

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III ☒

1 Briefly describe the organization’s mission:

THE CDC FOUNDATION HELPS THE CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) DO MORE, FASTER, BY FORGING EFFECTIVE PARTNERSHIPS BETWEEN CDC AND FOUNDATIONS, ORGANIZATIONS, CORPORATIONS AND INDIVIDUALS TO FIGHT THREATS TO HEALTH AND SAFETY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ **Yes** ☒ **No**

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ **Yes** ☒ **No**

If "Yes," describe these changes on Schedule O.

4 Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **227,244,719** including grants of \$ **16,824,600**) (Revenue \$ **5,747,672**)
COVID-19 RESPONSE-STRENGTHENING COMMUNITIES AND JURISDICTIONAL HEALTH DEPARTMENTSSEE SCHEDULE O FOR DESCRIPTION

4b (Code:) (Expenses \$ **7,532,818** including grants of \$ **722,141**) (Revenue \$ **0**)
DATA FOR HEALTHSEE SCHEDULE O FOR DESCRIPTION

4c (Code:) (Expenses \$ **6,284,954** including grants of \$ **0**) (Revenue \$ **0**)
OPIOID SURGE STAFFINGSEE SCHEDULE O FOR DESCRIPTION

(Code:) (Expenses \$ **79,084,769** including grants of \$ **17,493,664**) (Revenue \$ **756,928**)
THE FOUNDATION, WORKING IN COLLABORATION WITH CDC, SPENDS THE VAST MAJORITY OF ITS FUNDS DIRECTLY FOR PROGRAMS AND PROJECTS THAT FURTHER ITS EXEMPT PURPOSES. DURING THE YEAR ENDED JUNE 30, 2022, THE CDC FOUNDATION WAS INVOLVED IN A VARIETY OF PROJECTS IN ADDITION TO THE PROGRAMS MENTIONED IN DETAIL ON SCHEDULE O. THESE INCLUDE: PROVIDING STAFF TO HEALTH DEPARTMENTS NATIONWIDE; STRENGTHENING THE U.S. PUBLIC HEALTH SYSTEM; WORKING WITH COMMUNITIES NATIONWIDE TO INCREASE VACCINE CONFIDENCE; SAVING LIVES THROUGH MENINGITIS SCREENING IN AFRICA; ACHIEVING BETTER OUTCOMES FOR NEWBORNS IN CAMEROON, CHAD AND BURKINA FASO; AND A WIDE VARIETY OF OTHER CRITICAL PUBLIC HEALTH PROTECTION EFFORTS.

4d Other program services (Describe in Schedule O.)
(Expenses \$ **79,084,769** including grants of \$ **17,493,664**) (Revenue \$ **756,928**)

4e **Total program service expenses** ▶ **320,147,260**

Part IV

Checklist of Required Schedules

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

Part IV

Checklist of Required Schedules (continued)

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

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No	
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	135	
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		

Part V		Statements Regarding Other IRS Filings and Tax Compliance (continued)						
2a		Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		2a	2,892			
b		If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.		2b	Yes			
3a		Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a			No	
b		If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>		3b				
4a		At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a			No	
b		Enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
5a		Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .		5a			No	
b		Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b			No	
c		If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c				
6a		Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a			No	
b		If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b				
7		Organizations that may receive deductible contributions under section 170(c).						
a		Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a			No	
b		If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b				
c		Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c			No	
d		If "Yes," indicate the number of Forms 8282 filed during the year		7d				
e		Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e			No	
f		Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f			No	
g		If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g				
h		If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h				
8		Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8				
9		Sponsoring organizations maintaining donor advised funds.						
a		Did the sponsoring organization make any taxable distributions under section 4966?		9a				
b		Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b				
10		Section 501(c)(7) organizations. Enter:						
a		Initiation fees and capital contributions included on Part VIII, line 12		10a				
b		Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		10b				
11		Section 501(c)(12) organizations. Enter:						
a		Gross income from members or shareholders		11a				
b		Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		11b				
12a		Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a				
b		If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		12b				
13		Section 501(c)(29) qualified nonprofit health insurance issuers.						
a		Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		13a				
b		Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		13b				
c		Enter the amount of reserves on hand		13c				
14a		Did the organization receive any payments for indoor tanning services during the tax year?		14a			No	
b		If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>		14b				
15		Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		15			No	
16		If the organization is a trust, did it file Form 720, Schedule N, to report the section 4968 excise tax on net investment income?		16			No	
17		Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? . . . If "Yes," complete Form 6069.		17				

Part VI

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response or note to any line in this Part VI

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Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year.	1a	14	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent.	1b	14	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done.	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed.	AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI
18	Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☒ Own website ☒ Another's website ☐ Upon request ☐ Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.	
20	State the name, address, and telephone number of the person who possesses the organization's books and records: NEDRA R JONES 600 PEACHTREE STREET NE 1000 ATLANTA, GA 30308 (678) 733-1883	

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization’s tax year.

- List all of the organization’s **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization’s **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization’s five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization’s **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization’s **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LEAH DEVLIN CHAIR	2.00	X		X				0	0	0
(2) DAVID ALDRIDGE TREASURER	2.00	X		X				0	0	0
(3) RAYMOND BAXTER SECRETARY	2.00	X		X				0	0	0
(4) SHIRLEY FRANKLIN DIRECTOR	1.00	X						0	0	0
(5) JAMES MARKS DIRECTOR	1.00	X						0	0	0
(6) ELAINE CHAMBERS DIRECTOR	1.00	X						0	0	0
(7) BROOKS BELL DIRECTOR	1.00	X						0	0	0
(8) JEFFREY KOPLAN DIRECTOR	1.00	X						0	0	0
(9) PHIL KENT DIRECTOR	1.00	X						0	0	0
(10) AMELIE RAMIREZ DIRECTOR	1.00	X						0	0	0
(11) VANESSA BENAVIDES DIRECTOR	1.00	X						0	0	0
(12) KRISTEN SILVERBERG DIRECTOR	1.00	X						0	0	0
(13) LAURA ANGEL VP FOR ADVANCEMENT	40.00			X				211,186	0	22,762
(14) KATHY CAHILL VP FOR SYSTEMS INTEGRATIONS	40.00			X				160,078	0	1,756
(15) NEDRA JONES CFO	40.00			X				40,693	0	980
(16) JUDITH MONROE PRESIDENT & CEO	40.00			X				453,705	0	14,727
(17) DANIEL PIERCE NELSON VP FOR COMMUNICATIONS	40.00			X				239,150	0	13,044

