes.

The Charity aims to maintain a level of unrestricted reserves equivalent to six month's operating expenditure of the Charity's HQ offices, which is \$1,036,530 for FY 2024–25 and this is currently being achieved. Available unrestricted-fund balances in excess of the operational reserves' requirements are utilised to meet the other purposes as outlined above. Operating expenditure considered for reserves excludes transfers made for overseas programmes.

International Medical Corps (UK) continues to apply assessment of new opportunities and accepts projects that support its overhead costs required to maintain acceptable oversight of programme implementation, therefore mitigating the risk of insufficiently resourced projects. International Medical Corps (UK) considers accepting projects that do not fully cover its costs with its US affiliate to ensure sustainability of coverage of any gap

in funding. As of 30 June 2025, the Charity held restricted reserves of \$28,721,485 (2024: \$16,909,499). This represents the total funds received for specific projects that are yet to be spent at 30 June 2025, including projects responding to Syria and various other crises. The decrease in restricted funds in the reported period is due to timing difference of receiving donor funds with a number of projects starting in the last months of the previous reported period and continued in the current reporting period. These funds have been excluded from specific reserves policy, as they are not for the purposes of general working capital.

As of 30 June 2025, the balance of free reserves was \$1,036,530 (2024: \$1,115,947). The Charity is resolved to maintain an adequate level of reserves and is working with its affiliate to implement a feasible strategy for marketing and public awareness of its work, to cultivate support, but accepts that in the current economic climate this may be difficult. The Charity will respond to the risks identified above as follows.

- in collaboration with its affiliate, the Charity profiles income streams and undertakes projects with acceptable terms. Also, it looks to its affiliate to cover programme funding gaps that the affiliate has reviewed and considered as acceptable.
- the Charity and its affiliate continue to closely monitor the implementation context of quality programmes around the world and resolve operational challenges with its supporters and partners.
- the Charity is part of global treasury platform.
- the Charity's operational flexibility has enabled it to address risks caused by political changes, including Brexit and the effects of the pandemic.

Section 172 Statement

International Medical Corps (UK) complies with section 172 under the Companies Act 2006. It requires our Board of Trustees act in the way that they consider, in good faith, what would be most likely to promote International Medical Corps (UK)'s impact for our beneficiaries, whilst considering the long-term effect of decisions on International Medical Corps (UK)'s stakeholders, including its beneficiaries, employees, suppliers, partners, the communities with which it works and their environment.

Engagement with employees.

International Medical Corps (UK)'s internal stakeholders are its employees. Enhancing employee engagement is an integral part of the culture of the Charity and its implementing affiliates. Senior management are actively

involved in the engagement of colleagues through regular electronic communications, staff meetings and periodic Town Hall meetings that include employees working across the world. The trustees receive updates on employee matters from the Managing Director during board meetings. International Medical Corps (UK) undertakes regular salary reviews to ensure that salaries for the UK contracted staff are competitive within the sector in the UK.

Engagement with Other Stakeholders

- our beneficiaries. As a recognised first responder, we provide emergency relief, often within hours, to those hit by disaster, disease and conflict, no matter where they are, no matter what the conditions. International Medical Corps (UK) continuously monitors programme activities through effective internal reporting. We have a strict Code of Conduct and safeguarding processes in place to ensure the security and safety of our beneficiaries.
- our partners in project delivery. Our partnerships are critical to ensuring that we deliver programmes in the most hard-to-reach locations. We collaborate with other international and local NGOs when these partnerships bring greater benefits to the people we serve.
- our supporters and donors. Our donors are primarily institutional, including the UK Foreign, Commonwealth and Development Office (FCDO), UN agencies, Global Affairs Canada and many others. We are committed to delivering timely, high-quality, lifesaving humanitarian assistance, and to reporting on the impact of our work. We report to our donors, and publicise our work on our website, social media and other platforms.
- our suppliers. We are committed to eradicating modern slavery and trafficking in persons and engage with our suppliers to promote the highest standards.
- our wider communities and the environment. Our policies and procedures include safe environmental protection in the different countries where we work. Our programmes aim to reduce excess morbidity and mortality associated with potential exposure to environmental factors. For example, on a project-by-project basis, our teams assess the risks associated with healthcare waste and with the disposal of expired medicines.

INTERNATIONAL MEDICAL CORPS (UK) PLANS FOR 2025/2026

International Medical Corps (UK) plans are to:

1. expand opportunities for applied research to improve the impact of providing healthcare for vulnerable communities, in line with its mission;
2. achieve institutional income of \$139 million during the 12-month period to 30 June 2026;
3. continue to expand the organisation's number of partnerships and non-traditional donors;
4. expand the organisation's global profile through increased awareness of its activities;
5. review and strengthen current internal processes employed by its US affiliate, with a view to increasing organisational efficiency; and
6. continue to work with its US affiliate to apply new technology and systems that mitigate risks specific to the sector in general.

The Trustees' Report incorporating the strategic report is approved by the trustees and signed on their behalf by:



Approved by the Board Of Trustees on:

15 December 2025

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF INTERNATIONAL MEDICAL CORPS (UK)

OPINION

We have audited the financial statements of International Medical Corps (UK) (the 'charitable company') for the year ended 30 June 2025 which comprise the statement of financial activities, the balance sheet, and statement of cash flows, the principal accounting policies and the notes to the financial statements. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 30 June 2025 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

BASIS FOR OPINION

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

CONCLUSIONS RELATING TO GOING CONCERN

In auditing the financial statements, we have concluded that the trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast

significant doubt on the charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the trustees with respect to going concern are described in the relevant sections of this report.

