PUBLIC INSPECTION COPY

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

OMB No. 1545-0047

Department of the Treasury

A For the 2023 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable: Address change CENTER FOR DISASTER PHILANTHROPY, INC. Name 45-5257937 change Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 700 202-464-2018 ONE THOMAS CIRCLE, NW 30,724,437. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended WASHINGTON, DC 20005 H(a) Is this a group return return Applica-F Name and address of principal officer: PATRICIA MCILREAVY Yes X No for subordinates? tion pending SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions WWW.DISASTERPHILANTHROPY.ORG J Website: H(c) Group exemption number K Form of organization: X Corporation Other L Year of formation: 2012 M State of legal domicile: DC Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: MOBILIZING PHILANTHROPY TO Activities & Governance STRENGTHEN COMMUNITIES TO WITHSTAND AND RECOVER FROM DISASTERS. 2 if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 12 4 29 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0. Prior Year **Current Year** 40,316,703. 29,525,092. Contributions and grants (Part VIII, line 1h) Revenue 560,625. 634,829. Program service revenue (Part VIII, line 2g) 213,757. 563.875. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 2,300. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 641. 11 30,724,437. 41,093,385. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 28,228,486. 22,178,193. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 3,292,920. 2,737,985. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 952,286. 1,085,770. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 31,918,757. 26,556,883. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 9,174,628. 4,167,554. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 0 41,391,035. 46,447,620. Total assets (Part X, line 16) 2,704,228. 3,593,259 21 Total liabilities (Part X, line 26) let let 38,686,807. 42,854,361 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign PATRICIA MCILREAVY, PRESIDENT & CEO Here Type or print name and title Date PTIN Check Print/Type preparer's name Preparer's signature 06/07/24 P01246734 JILL M. BOYLE, CPA JILL M. BOYLE, CPA self-employed Paid SIKICH LLC Firm's EIN 36-3168081 Preparer Firm's name 333 JOHN CARLYLE STREET, Use Only Phone no. (703) 836-1350 ALEXANDRIA, VA 22314

X Yes

May the IRS discuss this return with the preparer shown above? See instructions

	rt 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 MISSION OF CDP IS TO MOBILIZE PHILANTHROPY TO STRENGTHEN THE
	ABILITY OF COMMUNITIES TO WITHSTAND DISASTERS AND RECOVER EQUITABLY
	WHEN THEY OCCUR.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? Yes X No
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X 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 \$64,051. including grants of \$) (Revenue \$) BUILD AWARENESS. THROUGH OUR WEBSITE, ONLINE COMMUNITY, AND WEBINARS,
	DONORS CAN FIND INFORMATION, ANALYSIS AND EDUCATIONAL RESOURCES ABOUT
	DISASTERS. USERS HAVE THE ABILITY TO ACCESS INFORMATION BASED ON THEIR
	INTERESTS AS WELL AS ENGAGE IN DIALOGUES WITH OTHER DONORS. THIS
	INFORMATION IS ALSO SHARED WITH OUR PARTNERS, CLIENTS AND THE MEDIA.
	THE CHARLES THE PROPERTY OF TH
	CDP PROVIDES INFORMATION ON DISASTERS AND DISASTER PHILANTHROPY VIA ITS
	WEBSITE, BLOGS, WEBINARS, SPEAKING ENGAGEMENTS, AND SOCIAL MEDIA TOOLS.
	IN ADDITION TO PROVIDING INFORMATION ON DISASTERS. IN 2023, CDP'S
	UNIQUE WEBSITE PAGE VIEWS AVERAGED ALMOST 224,000 PER MONTH, WITH AN
	AVERAGE OF MORE THAN 155,000 MONTHLY USERS AND A CONSIDERABLE SPIKE IN
	TRAFFIC DURING TIMES OF DISASTERS.
4b	(Code:) (Expenses \$
	IMPART KNOWLEDGE FOR DONORS WHO PREFER TO HAVE A MORE TAILORED
	STRATEGY, CDP PERFORMS CONSULTING SERVICES ENGAGEMENTS TO HELP THEM FIT
	THEIR DISASTER GIVING INTO LARGER PHILANTHROPIC GOALS.
	CDP PROVIDES THE FOLLOWING CONSULTING SERVICES:
	GRANTS MANAGEMENT TO ASSIST ORGANIZATIONS THAT WANT TO INCREASE THE
	EFFECTIVENESS OF THEIR DISASTER GIVING;
	RESEARCH AND ANALYSIS TO ASSIST ORGANIZATIONS THAT ARE LOOKING FOR BEST PRACTICES, DATA AND RESOURCES TO DEEPEN THEIR DISASTER-GIVING
	WORK.
	STRATEGIC PLANNING - TO CUSTOMIZE DISASTER PHILANTHROPY STRATEGIES
4c	00 140 011 00 150 100
70	FACILITATE ACCESS. IN ORDER TO HELP DONORS COLLABORATE AND BE MORE
	STRATEGIC WITH THEIR DISASTER PHILANTHROPY, CDP MANAGES BOTH GENERAL
	AND DISASTER-SPECIFIC DISASTER FUNDS. OUR TEAM OF PROGRAM EXPERTS, WITH
	DEEP KNOWLEDGE IN DOMESTIC AND INTERNATIONAL DISASTER PHILANTHROPY,
	MANAGES FUNDS ACROSS A RANGE OF NEEDS BEFORE, DURING, AND AFTER A
	DISASTER, DIRECTING RESOURCES STRATEGICALLY AND EFFICIENTLY TO HELP
	COMMUNITIES RECOVER EQUITABLY MORE QUICKLY AND BECOME MORE RESILIENT.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$\frac{\text{including grants of \$}}{\text{Normal problem}}\) (Revenue \$\text{Normal problem}\$)
4e	Total program service expenses 23,541,166.
	Form 990 (2023)

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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			l
	Schedule D, Part III	8	_	X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			.,
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		v	
	Part VI	11a	X	├
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		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			x
d	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
u		11d		х
•	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
	the organization's siability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			\vdash
124	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			\vdash
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	igsquare
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			l
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	_	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			3.7
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			\ _{3,7}
	complete Schedule G, Part III	19	<u> </u>	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		\vdash
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Х	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	Δ	

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			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		X
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	X	
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		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	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		<u> </u>
	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			\ ₃₇
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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	051		X
00	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	00		x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	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		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,	21		1
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
u	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
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		X
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? If "Yes," complete Schedule R, Part I	33		X
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		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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?			\ _{3,7}
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			_V
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
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	Х	
Pai		30	22	
	Check if Schedule O contains a response or note to any line in this Part V			
	Check is defined to Containe a responde of note to dry line in this rait v		Yes	No
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		.03	140
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_	(gambling) winnings to prize winners?	1c		
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Form 990 (2023) CENTER FOR DISASTER PHILANTHROPY, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	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		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	, , , , , , , , , , , , , , , , , , , ,	5a	-	<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	X
	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		X
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).			77
а	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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			37
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			37
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
9	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.	0-		
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: Initiation fees and capital contributions included on Part VIII, line 12			
a				
b				
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a			
a	Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources against			
D				
100	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note: See the instructions for additional information the organization must report on Schedule O.	154		
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			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	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		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			
			000	

332005 12-21-23

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent			
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
_	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
7 4	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7 4		
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	75		
а	The governing body?	8a	Х	
h	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	OD	21	
9		9		x
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		
000	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a	162	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	IUa		
D		10b		
44.	and branches to ensure their operations are consistent with the organization's exempt purposes?	11a	Х	\vdash
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Ha	21	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	40-	Х	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40	Х	
40	on Schedule O how this was done	12c	X	_
13	Did the organization have a written whistleblower policy?	13		
14	Did the organization have a written document retention and destruction policy?	14	X	
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?		37	
	The organization's CEO, Executive Director, or top management official	15a	X	<u> </u>
b	Other officers or key employees of the organization	15b		X
	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			7.7
	taxable entity during the year?	16a		X
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		
Sec	tion C. Disclosure		3.50	160
17	List the states with which a copy of this Form 990 is required to be filedCA, CO, CT, FL, GA, HI, IL, KS, KY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial	
	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			
	THE ORGANIZATION - 202-464-2018			
	ONE THOMAS CIRCLE, NW, 700, WASHINGTON, DC 20005			
332006	SEE SCHEDULE O FOR FULL LIST OF STATES	Form	990	(2023)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	box	not cl , unles	ss per	ition more son is	than o	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) PATRICIA MCILREAVY PRESIDENT & CEO	40.00			Х				350,867.	0.	13,616.
(2) REGINE WEBSTER (END 10/27/23) VICE PRESIDENT	36.00			Х				215,816.	0.	8,070.
(3) DEVIN MATHIAS SENIOR DIRECTOR, DEVELOPMENT	40.00					х		142,035.	0.	7,461.
(4) ANNA KRISTINA MOORE SENIOR DIRECTOR, MARKETING AND COMMU	40.00	Г	П	Г		X		141,194.	0.	
(5) SALLY RAY	40.00	H	Н	Н		Г	Н			6,835.
(6) BRENDA CAMACHO	40.00			Н		X		141,069.	0.	5,898.
CHIEF FINANCIAL AND OPERATIONS OFFIC (7) ALEX GRAY	40.00		Н	X				140,668.	0.	6,051.
DIRECTOR, INTERNATIONAL FUNDS (8) TANYA GULLIVER-GARCIA	40.00		Н	Н	_	Х	L	130,004.	0.	4,455.
DIRECTOR, LEARNING AND PARTNERSHIPS (9) JENNIFER COMMANDER (END 5/12/23	30.00		Н	Н		Х		122,775.	0.	5,962.
CHIEF FINANCIAL OFFICER			Ш	Х				118,576.	0.	3,462.
(10) TIFFANY BENJAMIN CHAIR	3.00	Х		Х				0.	0.	0.
(11) HEATHER GERONEMUS VICE CHAIR	1.00	х		Х				0.	0.	0.
(12) TIANA AUSTEL BOARD FINANCE & AUDIT COMMITTEE, MEM	1.00	Х						0.	0.	0.
(13) TRAVIS CAMPBELL BOARD TREASURER AND FINANCE & AUDIT	1.00	х		Х				0.	0.	0.
(14) PAUL CHEUNG BOARD GOVERNANCE & NOMINATIONS COMMI	1.00	Х						0.	0.	0.
(15) RON ESTRADA	1.00	Г	П	Н						
BOARD MEMBER (16) CHRISTINE RILEY MILLER	1.00	Х	H	H				0.	0.	0.
BOARD GOVERNANCE & NOMINATIONS COMMI (17) SABRENA SILVER	1.00	Х	H	H				0.	0.	0.
BOARD MEMBER		Х						0.	0.	0. Form 990 (2022)