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MONQUIE PATRICK COO	40.00			X				287,893	0	30,153
(19) LAUREN SMITH CHIEF HEALTH EQUITY & STRATEGY OFFICER	40.00			X				266,867	0	35,518
(20) MICHAEL BRANDON TALLEY VP NON-INFECTIOUS DISEASE	40.00			X				191,898	0	21,836
(21) LISA WADDELL CMO	40.00			X				252,792	0	35,206
(22) CATHERINE ZILBER VP INFECTIOUS DISEASE PROG.	40.00			X				147,257	0	33,319
(23) ROBERT ABRAHAM AVP FOR ADVANCEMENT	40.00				X			154,841	0	21,997
(24) ELIZABETH ARTEAGA DIR. TESTING & RESULTING OP.	40.00				X			152,483	0	170
(25) SUANNE BUGGY COALITION DEPUTY DIRECTOR	40.00				X			195,984	0	22,081
(26) RACHNA CHANDORA AVP NON INFECTIOUS DISEASE PROG.	40.00				X			158,942	0	21,943
(27) ANGELINA ESPARZA AVP JURISDICTIONAL SUPP. & HEALTH EQUITY	40.00				X			156,423	0	16,716
(28) JEREMY MORTON SENIOR SURVEY METHODOLOGIST	40.00				X			161,136	0	21,122
(29) ROLAND NGWANG MEDICAL EPIDEMIOLOGIST	40.00				X			183,418	0	22,554
(30) MEGAN O'CONNELL MEDICAL EPIDEMIOLOGIST	40.00				X			185,336	0	30,814
(31) TURQUOISE SIDIBE AVP FOR EMERGENCY RESPONSE	40.00				X			150,390	0	11,312
(32) TERRI HEYNS AVP FOR COMMUNICATIONS	40.00					X		139,583	0	20,223
(33) KINETRA JOSEPH CAMPAIGN DIRECTOR	40.00					X		135,240	0	18,747
(34) TWANDA MICKLE SENIOR DIR. OF STRATEGIC OP.	40.00					X		137,169	0	24,673
(35) COURTENAY SINGER DIR. PRODUCTION & NEW MEDIA	40.00					X		118,401	0	20,102
(36) JENNIFER PARKER FORMER VP INFECTIOUS DISEASE PROG.	40.00						X	194,200	0	12,489
1b Sub-Total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								4,475,065	0	474,244

2

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 2 3

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

Section B. Independent Contractors

1

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization’s tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
J CURVE LLC 3565 PIEDMONT RD NE SUITE 250 ATLANTA, GA 30305	STAFFING & RECRUITING	469,199
JULIE SCOFIELD 220 LAKE AVENUE STAUNTON, VA 24401	CONSULTING COVID COALITION	296,700
S MOFFATT PUBLIC HEALTH SOLUTIONS LLC 4788 ST GEORGE ROAD WILLISTON, VT 05495	CONSULTING COVID-19	212,729
ANGELA DUNBAR 2683 NORTHBROOK DRIVE ATLANTA, GA 30340	COMMUNICATION SERVICES	158,082
CAROL PERTOWSKI 44 EAGLE GAP CT NOVATO, CA 94949	CONSULTING & TRAINING	138,030

2

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 8

Part VIII

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and Other	1a Federated campaigns . . b Membership dues . . c Fundraising events . . d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a - 1f:\$ h Total. Add lines 1a-1f	1a		
Amt Similar Amounts		1b		
		1c		
		1d		
		1e	174,500,648	
		1f	73,641,060	
		1g	75,924	
				248,141,708

Program Service Revenue		Business Code				
	2a EMERGENCY RESPONSE	541900	6,336,831	6,336,831		
	b INFECTIOUS DISEASE	541900	88,055	88,055		
	c NON-INFECTIOUS DISEASE	541900	35,603	35,603		
	d LAB RESEARCH AGREEMENT	541900	28,378	28,378		
	e HEALTH SURVEILLANCE	541900	15,733	15,733		
	f All other program service revenue.					
	9 Total. Add lines 2a-2f.	6,504,600				

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,535,092			1,535,092
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real	(ii) Personal			
	6a Gross rents	6a				
	b Less: rental expenses	6b				
	c Rental income or (loss)	6c				
	d Net rental income or (loss)					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	7a	45,343,934			
	b Less: cost or other basis and sales expenses	7b	45,308,547			
	c Gain or (loss)	7c	35,387			
	d Net gain or (loss)		35,387			35,387
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a				
	b Less: direct expenses	8b				
	c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities. See Part IV, line 19	9a				
	b Less: direct expenses	9b				
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances	10a				
	b Less: cost of goods sold	10b				
	c Net income or (loss) from sales of inventory					
	Miscellaneous Revenue	Business Code				
	11a MISCELLANEOUS REVENUE	900099	1,437			1,437
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d		1,437			
	12 Total revenue. See instructions		256,218,224	6,504,600	0	1,571,916

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	32,964,631	32,964,631		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	60,000	60,000		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	2,015,774	2,015,774		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	4,563,182	2,777,337	1,135,915	649,930
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	170,559,887	163,276,699	6,137,621	1,145,567
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	5,581,213	4,921,780	546,534	112,899
9 Other employee benefits	9,410,137	8,788,278	559,285	62,574
10 Payroll taxes	14,170,611	13,565,649	477,737	127,225
11 Fees for services (non-employees):				
a Management				
b Legal	8,522		8,522	
c Accounting	58,605		58,605	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	120,806		120,806	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	83,116,508	77,443,696	5,194,323	478,489
12 Advertising and promotion				
13 Office expenses	4,962,417	3,515,041	956,537	490,839
14 Information technology	3,312,845	1,383,331	1,789,284	140,230
15 Royalties				
16 Occupancy	746,500	706,467	32,366	7,667
17 Travel	780,365	714,134	60,626	5,605
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	164,376	127,420	25,421	11,535
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	295,441	118,176	118,176	59,089
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PROJECT SUPPLIES	7,538,451	7,538,451		
b OTHER EXPENSES	1,017,057	230,396	755,106	31,555
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	341,447,328	320,147,260	17,976,864	3,323,204
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

☐

				(A)		(B)	
				Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing			1		
	2	Savings and temporary cash investments		54,773,674	2	54,381,378	
	3	Pledges and grants receivable, net		145,272,169	3	66,693,494	
	4	Accounts receivable, net		2,339,890	4	2,918,793	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6		
	7	Notes and loans receivable, net			7		
	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges		2,861,435	9	6,921,184	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	3,465,243			
	b	Less: accumulated depreciation	10b	2,352,401	1,408,283	10c	1,112,842
	11	Investments—publicly traded securities		82,939,636	11	78,176,247	
	12	Investments—other securities. See Part IV, line 11			12		
	13	Investments—program-related. See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		0	15	611	
16	Total assets: Add lines 1 through 15 (must equal line 33)		289,595,087	16	210,204,549		
Liabilities	17	Accounts payable and accrued expenses		5,437,956	17	19,771,231	
	18	Grants payable		12,806,838	18	16,269,348	
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		12,305	21		
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22		
	23	Secured mortgages and notes payable to unrelated third parties			23		
	24	Unsecured notes and loans payable to unrelated third parties			24		
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		11,633,307	25	3,240,611	
	26	Total liabilities. Add lines 17 through 25		29,890,406	26	39,281,190	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.						
	27	Net assets without donor restrictions		35,872,286	27	47,654,904	
	28	Net assets with donor restrictions		223,832,395	28	123,268,455	
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.						
	29	Capital stock or trust principal, or current funds			29		
	30	Paid-in or capital surplus, or land, building or equipment fund			30		
	31	Retained earnings, endowment, accumulated income, or other funds			31		
	32	Total net assets or fund balances		259,704,681	32	170,923,359	
	33	Total liabilities and net assets/fund balances		289,595,087	33	210,204,549	

Part XI

Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	256,218,224
2	Total expenses (must equal Part IX, column (A), line 25)	2	341,447,328
3	Revenue less expenses. Subtract line 2 from line 1	3	-85,229,104
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	259,704,681
5	Net unrealized gains (losses) on investments	5	-3,552,218
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (A))	10	170,923,359

Part XII

Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	Yes	

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

Name of the organization

NATIONAL FOUNDATION FOR THE CENTERS FOR DISEASE CONTROL AND PREVENTION INC

Employer identification number

58-2106707

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10

☐

An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11

☐

An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f

Enter the number of supported organizations
- g

Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	57,819,416	76,118,865	252,838,369	191,156,154	248,141,708	826,074,512
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge. .	198,274	167,552	229,894	270,464	176,000	1,042,184
4 Total. Add lines 1 through 3	58,017,690	76,286,417	253,068,263	191,426,618	248,317,708	827,116,696
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . .						147,750,667
6 Public support. Subtract line 5 from line 4.						679,366,029