OTHER INFORMATION

The trustees are responsible for the other information. The other information comprises the impact report for International Medical Corps and its affiliates worldwide included in pages 6 to 27, together with information included in the trustees' report, including the strategic report other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

OPINIONS ON OTHER MATTERS PRESCRIBED BY THE COMPANIES ACT 2006

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the trustees' report, which is also the directors' report for the purposes of company law and includes the strategic report, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the trustees' report, which is also the directors' report for the purposes of company law and

includes the strategic report, has been prepared in accordance with applicable legal requirements.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' report including the strategic report. We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

RESPONSIBILITIES OF TRUSTEES

As explained more fully in the trustees' responsibilities statement, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in

the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

- the engagement partner ensured that the engagement team collectively had the appropriate competence, capabilities, and skills to identify or recognise non-compliance with applicable laws and regulations;
- we identified the laws and regulations applicable to the charitable company through discussions with management and from our knowledge and experience of the charity sector;
- we focused on specific laws and regulations in both the UK and overseas, which we considered may have a direct material effect on the financial statements or the activities of the charitable company. These included but were not limited to the Charities Act 2011, the Companies Act 2006, Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable to the United Kingdom and Republic of Ireland (FRS 102) (effective 1 January 2019);
- we have assessed the processes in place to ensure that the implementors of programmes are aware of and comply with UK laws and regulations;
- we have assessed the processes in place to ensure that in country laws and regulations are followed; and
- we assessed the extent of compliance with the laws and regulations identified above through making enquiries of management and review of minutes of trustees' meetings.

We assessed the susceptibility of the charitable company's financial statements to material misstatement, including obtaining an understanding of how fraud might occur, by:

- making enquiries of management as to where they considered there was susceptibility to fraud,
- their knowledge of actual, suspected, and alleged fraud; and
- considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations.

To address the risk of fraud through management bias and override of controls, we:

- performed analytical procedures to identify any unusual or unexpected relationships;
- tested and reviewed journal entries to identify unusual transactions;
- tested the authorisation of expenditure;
- assessed whether judgements and assumptions made in determining the accounting estimates were indicative of potential bias; and
- investigated the rationale behind significant or unusual transactions.

In response to the risk of irregularities and noncompliance with laws and regulations, we designed procedures which included, but were not limited to:

- agreeing financial statements disclosures to underlying supporting documentation;
- reading the minutes of meetings of trustees; and
- enquiring of management as to actual and potential litigation and claims.

There are inherent limitations in our audit procedures described above. The more removed that laws and regulations are from financial transactions, the less likely it is that we would become aware of non-compliance. Auditing standards also limit the audit procedures required to identify non-compliance with laws and regulations to enquiry of the trustees and other management and the inspection of regulatory and legal correspondence, if any.

Material misstatements that arise due to fraud can be harder to detect than those that arise from error as they may involve deliberate concealment or collusion.

A further description of our responsibilities is available on the Financial Reporting Council's website at www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

USE OF OUR REPORT

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Buzzacott Audit LLP

Catherine Biscoe (Senior Statutory Auditor)

Date: 16 December 2025

For and on behalf of Buzzacott Audit LLP, Statutory Auditor
130 Wood Street
London
EC2V 6DL

**STATEMENT OF FINANCIAL ACTIVITIES INCLUDING
THE INCOME AND EXPENDITURE ACCOUNT
FOR THE YEAR ENDED 30 JUNE 2025**

	Notes	Unrestricted funds \$	Restricted funds \$	2025 Total funds \$	Unrestricted funds \$	Restricted funds \$	2024 Total funds \$
Income and expenditure							
Income from:							
Donations and legacies	1	69,896	57,249,660	57,319,556	1,741,342	21,026,182	22,767,524
Charitable activities	2	–	119,154,087	119,154,087	–	100,502,430	100,502,430
Total income		69,896	176,403,747	176,473,643	1,741,342	121,528,612	123,269,954
Expenditure on:							
Raising funds	3	34,383	–	34,383	8,465	672	9,137
Charitable activities	4	141,535	164,591,761	164,733,296	1,452,688	134,065,763	135,518,451
Total expenditure		175,918	164,591,761	164,767,679	1,461,153	134,066,435	135,527,588
Net income/(expenditure)		(106,022)	11,811,986	11,705,964	280,189	(12,537,823)	(12,257,634)
Net movement in funds		(106,022)	11,811,986	11,705,964	280,189	(12,537,823)	(12,257,634)
Fund balances brought forward							
at 1 July 2024		1,166,039	16,909,499	18,075,538	885,850	29,447,322	30,333,172
Fund balances carried forward							
at 30 June 2025		1,060,017	28,721,485	29,781,502	1,166,039	16,909,499	18,075,538

All of the Charity's activities derived from continuing operations during the above two financial periods.

The Charity has no recognised gains and losses other than those shown above.

BALANCE SHEET AS AT 30 JUNE 2025

	Notes	2025 \$	2025 \$	2024 \$	2024 \$
Fixed Assets					
Tangible assets	8		23,487		50,092
Current assets					
Stock	9	747,195		1,325,503	
Debtors	10	6,716,015		8,140,497	
Cash at bank and in hand		22,585,517		8,818,268	
		30,048,727		18,284,268	
Creditors: amounts falling due within one year	11	(290,712)		(258,822)	
Net current assets			29,758,015		18,025,446
Total net assets			29,781,502		18,075,538
The funds of the charity					
Restricted funds	12		28,721,485		16,909,499
Unrestricted funds			1,060,017		1,166,039
			29,781,502		18,075,538

Approved by the trustees and signed on their behalf by:

Andrew Géczy, Chair



Approved on: 15 December 2025

International Medical Corps (UK): A company limited by guarantee, Company Registration No. 04474904 (England and Wales)

STATEMENT OF CASH FLOWS

YEAR TO 30 JUNE 2025

	Notes	2025	2024
		\$	\$
Cash flows from operating activities:			
Net cash provided by / (used in) operating activities	A	13,777,939	(9,220,066)
Cash flows from investing activities:			
Purchase of tangible fixed assets		(10,690)	(17,284)
Net cash used in investing activities		(10,690)	(17,284)
Change in cash and cash equivalents in the year		13,767,249	(9,237,350)
Cash and cash equivalents at 1 July 2024	B	8,818,268	18,055,618
Cash and cash equivalents at 30 June 2025	B	22,585,517	8,818,268

Notes to the statement of cash flows for the year to 30 June 2025

A Reconciliation of net movement in funds to net cash used in operating activities

	2025	2024
	\$	\$
Net movement in funds (as per the statement of financial activities)		
Net movement in funds (as per the statement of financial activities)	11,705,964	(12,257,633)
Adjustments for:		
Depreciation charge	37,297	38,041
Decrease in stocks	578,308	699,792
Decrease in debtors	1,424,480	2,305,999
Increase/(decrease) in creditors	31,890	(6,265)
Net cash provided by / (used in) operating activities	13,777,939	(9,220,066)

B Analysis of cash and cash equivalents

	2025	2024
	\$	\$
Cash at bank and in hand		
Cash at bank and in hand	22,585,517	8,818,268
Total cash and cash equivalents	22,585,517	8,818,268

PRINCIPAL ACCOUNTING POLICIES

30 JUNE 2025

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are laid out below.