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Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	d Hig	ghes	st C	ompensated Employee	s (continued)				
(A)	(B)			(0	C)			(D)	(E)			(F)	
Name and title	Average	(do		Pos heck		<mark>)</mark> than ເ	one	Reportable	Reportable		Es	stimate	ed
	hours per week	box	, unle	ss per	rson i	s both	n an	compensation	compensatio		ar	nount	of
	(list any	-	oor ar	1444	110010	17 11 113	100)	from the	from related organization		oon	other pensa	tion
	hours for	direct				Ļ		organization	(W-2/1099-MIS			rom th	
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	,0,		anizat	
	organizations	Individual trustee or director	Institutional trustee		oyee	Highest compensated employee		1099-NEC)	ĺ		an	d relat	ed
	below	vidua	itutio	Officer	sey employee	hest coloyee	Former				orga	anizati	ons
	line)	Indi	Inst	0#i	Key	Hig	휸				<u> </u>		
(18) JEFF TERRY	1.00												
BOARD GOVERNANCE & NOMINATIONS COMMI	1 00	Х	L		L	┡	⊢	0.		0.	<u> </u>		0.
(19) ANITA WHITEHEAD	1.00												^
BOARD GOVERNANCE & NOMINATIONS COMMI	1 00	Х	H	H	H	⊬	⊢	0.		0.	<u> </u>		0.
(20) TAMARA WINFREY-HARRIS	1.00	ļ ,,								_			0
BOARD FINANCE & AUDIT COMMITTEE, MEM	1 00	Х	H	H	H	⊢	⊢	0.		0.			0.
(21) KRISTEN WOOLF	1.00	- -		Ι,,						_			0
BOARD SECRETARY	-	X	H	Х	Н	H	Н	0.		0.	-		0.
		ł											
	 	Н	\vdash	\vdash	Н	⊢	Н			\dashv		—	
		ł											
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	\vdash	1											
	 	Н				\vdash	т			\neg			
		1											
1b Subtotal								1,503,004.		0.	6	1,8	10.
c Total from continuation sheets to Part VI	I. Section A							0.		0.			0.
d Total (add lines 1b and 1c)								1,503,004.		0.	6	1,8	10.
2 Total number of individuals (including but n								eceived more than \$100,	000 of reportable	•			
compensation from the organization									•				9
												Yes	No
3 Did the organization list any former officer,	director, truste	ee, k	кеу е	empl	loye	e, or	hig	hest compensated emp	loyee on				
line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4 For any individual listed on line 1a, is the su								•	•				
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	J f	for such individual			4	Х	
5 Did any person listed on line 1a receive or a	-				-			-					
rendered to the organization? If "Yes," com	<u>plete Schedule</u>	e J f	or st	ıch <u>ı</u>	oers	on .					5		X
Section B. Independent Contractors													
1 Complete this table for your five highest co	-									ensat	tion fro	om	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin I		ear.	—			
(A) Name and business	address	NTC	ONE	7				(B) Description of s	ervices	C		C) nsatio	n
Traine and business	addrood	TAC)INI				\dashv	Bosomption or c	01 11000		ompo	Toution	
							\neg						
							\neg						
							_						
2 Total number of independent contractors (ii	ncluding but no	ot lir	nited	d to	thos	se lis	ted	above) who received me	ore than				
\$100,000 of compensation from the organization	zation				()							
											Form	990 (2023)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII Revenue excluded Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b **b** Membership dues c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above ... 29,525,092 1f 16,753 g Noncash contributions included in lines 1a-1f 29,525,092 h Total. Add lines 1a-1f **Business Code** 2 a CONSULTING FEES 541610 634,829. 634,829. Program Service b f All other program service revenue 634,829, g Total. Add lines 2a-2f Investment income (including dividends, interest, and 563,875 563,875 other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents 6a 6b **b** Less: rental expenses ... c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a b Less: cost or other basis and sales expenses Other Revenue c Gain or (loss) 7с d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellaneous 11 a HONORARIUMS 900099 641 641. b d All other revenue 641 e Total. Add lines 11a-11d

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564,516.

30,724,437.

12 Total revenue. See instructions

634,829.

Part IX | Statement of Functional Expenses

	Check if Schedule O contains a respon			(0)	(D)
	not include amounts reported on lines 6b, 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	14 054 044	14 054 044		
	and domestic governments. See Part IV, line 21	14,054,844.	14,054,844.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	8,123,349.	8,123,349.		
4	individuals. See Part IV, lines 15 and 16 Benefits paid to or for members	0,123,343.	0,143,343.		
4 5	Compensation of current officers, directors,				
Э	trustees, and key employees	857,126.	178,896.	600,576.	77,654
6	Compensation not included above to disqualified	037,120:	170,050.	000,5700	77,054
O	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,135,234.	716,552.	990,657.	428,025.
8	Pension plan accruals and contributions (include	_,,	. 20,002.	220,0010	
-	section 401(k) and 403(b) employer contributions)	82,695.	29,550.	33,402.	19,743.
9	Other employee benefits	9,111.	2,823.	4,015.	2,273.
10	Payroll taxes	208,754.	62,719.	98,161.	47,874.
11	Fees for services (nonemployees):		3=,1=51		_ , , ,
	Management				
	Legal	126,438.		126,438.	
	Accounting	21,200.		21,200.	
	Lobbying	•			
	Professional fundraising services. See Part IV, line 17				
f					
g					
	column (A), amount, list line 11g expenses on Sch 0.)	365,834.	131,018.	199,918.	34,898.
12	Advertising and promotion	24,651.	7,415.	12,927.	4,309.
13	Office expenses	159,787.	48,065.	83,793.	27,929.
14	Information technology	58,263.	17,526.	30,553.	10,184.
15	Royalties				
16	Occupancy				
17	Travel	192,460.	110,795.	62,898.	18,767.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	25,509.	24,034.	1,107.	368.
20	Interest				
21	Payments to affiliates	0 = 0.1:	44.000	40	
22	Depreciation, depletion, and amortization	37,261.	11,209.	19,539.	6,513.
23	Insurance	19,643.	5,909.	10,301.	3,433.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	OTHER	33,574.	10,100.	17,605.	5,869.
b	PROFESSIONAL DEVELOPMEN	21,150.	6,362.	11,091.	3,697.
С			·		
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	26,556,883.	23,541,166.	2,324,181.	691,536.
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)				

Form **990** (2023)

Form 990 (2023) Part X | Balance Sheet

Par	tΧ	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	36,629,743.	2	42,249,215.
	3	Pledges and grants receivable, net	4,616,722.	3	4,032,182.
	4	Accounts receivable, net	201.	4	105,590.
	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	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	F.C. 5.7.4	8	15 506
⋖	9	Prepaid expenses and deferred charges	76,574.	9	15,596.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 162,570.			44 420
		Less: accumulated depreciation 10b 118,132.	67,196.		44,438.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	599.	14	599.
	15	Other assets. See Part IV, line 11	41,391,035.	15	46,447,620.
-	16	Total assets. Add lines 1 through 15 (must equal line 33)	268,044.	16 17	684,589.
	17	Accounts payable and accrued expenses	2,373,436.	18	2,908,670.
	18 19	Grants payable	62,748.	19	2,900,070.
	20	Deferred revenue	02,740.	20	
	21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director,		41	
Liabilities	~~	trustee, key employee, creator or founder, substantial contributor, or 35%			
pii				22	
Lia	23	controlled entity or family member of any of these persons 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		25	
	26	Total liabilities. Add lines 17 through 25	2,704,228.	26	3,593,259.
		Organizations that follow FASB ASC 958, check here			
Ses		and complete lines 27, 28, 32, and 33.			
and	27	Net assets without donor restrictions	13,330,357.	27	17,284,564.
Bal	28	Net assets with donor restrictions	25,356,450.	28	25,569,797.
pu		Organizations that do not follow FASB ASC 958, check here			
표		and complete lines 29 through 33.			
S O	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
Ret	32	Total net assets or fund balances	38,686,807.	32	42,854,361.
-	33	Total liabilities and net assets/fund balances	41,391,035.	33	46,447,620. Form 990 (2023)

Form **990** (2023)

Pa	rt 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				37.
2	Total expenses (must equal Part IX, column (A), line 25)	2	26	,55	6,8	83.
3	Revenue less expenses. Subtract line 2 from line 1	3	4	,16	7,5	54.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	38	,68	6,8	07.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	42	,85	4,3	61.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule C).			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			l _{3h}		1

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number CENTER FOR DISASTER PHILANTHROPY, INC. 45-5257937

		CHIAI	HIC TOIL DIDI	ADIDIC LILLDAM.	TIII(OI .	. , 1110	-	5 3231331
Pa	ırt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.	
The	organ	nization is not a private found	ation because it is: (F	For lines 1 through 12, c	heck only	one box.)		
1		A church, convention of ch	urches, or associatio	n of churches described	l in section	n 170(b)(1	I)(A)(i).	
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990).)			
3	$\overline{\Box}$	A hospital or a cooperative)(b)(1)(A)(ii	i).	
4	\Box	A medical research organiz					•	the hospital's name
7		city, and state:	ation operated in cor	ijanotion with a noopital	dosonbod	iii Scotio	11 17 0(b)(1)(A)(III). Ento	the hoopital o hamo,
_		An organization operated for	or the benefit of a col	llogo or university evenes	l or operat	ad by a ga	warnmantal unit dasarih	od in
5				nege of university owned	or operat	ed by a go	ivernmental unit describ	ea m
		section 170(b)(1)(A)(iv).						
6		A federal, state, or local government	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).	
7	X	An organization that norma	lly receives a substar	ntial part of its support fr	rom a gove	ernmental	unit or from the general	public described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)					
8		A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Par	t II.)			
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a land-grant	college
		or university or a non-land-g						
		university:	,	,		, ,	,	
10		An organization that norma	Ilv receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns. membership fees, an	d gross receipts from
		activities related to its exem	*					-
		income and unrelated busin		(less section of reax) inc	iii busiiles	sses acqui	red by the organization	arter June 30, 1975.
		See section 509(a)(2). (Con	•					
11	\vdash	An organization organized a	· ·	*	-			
12		An organization organized a	· ·	•	•		•	
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section 509(a)(3).	Check the box on
		lines 12a through 12d that	describes the type of	f supporting organizatior	n and com	plete lines	12e, 12f, and 12g.	
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	oorted org	anization(s), typically by	giving
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	tors or trustees of the s	upporting
		organization. You must o	complete Part IV, Se	ections A and B.				
b		Type II. A supporting org	anization supervised	or controlled in connect	tion with it	s supporte	ed organization(s), by ha	ving
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the sup	ported
		organization(s). You mus						
С		Type III functionally inte	-		in connect	tion with	and functionally integrat	ad with
			-					od with,
_		its supported organization		·				ti(-)
C	·	☐ Type III non-functionally						. ,
		that is not functionally int	-		•		•	veness
		requirement (see instructi	•	·				
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, or	* *	nally integrated supportion	ng organiz	ation.		
f	Ente	er the number of supported o	organizations					
9		vide the following information						
	((i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orgain your govern	anization listed ing document?	(v) Amount of monetary	(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
_					 	 		
_								
_								
_								The second secon