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4.	58,017,690	76,286,417	253,068,263	191,426,618	248,317,708	827,116,696
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	856,785	1,725,480	2,014,825	1,655,957	1,535,092	7,788,139
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
11 Total support. Add lines 7 through 10						834,904,835

12 Gross receipts from related activities, etc. (see instructions) **12**

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f))	14	81.370 %
15 Public support percentage for 2020 Schedule A, Part II, line 14	15	76.630 %

- 16a 33 1/3% support test—2021.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization ☒
- b 33 1/3% support test—2020.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐
- 17a 10%-facts-and-circumstances test—2021.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here**. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐
- b 10%-facts-and-circumstances test—2020.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here**. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b. .						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .						
13 Total support. (Add lines 9, 10c, 11, and 12.) .						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2021 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2021 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions		

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

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

Part IV

Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b	A family member of a person described on 11a above?		
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part VI		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
a	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)			
2	Activities Test. Answer lines 2a and 2b below.			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b	Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No", provide details in Part VI.			
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.			

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in **Part VI***). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income

(A) Prior Year

(B) Current Year
(optional)

- | | |
|---|----------|
| 1 Net short-term capital gain | 1 |
| 2 Recoveries of prior-year distributions | 2 |
| 3 Other gross income (see instructions) | 3 |
| 4 Add lines 1 through 3 | 4 |
| 5 Depreciation and depletion | 5 |
| 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 |
| 7 Other expenses (see instructions) | 7 |
| 8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 |

Section B - Minimum Asset Amount

(A) Prior Year

(B) Current Year
(optional)

- | | |
|--|-----------|
| 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | 1 |
| a Average monthly value of securities | 1a |
| b Average monthly cash balances | 1b |
| c Fair market value of other non-exempt-use assets | 1c |
| d Total (add lines 1a, 1b, and 1c) | 1d |
| e Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>): | |
| 2 Acquisition indebtedness applicable to non-exempt use assets | 2 |
| 3 Subtract line 2 from line 1d | 3 |
| 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | 4 |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 |
| 6 Multiply line 5 by 0.035 | 6 |
| 7 Recoveries of prior-year distributions | 7 |
| 8 Minimum Asset Amount (add line 7 to line 6) | 8 |

Section C - Distributable Amount

Current Year

- | | |
|---|----------|
| 1 Adjusted net income for prior year (from Section A, line 8, Column A) | 1 |
| 2 Enter 85% of line 1 | 2 |
| 3 Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 |
| 4 Enter greater of line 2 or line 3 | 4 |
| 5 Income tax imposed in prior year | 5 |
| 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | 6 |

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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations		(continued)
Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (<i>prior IRS approval required - provide details in Part VI</i>)	5	
6 Other distributions (<i>describe in Part VI</i>). See instructions	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions	8	
9 Distributable amount for 2021 from Section C, line 6	9	
10 Line 8 amount divided by Line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required-- <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2021:			
a From 2016.			
b From 2017.			
c From 2018.			
d From 2019.			
e From 2020.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017.			
b Excess from 2018.			
c Excess from 2019.			
d Excess from 2020.			
e Excess from 2021.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
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Additional Data

[Return to Form](#)

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization NATIONAL FOUNDATION FOR THE CENTERS FOR DISEASE CONTROL AND PREVENTION INC	Employer identification number 58-2106707
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."	
2	Political campaign activity expenditures. See instructions	\$
3	Volunteer hours for political campaign activities. See instructions	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	\$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV.	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	\$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	\$
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b	\$
4	Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1				
2				
3				
4				
5				
6				

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check
- ☐
- if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B
- Check
- ☐
- if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures		341,447,328													
e Total exempt purpose expenditures (add lines 1c and 1d)		341,447,328													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000													
<table><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e.</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000.</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000.</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000.</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000.</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000													
h Subtract line 1g from line 1a. If zero or less, enter -0-.		0													
i Subtract line 1f from line 1c. If zero or less, enter -0-.		0													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No													

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures					
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures. See Instructions	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
SCHEDULE C, PART II-A, LINE 2C	THE FOUNDATION INCURRED NO LOBBYING EXPENDITURES FOR THE YEAR ENDED JUNE 30, 2022.

Additional Data

Return to Form

Software ID:

Software Version:

Name of the organization NATIONAL FOUNDATION FOR THE CENTERS FOR DISEASE CONTROL AND PREVENTION INC	Employer identification number 58-2106707
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No	

Part II Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1	Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area ☐ Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____	
4	Number of states where property subject to conservation easement is located ▶ _____	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____ (ii) Assets included in Form 990, Part X ▶ \$ _____	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____ b Assets included in Form 990, Part X ▶ \$ _____	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a

☐ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☒ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table:

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .

☐ Yes

☒ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	7,719,450	6,060,538	5,690,922	5,151,331	5,019,488
b Contributions	65,145	58,688	228,963	110,161	71,631
c Net investment earnings, gains, and losses	-1,072,069	1,613,217	184,927	475,683	103,655
d Grants or scholarships					
e Other expenditures for facilities and programs	17,387	12,993	44,274	46,253	43,443
f Administrative expenses					
g End of year balance	6,695,139	7,719,450	6,060,538	5,690,922	5,151,331

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶ 70.688 %

c

Term endowment ▶ 29.313 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations

(ii) Related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		No
3a(ii)		No
3b		

4

Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		2,120,065	1,308,521	811,544
d Equipment		205,839	118,445	87,394
e Other		1,139,339	925,435	213,904
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				1,112,842

Schedule D (Form 990) 2021

Part VII

Investments - Other Securities.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII

Investments - Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX

Other Assets.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X

Other Liabilities.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	3,240,611

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

☒

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	258,358,778
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-3,552,218
b	Donated services and use of facilities	2b	5,813,578
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	2,261,360
3	Subtract line 2e from line 1	3	256,097,418
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	120,806
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	120,806
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	256,218,224

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	347,140,100
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	5,813,578
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	5,813,578
3	Subtract line 2e from line 1	3	341,326,522
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	120,806
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	120,806
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	341,447,328

Part XIII

Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
PART V, LINE 4:	THE FOUNDATION'S ENDOWMENT CONSISTS OF APPROXIMATELY 20 INDIVIDUAL FUNDS ESTABLISHED BY DONORS FOR A VARIETY OF PURPOSES, INCLUDING PROGRAMS, AWARDS, RESEARCH AND OPERATIONS.
PART X, LINE 2:	THE FOUNDATION UTILIZES THE ACCOUNTING REQUIREMENTS ASSOCIATED WITH UNCERTAINTY IN INCOME TAXES USING THE PROVISIONS OF FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ASC 740, INCOME TAXES. USING THAT GUIDANCE, TAX POSITIONS INITIALLY NEED TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS WHEN IT IS MORE-LIKELY-THAN-NOT THE POSITIONS WILL BE SUSTAINED UPON EXAMINATION BY THE TAX AUTHORITIES. IT ALSO PROVIDES GUIDANCE FOR DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURE AND TRANSITION. AS OF JUNE 30, 2022 AND 2021, THE FOUNDATION HAS NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

Additional Data

[Return to Form](#)

Software ID:

Software Version:

Name of the organization
NATIONAL FOUNDATION FOR THE CENTERS FOR
DISEASE CONTROL AND PREVENTION INC

Employer identification number
58-2106707

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1

For grantmakers.