BASIS OF PREPARATION

These financial statements have been prepared for the year to 30 June 2025.

The financial statements have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant accounting policies below or the notes to these financial statements.

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) (Charities SORP FRS 102) (effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

The accounts are presented in US dollars and rounded to the nearest dollar. The charity constitutes a public benefit entity as defined by FRS 102.

CRITICAL ACCOUNTING ESTIMATES AND AREAS OF JUDGEMENT

Preparation of the financial statements requires the trustees to make significant judgements and estimates.

The items in the financial statements where these judgements and estimates have been made include:

- the estimation of the value of donated goods distributed in the year and undistributed at the year-end.
- the estimation of the recoverability of accrued income balances.
- the estimation of unrealised foreign exchange difference.
- the treatment of intercompany balances with the charity's implementing affiliates.

ASSESSMENT OF GOING CONCERN

The trustees have assessed whether the use of the going-concern assumption is appropriate in preparing these financial statements. The trustees have made this assessment in respect of a period of one year from the date of approval of these financial statements.

The Charity has free reserves of \$1,036,530 (2024: \$1,115,947), which is as per the reserves policy. The trustees have continued to use the going-concern assumption based on the relationship with its affiliate to cover programme funding gaps and provide cash-flow bridging. The trustees are of the opinion that the charity will have sufficient resources to meet its liabilities as they fall due.

INCOME

Income is recognised in the statement of financial activities when the charity is entitled to the income, the amount can be measured with accuracy and it is probable that the income will be received.

Donations and gifts in kind are included in full in the statement of financial activities when receivable.

Grants receivable are credited to the statement of financial activities in the year in which they are receivable.

DONATED GOODS AND SERVICES

Donated goods, typically comprising medical and food supplies, are recognised as income when the goods are received. Amounts are included in expenditure when the goods are distributed. The balance of goods received but not distributed are included as a stock balance at the year end.

Food and other non-pharmaceutical stocks are valued according to the value placed on the items by the donor.

Pharmaceutical goods received are accounted for at fair value to the Charity with reference to market sources.

EXPENDITURE AND THE BASIS OF APPORTIONING COSTS

Expenditure is included in the statement of financial activities when incurred and includes attributable VAT, which cannot be recovered.

Expenditure comprises the following:

- a) costs of raising funds include the salaries, direct costs and overheads with generating donated income.
- b) costs of charitable activities comprise expenditure on the charity's primary charitable purposes as described in the trustees' report. Such costs include:
 - i. technical advisory services
 - ii. programme management services
 - iii. gifts in kind of donated goods and services
- c) support costs comprise the costs incurred by finance, human resources, communications and IT departments, and the trustee costs, which are directly attributable to the management of the Charity's assets, organisational procedures and the necessary legal procedures for compliance with statutory requirements.

TANGIBLE FIXED ASSETS

Items of equipment are capitalised when the purchase price exceeds \$500. Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets capitalised are reviewed for impairment if circumstances indicate that their carrying value may exceed their net realisable value and value in use.

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life:

- computers – three years
- furniture, fixtures and fittings – five years
- servers – five years

Vehicles and equipment for use in overseas operational programmes are not capitalised but charged in full to expenditure when purchased. This is because the expected useful life is significantly reduced in such programmes and is generally less than one year for the majority of these assets.

FUND ACCOUNTING

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund together with a fair

allocation of management and support costs.

Unrestricted funds are donations and other income raised for the objects of the charity.

OTHER OPERATIONAL CURRENCIES

Transactions in US dollars are recorded at transaction value, with no exchange-rate gain or loss. Transactions in other operational currencies are recorded at the calculated monthly average rate. Monetary assets and liabilities are retranslated at the rate of exchange ruling at the balance sheet date. Differences arising on retranslation are charged to the statement of financial activities.

LEASED ASSETS

Rentals payable under operating leases, where substantially all the risks and reward of ownership remain with the lessor, are charged to the statement of financial activities over the period of the lease term.

PENSION COSTS

International Medical Corps (UK) sponsors a group personal pension plan. All eligible employees can participate in the scheme and contributions are based on a percentage of annual gross salary.

International Medical Corps (UK) contributes between 4% to 10% of eligible employees' gross earnings. Employees are immediately fully vested in contributions made on their behalf. The Charity is fully staged in its auto-enrolment obligations. Employees make additional contributions to meet legal requirements and should they wish to do so. Pension costs represent the employer's contributions payable during the year.

DEBTORS

Debtors are recognised at their settlement amount, less any provision for non-recoverability. Prepayments are valued at the amount prepaid. They have been discounted to the present value of the future cash receipt where such discounting is material.

CASH AT BANK AND IN HAND

Cash at bank and in hand represents such accounts and instruments that are available on demand or have a maturity of less than three months from the date of acquisition. Deposits for more than three months but less than one year have been disclosed as short-term deposits. Cash placed on deposit for more than one year is disclosed as a fixed asset investment.

CREDITORS AND PROVISIONS

Creditors and provisions are recognised when there is an obligation at the balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Creditors and provisions are recognised at the amount the charity anticipates it will pay to settle the debt. They have been discounted to the present value of the future cash payment where such discounting is material.

