In 2007, Dr. Omega Silva convinced the first national professional medical association to adopt a supportive medical aid-in-dying policy. She was also instrumental in the passage and implementation of the Washington, D.C. Death with Dignity Act and an honorary member of our African American Leadership Council. We are glad she was able to access the option she fought so hard for.

“I’m grateful that Compassion & Choices helped Omega overcome roadblocks in accessing and using the law, enabling her to die peacefully, without needless suffering, at home, in her own bed, with me by her side.” – Harold Bryant Webb, widower of Dr. Omega Silva
MESSAGE FROM THE PRESIDENT AND CEO

When history is written, I have little doubt 2020 will be recorded as one of the most challenging years in American history.

Far too many people suffered lonely, isolated deaths due to COVID-19; others were concerned about how they could receive end-of-life care safely; and underserved communities were, and continue to be, disproportionately impacted by the devastation of this disease. As a result, our mission took on increased importance:

**Improve care, expand options and empower everyone to chart their end-of-life journey.**

While many wondered what changes would come as a result of the pandemic, Compassion & Choices took an active role in shaping that destiny.

We took action immediately and charted a new path forward — one that is already contributing to major advances in healthcare quality, delivery, options and accessibility at life’s end.

I hope that as you peruse our annual report, you are as proud as I am. You were a major part of our progress in this challenging year. Your notes, emails, calls, volunteerism and financial support drove the movement forward despite relentless uncertainty. No doubt, in time, together, we will realize humanity and dignity at life’s end.

With deep gratitude,

Kim Callinan
RESPONDING TO THE PANDEMIC

Planning for End-of-Life Care

The pandemic heightened concerns among our terminally ill supporters about their ability to navigate their illness and dying process, and increased uncertainty among all of us about how to plan for life’s end. Compassion & Choices took action early in several ways:

» Developed a free comprehensive COVID-19 Toolkit (English and Spanish) as part of our Finish Strong program that includes tailored resources to address the most pressing questions facing people with advanced and terminal illness, including a special COVID-19 addendum to your advance directive.

» Launched our Staying Stronger Together webinar series in tandem with National Health-care Decisions Day in April, which blossomed into 14 live national events attended by thousands of people, plus countless state virtual events addressing an array of topics, from end-of-life planning and virtual advocacy to medical aid-in-dying authorization and implementation.

» Secured a steady stream of media coverage — through articles, press releases, ads and more — using the voices of our leadership and storytellers to clarify misconceptions and empower the public to access our menu of tools to navigate available options.

Since my cancer diagnosis, my mission is to raise awareness about the importance of end-of-life planning. Compassion & Choices planning resources and COVID-19 toolkit are free, easy to use and help people clarify priorities, resulting in real peace of mind.”

Isa Mendez, Compassion & Choices Latino Leadership Council member, has stage 4 uterine cancer; she promotes our Finish Strong resources.
Transforming End-of-Life Care

COVID-19 also brought to the forefront the glaring inadequacies of the current healthcare delivery system and growing concerns about the ability of vulnerable patients to receive care safely — whether routine examinations, palliative or hospice care, or medical aid in dying. Compassion & Choices harnessed our expertise to help reinvent the way Americans receive end-of-life care through several actions:

» Helped secure critical provisions for seriously and terminally ill patients in the massive Coronavirus Aid, Relief and Economic Security (CARES) Act, including improvements to telehealth laws to enable patients with a serious or terminal illness to access end-of-life care from the safety and comfort of their home.

» Advocated for improved telehealth laws through federal and state-specific policies to ensure safe and equitable access to care for terminally ill patients without the health risks of in-person visits.

» Urged reinstatement of provisions of the Patient Self Determination Act, which requires providers to inform patients about their advance directive policies, through a sign-on letter joined by 12 national organizations and 5,000 individuals.

The expanded telehealth provisions that Compassion & Choices and others advocated for so passionately have been transformative in healthcare delivery, ensuring people, particularly underserved communities, can safely and more easily access quality healthcare.”