Does the organization maintain records to substantiate the amount of its grants or other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒

Yes

☐No
- 2

For grantmakers.

Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3

Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AM. & CARIBBEAN	0	0	GRANT MAKING	AWARD	5,114
(2) CENTRAL AM. & CARIBBEAN	0	15	PROGRAM SERVICES	PROFESSIONAL FEES	2,638,066
(3) CENTRAL AM. & CARIBBEAN	0	0	PROGRAM SERVICES	SUPPLIES - LAB SUPP	57,840
(4) CENTRAL AM. & CARIBBEAN	0	0	PROGRAM SERVICES	SUPPLIES - OTHER	201,453
(5) CENTRAL AM. & CARIBBEAN	0	0	PROGRAM SERVICES	EQUIPMENT, REPAIRS,	47,998
(6) EAST ASIA & PACIFIC	0	0	PROGRAM SERVICES	TRAVEL	21,680
(7) EAST ASIA & PACIFIC	0	17	PROGRAM SERVICES	PROFESSIONAL FEES	1,017,384
(8) EAST ASIA & PACIFIC	0	0	PROGRAM SERVICES	SUPPLIES	11,470
(9) EAST ASIA & PACIFIC	0	0	PROGRAM SERVICES	PRINTING, PROMOTION	49,196
(10) EUROPE	0	0	GRANT MAKING	AWARD	212,114
(11) EUROPE	0	10	PROGRAM SERVICES	PROFESSIONAL FEES	944,383
(12) EUROPE	0	0	PROGRAM SERVICES	TRAVEL	4,358
(13) EUROPE	0	0	PROGRAM SERVICES	SUPPLIES	34,033
(14) MIDDLE EAST & N. AFRICA	0	0	GRANT MAKING	AWARD	441,236
(15) MIDDLE EAST & N. AFRICA	0	9	PROGRAM SERVICES	PROFESSIONAL FEES	742,084
(16) MIDDLE EAST & N. AFRICA	0	0	PROGRAM SERVICES	EQUIPMENT, REPAIRS,	30,971
(17) MIDDLE EAST & N. AFRICA	0	0	PROGRAM SERVICES	TRAVEL	22,867
(18) MIDDLE EAST & N. AFRICA	0	0	PROGRAM SERVICES	CONFERENCES, MEETIN	4,400
(19) MIDDLE EAST & N. AFRICA	0	0	PROGRAM SERVICES	SUPPLIES - LAB SUPP	8,501
(20) NORTH AMERICA	0	0	PROGRAM SERVICES	PROFESSIONAL FEES	4,900
(21) NORTH AMERICA	0	0	PROGRAM SERVICES	TRAVEL	1,006
(22) SOUTH AMERICA	0	0	GRANT MAKING	AWARD	169,400
(23) SOUTH AMERICA	0	4	PROGRAM SERVICES	PROFESSIONAL FEES	1,265,931
(24) SOUTH AMERICA	0	0	PROGRAM SERVICES	CONFERENCES, MEETIN	132
(25) SOUTH AMERICA	0	0	PROGRAM SERVICES	SUPPLIES - LAB SUPP	89,613
(26) SOUTH AMERICA	0	0	PROGRAM SERVICES	SUPPLIES - OTHER	169,228
(27) SOUTH ASIA	0	0	GRANT MAKING	AWARD	169,400
(28) SOUTH ASIA	0	30	PROGRAM SERVICES	PROFESSIONAL FEES	1,265,931
(29) SOUTH ASIA	0	0	PROGRAM SERVICES	CONFERENCES, MEETIN	132
(30) SOUTH ASIA	0	0	PROGRAM SERVICES	SUPPLIES - LAB SUPP	89,613
(31) SOUTH ASIA	0	0	PROGRAM SERVICES	SUPPLIES - OTHER	169,228
(32) SUB-SAHARAN AFRICA	0	0	GRANT MAKING	AWARD	1,064,376
(33) SUB-SAHARAN AFRICA	0	120	PROGRAM SERVICES	PROFESSIONAL FEES	9,758,104
(34) SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	TRAVEL	56,105
(35) SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	CONFERENCES, MEETIN	17,366
(36) SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	POSTAGE, SHIPPING	14,959
(37) SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	PRINTING, PROMOTION	1,061
(38) SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	SUPPLIES - LAB SUPP	595,533
(39) SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	SUPPLIES - OTHER	418,090
(40) SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	DUES, SUBSCRIPTIONS	8,605
(41) SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	EQUIPMENT, REPAIRS,	249,565
3a Sub-total	0	32			4,001,005
b Total from continuation sheets to Part I.	0	173			18,072,421
c Totals (add lines 3a and 3b)	0	205			22,073,426

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE	MONITORING THE GLOBAL TOBACCO EPIDEMIC - RENEWAL	159,640		0		
(2)			EUROPE	MONITORING THE GLOBAL TOBACCO EPIDEMIC - RENEWAL	90,931		0		
(3)			EUROPE	MONITORING THE GLOBAL TOBACCO EPIDEMIC - RENEWAL	52,478		0		
(4)			MIDDLE EAST AND NORTH AFRICA	FIELD EPIDEMIOLOGY TRAINING PROGRAM (FETP) IN SAUDI ARABIA - PHASE II	372,447		0		
(5)			MIDDLE EAST AND NORTH AFRICA	MONITORING THE GLOBAL TOBACCO EPIDEMIC - RENEWAL	68,789		0		
(6)			SOUTH AMERICA	EMERGENCY RESPONSE FUND-CORONAVIRUS	50,000		0		
(7)			SOUTH ASIA	MONITORING THE GLOBAL TOBACCO EPIDEMIC - RENEWAL	89,139		0		
(8)			SOUTH ASIA	MONITORING THE GLOBAL TOBACCO EPIDEMIC - RENEWAL	72,462		0		
(9)			SOUTH ASIA	INDIAN ROTAVIRUS VACCINES IN EARLY ADOPTER COUNTRIES	7,800		0		
(10)			SUB-SAHARAN AFRICA	INTEGRATING GENOMIC DATA SURVEILLANCE IN SENEGAL	45,220		0		
(11)			SUB-SAHARAN AFRICA	INNOVATIONS IN ANTENATAL AND POSTNATAL CARE IN KENYA	173,946		0		
(12)			SUB-SAHARAN AFRICA	ANTIMALARIAL RESISTANCE MONITORING IN AFRICA	31,540		0		
(13)			SUB-SAHARAN AFRICA	TECHNICAL ASSISTANCE FOR PNEUMOCOCCAL CARRIAGE STUDY BURKINA FASO	40,000		0		
(14)			SUB-SAHARAN AFRICA	MATERNAL AND REPRODUCTIVE HEALTH IN TANZANIA SUSTAINABILITY EVALUATION	209,370		0		
(15)			SUB-SAHARAN AFRICA	EMERGENCY RESPONSE FUND-CORONAVIRUS	125,000		0		
(16)			SUB-SAHARAN AFRICA	EMERGENCY RESPONSE FUND-CORONAVIRUS	71,662		0		
(17)			SUB-SAHARAN AFRICA	MONITORING THE GLOBAL TOBACCO EPIDEMIC - RENEWAL	96,000		0		
(18)			SUB-SAHARAN AFRICA	TOBACCO CONTROL SURVEILLANCE IN AFRICA	74,863		0		
(19)			SUB-SAHARAN AFRICA	GAVI ALLIANCE PARTNER ENGAGEMENT FRAMEWORK (2020)	65,354		0		
(			SUB-SAHARAN	EMERGENCY	50,000		0		