FINANCIAL INSTRUMENTS

The Charity has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the charity's balance sheet when the Charity becomes party to the contractual provisions of the instrument.

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

BASIC FINANCIAL ASSETS

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price, including transaction costs, and are subsequently carried at amortised cost using the effective interest method, unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts, discounted at a market rate of interest, if material. Financial assets classified as receivable within one year are not amortised.

BASIC FINANCIAL LIABILITIES

Basic financial liabilities, including creditors, bank loans, loans from fellow group companies. Financial liabilities classified as payable within one year are not amortised.

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of business from suppliers. Amounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

NOTES TO THE FINANCIAL STATEMENTS

YEAR TO 30 JUNE 2025

1 Donations and legacies

	Unrestricted funds \$	Restricted funds \$	2025 Total \$
Donation from International Medical Corps	–	2,079,752	2,079,752
Restricted Donations	–	40,749	40,749
Other Unrestricted Donations	44,693	–	44,693
Donated supplies	–	55,063,923	55,063,923
Donated services	–	65,236	65,236
Interest Income	25,203	–	25,203
2025 Total funds	69,896	57,249,660	57,319,556

	Unrestricted funds \$	Restricted funds \$	2024 Total \$
Donation from International Medical Corps	1,539,048	380,520	1,919,568
Restricted Donations	–	1,155,392	1,155,392
Other Unrestricted Donations	62,581	–	62,581
Donated supplies	–	19,490,270	19,490,270
Donated services	111,481	–	111,481
Interest Income	28,232	–	28,232
2024 Total funds	1,741,342	21,026,182	22,767,524

2 Income from charitable activities

	Unrestricted funds \$	Restricted funds \$	2025 Total \$
Strengthening health capacity	—	40,323,816	40,323,816
Emergency response and preparedness	—	40,386,598	40,386,598
Mental health and psychosocial support	—	3,079,123	3,079,123
Women & children's health	—	18,188,396	18,188,396
Water, sanitation and hygiene	—	8,667,296	8,667,296
Nutrition and food security	—	8,508,858	8,508,858
2025 Total funds	—	119,154,087	119,154,087

	Unrestricted funds \$	Restricted funds \$	2024 Total \$
Strengthening health capacity	—	35,087,033	35,087,033
Emergency response and preparedness	—	36,180,602	36,180,602
Mental health and psychosocial support	—	2,810,283	2,810,283
Women & children's health	—	10,059,754	10,059,754
Water, sanitation and hygiene	—	6,364,109	6,364,109
Nutrition and food security	—	10,000,649	10,000,649
2024 Total funds	—	100,502,430	100,502,430

3 Expenditure on raising funds

	Unrestricted funds \$	Restricted funds \$	2025 Total \$
Fundraising staff costs	—	—	—
Other fundraising costs	34,383	—	34,383
2025 Total funds	34,383	—	34,383

	Unrestricted funds \$	Restricted funds \$	2024 Total \$
Fundraising staff costs	—	—	—
Other fundraising costs	8,465	672	9,137
2024 Total funds	8,465	672	9,137

4 Expenditure on charitable activities

	Unrestricted funds \$	Restricted funds \$	2025 Total \$
Strengthening health capacity	28,935	33,648,148	33,677,083
Emergency response and preparedness	32,525	37,823,502	37,856,027
Mental health and psychosocial support	2,588	3,009,575	3,012,163
Women & children's health	13,646	15,869,511	15,883,157
Water, sanitation and hygiene	8,880	10,326,432	10,335,312
Nutrition and food security	54,961	63,914,593	63,969,554
2025 Total funds	141,535	164,591,761	164,733,296

	Unrestricted funds \$	Restricted funds \$	2024 Total \$
Strengthening health capacity	411,412	37,968,389	38,379,801
Emergency response and preparedness	497,704	45,932,166	46,429,870
Mental health and psychosocial support	54,375	5,018,179	5,072,554
Women & children's health	129,295	11,932,380	12,061,675
Water, sanitation and hygiene	69,530	6,416,795	6,486,325
Nutrition and food security	290,372	26,797,854	27,088,226
2024 Total funds	1,452,688	134,065,763	135,518,451

4 Charitable activities (continued)

Support costs are allocated to projects in line with the level of direct expenditure as this best reflects the level of support required by each project.

Costs of charitable activities can further be analysed as follows:

	Activities undertaken directly \$	Support costs \$	2025 Total \$
Staff costs	36,146,488	2,646,579	38,793,067
Donated supplies and services	55,707,466	—	55,707,466
Auditor's remuneration			
• Statutory audit	—	63,143	63,143
Other costs	63,599,149	6,570,471	70,169,620
2025 Total	155,453,103	9,280,193	164,733,296

	Activities undertaken directly \$	Support costs \$	2024 Total \$
Staff costs	41,940,582	2,526,379	44,466,961
Donated supplies and services	20,301,543	—	20,301,543
Auditor's remuneration			
• Statutory audit	—	54,999	54,999
Other costs	64,525,231	6,169,717	70,694,948
2024 Total	126,767,356	8,751,095	135,518,451

4 Charitable activities (continued)

	Activities undertaken directly \$	Support costs \$	2025 Total \$
Strengthening health capacity	31,779,897	1,897,186	33,677,083
Emergency response and preparedness	35,723,421	2,132,606	37,856,027
Mental health and psychosocial support	2,842,473	169,690	3,012,163
Women & children's health	14,988,385	894,772	15,883,157
Water, sanitation and hygiene	9,753,076	582,236	10,335,312
Nutrition and food security	60,365,851	3,603,703	63,969,554
2025 Total funds	155,453,103	9,280,193	164,733,296

	Activities undertaken directly \$	Support costs \$	2024 Total \$
Strengthening health capacity	35,901,428	2,478,373	38,379,801
Emergency response and preparedness	43,431,664	2,998,206	46,429,870
Mental health and psychosocial support	4,744,994	327,560	5,072,554
Women & children's health	11,282,793	778,882	12,061,675
Water, sanitation and hygiene	6,067,471	418,854	6,486,325
Nutrition and food security	25,339,006	1,749,220	27,088,226
2024 Total funds	126,767,356	8,751,095	135,518,451