CENTER FOR DISASTER PHILANTHROPY, INC. 45-5257937 Schedule A (Form 990) 2023 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") L3747286.54795043.L9138518.H0316703.L9525092.L57522642 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 13747286.54795043.19138518.40316703.29525092.157522642 4 Total. Add lines 1 through 3 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) 40159426. 17363216 6 Public support. Subtract line 5 from line 4 Section B. Total Support (c) 2021 (d) 2022 Calendar year (or fiscal year beginning in) (a) 2019 (b) 2020 (e) 2023 (f) Total 40316703. 13747286. 4795043. 9138518. 29525092. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, 60,254. 108,968. 133,144. 213,472. 563,875. 1079713. and income from similar sources 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 2,300. 641 assets (Explain in Part VI.) 158605296 11 Total support. Add lines 7 through 10 2,351,247 12 Gross receipts from related activities, etc. (see instructions) 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

Se	ction C. Computation of Public Support Percentage		
14	Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	74.00 %
15	Public support percentage from 2022 Schedule A, Part II, line 14	15	75.10 %
16a	33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or m	ore, c	heck this box and
	stop here. The organization qualifies as a publicly supported organization		X
k	33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3%	or mo	ore, check this box
	and stop here. The organization qualifies as a publicly supported organization		
17a	10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, a	nd lin	e 14 is 10% or more,
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part	۷I ho۱	v the organization
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		
k	10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 1	7a, aı	nd line 15 is 10% or
	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in	n Part	VI how the
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	ation	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box at	nd see	e instructions
			Schedule A (Form 990) 2023

332022 12-21-23

Schedule A (Form 990) 2023 CENTER FOR DISASTER PHILANTHROPY, INC. 45-5257937 Page 3

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

A. Public Support
qualify under the tests listed below, please complete Part II.)
(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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-			1			
·	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities					1	
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				 		
	Amounts included on lines 1, 2, and		 	 			
10	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received		 	 	1		
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	etion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	(a) 2019	(b) 2020	(0) 2021	(u) 2022	(6) 2020	(i) iotai
	Gross income from interest,						
100	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
h	Unrelated business taxable income			 			
L	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
				 	+		
	Add lines 10a and 10b Net income from unrelated business						
•	activities not included on line 10b,						
	whether or not the business is						
12	regularly carried on Other income. Do not include gain		 	 		 	
	or loss from the sale of capital						
10	assets (Explain in Part VI.)		 	 	+	 	
	Total support. (Add lines 9, 10c, 11, and 12.)	o organization!	ivet engaged this of	formation on Ethic 4	Voor oo o saatis a t	[[01(a)(2) a	<u> </u>
14	First 5 years. If the Form 990 is for the	-			-		
Sac	check this box and stop heretion C. Computation of Publi	c Support Par	rcentage				
				l (f))		15	0/
	Public support percentage for 2023 (I		•			16	%
	Public support percentage from 2022 ction D. Computation of Inves					1 10 1	%
	Investment income percentage for 20			ine 13. column (fl)		17	%
	Investment income percentage from		D 1 111 11 4 7			18	%
	33 1/3% support tests - 2023. If the	•					
.56	more than 33 1/3%, check this box ar	-					51.60
h	33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, che	•			•		
20	Private foundation. If the organization						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 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")? |f "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 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.
 - 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.)

		Yes	NO_
	1		
	2		
	3a		
	3b		
	0.2		
	3с		
	4a		
	4b		
	40		
	4c		
	5a		
	Ja		
	5b		
	5c		
	6		
	Ŭ		
	7		
	8		
	9a		
	9b		
	9с		
	100		
	10a		
	10b		
_			

	dule A (Form 990) 2023 CENTER FOR DISASTER PHILANTHROPY, INC. 45-52	<u>5793</u>	7 Pa	age 5
Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		_
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
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.	2		
Sec	tion 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).	1		
Sec	tion 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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion 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)			
а	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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		_
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		_
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	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.

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	ov. 20, 1970 (explain in l	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus			
Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrated	d Type III supporting orga	nization (see
	instructions).	-		

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued))
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes	1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity		2	2
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5	5
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	•
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions.		8	:
9	Distributable amount for 2023 from Section C, line 6		g)
10	Line 8 amount divided by line 9 amount		10)
		(i)	(ii)	(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2023	Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2023			
a	From 2018			
b	From 2019			
С	From 2020			
d	From 2021			
е	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2019			
	Excess from 2020			
	Excess from 2021			
	Excess from 2022			
	Excess from 2023			

CENTER FOR DISASTER PHILANTHROPY,

INC.

45-5257937 Page 8

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

2023
Open to Public Inspection

Name of the organization

CENTER FOR DISASTER PHILANTHROPY, INC.

Employer identification number 45-5257937

Par	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		imilar Funds o	r Accounts. Complete if the
	organization answered fes on Form 990, Part IV, line	(a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at and of year	(a) Donor adviso	d fullus	(b) I dilds and other accounts
2	Total number at end of year			
3	Aggregate value of grants from (during year) 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 w	vriting that the assets he	ld in donor advised	funds
Ü	are the organization's property, subject to the organization's	-		
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or			-
	impermissible private benefit?	*		
Par				
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recreat	tion or education)	Preservation of a	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 qualifi	ied conservation contrib	ution in the form of	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic stru	ucture included on line 2	a	2c
d	Number of conservation easements included on line 2c acqui			
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or t	erminated by the or	rganization during the tax
	year			
4	Number of states where property subject to conservation eas			
5	Does the organization have a written policy regarding the peri			
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, ar	id enforcing conser	vation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handle	ling of violations, and en	forcing conservatio	n easements during the year
				
8	Does each conservation easement reported on line 2d above			
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footne	ote to the organization's	tinanciai statement	ts that describes the
Par	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	Art, Historical Tre	asures, or Othe	er 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	8, not to report in its reve	enue statement and	l balance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education	or research in furth	nerance of public
	service, provide in Part XIII the text of the footnote to its finan	icial statements that des	cribes these items.	
b	If the organization elected, as permitted under FASB ASC 958	8, to report in its revenue	statement and bal	ance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in further	rance of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	If the organization received or held works of art, historical trea			
	the following amounts required to be reported under FASB AS	SC 958 relating to these	items:	
а	Revenue included on Form 990, Part VIII, line 1			\$ <u></u>
b	Assets included in Form 990, Part X			

332051 09-28-23

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

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				
d Equipment		67,710.	42,706.	25,004.
e Other		94,860.	75,426.	19,434.
Total. Add lines 1a through 1e. (Column (d) must equa	al Form 990 Part X line 1	Oc. column (B))		44,438.

2 and 1/11	Inches a desay a series	Other Committee			
chedule D	(Form 990) 2023	CENTER FOR	DISASTER	PHILANTHROPY,	INC

a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
Financial derivatives			
Closely held equity interests			
Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
al. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
art VIII Investments - Program Related.		•	
Complete if the organization answered "Yes" o	n 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)		i	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)		 	
(0)			
(0)			
(9) al (Col (h) must equal Form 990 Part X line 13 col (R))			
al. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
al. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) art IX Other Assets	n Form 990. Part IV. line	11d. See Form 990. Part X. line 15.	
al. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) art IX Other Assets Complete if the organization answered "Yes" o		11d. See Form 990, Part X, line 15.	(b) Book value
al. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) art IX Other Assets Complete if the organization answered "Yes" o (a) D	n Form 990, Part IV, line Description	11d. See Form 990, Part X, line 15.	(b) Book value
al. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) art IX Other Assets Complete if the organization answered "Yes" o (a) D		11d. See Form 990, Part X, line 15.	(b) Book value
al. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) art IX Other Assets Complete if the organization answered "Yes" o (a) D (1)		11d. See Form 990, Part X, line 15.	(b) Book value
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al. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) art IX Other Assets Complete if the organization answered "Yes" o (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, line 15, col. art X Other Liabilities Complete if the organization answered "Yes" o (a) Description of liability	Description (B))		
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al. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) art IX Other Assets Complete if the organization answered "Yes" o (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, line 15, col. art X Other Liabilities Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6)	Description (B))		ne 25.
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THE CENTER IS NOT AWARE OF ANY ACTIVITIES THAT WOULD JEOPARDIZE THEIR

TAX-EXEMPT STATUS THAT WOULD REQUIRE RECOGNITION IN THE ACCOMPANYING

FINANCIAL STATEMENTS. GENERALLY, TAX RETURNS ARE SUBJECT TO EXAMINATION BY

TAXING AUTHORITIES FOR UP TO THREE YEARS FROM THE DATE A COMPLETED RETURN

IS FILED. IF MATERIAL OMISSIONS OF INCOME EXIST, TAX RETURNS MAY BE

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Employer identification number