Dr. Jeff Gardere, psychologist, minister, author and advocate for underserved communities, testified in Maryland and New York.
Choice and options for care at the end of life should be universal. Compassion & Choices is working diligently to make sure all people — regardless of age, race, ethnicity, sexual orientation, gender identity or political affiliation — have the resources and tools they need to plan for and access an end-of-life experience that reflects their wishes and priorities.

A powerful surge of activism around racial justice and equality highlighted persistent healthcare and access disparities among underserved communities. As the country grappled with possible solutions to these inequities, Compassion & Choices accelerated our work to embody inclusive strategies while continuing to elevate our voice and commitment in the national discussion in several ways:

» **Reached Black and Latino populations**: With the guidance of our African American and Latino Leadership Councils, we launched a public education campaign of culturally competent and actionable ads, digital tools, virtual discussions and videos with key community leaders, such as Dr. Jeff Gardere, Dr. Ben Chavis and Dolores Huerta.

» **Formed collaborations and partnerships**: We built new organizational alliances, developed robust resolutions, worked with state leaders to advance on-the-ground efforts, established new partnerships and collaborations, and cultivated current relationships with some 38 leading organizations, including the National Organization of Black Elected Legislative Women, National African American Tobacco Prevention Network, the Dolores Huerta Foundation and the National Hispanic Medical Association.

» **Launched a culturally competent public education campaign** targeting underserved communities that included digital tools, targeted ads and public service announcements, impassioned letters to more than 74,000 people, and the dissemination of more than 14,000 advance-care planning resources.
Benjamin Chavis, Ph.D., civil rights leader and president and CEO of the National Newspaper Publishers Association (NPAA).

Talking about and planning your transition will not kill you, but it will save your loved ones the awful sorrow and agony of unpreparedness. We are grateful to Compassion & Choices for helping us transfer our reluctance and fear of discussing the ultimate transition of our life journeys into a responsible and respectful plan of love and dignity.”

USA Today included a Compassion & Choices ad in their special Black History Month edition, which was distributed to more than 5 million people via print and online.
PLANNING FOR DEMENTIA

The needs of people with dementia at the end of life are urgent, unique and require careful consideration. In the winter of 2019, Compassion & Choices launched a national campaign to address how a person at risk of, worried about or in the early stages of dementia can plan for a dignified, natural, unimpeded death.

Starting in Oregon and moving to Florida and beyond, we engaged Compassion & Choices storytellers and other volunteer advocates to travel the states to spark dialogue and systemic change by encouraging doctors (including their own), care communities and hospices to adopt our end-of-life dementia directive.

The program’s core elements include:

- The **Dementia Values & Priorities Tool**, which allows people to create a set of clear-cut care instructions for their loved ones and outline their intentions through a personalized care plan — a Dementia Healthcare Directive.

- The **Dementia Decoder** empowers people to specify what they want to accomplish from an upcoming clinical appointment and customize that experience using a list of helpful questions.

- A **web portal** that provides comprehensive planning and care resources to assist people with dementia, their loved ones and caregivers on this difficult journey.

- A **series of webinars** to educate people about planning for a dementia diagnosis and encourage discussions about the culture shift necessary to allow people with dementia to die dignified and natural deaths in increasing numbers — starting with a webinar hosted by the American Society on Aging and with UsAgainstAlzheimer’s.

This is the first national campaign designed to help a person work within medicine to choose a dignified, natural, unimpeded death in advance of a dementia diagnosis.
Dan Winter serves on the American Civil Liberties Union board and was recently diagnosed with Alzheimer’s disease. The new Compassion & Choices Dementia Values & Priorities Tool already helps me face practical questions like that. With the new tools from Compassion & Choices, I am developing the emotional skills to address my end-of-life options. There is nothing else out there like this. To me, it’s a godsend. I now have choices that I didn’t know I had.”

Dan Winter serves on the American Civil Liberties Union board and was recently diagnosed with Alzheimer’s disease.
ADVANCING END-OF-LIFE AUTONYM: COAST TO COAST

In every state in the nation, Compassion & Choices is mobilizing volunteer leaders and supporters to advance end-of-life autonomy by authorizing medical aid in dying; establishing our legal rights to forgo treatments in advance of a dementia diagnosis; and reducing disparities in end-of-life care.