5 Employees and staff costs

Staff costs during the year were as follows:

	2025 Total \$	2024 Total \$
Wages and salaries	2,216,897	2,181,058
Social security costs	221,346	222,363
Other pension costs	201,844	122,958
Severance costs	6,492	–
Total UK staff costs	2,646,579	2,526,379
International Medical Corps Worldwide on International Medical Corps (UK) projects	36,146,488	41,940,582
Total staff costs	38,793,067	44,466,961

The average number of employees during the year, analysed by function, was as follows:

	2025 No	2024 No
UK Staff	34	33

5 Employees and staff costs (continued)

International Medical Corps (UK) contributes towards the salaries of a number of staff overseas and on local projects. Such staff may have only part of their salaries charged to projects; however, it is not meaningful to provide a full-time equivalent figure. The estimated number of such staff employed in the year was 1,541 (2024 - 2,538).

The number of employees who earned £60,000 or more (including taxable benefits but excluding employer pension contributions) during the year was as follows:

	2025 No	2024 No
£60,000 – £70,000	3	–
£70,001 – £80,000	–	2
£80,001 - £90,000	2	2
£90,001 - £100,000	2	2
£100,001 - £110,000	2	1
£150,001 - £160,000	–	1

Key management personnel comprise those set out on page 33. The total remuneration paid to key management personnel in the year was \$534,480 (2024 - \$691,617).

	2025 \$	2024 \$
Wages and salaries	406,027	569,251
Social security costs	51,150	72,107
Employer pension costs	77,303	50,259
Total costs	534,480	691,617

6 Trustees' remuneration

None of the trustees received any remuneration in respect of their services during either of the years under review.

No trustees expenses were incurred during the period (2024 - nil).

7 Taxation

International Medical Corps (UK) is a registered charity and therefore is not liable to corporation tax on income or capital gains derived from its charitable activities or use of assets, as it falls within the various exemptions available to registered charities.

The Charity is not registered for VAT and, accordingly, all expenditure is recorded inclusive of any VAT incurred.

8 Tangible fixed assets

	Office equipment	\$
Cost		
Total cost at 1 July 2024		219,045
Additions		10,690
Disposals		(72,116)
Total cost and 30 June 2025		157,619
Depreciation		
Aggregate depreciation as at 1 July 2024		168,953
Charge for the year		37,296
Disposals		(72,117)
Aggregate depreciation as at 30 June 2025		134,132
Net book values		
As at 30 June 2025		23,487
As at 30 June 2024		50,092

9 Stocks

	2025	2024
	\$	\$
Donated goods received but not distributed	747,195	1,325,503

10 Debtors

	2025	2024
	\$	\$
Due within one year		
Prepayments and deposits	102,969	91,487
Accrued income	5,402,778	7,618,150
Other debtors – Accounts Receivable	–	1,105
Amount receivable from International Medical Corps Croatia	26,992	25,580
Amount receivable from International Medical Corps	1,180,543	397,925
Emergency response stock	2,733	6,250
	6,716,015	8,140,497

11 Creditors: amounts falling due within one year

	2025 \$	2024 \$
Trade creditors	16,748	43,050
Accruals	273,964	215,772
	290,712	258,822

12 Restricted funds

The funds of the Charity include restricted funds comprising the following unexpended balances of donations held on trusts for specific purposes:

	At 1 July 2024 \$	Income \$	Expenditure \$	At 30 June 2025 \$
Strengthening health capacity	5,532,988	40,787,013	32,965,381	13,354,620
Emergency response and preparedness	4,284,517	41,072,902	37,056,010	8,301,409
Mental health & psychosocial support	548,742	3,090,448	2,948,506	690,684
Women & children's health	514,980	19,377,293	15,547,496	4,344,777
Water, sanitation and hygiene	1,451,930	8,990,305	10,116,895	325,340
Nutrition and food security	2,032,797	60,900,049	62,617,677	315,169
Restricted by country	2,543,545	2,185,737	3,339,796	1,389,486
	16,909,499	176,403,747	164,591,761	28,721,485

Restricted funds are analysed by the type of activity to which the funds relate. All restricted funds are held to carry out activities under these headings.

13 Analysis of net assets between funds

	Unrestricted funds \$	Restricted funds \$	Total 2025 \$
<i>Fund balances at 30 June 2025 are represented by:</i>			
Fixed assets	23,487	—	23,487
Current assets	1,036,530	29,012,197	30,048,727
Creditors: amounts falling due within one year	—	(290,712)	(290,712)
2025 Total net assets	1,060,017	28,721,485	29,781,502

	Unrestricted funds \$	Restricted funds \$	Total 2024 \$
<i>Fund balances at 30 June 2024 are represented by:</i>			
Fixed assets	50,092	—	50,092
Current assets	1,115,947	17,168,321	18,284,268
Creditors: amounts falling due within one year	—	(258,822)	(258,822)
2024 Total net assets	1,166,039	16,909,499	18,075,538

14 International Medical Corps (UK) flagship areas

International Medical Corps (UK) continued to operate during the financial year to 30 June 2025 under the main flag ship areas of strengthening health capacity, emergency response and preparedness, mental health & psychosocial support, women and children's health, water, sanitation and hygiene (WASH) and nutrition and food security.

15 Related party transactions

On 1 July 2023 International Medical Corps (UK) renewed its new Administrative Services Agreement with International Medical Corps, a US-based non-profit organisation to share certain services in connection with its operations. International Medical Corps agreed to assist International Medical Corps (UK) in the achievement of its charitable objectives: to relieve suffering, sickness and poverty throughout the world by providing medical aid, healthcare training and healthcare projects.

On 1 July 2019 International Medical Corps (UK) entered into an Administrative Services Agreement with International Medical Corps Croatia, a Croatian based non-profit organisation, to share certain services in connection with its operations.