Name of the organization CENTER FOR DISASTER PHILANTHROPY, INC. 45-5257937 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 and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 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 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (e) If activity listed in (d) (f) Total (c) Number of (d) Activities conducted in the region (a) Region employees, expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors of service(s) in the region recipients located in the region) in the region in the region EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, GRANTS TO RECIPIENTS CAMBODIA, 0 0 LOCATED IN THE REGION 327,723. EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, GRANTS TO RECIPIENTS AUSTRIA, BELGIUM 0 LOCATED IN THE REGION 4,844,535. 0 RUSSIA AND NEIGHBORING STATES -ARMENIA, AZERBIJAN, GRANTS TO RECIPIENTS 480,000. 0 LOCATED IN THE REGION BELARUS 0 SOUTH AMERICA -ARGENTINA, BOLIVIA, BRAZIL, CHILE, GRANTS TO RECIPIENTS COLUMBIA, ECUADOR Λ LOCATED IN THE REGION 0 279,457. SOUTH ASIA AFGHANISTAN, BANGLADESH, BHUTAN, GRANTS TO RECIPIENTS LOCATED IN THE REGION INDIA, MALDIVES, 0 0 620,539. SUB-SAHARAN AFRICA ANGOLA, BENIN, BOTSWANA, BURKINA GRANTS TO RECIPTENTS FASO 0 0 LOCATED IN THE REGION 1,371,095. GRANTS TO RECIPIENTS NORTH AMERICA 0 LOCATED IN THE REGION 200,000. 0 0 8,123,349. 3 a Subtotal **b** Total from continuation 0 0 sheets to Part I c Totals (add lines 3a 8,123,349. and 3b)

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

45-5257937

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. Part II

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)
			SUPPORT TO LIFE WILL					
		EUROPE (INCLUDING	RECEIVE A \$750,000					
		ICELAND AND	GRANT (1 APRIL 23 -					
		GREENLAND)	31 MAY 24) TO WORK	1045775.	WIRE	0.		
			THE WHITE HELMETS					
		EUROPE (INCLUDING	RECEIVED \$1 MILLION					
		ICELAND AND	TO REHABILITATE A					
		GREENLAND)	MAJOR SUPPLY ROAD	1000000.	WIRE	0.		
			RELIEF INTERNATIONAL					
		EUROPE (INCLUDING	UK AND PARTNER MUDEM					
		ICELAND AND	RECEIVED \$750,000 TO					
		GREENLAND)	STRENGTHEN CAPACITY	750,000.	WIRE	0.		
			SENED WILL RECEIVE					
		EUROPE (INCLUDING	\$750,000 TO PROVIDE					
		ICELAND AND	MULTI-SECTORAL AND					
		GREENLAND)	INTEGRATED SHELTER,	750,000.	WIRE	0.		
			BINAA WILL RECEIVE					
		EUROPE (INCLUDING	\$548,760 TO					
		ICELAND AND	RECONSTRUCT THE					
		GREENLAND)	MARKETPLACE IN	548,760.	WIRE	0.		
			AHF, HOSTED BY ALDEF,					
			WILL RECEIVE \$500,000					
		SUB-SAHARAN	TO PROVIDE RECOVERY					
		AFRICA	AND BUILD RESILIENCE	500,000.	WIRE	0.		
			ASAM WILL RECEIVE					
		EUROPE (INCLUDING	\$400,000 TO PROMOTE					
		ICELAND AND	INCLUSIVE DISASTER					
		GREENLAND)	RECOVERY, ENHANCE	400,000. WIRE	VIRE	0.		
			VIOLET WILL RECEIVE					
		EUROPE (INCLUDING	\$350,000 TO SUPPORT					
		ICELAND AND	VULNERABLE					
		GREENLAND)	EARTHQUAKE-AFFECTED	350,000.WIRE	VIRE	0.		

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

Schedule F (Form 990) 2023

25

Enter total number of other organizations or entities

က

Schedule F (Form 990) Part II Continuation of	CENTER f Grants and Other As	(Form 990) CENTER FOR DISASTER PI Continuation of Grants and Other Assistance to Organizations or	3R PHILANTHROPY, INC.		45-5257937 (Schedule F (Form 990), Part II, line 1)	57937 90), Part II, line 1)		Page 2
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NEXUS WILL RECEIVE					
		SUB-SAHARAN	FUND TO IMPROVE					
		AFRICA	HOUSEHOLD LIVELIHOODS	250,095.	WIRE	0 *		
			C2C WILL RECEIVE A					
			GRANT OF \$250,000					
		SUB-SAHARAN	FROM CDP'S GLOBAL					
		AFRICA	HUNGER CRISIS AND	250,000.	WIRE	0.		
			GENDER STREAM WILL					
		RUSSIA AND	RECEIVE \$250,000 TO					
		NEIGHBORING	IDENTIFY AND					
		STATES	STRENGTHEN THE	250,000. WIRE	WIRE	0 *		
			TEACH FOR NIGERIA					
			WILL RECEIVE A					
		SUB-SAHARAN	\$250,000 GRANT FROM					
		AFRICA	CDP'S COVID FUND TO	250,000.	WIRE	0.		
			ALLIANCE GLOBAL WILL					
		RUSSIA AND	RECEIVE A GRANT OF					
		NEIGHBORING	\$230,000 TO IMPROVE					
		STATES	THE RESILIENCE AND	230,000.	WIRE	0.		
			YEU RECEIVED A					
			\$216,423 GRANT FROM					
		EAST ASIA AND THE	MARCH-DEC 2023 TO					
		PACIFIC	STRENGTHEN CAPACITY	216,423. WIRE	WIRE	0.		
			GUARDIANS FOR					
			EQUALITY MOVEMENT					
			WILL RECEIVE \$200,000					
		NORTH AMERICA	TO COMBAT THE	200,000.	WIRE	0.		
			GUAKIA AMBIENTE WILL					
			RECEIVE \$188,378 TO					
			RECOVER FROM THE					
		SOUTH ASIA	AFTERMATH OF	188,378. WIRE	WIRE	0.		
			TKF WILL RECEIVE					
			\$182,161 TO ENHANCE					
			ECONOMIC RESILIENCE,					
		SOUTH ASIA	RESTORE AGRICULTURAL	182,161. WIRE	WIRE	.0		

Page 2		(i) Method of valuation (book, FMV, appraisal, other)																																	
45-5257937	(Schedule F (Form 990), Part II, line 1)	(h) Description of non-cash assistance																																	
		(g) Amount of non-cash assistance				0.				0.				0.				0.				0.				0.				0.				0.	
		(f) Manner of cash disbursement				WIRE				WIRE				WIRE				WIRE				WIRE				WIRE				WIRE				WIRE	
, INC.	. [(e) Amount of cash grant				150,000.				120,416.WIRE				111,300.WIRE				100,000.				87,000.				75,000.WIRE				72,041.				46,000.WIRE	
	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.	(d) Purpose of grant	RIZQ WILL RECEIVE	\$150,000 TO HELP	FLOOD-AFFECTED	FARMERS IN SOUTHERN	AVSI WILL RECEIVE	\$120,416 TO PROVIDE	LONG-TERM SUPPORT FOR	FAMILIES' (600	THE NEW ZEALAND RED	CROSS WILL RECEIVE	\$111,300 TO	CONTRIBUTE TO THEIR	AWARD WILL RECEIVE	\$100,000 TO SUPPORT	2022 FLOOD AFFECTED	COMMUNITIES	NOIS RADIO WILL	RECEIVE \$87,000 FROM	COVID-19 FUND TO	CREATE TAILORED	FODDAJ WILL RECEIVE	\$75,000 FROM HUNGER	CRISIS FUND TO	PROVIDE TRAINING AND	SINERGIAS WILL	RECEIVE A \$72,040	GRANT FROM CDP'S	COVID-19 FUND TO	RIFT VALLEY CHILDREN	AND WOMEN DEVELOPMENT		WILL RECEIVE \$46,000	
		(c) Region				SOUTH ASIA				SOUTH AMERICA			EAST ASIA AND THE	PACIFIC				SOUTH ASIA				SOUTH AMERICA			SUB-SAHARAN	AFRICA				SOUTH AMERICA			SUB-SAHARAN	AFRICA	
		(b) IRS code section and EIN (if applicable)																																	
Schedule F (Form 990)	Part II Continuation of	1 (a) Name of organization																																	

INC.

45-5257937

Page 3

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. Schedule F (Form 990) 2023

CENTER FOR DISASTER PHILANTHROPY,

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2023
(g) Description of noncash assistance					Sched
(f) Amount of noncash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					-
(c) Number of recipients					
(b) Region					
(a) Type of grant or assistance					

Schedule F (Form 990) 2023 (Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)	Yes	X 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 the Instructions for Form 8865)	Yes	X 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 the Instructions for Form 5713; don't file with Form 990)	Yes	X 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.

PART I, LINE 2:

THE CENTER FOR DISASTER PHILANTHROPY CLOSELY MONITORS ALL OF ITS GRANTEES THROUGH FREQUENT PHONE CALLS, EMAIL COMMUNICATION AND SITE VISITS. GRANTEE IS REQUIRED TO COMMUNICATE ANY SUBSTANTIVE BUDGET OR PROGRAMMATIC ALL GRANTEES SUBMIT A FINAL REPORT DETAILING THEIR PROGRESS AGAINST GOALS, ACTIVITIES AND OBJECTIVES, HOW THEY WERE ABLE TO SERVE THE AFFECTED POPULATION, AND DETAILING FINAL EXPENDITURES. DEPENDING ON THE SIZE OF THE GRANT, SOME GRANTEES SUBMIT BOTH AN INTERIM/PROGRESS REPORT AND A FINAL REPORT.

PART II, COLUMN (D):

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: SUPPORT TO LIFE WILL RECEIVE A \$750,000 GRANT (1 APRIL 23 - 31 MAY 24) TO WORK WITH EARTHQUAKE-AFFECTED COMMUNITIES IN TURKEY TO IDENTIFY AND IMPLEMENT 90 COMMUNITY-IDENTIFIED PROJECTS THROUGH THE SURVIVOR AND COMMUNITY LED (SCLR) APPROACH. SUPPORT TO LIFE WILL RECEIVE \$295,775 ENHANCE THE RESILIENCE OF PEOPLE WITH DISABILITIES AFFECTED BY THE EARTHQUAKE BY SUPPORTING LOCAL ORGANIZATIONS IN HATAY WHO WILL CREATE A COMMUNITY-RUN CENTER AND OFFER PSYCHOSOCIAL SUPPORT AND PHYSICAL REHABILITATION SERVICES.

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: THE WHITE HELMETS RECEIVED \$1 MILLION TO REHABILITATE A MAJOR SUPPLY ROAD RUNNING FROM THE JARABLUS CROSS-BORDER POINT BETWEEN TURKEY/SYRIA AND DEVELOP A PROTOTYPE FOR AN AUTONOMOUS MINE DETECTION AND REMOVAL SYSTEM, ENABLING QUICKER AND SAFER RECOVERY FROM THE EARTHQUAKE IMPACT FOR VULNERABLE POPULATIONS IN NW SYRIA.