This fiscal year, we amassed significant achievements:

» Launched efforts to ensure access to New Jersey’s newly authorized Medical Aid in Dying for the Terminally Ill Act, which took effect August 1, 2019.

» Introduced legislation to authorize medical aid in dying in 20 states, advancing further than ever in Massachusetts.

» Advanced efforts to improve existing model medical aid-in-dying legislation, including leading efforts to improve Hawaii’s Our Care, Our Choice Act and supporting efforts to improve Washington’s law.

» Launched our newly established dementia program.

» Launched a public education campaign to engage underserved communities in end-of-life planning, featuring opinion articles, public service announcements, video assets and new national influencers representing communities of color.

REP. PAUL BAUMBACH

"One of the reasons we’ve made progress is because of our partnership with Compassion & Choices. They are our team on this. They organize education events, lobby days and letter-writing campaigns. We would be nowhere in Delaware without them. I am one of their biggest advocates, and I know that they keep my commitment going."

Rep. Paul Baumbach (Delaware) is a sponsor of the Ron Silverio/Heather Block End of Life Options Law.
Compassion & Choices’ Reach

22 states where we built capacity to advance end-of-life options, including medical aid-in-dying legislation

108 legislators in 24 states were provided technical assistance

342 lawmakers were identified to serve as sponsors or cosponsors of legislation that authorized medical aid in dying

4,533 end-of-life consultation sessions

2,155 legislative visits

3 states where we advanced legislation to improve existing medical aid-in-dying laws

13 large medical conferences attended, including speaking roles at City of Hope’s first end-of-life symposium

over 50 healthcare systems and organizations were provided technical support
At Work in Your Community

Compassion & Choices and our volunteers organized efforts to advance end-of-life autonomy in every state.

Our Size

450,000
supporters nationally

7,930
volunteers
in 50 states

$20
million in revenue

Our Progress

10
jurisdictions
have authorized
medical aid in dying

1 in 5
Americans
access to this compassionate option

GIVING
Authorized medical aid in dying
Medical aid-in-dying legislation introduced during 2019/2020 legislative session
Compassion & Choices volunteer groups
Compassion & Choices storytellers
Individuals accessed our Spanish-Language tools
Individuals called our end-of-life care consultants
Across the nation, we advanced medical aid-in-dying legislation, launched our new dementia program and worked to ensure more patients can access the care they want — nothing more, nothing less.

**California**
Compassion & Choices achieved a major milestone in our defense of the California End of Life Option Act when the Riverside County Superior Court ruled in Ahn v. Hestrin that the law was passed constitutionally and opponents do not have standing to bring their claims. The court’s decision has been appealed and the litigation is ongoing. Kim Callinan, Rev. Madison Shockley, Dan Diaz and multiple storytellers attended Assemblymember Susan Talamantes Eggman’s 2nd Select Hearing on the California End of Life Option Act, stressing that the law is working for those who can access it, but too many barriers are still in place.

**Hawai‘i**
Compassion & Choices launched a campaign to improve the Our Care, Our Choice Act, securing lead sponsors for identical bills in the House and Senate. We kicked off our campaign with a panel at the State Capitol to discuss needed improvements and successfully passed the bill out of the Senate.

**Illinois**
Working in partnership with the ACLU of Illinois and Final Options Illinois, we expanded to 9 action teams, hosted 35 community events, and trained volunteers on phone banking to engage supporters across the state.

**Delaware**
Compassion & Choices inundated lawmakers with weekly emails addressing key components of the Ron Silverio/Heather Block End of Life Options Law and dispelling myths. Our state-wide survey found 72% of Delawareans across all demographics support medical aid-in-dying legislation.

**Maryland**
Compassion & Choices organized a lobby day in support of the Maryland End-of-Life Option Act with over 185 supporters, 15 legislative sponsors and cosponsors, and a legislative hearing in front of the Senate Judicial Affairs Committee, where dozens of advocates testified in support of legislation.

**Florida**
Compassion & Choices launched our dementia pilot program, reaching over 4,000 Floridians through educational events (including a speaking tour with Dan Diaz, a Finish Strong book tour and end-of-life planning workshops).