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
20)			AFRICA	RESPONSE FUND-CORONAVIRUS					
(21)			SUB-SAHARAN AFRICA	EMERGENCY RESPONSE FUND-CORONAVIRUS	17,500		0		
(22)			SUB-SAHARAN AFRICA	EMERGENCY RESPONSE FUND-CORONAVIRUS	10,000		0		
(23)			SUB-SAHARAN AFRICA	EMERGENCY RESPONSE FUND-CORONAVIRUS	10,000		0		
(24)			SUB-SAHARAN AFRICA	EMERGENCY RESPONSE FUND-CORONAVIRUS	10,000		0		
(25)			SUB-SAHARAN AFRICA	EMERGENCY RESPONSE FUND-CORONAVIRUS	9,000		0		
(26)			SUB-SAHARAN AFRICA	MARTIN MEMORIAL	7,635		0		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

1115

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1

Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐ Yes

☒ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)*

☐ Yes

☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☐ Yes

☒ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐ Yes

☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)*

☐ Yes

☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).*

☐ Yes

☒ No

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

[illegible]

Additional Data

Software ID:

Software Version:

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) IMPROVING HEALTH	1	60,000			
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	THE CDC FOUNDATION MONITORS GRANT FUNDS IN MANY WAYS. MANY PROGRAMS ARE IMPLEMENTED IN COLLABORATION WITH THE CENTERS FOR DISEASE CONTROL AND PREVENTION, AN AGENCY OF THE FEDERAL GOVERNMENT. THE CDC WORKS CLOSELY WITH FOUNDATION PERSONNEL TO ACTIVELY MONITOR THE GRANTEE'S PROGRESS AND EXPENDITURES, AND BOTH THE GRANTEE AND THE CDC PROVIDE DETAILED INFORMATION TO THE CDC FOUNDATION'S PROGRAM OFFICERS WHO ARE ASSIGNED TO THE PROJECT. OFTEN, THE FOUNDATION PROGRAM OFFICER WILL MAKE SITE VISITS TO ENSURE THAT THE PROGRAM IS PROCEEDING AS AGREED AND THAT THE FUNDS ARE PROPERLY SPENT.

Additional Data

Return to Form

Software ID:
Software Version:

Name of the organization
NATIONAL FOUNDATION FOR THE CENTERS FOR
DISEASE CONTROL AND PREVENTION INC

Employer identification number
58-2106707

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- ☐ First-class or charter travel

☐ Housing allowance or residence for personal use
- ☐ Travel for companions

☐ Payments for business use of personal residence
- ☒ Tax idemnification and gross-up payments

☐ Health or social club dues or initiation fees
- ☐ Discretionary spending account

☐ Personal services (e.g., maid, chauffeur, chef)
- b** If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain
- 2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?
- 3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.
- ☐ Compensation committee

☐ Written employment contract
- ☒ Independent compensation consultant

☒ Compensation survey or study
- ☐ Form 990 of other organizations

☒ Approval by the board or compensation committee
- 4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:
- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

	Yes	No
1b	Yes	
2	Yes	
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
9		

- Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**
- 5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
- a** The organization?
- b** Any related organization?
If "Yes," on line 5a or 5b, describe in Part III.
- 6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
- a** The organization?
- b** Any related organization?
If "Yes," on line 6a or 6b, describe in Part III.
- 7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III
- 8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III
- 9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Part II

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1JUDITH MONROE PRESIDENT & CEO	(i)	413,705	40,000	0	11,600	3,127	468,432	0
	(ii)	0	0	0	0	- 0	- 0	0
2MONQUIE PATRICK COO	(i)	267,893	20,000	0	11,600	18,553	318,046	0
	(ii)	0	0	0	0	- 0	- 0	0
3LAUREN SMITH CHIEF HEALTH EQUITY & STRATEGY OFFIC	(i)	256,867	10,000	0	11,600	23,918	302,385	0
	(ii)	0	0	0	0	- 0	- 0	0
4LISA WADDELL CMO	(i)	252,792	0	0	11,600	23,606	287,998	0
	(ii)	0	0	0	0	- 0	- 0	0
5DANIEL PIERCE NELSON VP FOR COMMUNICATIONS	(i)	217,688	21,462	0	12,246	798	252,194	0
	(ii)	0	0	0	0	- 0	- 0	0
6LAURA ANGEL VP FOR ADVANCEMENT	(i)	193,686	17,500	0	11,600	11,162	233,948	0
	(ii)	0	0	0	0	- 0	- 0	0
7SUANNE BUGGY COALITION DEPUTY DIRECTOR	(i)	195,984	0	0	11,890	10,191	218,065	0
	(ii)	0	0	0	0	- 0	- 0	0
8MEGAN O'CONNELL MEDICAL EPIDEMIOLOGIST	(i)	185,336	0	0	13,962	16,852	216,150	0
	(ii)	0	0	0	0	- 0	- 0	0
9MICHAEL BRANDON TALLEY VP NON-INFECTIOUS DISEASE	(i)	181,898	10,000	0	11,600	10,236	213,734	0
	(ii)	0	0	0	0	- 0	- 0	0
10JENNIFER PARKER FORMER VP INFECTIOUS DISEASE PROG.	(i)	181,700	12,500	0	11,600	889	206,689	0
	(ii)	0	0	0	0	- 0	- 0	0
11ROLAND NGWANG MEDICAL EPIDEMIOLOGIST	(i)	183,418	0	0	0	22,554	205,972	0
	(ii)	0	0	0	0	- 0	- 0	0
12JEREMY MORTON SENIOR SURVEY METHODOLOGIST	(i)	159,936	1,200	0	11,338	9,784	182,258	0
	(ii)	0	0	0	0	- 0	- 0	0
13RACHNA CHANDORA AVP NON INFECTIOUS DISEASE PROG.	(i)	154,192	4,750	0	12,000	9,943	180,885	0
	(ii)	0	0	0	0	- 0	- 0	0
14CATHERINE ZILBER VP INFECTIOUS DISEASE PROG.	(i)	142,507	4,750	0	11,769	21,550	180,576	0
	(ii)	0	0	0	0	- 0	- 0	0
15ROBERT ABRAHAM AVP FOR ADVANCEMENT	(i)	147,841	7,000	0	12,069	9,928	176,838	0
	(ii)	0	0	0	0	- 0	- 0	0
16ANGELINA ESPARZA AVP JURISDICTIONAL SUPP. & HEALTH EQ	(i)	156,423	0	0	0	16,716	173,139	0
	(ii)	0	0	0	0	- 0	- 0	0
17TWANDA MICKLE SENIOR DIR. OF STRATEGIC OP.	(i)	129,669	7,500	0	10,765	13,908	161,842	0
	(ii)	0	0	0	0	- 0	- 0	0
18KATHY CAHILL VP FOR SYSTEMS INTEGRATIONS	(i)	160,078	0	0	0	1,756	161,834	0
	(ii)	0	0	0	0	- 0	- 0	0
19TURQUOISE SIDIBE AVP FOR EMERGENCY RESPONSE	(i)	139,390	11,000	0	11,163	149	161,702	0
	(ii)	0	0	0	0	- 0	- 0	0
20TERRI HEYNS AVP FOR COMMUNICATIONS	(i)	131,883	7,700	0	10,222	10,001	159,806	0
	(ii)	0	0	0	0	- 0	- 0	0
21KINETRA JOSEPH CAMPAIGN DIRECTOR	(i)	135,240	0	0	10,206	8,541	153,987	0
	(ii)	0	0	0	0	- 0	- 0	0
22ELIZABETH ARTEAGA DIR.TESTING & RESULTING OP.	(i)	152,483	0	0	0	170	152,653	0
	(ii)	0	0	0	0	- 0	- 0	0