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.

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: RELIEF INTERNATIONAL UK AND PARTNER MUDEM RECEIVED \$750,000 TO STRENGTHEN CAPACITY TO IMPROVE ACCESS TO SPECIALIZED HEALTHCARE AND PROTECTION SERVICES IN EARTHQUAKE-AFFECTED COMMUNITIES OF TURKEY FOR PERSONS WITH DISABILITIES (PWDS) AND THEIR CAREGIVERS, THEREBY FOSTERING INCLUSIVITY.

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: SENED WILL RECEIVE \$750,000 TO PROVIDE MULTI-SECTORAL AND INTEGRATED SHELTER, PROTECTION, EDUCATION AND LIVELIHOOD SUPPORT TO THE MOST VULNERABLE EARTHQUAKE-AFFECTED INDIVIDUALS, WITH A PARTICULAR FOCUS ON CHILDREN, THE ELDERLY AND PEOPLE LIVING WITH DISABILITIES.

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: BINAA WILL RECEIVE \$548,760 TO RECONSTRUCT THE MARKETPLACE IN JANDAIRIS, CREATING A VIBRANT, INCLUSIVE HUB FOR COMMERCE, TRADE, AND ENTREPRENEURSHIP, FOSTERING ECONOMIC GROWTH, COMMUNITY DEVELOPMENT, AND SOCIAL COHESION POST-EARTHQUAKE.

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: AHF, HOSTED BY ALDEF, WILL RECEIVE \$500,000 TO PROVIDE RECOVERY AND BUILD RESILIENCE TO THE HUNGER CRISIS IN DROUGHT DISASTER-AFFECTED COMMUNITIES THROUGH ACCELERATED ADOPTION OF SURVIVOR AND COMMUNITY-LED RESPONSE (SCLR) IN 10 ASALS COUNTIES IN KENYA.

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.

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: ASAM WILL RECEIVE \$400,000 TO PROMOTE INCLUSIVE DISASTER RECOVERY, ENHANCE COMMUNITY RESILIENCE, PROVIDE COMPREHENSIVE PSYCHOSOCIAL SUPPORT TO REFUGEES WITH DISABILITIES, THEIR FAMILIES, AND CAREGIVERS, AND FACILITATE MOBILITY FOR INDIVIDUALS WITH DISABILITIES AFFECTED BY THE EARTHQUAKE.

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND)

(D) PURPOSE OF GRANT: VIOLET WILL RECEIVE \$350,000 TO SUPPORT VULNERABLE EARTHQUAKE-AFFECTED COMMUNITIES, ESPECIALLY WOMEN AND YOUTH, TO REBUILD THEIR LIVELIHOODS AND RESILIENCE FOLLOWING THE DEVASTATING EARTHOUAKE IN SYRIA.

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: NEXUS WILL RECEIVE \$250,095 FROM HUNGER FUND TO IMPROVE HOUSEHOLD LIVELIHOODS SECURITY AND INCREASE THE ABILITY TO ADAPT AND MANAGE CLIMATE RISKS AMONG DROUGHT AFFECTED FARMERS FROM MARGINALIZED COMMUNITIES IN BAARDHERE AND GABILEY DISTRICTS, SOMALIA.

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: C2C WILL RECEIVE A GRANT OF \$250,000 FROM CDP'S GLOBAL HUNGER CRISIS AND GLOBAL RECOVERY FUNDS TO IMPLEMENT A SURVIVOR AND COMMUNITY LED RESPONSE (SCLR) APPROACH IN HIGHLY FOOD INSECURE REGIONS OF ETHIOPIA, PROVIDING COMMUNITY-LEVEL TRAINING AND ISSUING SMALL GRANTS TO WORTHY COMMUNITY-IDENTIFIED AND LED PROJECTS.

REGION: RUSSIA AND NEIGHBORING STATES

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.

PURPOSE OF GRANT: GENDER STREAM WILL RECEIVE \$250,000 TO IDENTIFY AND STRENGTHEN THE LEADERSHIP CAPACITY OF NASCENT LGBTOI+ RIGHTS ACTIVISTS AND CIVIL SOCIETY LEADERS TO WORK WITH THEIR COMMUNITIES, AND TO ADVOCATE FOR GREATER INCLUSION OF AFFECTED LGBTQIA+ PEOPLE IN RESPONSE AND RECOVERY PLANS.

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: TEACH FOR NIGERIA WILL RECEIVE A \$250,000 GRANT FROM CDP'S COVID FUND TO MITIGATE THE IMPACT OF THE PANDEMIC ON LEARNING AND SOCIAL-EMOTIONAL OUTCOME BY DEVELOPING RESPONSIVE PROGRAMS THAT HELP TO ACCELERATE COLLECTIVE LEADERSHIP ACTION NEEDED TO ENABLE ALL CHILDREN IN UNDERSERVED COMMUNITIES TO CATCH UP AND ACCESS QUALITY EDUCATION.

REGION: RUSSIA AND NEIGHBORING STATES

(D) PURPOSE OF GRANT: ALLIANCE GLOBAL WILL RECEIVE A GRANT OF \$230,000 TO IMPROVE THE RESILIENCE AND ENABLE SUSTAINABLE RECOVERY AND REHABILITATION OF MARGINALIZED AND CONFLICT AFFECTED LGBTOIA+ PEOPLE THROUGH IMPROVED MENTAL HEALTH.

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: YEU RECEIVED A \$216,423 GRANT FROM MARCH-DEC 2023 TO STRENGTHEN CAPACITY OF AFFECTED COMMUNITIES OF THE 2022 EARTHQUAKE IN INDONESIA'S CIANJUR DISTRICT IN DISASTER PREPAREDNESS AND TO INCREASE ACCESSIBILITY OF HEALTH AND WASH SERVICES FOR MOST AT-RISK GROUPS

REGION: NORTH AMERICA

(D) PURPOSE OF GRANT: GUARDIANS FOR EQUALITY MOVEMENT WILL RECEIVE

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.

\$200,000 TO COMBAT THE PSYCHOLOGICAL AND ECONOMIC IMPACT ON THE MOST VULNERABLE EARTHOUAKE-AFFECTED LGBTOIA+ POPULATIONS IN SOUTH-EAST TURKEY AND NORTH-WEST SYRIA AND BUILD THEIR LONG-TERM RESILIENCE.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: GUAKIA AMBIENTE WILL RECEIVE \$188,378 TO RECOVER FROM THE AFTERMATH OF HURRICANE FIONA AND ENHANCE WATER SECURITY AND RESILIENCE IN EL SEIBO PROVINCE, DOMINICAN REPUBLIC.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: TKF WILL RECEIVE \$182,161 TO ENHANCE ECONOMIC RESILIENCE, RESTORE AGRICULTURAL PRODUCTIVITY AND IMPROVE PSYCHOSOCIAL WELL-BEING OF VULNERABLE FLOOD-AFFECTED FAMILIES IN BALOCHISTAN, PAKISTAN.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: RIZQ WILL RECEIVE \$150,000 TO HELP FLOOD-AFFECTED FARMERS IN SOUTHERN PUNJAB TO RECOVER BY PROVIDING ESSENTIAL AGRICULTURAL INPUTS, KNOWLEDGE, AND SUPPORT FOR SUSTAINABLE INCOME GENERATION AND COMMUNITY REBUILDING, INCLUDING WATER ACCESS.

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: AVSI WILL RECEIVE \$120,416 TO PROVIDE LONG-TERM SUPPORT FOR FAMILIES' (600 PEOPLE) RECOVERY AND INCREASE COMMUNITY RESILIENCE AFTER THE SAO PAOLO FLOODS DISASTER TRAGEDY, INCLUDING SOCIAL, ECONOMIC LIVELIHOOD AND HEALTH ASSISTANCE, AND IMPROVED LIVING

CONDITIONS.

Schedule F (Form 990) 2023 Part V | Supplemental Information

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

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: THE NEW ZEALAND RED CROSS WILL RECEIVE \$111,300 TO CONTRIBUTE TO THEIR RECOVERY CAMPAIGN TO PROVIDE ESSENTIAL HOUSEHOLD ITEMS (WHICH INCLUDES BASIC FURNITURE, WHITEWARE, AND HOMEWARE) TO SOME OF THE APPROXIMATELY 800 VULNERABLE HOUSEHOLDS SIGNIFICANTLY AFFECTED BY CYCLONE GABRIELLE AND FLOODING IN AUCKLAND AND NORTHLAND IN JANUARY -FEBRUARY 2023.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: AWARD WILL RECEIVE \$100,000 TO SUPPORT 2022 FLOOD AFFECTED COMMUNITIES (PARTICULARLY WOMEN) OF DISTRICT KHAIRPUR RECOVER THROUGH IMPROVED HOUSING, LIVELIHOOD , WASH AND DRR BY THE END OF THE PROJECT.

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: NOIS RADIO WILL RECEIVE \$87,000 FROM COVID-19 FUND TO CREATE TAILORED ONE-HEALTH AND SAFETY CONTENT AND IMPROVE THE ACCURACY AND QUALITY OF INFORMATION REACHING VULNERABLE MIGRANT AND HOST COMMUNITIES IN THE COLOMBIAN BORDER WITH PANAMA AND THE VENEZUELAN BORDER WITH BRAZIL.

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: FODDAJ WILL RECEIVE \$75,000 FROM HUNGER CRISIS FUND TO PROVIDE TRAINING AND INCREASE PUBLIC AWARENESS FOR 5,200 COMMUNITY MEMBERS TO HELP ADDRESS THE ALARMING RATES OF EARLY FORCED

CHILD MARRIAGE, FGM AND HUMAN TRAFFICKING WHICH HAS INCREASED DRASTICALLY

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047 2023 Open to Public

Inspection

Go to www.irs.gov/Form990 for the latest information. Attach to Form 990.