Given the close operating relationship between International Medical Corps and International Medical Corps (UK) there are a number of connected persons between the two organisations at trustee level. These connected persons include Nancy A Aossey, who is a founding Trustee of International Medical Corps (UK), and the President and CEO of International Medical Corps, as well as a member of its board. C. William Sundblad, a Trustee of International Medical Corps (UK) is also the Chief Knowledge Officer of International Medical Corps.

During the year ended 30 June 2025 International Medical Corps billed International Medical Corps (UK) \$7,841,155 (2024: \$7,246,146) in lieu of Service fee as per Article 5 of the Administrative Services Agreement. During the same period, International Medical Corps (UK) has rendered services to International Medical Corps of \$978,241 (2024: \$1,054,335).

During the year ended 30 June 2025 International Medical Corps Croatia billed International Medical Corps (UK) \$64,588 (2024: \$56,132). During the same period International Medical Corps (UK) has rendered services to International Medical Corps Croatia of \$306,874 (2024: \$256,121).

16 Liability of members

The charity is constituted as a company limited by guarantee. Each member has undertaken to contribute £1 to the assets of the company to meet its liabilities if called on to do so.

17 Contingent liability

Due to the nature of the Charity's agreement with donors, the Charity's expenditure is often subject to audit or other review by representatives of donors in a subsequent accounting period. There is a possibility that these audits or reviews would identify expenditure that does not fall within the terms of the grant agreements, and so the Charity would be required to repay the monies received. The trustees are not aware of any material circumstances in the year to 30 June 2025 that could give raise to such liability (2024: none).

18 Operating leases

The total of future minimum lease payments under non-cancellable operating leases is as follows:

	Land and buildings \$	Equipment \$	Total 2025 \$
Due within one year	85,170	854	86,024
Due between 2 and 5 years	–	–	–
	85,170	854	86,024

	Land and buildings \$	Equipment \$	Total 2024 \$
Due within one year	77,611	1,576	79,187
Due between 2 and 5 years	16,576	788	17,364
	94,187	2,364	96,551

CHARITABLE ACTIVITIES DETAILED ANALYSIS FOR THE YEAR ENDED 30 JUNE 2025

The following pages (pages 66-73) do not form part of the statutory financial statements.

For certain projects, closeout adjustments have resulted in negative charitable Income and expenditure adjustments

PROJECTS CATEGORISED UNDER STRENGTHENING HEALTH CAPACITY

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	UNOCHA	204439	(15,039)	120
Afghanistan	UNOCHA	204483	(12,826)	(12,826)
Afghanistan	UNOCHA	204558	(12,319)	(12,319)
Afghanistan	UNOCHA	204772	(29,702)	(29,701)
Central African Republic	EC	204406	1,778,353	1,145,933
Central African Republic	Ministry of Health CAR	204819	-	80,243
Central African Republic	UNOCHA	204248	(3,853)	(3,853)
Central African Republic	UNOCHA	204416	(73)	-
Central African Republic	WV	204891	1,401,611	1,249,135
Democratic Rep of Congo	LDS	204790	-	358,687
Democratic Rep of Congo	Save the Children	204571	466,610	466,610
Ethiopia	GAC	204636	(54)	(5,362)
Global	UNICEF	204747	121,594	121,594
Global	UNICEF	205134	1,531	1,531
Global ERU	KSRelief	204533	-	-
Iraq	French MOFA	204808	457	3,534,031
Iraq	French MOFA	205091	2,184,600	589,237
Jordan	UNHCR	204563	(7)	37
Jordan	UNHCR	204812	5,883,727	5,883,727
Jordan	UNHCR	205029	7,088,529	4,534,583
Jordan	UNICEF	204811	403,272	403,272
Lebanon	EC	203528	(5,155)	(5,155)
Lebanon	EC	203696	(727)	(727)
Lebanon	GAC	204375	(454)	-
Lebanon	GAC	204914	1,880,125	1,098,086
Mali	ACF Spain	203973	(4,975)	-
Mali	UNFPA	204850	570,639	648,959
Mali	UNICEF	204504	-	188,263
Pakistan	IOM	204960	136,301	136,301
Somalia	ACF US	205142	22,717	-
Somalia	KSRelief	205013	388,000	129,404
South Sudan	Columbia University	203426	(1,253)	(1,253)
South Sudan	Crown Agents	203050	(3,283)	(3,283)

PROJECTS CATEGORISED UNDER STRENGTHENING HEALTH CAPACITY (CONTD.)

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
South Sudan	Crown Agents	203051	(7,109)	(7,109)
South Sudan	Crown Agents	203052	(5,890)	(5,890)
South Sudan	Crown Agents	203053	(2,911)	(2,911)
South Sudan	Crown Agents	203116	(7,666)	(7,666)
South Sudan	Crown Agents	203117	-	(22,441)
South Sudan	Crown Agents	203118	-	(24,356)
South Sudan	Crown Agents	203119	-	(13,589)
South Sudan	Crown Agents	203149	-	(10,460)
South Sudan	Crown Agents	203259	(1,409)	(1,409)
South Sudan	Crown Agents	203260	(5,280)	(5,280)
South Sudan	Crown Agents	203261	(3,238)	(3,238)
South Sudan	Crown Agents	203262	(3,488)	(3,488)
South Sudan	Crown Agents	203263	(3,412)	(3,412)
South Sudan	ECHO	203424	-	(88,709)
South Sudan	KIT	202236	-	(20,638)
South Sudan	UNDP	203120	(1,502)	(1,502)
South Sudan	UNDP	203463	(2,515)	(2,515)
South Sudan	UNFPA	203060	-	(143,349)
South Sudan	UNFPA	205053	589,240	517,434
South Sudan	UNHCR	203308	-	(10,190)
South Sudan	UNICEF	202887	(1,008)	(1,008)
South Sudan	UNICEF	203432	(3,922)	(3,922)
South Sudan	UNOCHA	205034	506,472	379,992
Sudan	Save the Children	205038	375,163	375,163
Sudan	UNOCHA	204494	(15,599)	-
Sudan	UNOCHA	204733	392,239	622,279
Sudan	UNOCHA	204873	154,066	693,556
Syria	DAHW	205022	626,840	626,840
Syria	DRC	204880	949,675	949,675
Syria	DRC	205033	762,581	314,345
Syria	DRC	205064	236,545	127,640
Syria	UNOCHA	205002	305,280	232,101
Ukraine	GAC	204911	4,357,126	2,335,590
Venezuela	LDS	204854	4,498	302,461
Yemen	GAC	204910	1,767,695	832,074
Yemen	MOFAIC	204319	(1,531)	-
Yemen	MOFAIC	204662	7,500,000	4,434,414
Yemen	UNOCHA	204109	(1,637)	(1,637)
Zimbabwe	UNICEF	204856	89,369	111,267
Total Strengthening health capacity			40,787,018	32,965,386