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	ALL EMPLOYEES WHO WORK 30 HOURS OR MORE ARE PROVIDED DISABILITY INSURANCE. THE EMPLOYEE'S SALARY IS GROSSED UP FOR THE PREMIUM AND THEN THE INSURANCE PREMIUM IS DEDUCTED AND PAID TO THE VENDOR.
PART I, LINE 1B	THE FOUNDATION FOLLOWS IRS PRESCRIBED PROCEDURES FOR ESTABLISHING A REBUTTABLE PRESUMPTION OF REASONABLENESS OF ALL COMPENSATION PAID TO "DISQUALIFIED PERSONS" (AS DETAILED IN SECTION 4958 OF THE INTERNAL REVENUE CODE OF 1986) THE FOUNDATION HIRES AN INDEPENDENT, INTERNATIONAL HUMAN RESOURCES FIRM TO PROVIDE MARKET DATA FOR ALL STAFF POSITIONS. THIS FIRM USES A VARIETY OF SURVEYS AND USING THESE AND THEIR EXPERTISE, IT RECOMMENDS MARKET VALUES AND SALARY RANGES FOR STAFF POSITIONS. THE EXECUTIVE COMMITTEE OF THE FOUNDATION WHICH IS COMPRISED OF THE CHAIR, TREASURER, SECRETARY, AND THE CHAIRS OF THE ADVANCEMENT AND NOMINATING COMMITTEES ARE INDEPENDENT, VOTING MEMBERS OF THE BOARD OF DIRECTORS. THE COMMITTEE REVIEWS THE DATA, EVALUATES THE PERFORMANCE OF THE PRESIDENT/CEO AND VOTES ON HER COMPENSATION. THESE ACTIONS ARE DOCUMENTED IN ACCORDANCE WITH THE REGULATIONS UNDER SECTION 4958 OF THE CODE.

Additional Data

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Software ID:

Software Version:

Name of the organization
NATIONAL FOUNDATION FOR THE CENTERS FOR
DISEASE CONTROL AND PREVENTION INC

Employer identification number
58-2106707

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	10	75,924	FAIR MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions
for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that
it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for
exempt purposes for the entire holding period?
.

31 If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?
.

32a If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II.

Yes

No

No

No

No

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference

Explanation

Additional Data

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Software Version:

SCHEDULE O (Form 990) Department of the Treasury Internal Revenue Service		Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.		OMB No. 1545-0047 2021 Open to Public Inspection	
Name of the organization NATIONAL FOUNDATION FOR THE CENTERS FOR DISEASE CONTROL AND PREVENTION INC			Employer identification number 58-2106707		
Return Reference		Explanation			
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:		THE CDC FOUNDATION HELPS THE CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) DO MORE, FASTER, BY FORGING EFFECTIVE PARTNERSHIPS BETWEEN CDC AND FOUNDATIONS, ORGANIZATIONS, CORPORATIONS AND INDIVIDUALS TO FIGHT THREATS TO HEALTH AND SAFETY.			
FORM 990, DESCRIPTION OF THE ORGANIZATION:		THE FOUNDATION IS A DYNAMIC ORGANIZATION WITH HUNDREDS OF PROGRAMS THROUGHOUT THE WORLD TO ADDRESS VARIOUS PUBLIC HEALTH CHALLENGES. THE FOUNDATION'S REVENUE RECOGNITION POLICIES, CAN RESULT IN PROGRAM CONTRIBUTION REVENUES BEING RECOGNIZED IN A DIFFERENT PERIOD FROM THE APPLICABLE PROGRAM COSTS AND EXPENSES, WHICH CAN ALSO IMPACT THE CHANGE IN NET ASSETS IN ANY GIVEN REPORTING PERIOD. FOR THE YEAR ENDED JUNE 30, 2022, THE FOUNDATION INCURRED SIGNIFICANT PROGRAM COSTS AND EXPENSES, INCLUDING A HEADCOUNT INCREASE OF OVER 400 PERCENT, FOR WHICH THE CORRESPONDING CONTRIBUTION REVENUE WAS RECORDED IN PRIOR PERIODS, RESULTING IN A REDUCTION IN NET ASSETS FOR THE YEAR ENDED JUNE 30, 2022. EACH YEAR, PROGRAMS AND FUNDING SOURCES MIGHT CHANGE, EFFECTING THE TIMING OF REVENUE STREAMS AND EXPENSES, AND THUS CHANGES IN NET ASSETS.			
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:		COVID-19 RESPONSE-STRENGTHENING COMMUNITIES AND JURISDICTIONAL HEALTH DEPARTMENTS IN FY2022, THE CDC FOUNDATION CONTINUED ITS COVID-19 EMERGENCY RESPONSE ACTIVITIES. THE U.S. CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) FUNDED SEVERAL FOUNDATION PROJECTS, TO SUPPORT CAPACITY-BUILDING ASSISTANCE (CBA) TO HELP COMMUNITY-BASED ORGANIZATIONS (CBO) SECURE AND DEVELOP THE SKILLS, TOOLS, STAFF, AND RESOURCES TO RESPOND TO THE COVID-19 PANDEMIC CHALLENGES. THE PROJECT FOCUSED ON THREE KEY AREAS: DEVELOPING CBO-SPECIFIC RESOURCES; SUPPORTING THE DEVELOPMENT OF EFFECTIVE, MULTISECTORAL PARTNERSHIPS; AND ENHANCING THE SUSTAINABILITY AND VIABILITY OF CBOS, ALLOWING THEM TO CREATE STRONGER, MORE RESILIENT COMMUNITIES. THE CBA SERVICES PROVIDED ADDITIONAL SUPPORT BY PROVIDING TAILORED TECHNICAL ASSISTANCE, HOSTED WEBINARS, FACILITATED LEARNING GROUPS, AND MORE. THESE SERVICES HELPED CBOS DEVELOP COMPETENCIES AND SKILLS THAT INCREASED THEIR EFFECTIVENESS AND CONTRIBUTED TO THEIR SUSTAINABILITY. WITH THE SUCCESS OF ITS FY2020-2021 COVID-19 CORPS PROJECT, WHICH DEPLOYED MORE THAN 770 PERSONNEL TO AID HEALTH DEPARTMENTS IN 79 JURISDICTIONS WITH CONTACT TRACING, DISEASE INVESTIGATIONS AND OTHER EMERGENCY CORONAVIRUS ACTIVITIES, THE CDC FOUNDATION, THROUGH A GRANT FROM THE CENTERS FOR DISEASE CONTROL AND PREVENTION, SCALED UP ITS RESPONSE IN FY2022 BY SUPPLYING LARGER NUMBERS OF WORKFORCE STAFF TO SUPPORT HEALTH DEPARTMENTS IN ALL 50 STATES, PLUS MULTIPLE TERRITORIES, CITIES AND TRIBAL AREAS. AS PART OF THIS PROJECT, THE CDC FOUNDATION RECRUITED AND HIRED APPROXIMATELY 2,600 PUBLIC HEALTH WORKERS TO CONTINUE TO BRIDGE GAPS IN HEALTH DEPARTMENT WORKFORCES ACROSS THE COUNTRY AND BUILD A DIVERSE POOL OF PUBLIC HEALTH PROFESSIONALS FOR THE FUTURE. ANOTHER PROJECT, WAS AIMED AT ADDING APPROXIMATELY 300 STAFF TO SUPPORT VACCINE AWARENESS THROUGH STATE AND LOCAL HEALTH DEPARTMENTS WITH PARTICULAR ATTENTION PAID TO REACHING COMMUNITIES IN NEED. THESE PROJECTS, WIDENED TO INCLUDE A BROADER BASE OF PUBLIC-HEALTH PROFESSIONALS, INCLUDING POLICY ANALYSTS AND ATTORNEYS, LABORATORY PROJECT MANAGERS TO HELP CAPTURE DATA ON VARIANTS AND DEVELOP WASTEWATER SURVEILLANCE PROGRAMS, INFORMATICIANS TO SUPPORT DATA MODERNIZATION EFFORTS AND OTHERS. PARTICULAR AREAS OF FOCUS INCLUDED SCHOOLS, WHERE FIELD EMPLOYEES HELPED ESTABLISH CONNECTIONS BETWEEN HEALTH DEPARTMENTS AND K-12 SCHOOLS TO SUPPORT STUDENTS, PARENTS AND STAFF WITH CONTACT TRACING AND INFORMATION SHARING. HEALTH EQUITY PROGRAM MANAGERS WERE HIRED IN MANY JURISDICTIONS TO ADDRESS THE ONGOING CHALLENGES OF SOCIAL INEQUITY AND UNEQUAL ACCESS TO CARE BY DEVELOPING STRATEGIC PROGRAMS AND PARTNERSHIPS, ASSURING INCLUSIVE DATA MANAGEMENT AND PARTICIPATING IN COMMUNITY OUTREACH AND EDUCATION. ASSIGNED TO TRIBAL AREAS, CDC FOUNDATION FIELD EMPLOYEES-MANY OF THEM TRIBAL MEMBERS THEMSELVES-WORKED TO STRENGTHEN TRIBAL PUBLIC HEALTH INFRASTRUCTURE THROUGH COMMUNICATIONS, VACCINATION INFORMATION SUPPORT, WASTEWATER PROJECTS AND POLICY INITIATIVES. VACCINE DEMAND STRATEGISTS DEVELOPED INNOVATIVE APPROACHES TO ADDRESS HESITANCY AND PROMOTE VACCINE UPTAKE IN RURAL, SUBURBAN AND URBAN NEIGHBORHOODS ACROSS THE NATION. BY MEETING JURISDICTIONAL NEEDS AND EXPECTATIONS WHEN AND WHERE THEY WERE NEEDED MOST, THE WORKFORCE/VACCINE INITIATIVE CONTINUED AS THE FISCAL YEAR ENDED TO MAKE AN INVALUABLE CONTRIBUTION TO PUBLIC HEALTH, BOTH PRESENT AND FUTURE.			
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:		DATA FOR HEALTH THE CDC FOUNDATION CONTINUED ITS PARTNERSHIP ON THE DATA FOR HEALTH INITIATIVE IN FY2022. THIS INNOVATIVE EFFORT IS AIMED AT SOLVING THE WORLD'S MOST PRESSING PUBLIC HEALTH PROBLEMS WITH TECHNOLOGY AND DATA, HELPING TO FILL MAJOR GAPS IN GLOBAL HEALTH. IN 2015 IT WAS ESTIMATED THAT MORE THAN 50 MILLION PEOPLE DIED AROUND THE GLOBE, AND NEARLY 30 MILLION OF THESE DEATHS WERE NOT RECORDED-A MAJOR OBSTACLE TO DEVELOPING DATA-DRIVEN POLICIES TO IMPROVE PUBLIC HEALTH. AS PART OF THE DATA FOR HEALTH INITIATIVE, THE CDC FOUNDATION, WORKING ALONGSIDE EXPERTS AT THE U.S. CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) AND OTHER PARTNERS, SUPPORTS SELECTED COUNTRY GOVERNMENTS IN AFRICA, ASIA AND LATIN AMERICA TO STRENGTHEN THEIR PUBLIC HEALTH DATA SYSTEMS AND IMPROVE CAPACITY IN MINISTRIES OF HEALTH TO USE HEALTH DATA TO INFORM POLICY DEVELOPMENT AND COMMUNICATE HEALTH RESEARCH AND PRIORITIES TO DIVERSE AUDIENCES. THIS INCLUDES MULTI-YEAR COMPREHENSIVE PARTNERSHIPS WITH GOVERNMENTS IN 25 COUNTRIES AS WELL AS SUPPORT FOR SMALLER SCALE TIME-BOUND PROJECTS IN 15 COUNTRIES. FINALLY, IN A SUBSET OF COUNTRIES, THE PARTNERSHIP CONVENES EXPERTS TO PILOT AN INNOVATIVE MOBILE PHONE RISK FACTOR SURVEY FOR NONCOMMUNICABLE DISEASES. TO DATE, MORE THAN FIVE BILLION PEOPLE HAVE BEEN REACHED BY THIS PROJECT, LIVING IN COUNTRIES WITH IMPROVED CAPACITY TO USE DATA TO INFORM CRITICAL PUBLIC HEALTH DECISIONS. SINCE THE INITIATIVE'S LAUNCH IN 2015, MORE THAN 150 DISCRETE INTERVENTIONS WERE COMPLETED, PROVIDING			