Name of the organization CENTER FOR	R DISASTER	R PHILANTHROPY	PY, INC.				Employer identification number $45-5257937$	<u>.</u>
Part I General Information on Grants and Assistance	nd Assistance							
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	o substantiate the	amount of the grants of	or assistance, the g	grantees' eligibility	for the grants or assis	tance, and the selectic	uc	
criteria used to award the grants or assistance?	tance?						X Yes	٩
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	cedures for monito	oring the use of grant f	unds in the United	States.				
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Corrections are provided in additional space is needed	Domestic Organiz 5,000. Part II can	ations and Domestic	Domestic Governments. Ced if additional space is neede	omplete if the orga ed.	nization answered "Y.	Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any ded.	IV, line 21, for any	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
							IMA INNOVATIONS (CORUS	
IMA INNOVATIONS							INTERNATIONAL) - WILL	
1730 M ST NE SUITE 1100							RECEIVE \$1M FROM UKRAINE	
WASHINGTON, DC 20002-0000	82-4219629	501(C)3	1,000,000.	0.			CRISIS RECOVERY FUND FOR	
BOSTON FOUNDATION - HAITIAN							HDI WILL RECEIVE \$505,750	0
DEVELOPMENT INSTITUTE (HDI) - 75							FROM CDP'S HAITI	
ARLINGTON STREET - BOSTON, MA							EARTHQUAKE RECOVERY FUND	
02116-3936	04-2104021	501(C)3	505,750.	0.			TO WORK WITH COMMUNITY	
							THROUGH FUNDING FROM THE	
DONORSCHOOSE							CDP DISASTER RECOVERY	
134 W 37TH ST FL 11							FUND, TORNADO RECOVERY	
NEW YORK, NY 10018-6938	13-4129457	501(C)3	500,000.	0.			FUND AND ATLANTIC	
							THROUGH FUNDING FROM THE	١
ST. BERNARD PROJECT, INC							CDP ATLANTIC HURRICANE	
2645 TOULOUSE STREET							SEASON RECOVERY FUND, SBP	Д
NEW ORLEANS, LA 70119-0000	26-2189665	501(C)3	500,000.	0.			AND ITS PARTNERS WILL	
PROJECT HOPE - THE							PROJECT HOPE WILL RECEIVE	回
PEOPLE-TO-PEOPLE - 1220 19TH							\$190,000 TO IMPLEMENT A	
STREET, NW, SUITE 800 -							5 MONTH PROJECT FROM FEB	
WASHINGTON, DC 20036	53-0242962	501(C)3	490,000.	0.			TO JUNE 2023 TO ENHANCE	
ORAM - ORGANIZATION FOR REFUGE,							ORAM WILL RECEIVE A	
ASYLUM AND MIGRATION - 1325 QUINCY							TWO-YEAR GRANT OF	
ST NE STE A1 - MINNEAPOLIS, MN							\$485,000 TO BUILD THE	
55413	26-3748676	501(C)3	485,000.	0.			CAPACITY OF INGOS, NGOS	
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government org	anizations listed in the					9	5.
3 Enter total number of other organizations listed in the line 1 table	listed in the line 1	table	- :				1	•

SEE PART IV FOR COLUMN (H) DESCRIPTIONS For Paperwork Reduction Act Notice, see the Instructions for Form 990.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONCERN WORLDWIDE US, INC. 355 LEXINGTON AVE, 16TH FLOOR NEW YORK, NY 10017	13-3712030	501(C)3	475,000.	.0			CONCERN USA WILL RECEIVE \$475,000 TO IMPROVE RESILIENCE CAPACITIES AMONG VULNERABLE PASTORAL
EQUAL JUSTICE WORKS 1730 M ST NW STE 800 WASHINGTON, DC 20036-4551	52-1469738	501(C)3	450,000.	.0			THROUGH FUNDING FROM THE ATLANTIC HURRICANE SEASON RECOVERY FUND, EQUAL JUSTICE WORKS BUILDS
TRANSGENDER LAW CENTER PO BOX 70976 OAKLAND, CA 94612-0000	05-0544006	501(C)3	450,000.	0.			THE TRANSGENDER LAW CENTER RECEIVED A \$450,000 GRANT TO PROVIDE LEGAL SERVICES AND
IMPACT ON EDUCATION 721 FRONT ST APT A LOUISVILLE, CO 80027-1877	84-0943046	501(C)3	441,000.	•0			THROUGH FUNDING FROM THE CDP COLORADO WILDFIRES RECOVERY FUND, IMPACT ON EDUCATION WILL EXPAND
HABITAT FOR HUMANITY OF FLORIDA 1150 CLEVELAND ST STE 301 CLEARWATER, FL 33755-4859	80-0423130	501(C)3	300,000.	0			THROUGH FUNDING FROM CDP'S ATLANTIC HURRICANE SEASON RECOVERY FUND, HABITAT FOR HUMANITY
VIBRANT EMOTIONAL HEALTH 80 PINE ST NEW YORK, NY 10005-1702	13-2637308	501(C)3	300,000	.0			VIBRANT EMOTIONAL HEALTH AND ITS CRISIS EMOTIONAL CARE TEAM RECEIVED A \$300,000 GRANT FROM THE
REBUILDING TOGETHER TAMPA BAY 3914 US-301 700 TAMPA, FL 33619-0000	59-3664580	501(C)3	300,000.	.0			THROUGH FUNDING FROM THE CDP ATLANTIC HURRICANE SEASON RECOVERY FUND, REBUILDING TOGETHER TAMPA
TALLER SALUD, INC. PO BOX 524 LOIZA, PR 00772-0524	66-0494692	501(C)3	260,000.	0			THROUGH FUNDING FROM THE CDP ATLANTIC HURRICANE SEASON RECOVERY FUND, TALLER SALUD WILL EXPAND
UNITED POLICYHOLDERS 917 IRVING STREET 4 SAN FRANCISCO, CA 94122-0000	94-3162024	501(C)3	250,000.	0			FUNDING FROM THE CDP ATLANTIC HURRICANE SEASON RECOVERY FUND SUPPORTS UP'S EFFORTS TO DELLIVER
							Schedule I (Form 990)

(a) Name and address of (b) EIN (c) IRC sec organization or government if applical	(b) EIN		tion (d) Amount of cash grant	(e) Amount of noncash assistance ap	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTH BAY ORGANIZING PROJECT (NORTH BAY JOBS WITH JUSTICE) - PO BOX 427 - SANTA ROSA, CA							THROUGH FUNDING FROM THE CDP CALIFORNIA WILDFIRES RECOVERY FUND AND THE CDP
95402-0000	45-2369887	501(C)3	250,000.	0.			DISASTER RECOVERY FUND
NEAR EAST FOUNDATION							NEAR EAST FOUNDATION WILL RECEIVE \$250,000 TO
110 W. FAYETTE ST. SUITE 710 SYRACHSE NY 13202	13-1624114	501(C)3	250 000	C			SUPPORT COVID, CONFLICT,
			, , , , , , , , , , , , , , , , , , , ,				24
INTERNEWS NETWORK							GRANT OF \$250,000 FROM
4							CDP'S COVID-19 FUND TO
ARCATA, CA 95518-4448	94-3027961	501(C)3	250,000.	0.			EXPAND THE CAPACITIES OF
CMT mage ITTITO ITTITIONOR							THROUGH FUNDING FROM THE
CIVIL BERI,							CUE MANALL WILDFINES FUND CIVIL BEAT COMMITS
HONOLULU, HI 96816-0000	81-2803662	501(C)3	250,000.	0			TO PROVIDING A LOCAL,
							CASA JUANA COLN RECEIVED
CASA JUANA COLON							A \$250,000 GRANT TO
PO BOX 800							PROVIDE RECOVERY AND
COMERIO, PR 00782-0800	66-0645609	501(C)3	250,000.	0.			MITIGATION SUPPORT TO THE
							THROUGH FUNDING FROM THE
HOUSING DEVELOPMENT ALLIANCE, INC.							CDP DISASTER RECOVERY
PO BOX 7284							FUND DESIGNATED TO
HAZARD, KY 41702-0000	61-1253346	501(C)3	250,000.	0.			SUPPORT RECOVERY FROM THE
							THROUGH FUNDING FROM THE
TION DE MUJER							CDP ATLANTIC HURRICANE
INC 1863 AVE							SEASON RECOVERY FUND
JUNCO - SAN JUAN, PR 00909-3028	66-0931262	501(C)3	250,000.	0.			DESIGNATED FOR HURRICANE
							BUILDING MARKETS WILL
BUILDING MARKETS LTD							RECEIVE \$250,000 FROM
32 BROADWAY STE 1714							TURKEY-SYRIA EARTHQUAKE
NEW YORK, NY 10004-1628	98-0575195	501(C)3	250,000.	0.			FUND TO PROVIDE
							MIYAMOTO RELIEF WILL
MIYAMOTO GLOBAL DISASTER RELIEF							RECEIVE \$250,000 TO
HALYARD DRIVE,							DEVELOP GUIDELINES AND
WEST SACRAMENTO, CA 95691	45-1504288	501(C)3	250,000.	0.			TRAINING TO ENABLE THE
							Schedule I (Form 990)