**Massachusetts**
Through public education and lobbying, Compassion & Choices and others secured the sponsorship of more than 67 Massachusetts lawmakers for the End of Life Options Act, positioning it to successfully advance through the Joint Committee on Public Health for the first time ever.
Minnesota
Compassion & Choices organized an informational hearing on the Minnesota End of Life Option Act with over 120 supporters, relegating opponents to an overflow room. Speakers included Barbara Coombs Lee, Dr. David Plimpton, Reverend Harlan Limpert, and storytellers Marianne Turnbull and Bobbi Jacobsen.

New Jersey
Compassion & Choices created steady media coverage and grassroots support to protect the new medical aid-in-dying law from both legislative and legal attempts to overturn it. At the same time, we launched robust implementation activities, including medical education efforts that contributed to 42 medical centers, hospitals and hospices adopting supportive medical aid-in-dying policies.

New York
Compassion & Choice launched an aggressive multi-prong campaign targeting New York lawmakers that included: 1) a billboard on the New York State Thruway into Albany announcing “56% of doctors and 63% of voters agree: Pass Medical Aid in Dying NOW!”; 2) a large-scale exhibit in the legislative office building that launched our “50 Reasons” campaign (see page 14); 3) strategic earned and social media campaigns listing a new reason to pass medical aid in dying every day; 4) an event to announce the support of our first major disability rights group; and 5) a partnership with Dr. Jeff Gardere, better known as “Dr. Jeff” or “America’s Psychologist.”

Oregon
Compassion & Choices unveiled our dementia program at our annual Oregon event, where Dan Winter shared his compelling story about using the dementia tools (see page 7) with more than 200 supporters.

Washington, D.C.
Compassion & Choices created a working group with DC Health, the District’s Department of Health, to address administrative barriers to patient access, resulting in a partnership to provide annual training to medical providers. During this fiscal year, 185 medical providers attended and received continuing medical education credits as a result of our work.

Don’t see your state listed?
Visit CompassionAndChoices.org to learn what is happening in your state.
Throughout the country, Compassion & Choices identified people personally touched and impacted by end-of-life issues, who bring a human face to our advocacy and establish powerful connections with lawmakers. In New York, for example, storytellers were featured in our “50 Reasons to Support New York’s Medical Aid in Dying Act” campaign, releasing one reason per day to lawmakers and the media to amplify personal stories and pleas from residents across the state. Some powerful reasons are shown here.

**THE SPECIAL POWER OF STORYTELLERS**

Florrie Burke

“So that after more than 30 years of a vibrant life together, no one has to remember the final moments of a life well lived as ones spent in agony.”

Anthony Randolph

“So that no one has to watch their strong former Marine brother wither away in a hospital bed and suffer needlessly at the end of life.”

Fay Hoh Yin

“Because giving me the option of medical aid in dying would free me to spend all my remaining energy just living, knowing that I would not end up in a dark hole of suffering.”

Gene Hughes

“So that at the end of my life, I have the autonomy that I fought so hard for since my first day in a wheelchair.”

Susan Rahn

“So that no one is forced to be at someone else’s mercy for pain management and comfort care at the end of life after enduring countless treatments, procedures and side effects in order to live as long as possible.”
VOLUNTEER LEADERSHIP

**Board of Directors**

David N. Cook, M.Th., J.D.  
*Chair*  
Rev. Madison T. Shockley II  
*First Vice Chair*  
Nancy Hoyt, M.A.  
*Second Vice Chair*  
Steve Hut, J.D.  
*Secretary*  
Dan Grossman, M.B.A.  
*Treasurer*  
Debbi Gibbs, M. Arch.  
Lucille Ridgill, M.D.  
Leslie Rowley, Ph.D., M.B.A.  
Samantha Sandler, M.S.W.  
Jerri Shaw, M.R.P.  
Mark Weideman, J.D.  