Return Reference	Explanation
	GOVERNMENTS WITH TECHNICAL ASSISTANCE AND CATALYTIC FUNDING TO SOLVE CHALLENGES IN CIVIL REGISTRATION AND VITAL STATISTICS FUNCTIONS AND CONTRIBUTE TO INITIAL SCALE UP OF INSTITUTIONALIZED SOLUTIONS. RESULTS INCLUDE MORE THAN 13 MILLION IMPROVED OR NEWLY COUNTED DEATHS AND NEARLY 8 MILLION ADDITIONAL BIRTH RECORDS RECORDED. SUPPORT FOR RAPID MORTALITY SURVEILLANCE DURING THE COVID-19 PANDEMIC HELPED ENABLE 17 COUNTRIES TO COUNT MORE THAN 5 MILLION DEATHS BY AGE AND PLACE OF DEATH IN JUST OVER TWO YEARS. SINCE 2015, THE INITIATIVE HAS RECORDED 60 SUSTAINABLE CHANGES IN CIVIL REGISTRATION AND VITAL STATISTICS SYSTEMS AS MEASURED BY NEW OR IMPROVED LAWS, REGULATIONS, RULES, STANDARDS, PROCESSES OR STANDARD OPERATING PROCEDURES. IN ADDITION, PARTICIPANTS FROM 14 COUNTRIES COMPLETED THE DATA TO POLICY TRAINING PROGRAM AND PRODUCED MORE THAN 100 POLICY BRIEFS, 50 OF WHICH HAVE BEEN ENACTED OR ARE IN THE PROCESS OF BEING ENACTED OR IMPLEMENTED. AND, SEVEN COUNTRIES HAVE LAUNCHED NEW OR STRENGTHENED EXISTING PUBLIC HEALTH BULLETINS. FINALLY, PILOT PROJECTS TO CONDUCT MOBILE PHONE SURVEYS THAT COLLECT NONCOMMUNICABLE DISEASE RISK FACTOR DATA HAVE BEEN COMPLETED IN SEVEN COUNTRIES. THIS IS THE FIRST TIME THAT A MOBILE PHONE SURVEY OF THIS KIND HAS BEEN CONDUCTED, AND THE RESULTS ARE BEING COMPARED TO THE WORLD HEALTH ORGANIZATION'S STEPWISE APPROACH TO SURVEILLANCE (STEPS) SURVEY IN THE SAME COUNTRIES TO EVALUATE ACCURACY AND REPRESENTATIVENESS OF THIS INNOVATION.
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:	OPIOID SURGE STAFFING BUILDING ON ITS FY2018 WORK IN ASSISTING CAPACITY-BUILDING IN STATE HEALTH DEPARTMENTS TO COMBAT THE RAPID INCREASE OF DEATHS RELATED TO OPIOID OVERDOSES ACROSS THE COUNTRY, THE CDC FOUNDATION HAD TWO SPECIFIC ONGOING PROJECTS DESIGNED TO FURTHER ADDRESS THIS ISSUE IN FY2022. CDC AWARDED A COOPERATIVE AGREEMENT TO THE FOUNDATION FOR A CAPACITY-BUILDING PROGRAM KNOWN AS OVERDOSE DATA TO ACTION (OD2A). OD2A SUPPORTS MORE THAN 150 FIELD EMPLOYEES IN 22 POSITION TITLES ACROSS 55 JURISDICTIONS AND SUBRECIPIENTS TO IMPLEMENT OVERDOSE SURVEILLANCE AND PREVENTION ACTIVITIES. IN ADDITION TO THE HIRING AND MANAGEMENT OF FIELD STAFF, THERE IS ALSO A TRAINING COMPONENT TO THIS PROJECT. THE FORMAL TRAINING PLAN INCLUDES OPPORTUNITIES FOR WORKFORCE DEVELOPMENT AND CROSS-JURISDICTIONAL LEARNING THROUGHOUT THE PROJECT AS WELL AS EVALUATIONS TO GAUGE THE VALUE OF THE TRAINING RESOURCES AND LEARNING EXPERIENCE. IN ADDITION, THE OVERDOSE RESPONSE STRATEGY (ORS) IS AN INITIATIVE DESIGNED TO ENHANCE PUBLIC HEALTH-PUBLIC SAFETY COLLABORATION AND STRENGTHEN EFFORTS TO REDUCE DRUG OVERDOSE DEATHS. THE ORS IS FUNDED BY CDC AND THE OFFICE OF NATIONAL DRUG CONTROL POLICY (ONDCP) THROUGH THE HIGH INTENSITY DRUG TRAFFICKING AREA (HIDTA) PROGRAM TO HELP COMMUNITIES REDUCE FATAL AND NON-FATAL DRUG OVERDOSE RATES BY IMPROVED INFORMATION SHARING ACROSS PUBLIC HEALTH AND PUBLIC SAFETY AGENCIES AND BY SUPPORTING EVIDENCE-BASED INTERVENTIONS. SPECIFICALLY, ORS AIMS TO BUILD THE CAPACITY OF 33 HIDTA PROGRAMS THROUGH SOURCING, HIRING, TRAINING, MANAGING AND PROVIDING TECHNICAL ASSISTANCE TO 60 PUBLIC HEALTH ANALYSTS AND A NATIONAL COORDINATION TEAM TO AID IN LOCAL OVERDOSE PREVENTION AND RESPONSE ACTIVITIES.
FORM 990, PART VI, SECTION A, LINE 4	THE BYLAWS WERE AMENDED IN JULY 2021. THE CHANGES INCLUDE MODIFICATION OF THE BOARD CHAIR TERM, ADDITION OF VICE CHAIR AND PAST CHAIR, AND ALLOWING FOR THE REMOVAL OF A BOARD MEMBER IN THE EVENT CERTAIN CONDITIONS ARE MET.
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 WAS PREPARED BY THE FOUNDATION'S PUBLIC ACCOUNTING FIRM IN CONJUNCTION WITH KEY ACCOUNTING STAFF AND OTHER MEMBERS OF MANAGEMENT OF THE CDC FOUNDATION. SUBSEQUENTLY, THE FORM 990 WAS REVIEWED BY LEGAL COUNSEL. PRIOR TO ELECTRONIC FILING, KEY ACCOUNTING STAFF REVIEWED THE FORM 990 WITH THE FOUNDATION'S CEO/PRESIDENT, COO, IN-HOUSE LEGAL COUNSEL, AND VP OF COMMUNICATIONS. IN ADDITION, THE FORM 990 WAS SENT TO THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS FOR THEIR REVIEW, COMMENTS, AND QUESTIONS AND THEN GIVEN TO THE BOARD FOR THEIR REVIEW.
FORM 990, PART VI, SECTION B, LINE 12C	ALL MEMBERS OF THE BOARD ARE REQUIRED TO SIGN THE CONFLICT OF INTEREST POLICY ANNUALLY. THE FOUNDATION MAINTAINS A COPY OF THE SIGNATURE INDICATING COMPLIANCE WITH THE RULES. LEGAL COUNSEL REVIEWS THE POLICY ANNUALLY WITH ALL BOARD MEMBERS.
FORM 990, PART VI, SECTION B, LINE 15	AN INDEPENDENT, INTERNATIONAL HUMAN RESOURCES CONSULTING FIRM IS PROVIDED WITH ALL POSITION DESCRIPTIONS AND THAT FIRM PREPARES A SALARY STUDY INCLUDING MARKET VALUES FOR EACH POSITION AND RANGES FOR EVERY GRADE. THE EXECUTIVE COMMITTEE OF THE BOARD, CONSISTING OF THE CHAIR, TREASURER, SECRETARY, NOMINATING CHAIR, AND ADVANCEMENT CHAIR ARE PROVIDED WITH THE INFORMATION FROM THE CONSULTANT. THIS COMMITTEE REVIEWS THE PERFORMANCE OF THE PRESIDENT/CEO, SETS GOALS AND OBJECTIVES FOR THE FOLLOWING YEAR AND DETERMINES THE PRESIDENT'S COMPENSATION PACKAGE FOR THE FOLLOWING YEAR.
FORM 990, PART VI, SECTION C, LINE 19	THE FOUNDATION POSTS THE PRIOR TEN YEARS OF 990'S AND FORM 1023 ON ITS WEBSITE. THE FOUNDATION POSTS THE PRIOR THREE YEARS OF AUDITS ON ITS WEBSITE. THE FOUNDATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.
FORM 990, PART IX, LINE 11G	OTHER FEES: PROGRAM SERVICE EXPENSES 77,443,696. MANAGEMENT AND GENERAL EXPENSES 5,194,323. FUNDRAISING EXPENSES 478,489. TOTAL EXPENSES 83,116,508.
FORM 990, PART IX, LINE 11G	THE FOUNDATION, WORKING IN CONCERT WITH THE CDC, SPENDS THE VAST MAJORITY OF ITS FUNDS DIRECTLY FOR PROGRAMS AND PROJECTS THAT FURTHER ITS EXEMPT PURPOSES. THESE DISBURSEMENTS ARE EITHER IN THE FORM OF GRANTS OR AWARDS OR IN THE FORM OF FEES FOR SERVICES. FEES FOR SERVICES IN FY22 WERE PRIMARILY RELATED TO STATE-FUNDED CONTRACTS TO PROVIDE STAFF TO HEALTH DEPARTMENTS NATIONWIDE. THE AUTHORITY OF THE FOUNDATION TO PAY FOR THESE SERVICES IS ADDRESSED IN THE FEDERAL STATUTE CREATING THE FOUNDATION AND PLAYS A VITAL ROLE IN HELPING CDC ACCOMPLISH ITS MISSION. THE FOUNDATION MONITORS THESE FEES AND SERVICES TO ENSURE THAT THE AMOUNTS PAID ARE REASONABLE AND THAT PROGRAM GOALS ARE BEING MET.

Additional Data

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