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
-							FUNDING FROM THE CDP
(COLLIER DISASTER ALLIANCE, INC) -							ATLANTIC HURRICANE SEASON
1450 WINTERBERRY DR - MARCO							RECOVERY FUND PROVIDES
ISLAND, FL 34145-5051	83-2956050	501(C)3	250,000.	0.			COLLIER DISASTER ALLIANCE
							THROUGH FUNDING FROM
LA FAMILIA SANA							GOOGLE AND THE CDP
233 N CLOVERDALE BLVD							DISASTER RECOVERY FUND
CLOVERDALE, CA 95425-3318	86-1711899	501(C)3	250,000.	0.			DESIGNATED TO SUPPORT
							THROUGH FUNDING FROM THE
CREATE FOUNDATION, INC. (LOVE							CDP TORNADO RECOVERY
WITHOUT WALLS) - 201 3RD AVE N,							FUND, LOVE WITHOUT WALLS
SUITE 7 - AMORY, MS 38821	23-7248582	501(C)3	250,000.	0.			PROVIDES RESOURCE
							THROUGH FUNDING FROM THE
THE HEIGHTS CENTER, INC.							CDP ATLANTIC HURRICANE
15570 HAGIE DR							SEASON RECOVERY FUND, THE
FORT MYERS, FL 33908-2890	45-5595206	501(C)3	250,000.	0.			HEIGHTS CENTER WILL
							THROUGH FUNDING FROM THE
TOOLBANK							ATLANTIC HURRICANE SEASON
410 ENGLEWOOD AVE SE							RECOVERY FUND DESIGNATED
ATLANTA, GA 30315-2502	90-0386790	501(C)3	250,000.	0.			TO SUPPORT RECOVERY FROM
							THROUGH FUNDING FROM THE
ARCADIA-DESOTO COUNTY HABITAT FOR							CDP ATLANTIC HURRICANE
HUMANITY INC 10 S DESOTO AVE							RECOVERY FUND, HOPE
STE 101 - ARCADIA, FL 34266-3963	59-3656661	501(C)3	200,000.	0.			DESOTO LONG TERM RECOVERY
							THROUGH FUNDING FROM THE
GOOD360							CDP DISASTER RECOVERY
675 N WASHINGTON ST STE 330							FUND AND THE CDP ATLANTIC
ALEXANDRIA, VA 22314-1939	54-1282616	501(C)3	200,000.	0.			HURRICANE SEASON RECOVERY
							THROUGH FUNDING FROM THE
NORTHERN VALLEY CATHOLIC SOCIAL							CDP CALIFORNIA WILDFIRES
SERVICE INC - 2400 WASHINGTON AVE							RECOVERY FUND, NORTHERN
- REDDING, CA 96001-2802	20-0984601	501(C)3	200,000.	0.			VALLEY CATHOLIC SOCIAL
							AMAN PROJECT WILL RECEIVE
SAFE PLACE INTERNATIONAL (AMAN							\$199,680 TO SUPPORT
PROJECT) - 150 3RD AVENUE - SAN							VULNERABLE
FRANCISCO, CA 94121	82-3250577 501(C)3	501(C)3	199,680.	0.			EARTHQUAKE-AFFECTED
							Schedule I (Form 990)

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							THROUGH FUNDING FROM THE
EMERGENCY LEGAL RESPONDERS							CDP TORNADO RECOVERY
2533 COLUMBUS ST STE 110							FUND, EMERGENCY LEGAL
NEW ORLEANS, LA 70119-2385	82-3334639	501(C)3	194,924.	0.			RESPONDERS WILL CREATE
							\$180,000 TO ARKANSAS
ARKANSAS COMMUNITY FOUNDATION							COMMUNITY FOUNDATION TO
5 ALLIED DRIVE 51110							SUPPORT DISASTER CASE
LITTLE ROCK, AR 72202-0000	52-1055743	501(C)3	180,000.	0			MANAGEMENT AND CHILDCARE
							REFUGEES INTERNATIONAL
REFUGEES INTERNATIONAL							WILL RECEIVE \$160,000 TO
щ							HELP OPERATIONALIZE THE
WASHINGTON, DC 20036	52-1224516	501(C)3	160,000.	0.			LOCALIZATION AGENDA IN
							\$154,000 TO MENNONITE
MENNONITE DISASTER SERVICE							DISASTER SERVICES FOR USE
583 AIRPORT RD							IN RED LAKE NATION
LITITZ, PA 17543-9339	23-2713127	501(C)3	154,000.	0.			(NORTHERN MINNESOTA) TO
							HELPAGE WILL RECEIVE
HELPAGE USA							\$153,000 TO PROVIDE
1730 M ST NW STE 1000							HIGH-LEVEL TECHNICAL
WASHINGTON, DC 20036-4570	27-1071179	501(C)3	153,000.	0.			ADVICE AND LEADERSHIP TO
RECOVERING OKLAHOMANS AFTER							\$150,000 TO RECOVERING
DISASTERS (ROAD) - 12101 N							OKLAHOMANS AFTER DISASTER
MACARTHUR BLVD STE A112 - OKLAHOMA							(ROAD) TO SUPPORT
CITY, OK 73162-1800	83-1952160	501(C)3	150,000.	0.			STAFFING CAPACITY FOR
							THROUGH FUNDING FROM THE
COMMUNITY FARM ALLIANCE							CDP DISASTER RECOVERY
PO BOX 130							FUND, COMMUNITY FARM
BEREA, KY 40403-0130	61-1092056	501(C)3	149,677.	0.			ALLIANCE WILL BUILD
DISASTER SERVICES CORPORATION -							THROUGH FUNDING FROM THE
SOCIETY OF ST. VINCENT DE PAUL -							CDP TORNADO RECOVERY
511 E JOHN CARPENTER FWY STE 500 -							FUND, DISASTER SERVICES
IRVING, TX 75062-8138	82-0658251	501(C)3	134,766.	0.			CORPORATION - SOCIETY OF
							WITH SUPPORT FROM CDP'S
MAUI UNITED WAY							HAWAII WILDFIRES RECOVERY
95 MAHALANI ST RM 24							FUND, AND IN ORDER TO
WAILUKU, HI 96793-2521	99-0086524 501(C)3	501(C)3	125,000.	0 *			EMPOWER FIRE-IMPACTED
							Schedule I (Form 990)

	(Schedule I (Form 990), Part II.)
, INC.	Domestic Governments
PHILANTHROPY	stic Organizations and I
R DISASTER	Assistance to Domes
CENTER FOR	Grants and Other
le I (Form 990)	Continuation of
Schedu	Part II

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							\$107,415 TO COMMUNITIES
COMMUNITIES FOUNDATION OF OKLAHOMA DO BOX 21210							FOUNDATION OF OKLAHOMA TO
OKLAHOMA CITY, OK 73156-1210	73-1396320	501(C)3	107,415.	0			RECOVERY COORDINATOR FOR
18							
UNITED METHODIST CHURCH (CRISIS							SPONSORSHIP OF THE
CARE MINISTRIES) - 608 OUTER BANKS							OKLAHOMA CONFERENCE OF
WAY - EDMOND, OK 73034	73-0617470	501(C)3	101,200.	0.			THE UNITED METHODIST
							THROUGH FUNDING FROM THE
NORTHERN CALIFORNIA GRANTMAKERS							DISASTER RECOVERY FUND,
160 SPEAR ST STE 360							NORTHERN CALIFORNIA
SAN FRANCISCO, CA 94105-1543	94-2761355	501(C)3	100,000.	0.			GRANTMAKERS WILL INCREASE
							THROUGH FUNDING FROM
APPALACHIAN CITIZENS' LAW CENTER,							CDP'S DISASTER RECOVERY
INC 317 MAIN STREET -							FUND, THE APPALACHIAN
WHITESBURG, KY 41858-0000	61-1401589	501(C)3	100,000.	0.			CITIZENS' LAW CENTER
							THROUGH FUNDING FROM THE
INFORMATION TECHNOLOGY DISASTER							ATLANTIC HURRICANE SEASON
RESOURCE CENTER - 3934 SANDSHELL							RECOVERY FUND AND THE
DR - FORT WORTH, TX 76137-2403	26-3865869	501(C)3	100,000.	0			DISASTER RECOVERY FUND,
							\$91,520 TO UNITED WAY OF
UNITED WAY OF POTTAWATOMIE COUNTY							POTTAWATOMIE COUNTY TO
PO BOX 697							SUPPORT DISASTER RECOVERY
SHAWNEE, OK 74802-0697	73-0732745	501(C)3	91,520.	0.			COORDINATION IN RESPONSE
							\$82,500 GRANT FROM CDP'S
ROSE ROCK HABITAT FOR HUMANITY							EARLY RECOVERY FUND TO
PO BOX 1005							ROSE ROCK HABITAT FOR
NORMAN, OK 73070-0000	73-1422362	501(C)3	82,500.	0.			HUMANITY. THE FUNDS WILL
							THROUGH FUNDING FROM
CENTER FOR RURAL STRATEGIES INC							CDP'S DISASTER RECOVERY
46 E MAIN STREET							FUND DESIGNATED FOR
WHITESBURG, KY 41858-0000	61-1379952	501(C)3	80,000.	0.			APPALACHIA FLOOD
							THROUGH FUNDING FROM
PEOPLES ADVOCACY INSTITUTE							GOOGLE AND THE CDP
1959 HIGHLANDER WAY							DISASTER RECOVERY FUND,
NEW MARKET, TN 37820-4939	62-0646373	501(C)3	80,000.	0.			THE PEOPLES ADVOCACY
							Schodulo I (Eorm 000)