**Ex Officio**

Kim Callinan, M.P.P.  
*President and Chief Executive Officer*  

**African American Leadership Council**

Khadine Bennett  
Christy Davis Jackson  
Jason Gaulden  
Channte’ Keith  
Rev. Charles McNeill Jr.  
Ottamissiah “Missy” Moore  
Beverly Morgan  
Shawn Perry  
Dr. Lucille Ridgill  
Rev. Madison T. Shockley II  
Dr. Omega Silva (1919-2020)  
Rev. Dr. Paul Smith  
Shirley Tabb  
Al Thomas  
Ricardo Thomas

**Latino Leadership Council**

Fr. Luis Barrios  
Pastor Sergio Camacho  
Rev. Dr. Ignacio Castuera  
Nilsa Centeno  
Guillermo Chacon  
Former Rep. Rebecca Chavez-Houck  
Dr. Yanira Cruz  
Dan Diaz  
Dolores Huerta  
Jorge Lambrinos  
Maria Lemus  
Irisaida “Isa” Mendez Iriarte  
Mauricio Ochmann  
Hanna Olivas  
Maria Otero  
Dr. Jaime Torres  
Dr. Daniel Turner-Lloveras
## COMBINED STATEMENT OF FINANCIAL POSITION

**June 30, 2020**

### Assets

#### Current Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents:</td>
<td></td>
</tr>
<tr>
<td>Operating</td>
<td>1,030,279</td>
</tr>
<tr>
<td>Investments</td>
<td>4,729,839</td>
</tr>
<tr>
<td>Pledges receivable-current portion</td>
<td>348,640</td>
</tr>
<tr>
<td>Investments</td>
<td>13,897,148</td>
</tr>
<tr>
<td>Prepaid expenses and other</td>
<td>313,902</td>
</tr>
<tr>
<td>Beneficial interest in charitable remainder trusts</td>
<td>81,980</td>
</tr>
<tr>
<td>Other current assets</td>
<td>852</td>
</tr>
<tr>
<td><strong>Total current assets</strong></td>
<td><strong>20,402,640</strong></td>
</tr>
</tbody>
</table>

#### Property, Equipment and Improvements, at Cost

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Furniture, fixtures and equipment</td>
<td>356,540</td>
</tr>
<tr>
<td>Leasehold improvements</td>
<td>11,695</td>
</tr>
<tr>
<td><strong>Less accumulated depreciation and amortization</strong></td>
<td><strong>368,235</strong></td>
</tr>
<tr>
<td><strong>Total property, equipment and improvements</strong></td>
<td><strong>12,159</strong></td>
</tr>
</tbody>
</table>

#### Other Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pledges receivable net of current portion</td>
<td>35,000</td>
</tr>
<tr>
<td>Intangible assets</td>
<td>9,514</td>
</tr>
<tr>
<td>Investment, partnership interest</td>
<td>238,841</td>
</tr>
<tr>
<td>Deposits</td>
<td>20,039</td>
</tr>
<tr>
<td><strong>Total other assets</strong></td>
<td><strong>303,394</strong></td>
</tr>
</tbody>
</table>

**TOTAL ASSETS**

**20,718,193**

### Liabilities and Net Assets

#### Current Liabilities

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts payable</td>
<td>339,611</td>
</tr>
<tr>
<td>Accrued expenses</td>
<td>783,316</td>
</tr>
<tr>
<td><strong>Total current liabilities</strong></td>
<td><strong>1,122,927</strong></td>
</tr>
</tbody>
</table>

#### Long-Term Liabilities

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gift annuity payments due</td>
<td>392,403</td>
</tr>
<tr>
<td><strong>Total long-term liabilities</strong></td>
<td><strong>392,403</strong></td>
</tr>
</tbody>
</table>

**TOTAL LIABILITIES**

**1,515,330**

#### Net Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Without donor restrictions:</td>
<td></td>
</tr>
<tr>
<td>Operating</td>
<td>18,844,491</td>
</tr>
<tr>
<td>Net investment in property, equipment and improvements</td>
<td>12,159</td>
</tr>
<tr>
<td>With donor restrictions</td>
<td>346,213</td>
</tr>
<tr>
<td><strong>Total net assets</strong></td>
<td><strong>19,202,863</strong></td>
</tr>
</tbody>
</table>