PROJECTS CATEGORISED UNDER EMERGENCY RESPONSE AND PREPAREDNESS

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Cameroon	UNHCR	204566	-	13,805
Cameroon	UNHCR	205042	884,135	466,322
Central African Republic	French MOFA	204951	110,690	110,690
Central African Republic	UNOCHA	204527	(1,504)	-
Democratic Rep of Congo	LDS Charities Australia	205008	80,000	80,000
Democratic Rep of Congo	UNOCHA	204947	750,000	715,366
Ethiopia	GAC	204912	2,634,892	1,576,560
Ethiopia	MCMDO	204958	195,395	194,321
Ethiopia	UNOCHA	204907	1,130,917	1,130,917
Ethiopia	UNOCHA	204948	804,054	512,845
Ethiopia	UNOCHA	204999	707,518	707,254
Global	French MOFA	204529	(6,842)	249
Global ERU	KSRelief	204898	(1,234,552)	8,300
Iraq	FCDO	204620	17,644,283	17,745,637
Iraq	French MOFA	204564	(370)	-
Jamaica	LDS Charities Australia	204959	300,000	222,337
Lebanon	LDS Charities Australia	204985	300,000	293,813
Libya	LDS	204726	-	85,888
Libya	ZOA Netherlands	204766	(920)	(920)
Libya	ZOA Netherlands	204968	186,500	186,500
Middle East	Donor A	204689	(8,391)	-
Middle East	GAC	204378	(2,547)	3
Middle East	Plan Int. Australia	204634	(13)	15,728
Morocco	LDS	204744	-	-
Myanmar	LDS Charities Australia	205107	300,000	-
Palestinian Territory	Donor B	205075	999,000	126,031
Palestinian Territory	Donor 5	205021	36,752	18,054
Palestinian Territory	KSRelief	204898	494,740	494,740
Palestinian Territory	LDS	205084	1,000,000	487
Palestinian Territory	LDS Charities Australia	204885	-	602,940
Palestinian Territory	Donor C	205024	48,830	48,657
Palestinian Territory	RCSI	205005	311,910	-
Somalia	ACF US	204770	91,972	91,607
Somalia	ACF US	205009	395,853	395,853
South Sudan	ECHO	203047	-	(173,207)

PROJECTS CATEGORISED UNDER EMERGENCY RESPONSE AND PREPAREDNESS (CONTD.)

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
South Sudan	UNDP	203078	-	(15,407)
South Sudan	UNDP	203255	(7,395)	(7,395)
South Sudan	UNDP	203632	(910)	(910)
South Sudan	UNFPA	203054	-	(56,336)
South Sudan	UNICEF	203128	(2,776)	(2,776)
South Sudan	UNICEF	204577	16,693	16,693
South Sudan	UNOCHA	204675	(657)	-
South Sudan	UNOCHA	204696	113,002	113,002
South Sudan	UNOCHA	204838	(12,395)	76,375
Sudan	CDCS	204991	861,993	616,892
Sudan	KSRelief	204898	499,412	499,412
Sudan	LDS	204679	(267)	97,787
Sudan	LDS Charities Australia	205098	1,000,000	93,822
Syria	Donor A	204688	8,196	12,269
Syria	DAHW	204705	272,110	429,444
Syria	FCDO	204620	7,643,213	7,643,213
Syria	GAC	204378	(57)	(57)
Syria	LDS	204594	(758)	7,674
Ukraine	AstraZeneca	204965	200,000	200,000
Ukraine	LDS	204637	-	55,924
Ukraine	LDS Charities Australia	205039	300,000	257,287
US&T - Continental US	LDS	204746	-	76,361
US&T - Continental US	LDS	204974	300,000	300,000
US&T - Continental US	LDS	205006	300,000	64,266
US&T - Continental US	LDS	205049	300,000	246,668
US&T - Puerto Rico	LDS	204941	300,000	260,418
Venezuela	LDS Charities Australia	205015	300,000	164,800
Venezuela	LDS Charities Australia	205102	300,000	-
Yemen	GAC	204374	(7,361)	(122)
Yemen	KSRelief	204898	240,400	240,400
Yemen	UNOCHA	203868	(7,137)	(7,137)
Yemen	UNOCHA	204245	-	(2,629)
Yemen	UNOCHA	205129	5,297	5,297
Total Emergency response and preparedness			41,072,905	37,056,012

PROJECTS CATEGORISED UNDER MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	WHO	204933	789,589	789,589
Afghanistan	WHO	204953	379,228	378,224
Jordan	KSRelief	204694	50,953	152,519
Pakistan	GIZ	204731	324,245	384,615
Pakistan	IOM	205113	67,328	36,322
Pakistan	UNHCR	204809	329,908	443,433
Pakistan	UNHCR	205041	317,437	317,437
Ukraine	GIZ	205018	831,760	194,383
Ukraine	LDS	204813	-	251,984
Total Mental Health and Psychosocial Support			3,090,448	2,948,506