**TOTAL LIABILITIES AND NET ASSETS**

**20,718,193**
COMBINED STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS *

For the Year Ended June 30, 2020

Revenue and Other Support

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conferences and events</td>
<td>--</td>
</tr>
<tr>
<td>Contributions</td>
<td>18,768,894</td>
</tr>
<tr>
<td>Donated services</td>
<td>618,541</td>
</tr>
<tr>
<td>Membership fees</td>
<td>60,062</td>
</tr>
<tr>
<td>Investment income, net of expenses</td>
<td>369,903</td>
</tr>
<tr>
<td>Realized and unrealized gain on investments</td>
<td>(26,060)</td>
</tr>
<tr>
<td>Gain on sale of asset</td>
<td>2,050</td>
</tr>
<tr>
<td>Other income</td>
<td>49,113</td>
</tr>
<tr>
<td><strong>Total revenue and other support</strong></td>
<td><strong>19,842,503</strong></td>
</tr>
</tbody>
</table>

Expenses

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programs</td>
<td>13,633,238</td>
</tr>
<tr>
<td>General and administrative</td>
<td>1,685,763</td>
</tr>
<tr>
<td>Fundraising</td>
<td>1,360,649</td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td><strong>16,679,650</strong></td>
</tr>
<tr>
<td><strong>Increase in net assets</strong></td>
<td><strong>3,162,853</strong></td>
</tr>
</tbody>
</table>

Net Assets, Beginning

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total net assets, beginning</td>
<td>16,040,010</td>
</tr>
<tr>
<td><strong>NET ASSETS, ENDING</strong></td>
<td><strong>19,202,863</strong></td>
</tr>
</tbody>
</table>

ALL COSTS *

For the Year Ended June 30, 2020

- **3%** Direct Lobbying
- **10%** Administration
- **8%** Fundraising
- **31%** Public Education
- **7%** Constituency
- **1%** Grassroots Lobbying
- **9%** Policy and Litigation
- **8%** Integrated Programs
- **23%** Advocacy

* Compassion & Choices and Compassion & Choices Action Network
**PROGRAM EXPENSES AND RATIOS**

*For the Year Ended June 30, 2020*

This pie chart and table offer a detailed look at how Compassion & Choices’ expenses are distributed by program area.

![Pie chart]

<table>
<thead>
<tr>
<th>Program Area</th>
<th>Compassion &amp; Choices</th>
<th>Compassion &amp; Choices Action Network</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct Lobbying</td>
<td>486,849</td>
<td>9,551</td>
<td>496,400</td>
</tr>
<tr>
<td>Grassroots Lobbying</td>
<td>186,979</td>
<td>–</td>
<td>186,979</td>
</tr>
<tr>
<td>Policy and Litigation</td>
<td>1,518,006</td>
<td>–</td>
<td>1,518,006</td>
</tr>
<tr>
<td>Integrated Programs</td>
<td>1,316,618</td>
<td>–</td>
<td>1,316,618</td>
</tr>
<tr>
<td>Advocacy</td>
<td>3,788,699</td>
<td>3,548</td>
<td>3,792,247</td>
</tr>
<tr>
<td>Constituency</td>
<td>1,213,850</td>
<td>–</td>
<td>1,213,850</td>
</tr>
<tr>
<td>Public Education</td>
<td>5,079,417</td>
<td>29,721</td>
<td>5,109,138</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>13,590,418</strong></td>
<td><strong>42,820</strong></td>
<td><strong>13,633,238</strong></td>
</tr>
</tbody>
</table>

* Compassion & Choices and Compassion & Choices Action Network
CELEBRATING ALL WHO ADVANCE THE MOVEMENT

When our supporters come together, anything is possible. The collective impact of their power is illustrated with each gift made throughout the year, fueling every advancement we make and propelling us forward every day, all across the country.

With deepest gratitude, we give thanks to all the donors listed on the following pages — and the thousands more that we don’t have space to acknowledge. We honor and celebrate friends who contribute gifts of any amount.

If you are a new donor, we welcome you to our community of incredible, dedicated supporters, many of whom are celebrating 5, 10, or even 20-plus years of commitment to the cause — providing the foundation that sustains all our work.

How You Can Help

Donate
Online: CompassionAndChoices.org/donate
Call: 800.247.7421 x2159
Mail your gift to:
Compassion & Choices
Attn: Trish Bernstein
101 SW Madison Street, #8009
Portland, OR 97207

We also accept stocks, bonds and mutual fund shares, as well as IRA-qualified charitable distributions.

Be a Champion
Setting up a recurring monthly gift is simple and easy. Your gift as a Champions Circle member will keep us moving forward month to month and year to year. Sign up at CompassionAndChoices.org/champions-circle or call 800.247.7421 x2159.

Legacy Gifts
Creating a planned gift can provide significant tax benefits and lifetime, tax-free income. Contact us at 800.247.7421 x2152 or plannedgiving@CompassionAndChoices.org to learn more and to let us know if you have a legacy gift in your estate plan to ensure the support of our work in the future.

Donor-Advised Funds
To donate through your fund, simply select Compassion & Choices from the list of non-profits or ask your provider to add us to the list. Our tax ID is 84-1328829. You can also make Compassion & Choices the successor/beneficiary of your donor-advised account.

Other Ways to Give
Ask friends to contribute in honor of your birthday or celebration; set up a Facebook fundraiser; or select Compassion & Choices as your AmazonSmile charity.
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Mary Moseley
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Stewarding Your Resources Efficiently and Effectively

Compassion & Choices is proud to be rated one of the most trusted, efficient, sustainable, accountable and transparent charities in the country.
THANKING OUR PROFESSIONAL COLLEAGUES FOR DONATED SERVICES

Compassion & Choices thanks the law firms and their attorneys and staff that provided pro bono legal assistance and generously gave their time and expertise this year. Collectively, these law firms contributed thousands of hours of service valued at more than $618,000 (July 1, 2019–June 30, 2020).

<table>
<thead>
<tr>
<th>Law Firm</th>
<th>Attorney/Staff</th>
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<tr>
<td><strong>Hanson Bridgett LLP</strong></td>
<td>Adam Hoffman</td>
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<td>Josephine Mason Petrick</td>
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<td><strong>Law Office of Jon B. Eisenberg</strong></td>
<td>Jon B. Eisenberg</td>
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<tr>
<td><strong>Morgan Lewis</strong></td>
<td>Jonathan M. Albano</td>
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<td></td>
<td>Nathaniel P. Bruhn</td>
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<tr>
<td><strong>O’Melveny</strong></td>
<td>John Kappos</td>
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<td></td>
<td>Bo Moon</td>
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<td>Jason A. Orr</td>
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<td>Mark A. Hayden</td>
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<td>Meng Xu</td>
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<td></td>
<td>Amanda Hoffman (law clerk)</td>
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<td>Kristin Godfrey (support staff)</td>
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<td>Heide-Marie Bliss (support staff)</td>
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<td>John Paolo Dalog (support staff)</td>
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<td><strong>Perkins Coie LLP</strong></td>
<td>Rick Boardman</td>
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<td>Katie Page</td>
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<td><strong>Stoel Rives LLP</strong></td>
<td>Emily Atmore</td>
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<td>Maggie Dalton</td>
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John Kappos and Bo Moon of O’Melveny with Compassion & Choices Chief Legal Advocacy Officer Kevin Díaz on the steps of the California Riverside Superior Court.
John Radcliffe, who lived with cancer for several years, worked side by side with Compassion & Choices to authorize, implement and improve the Hawai‘i Our Care, Our Choice Act. John became the first person to publicly request a prescription under the new law and was able to use it to have a peaceful death.

“All of you folks at C&C are godsends for those of us that you have helped make life and death better. My heroes.”

– John Radcliffe, June 26, 2020
Compassion & Choices End-of-Life Consultation

Helping Patients Navigate End-of-Life Options and Care

We provide confidential, nonjudgmental, professional support for end-of-life planning. We can provide information on such areas as the benefits of hospice and palliative care, completing an advance directive, navigating the healthcare system, medical aid in dying and other ways to attain a peaceful death.

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