PROJECTS CATEGORISED UNDER WATER, SANITATION AND HYGIENE

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	Islamic Development Bank	204649	(9,863)	2
Afghanistan	LDS Charities Australia	204934	300,000	296,834
Ethiopia	UNHCR	204822	1,792,409	1,147,177
Ethiopia	UNHCR	204824	526,545	452,885
Ethiopia	UNHCR	204825	3,511,003	2,806,842
Ethiopia	UNHCR	205060	569,761	1,436,325
Ethiopia	UNHCR	205061	255,567	954,798
Ethiopia	UNHCR	205062	39,389	99,272
Ethiopia	UNICEF	205025	505,812	313,584
Libya	GIZ	204433	(32,073)	(32,785)
Libya	UNICEF	204745	-	2,259
Nigeria	UNOCHA	204691	(59,914)	(61)
Pakistan	UNICEF	204785	265,920	268,837
Somalia	UNOCHA	204940	400,000	400,000
South Sudan	UNDP	203230	(5,050)	(5,050)
Syria	UNOCHA	204789	120,000	192,773
Yemen	GCC	205103	147,324	17,294
Yemen	UNOCHA	204117	(268)	(268)
Yemen	UNOCHA	204732	417,944	649,632
Yemen	UNOCHA	204805	190,642	889,736
Zimbabwe	UNICEF	204869	55,155	226,807
Total Water, Sanitation and Hygiene			8,990,305	10,116,893

PROJECTS CATEGORISED UNDER WOMEN & CHILDREN'S HEALTH

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	UNFPA	204814	2,811,110	2,805,411
Afghanistan	UNFPA	205044	2,579,318	2,594,873
Cameroon	UNHCR	204800	738,547	881,421
Cameroon	UNICEF	204771	156,142	222,333
Central African Republic	IRC	204214	(7,373)	(7,373)
Ethiopia	UNFPA	204569	-	(275)
Ethiopia	UNFPA	204837	597,796	597,796
Ethiopia	UNFPA	205063	200,482	171,184
Ethiopia	UNHCR	204823	-	27,502
Jordan	UNICEF	205027	386,177	352,941
Lebanon	French MOFA	204666	(875)	(41)
Lebanon	Plan Int.Australia	204684	(683)	(145)
Mali	GAC	204353	3,956,646	3,290,696
Mali	UNFPA	205083	101,349	101,349
Nigeria	UNICEF	204876	224,939	230,653
Pakistan	IOM	204902	200,498	200,498
Palestinian Territory	UNFPA	205115	312,630	312,630
South Sudan	DFID	202698	-	(10,375)
South Sudan	DFID	203190	-	(379,267)
South Sudan	FCDO	204990	2,800,970	2,507,599
South Sudan	UNDP	203077	(9,957)	(9,957)
South Sudan	UNDP	203461	(9,288)	(9,288)
South Sudan	UNFPA	203307	-	(185,809)
South Sudan	UNFPA	203521	-	(200,115)
South Sudan	UNFPA	204575	-	29
South Sudan	UNFPA	204807	542,664	538,422
South Sudan	UNICEF	203043	-	(15,654)
South Sudan	UNICEF	203163	(3,905)	(3,905)
South Sudan	UNICEF	203580	-	(39,123)
South Sudan	UNICEF	203620	(1,762)	(1,762)
South Sudan	UNICEF	203636	(958)	(958)
South Sudan	UNICEF	204845	425,177	411,126
South Sudan	Private	200029	83,462	83,462
Sudan	UNFPA	205087	193,454	144,947
Syria	GAC	204913	1,645,732	729,426
Yemen	KSRelief	205089	1,455,000	207,247
Total Women and Children's Health			19,377,292	15,547,498

PROJECTS CATEGORISED UNDER NUTRITION AND FOOD SECURITY

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	ACF Canada	204550	42,151	42,151
Cameroon	WFP	204881	272,382	272,382
Cameroon	WFP	205119	36,944	36,944
Chad	WFP	205090	3,094,332	3,094,332
Ethiopia	LDS	204709	-	116,911
Ethiopia	The Power of Nutrition	204681	(1,005)	49,650
Ethiopia	UNICEF	204886	711,578	737,641
Ethiopia	WFP	204030	924,175	991,273
Ethiopia	WFP	204704	10,976,156	11,509,685
Ethiopia	WFP	204851	3,091,859	3,117,285
Ethiopia	WFP	204954	29,828,723	29,803,223
Ethiopia	WFP	204993	1,015,880	1,012,521
Global	ACF Canada	204550	121,549	121,549
Global	ELRHA	204915	19,169	19,169
Jordan	WFP	205003	74,079	74,079
Nigeria	WFP	204648	(293)	(293)
Nigeria	WFP	204840	223,937	215,284
Nigeria	WFP	204841	54,522	54,522
Nigeria	WFP	205072	141,311	141,311
Nigeria	WFP	205073	41,149	41,149
Somalia	UNICEF	204491	389,923	467,221
Somalia	WFP	204872	1,705,456	1,705,456
Somalia	WFP	205096	135,556	135,556
South Sudan	ACF Canada	204550	10,732	10,732
South Sudan	UNDP	202937	(1,105)	(1,105)
South Sudan	UNDP	203145	(7,807)	(7,807)
South Sudan	UNDP	203256	-	(22,002)
South Sudan	UNDP	203429	-	(14,840)
South Sudan	UNDP	203635	(2,781)	(2,781)
South Sudan	UNHCR	203035	(4,668)	(4,668)
South Sudan	UNHCR	203520	-	(12,644)
South Sudan	UNICEF	203155	-	(21,601)
South Sudan	UNICEF	204562	1,882,204	1,818,851
South Sudan	UNICEF	205095	87,534	44,379
South Sudan	WFP	203540	(1,509)	(1,509)
South Sudan	WFP	203544	(1,524)	(1,524)
South Sudan	WFP	203545	(1,052)	(1,052)
South Sudan	WFP	204810	2,249,440	2,167,997
Venezuela	WFP	204767	3,232,614	3,232,614
Yemen	LDS	204630	(545)	32,392
Yemen	LDS Charities Australia	204905	58,063	793,471
Yemen	UNOCHA	204111	(6,592)	(6,592)
Yemen	UNOCHA	204906	61,779	410,630
Yemen	UNOCHA	205014	445,733	445,733
Total Nutrition and Food Security			60,900,049	62,617,675

IMAGE CREDITS

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