The CTITEMS POUNDATION	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Name	CITIZENS FOUNDATION WILCREST DR, SUITE							THE CITIZEN'S FOUNDATION WILL RECEIVE \$78,846.65
NAME POUND ASSOCIATION		41-2046295	501(C)3	78,847.	0			EDUCATION INTERVENTIONS
No. 1.897 No. 1.998 No.	LOST AND FOUND ASSOCIATION							\$78,210 TO LOST AND FOUND ASSOCIATION IN WESTERN
NATURE PROCURE FUNDING FRONTEN FOR FUNDING FRONTEN FOR FUNDING FRONTEN FRONTEN FUNDING FRONTEN FRONTEN FUNDING FRONTEN FRONT				;	,			SOUTH DAKOTA, FUNDING
HE BAY ORGANIZING PROJECT A. REAN ORGANIZING PROJECT A. REAN ORGANIZING PROJECT A. REAN ORGANIZING PROJECT A. READ ORGANIZING PROJECT A. READ ORGANIZING PROJECT BAY ORGANIZING PROJECT BAY ORGANIZING PROJECT BAY ORGANIZING PROJECT BAY ORGANIZING PROMESHALESE (ACON) FOR MASSHALESE (ACON) FOR MASSHALE	SD	45-4306370	501(C)3	.012,87	0			WILL PROVIDE PSYCHOSOCIAL
Page 2016 Page	NORTH BAY ORGANIZING PROJECT							CDP DISASTER RECOVERY
Name	PO BOX 1928							FUND DESIGNATED FOR
NAMES COLLITION OF MARSHALLESE ST. 2416698 SOL(C)3 TO,400 O. S. AGADITON MARSHALLESE (ACOM) FOR THE RESILIENT TO TO TERRAL AND TERRAL AND TERRAL AND TERRAL TO TO,400 O. S. C.L. TOO PERMALLESE (ACOM) FOR THE RESILIENT TO TERRAL AND CONFERENCE TERRAL TO TE	, CA	45-2369887	501(C)3		0.			RECOVERY FROM THE
PREA PREABULESE PR								
EAST EMAR AVE STE 113 INGDALE, AR 72764-0000 CLIFF CAMP AND CONFERENCE EEK, INC 1720 FERNCLIFP ROAD TI-0657898 501(C)3 66,000. TENER RIVER LONG-TERM RECOVERY THE ROCK, AR 72223-0000 TI-0657898 501(C)3 66,000. THOUST LONG-TERM RECOVERY THE ROCK, AR 72221 - DUPREE, SD 39-0221 EAST LONG-TERM RECOVERY THOUST LONG-TERM RECOVER	INSAS							
NCE IFF ROAD T1-0657898 501(C)3 66,000. ECOVERY E, SD 70,400. 00 71-0657898 501(C)3 66,000. 00 72-0706669 501(C)3 66,000. NGRESS 85-1403937 501(C)3 50,000. 00 94-1422471 501(C)3 50,000. 00	EAST EMMA AVE STE							
NCE IPP ROAD ONTERSS ACCOURTY E. SD 71-0657898 501(C)3 66,000. 0. 66,000. 0. 66,000. 0. 72-0706669 501(C)3 57,500. 0. 85-1403937 501(C)3 50,000. 0. 94-1422471 501(C)3 50,000. 0.	, AR	35-2416698	501(C)3		0			THEIR RESILIENT TO
NOTE								\$66,000 TO FERNCLIFF CAMP
FROVIDE PSYCHOSCIAL PROVIDE PSYCHOSCIAL								
00 71-0657898 501(C)3 66,000. 0. 0. SUPPORT POR CHILDREN E, SD 92-2030939 501(C)3 66,000. 0. 0. SUPPORT THE CHEVENNE E, SD 52-2030939 501(C)3 66,000. 0. C.	INC 1720 FERNCLIFF							PSYCHOSOCIAL
ECOVERY E, SD 92-2030939 501(C)3	LITTLE ROCK, AR	71-0657898	501(C)3		0			SUPPORT FOR CHILDREN AND
ECOVERY E, SD 92-2030939 501(C)3 66,000. 0. 0. 8 PRICE RECOVERY FUND THE CHEYENNE FUND THE CHEYENNE FUND THE CONTINUE FOR MISSISSIPPI FREE FREE CODELE IN SUPPORT OF CDP DISASTER RECOVERY PUND. A RELIEF AND								\$66,000 FROM THE MIDWEST
E, SD 92-2030939 501(C)3 66,000. 0. 0. RIVER LONG THE CHEYENNE RECOVER AND IMPROVIDED A \$57,500 GRANT TO REPLICATE AND IMPROVIDED A SECONDARY SOLICO STATEMENT AND GOOGLE, THE MISSISSIPPI FREE PREFAMENT OF HOLICO STATEMENT AND GOOGLE, THE STATEMENT AND GOOGLE THE STATEMENT OF HOLICO STATEMENT AND GOOGLE IN SUPPORT OF CORP. A RELIEF AND TO SECONDARY SOLICO STATEMENT AND A RELIEF AND TABLES AND T	CHEYENNE RIVER LONG-TERM RECOVERY							EARLY RECOVERY FUND TO
10 10 10 10 10 10 10 10	- PO BOX 221 - DUPREE,							SUPPORT THE CHEYENNE
NGRESS 85-1403937 501(C)3 50,000 0. 61-422471 501(C)3 50,000 0. 63-64-422471 501(C)3 50,000 0. 64-1422471 501(C)3 50,000 0. 64-14224	57623-0221	92-2030939	501(C)3	.000,99	0.			RIVER LONG TERM RECOVERY
T2-0706669 501(C)3 57,500. 0. REPLICATE AND IMPROVIOUS PROMINGRESS 50,000. 0. REPLICATE AND IMPROVIOUS PROMINGRESS 50,000. 0. REPLICATE AND IMPROVIOUS PROMINGRESS S5,000. 0. REPLICATE AND IMPROVIOUS PROMINGRESS REPRESENTED PROGRES, THE MISSISSIPPI FREE PRESENTED PROGRES, THE MISSISSIPPI FREE PRESENTED PROGRES PROGRES PRESENTED PROGRES								VIA LINK RECEIVED A
NGRESS S01(C)3 S7,500, O. O. REPLICATE AND IMPROVI NGRESS S01(C)3 S0,000, O. O. O. O. O. O. O. O	VIA LINK							\$57,500 GRANT TO
NGRESS 50,000 0 POPON THEIR HURRICANE NGRESS 85-1403937 50,000 0 PROGGE, THE MISSISSIPPI FREE PRESTRICTORY OUNITY 84-1422471 50,000 0 PROGGE IN SUPPORT OF COPPLIANCE OF COPPLIANCE OF COPPLIANCE AND COPPLI	5001 HIGHWAY 190 UNIT C1							REPLICATE AND IMPROVE
NGRESS 85-1403937 501(C)3 50,000. 0. 0. HROUGH FUNDING FROM AND GOOGLE, THE MISSISSIPPI FREE PRES WILL CONTINUE TO HOLL THROUGH FUNDING FROM GOOGLE IN SUPPORT OF CONTINUE TO BUSASTER RECOVERY 94-1422471 501(C)3 50,000. 0. FUND, A RELIEF AND		72-0706669	501(C)3	57,500.	0.			UPON THEIR HURRICANE IDA
AND GOOGLE, THE MISSISSIPPI FREE PRES B5-1403937 501(C)3 50,000. 0. 0. MILL CONTINUE TO HOLI THROUGH FUNDING FROM GOOGLE IN SUPPORT OF SANTA CRUZ COUNTY OF SANTA CRUZ COUNTY 3 94-1422471 501(C)3 50,000. 0. 0. FUND, A RELIEF AND	MISSISSIPPI JOURNALISM AND							THROUGH FUNDING FROM CDP
1 - JACKSON, MS	- 125							
SF-1403937 SO1(C)3 50,000. 0 WILL CONTINUE TO HOLI	- JACKSON,							MISSISSIPPI FREE PRESS
OF SANTA CRUZ COUNTY OF SANTA CRUZ COUNTY 3 2A 95010-1458 94-1422471 501(C)3 50,000. 0. 1 THROUGH FUNDING FROM CRUZ COUNTY BOOGLE IN SUPPORT OF CDP DISASTER RECOVERY COUNTY BOOGLE IN SUPPORT OF CDP DISASTER RECOVERY COUNTY BOOGLE IN SUPPORT OF CDP DISASTER RECOVERY COUNTY COU	39201-3300	85-1403937	501(C)3	50,000.	0 *			WILL CONTINUE TO HOLD
OF SANTA CRUZ COUNTY 3 2A 95010-1458 94-1422471 501(C)3 50,000. GOOGLE IN SUPPORT OF COUNTY CDP DISASTER RECOVERY FUND, A RELIEF AND								THROUGH FUNDING FROM
458 , CA 95010-1458 94-1422471 501(C)3 50,000. 0.	OF							GOOGLE IN SUPPORT OF THE
, CA 95010-1458 94-1422471 501(C)3 50,000. 0. FUND, A RELIEF	BOX							CDP DISASTER RECOVERY
	, CA	94-1422471	501(C)3	50,000.	0.			, A RELIEF

(a) Name and address of if applicable cash grant assistance (b) EIN (c) IRC section organization or government (d) EIN (e) IRC section (f) Method of (f) Met	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALMATTERS 1017 L STREET 261 SACRAMENTO. CA 95814-3805	47-2474086	501(C)3	2000	°			THROUGH FUNDING FROM THE CDP DISASTER RECOVERY FUND FOR CALIFORNIA STORMS RECOVERY AND FROM
EPISCOPAL CHURCH IN THE DIOCESE OF NORTHERN CALIFORNIA - 350 UNIVERSITY AVE STE 280 - SACRAMENTO, CA 95825-6517	94-1408152	501(C)3	.000,05	.0			EPISCOPAL CHURCH IN THE DIOCESE OF NORTHERN CALIFORNIA RECEIVED A \$50,000 GRANT TO PROVIDE
MAPACTION 1090 VERMONT AVENUE NW WASHINGTON, DC 20005	84-3641056 501(C)3	501(C)3	40,000.	•0			MAPACTION WILL RECEIVE \$40,000 FROM CDP'S TUEKY/SYRIA EARTHQUAKE FUND TO ALLOW THEM TO
CATHOLIC CHARITIES OF SOUTHERN MISSOURI - 424 E MONASTERY ST - SPRINGFIELD, MO 65807-6099	80-0455890	501(C)3	31,428.	0.			\$31,428 TO CATHOLIC CHARITIES OF SOUTHERN MISSOURI TO SUPPORT DISASTER CASE MANAGEMENT
SCOPA HAS A DREAM PO BOX 1004 HEALDSBURG, CA 95448-0000	27-3044487	501(C)3	30,000.	.0			THROUGH FUNDING FROM GOOGLE AND THE CDP DISASTER RECOVERY FUND, CORAZON HEALDSBURG CAN
NORTHERN ROCKY MOUNTAIN ECONOMIC DEVELOPMENT DISTRICT - PO BOX 3725 - BOZEMAN, MT 59772-0000	26-0281964	501(C)6	10,000.	.0			\$10,000 TO NORTHERN ROCKY MOUNTAIN ECONOMIC DEVELOPMENT DISTRICT TO SUPPORT COMMUNITY
							Schedule I (Form 990)

Schedule I (Form 990) 2023 CENTER FOR DISASTER PHILLANTHROPY, INC.

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 non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	quired in Part I, lin	e 2; Part III, column	(b); and any other ad	ditional information.	
PART I, LINE 2:					
THE CENTER FOR DISASTER PHILANTHROPY	PY CLOSELY	Y MONITORS	ALL OF ITS	S GRANTEES	
THROUGH FREQUENT PHONE CALLS, EMAII	L COMMUNI	EMAIL COMMUNICATION AND	SITE VISITS.	rs. each	
GRANTEE IS REQUIRED TO COMMUNICATE	ANY	SUBSTANTIVE BU	BUDGET OR PRO	PROGRAMMATIC	
CHANGES. ALL GRANTEES SUBMIT A FIN	FINAL REPORT	T DETAILING	THEIR	PROGRESS	
AGAINST GOALS, ACTIVITIES AND OBJEC	OBJECTIVES, H	HOW THEY WERE	RE ABLE TO	SERVE THE	
AFFECTED POPULATION, AND DETAILING	FINAL	EXPENDITURES.	• DEPENDING	NG ON THE	
SIZE OF THE GRANT, SOME GRANTEES SU	SUBMIT BOTH	AN	INTERIM/PROGRESS	S REPORT AND	
A FINAL REPORT.					
332102 11-01-23		L			Schedule I (Form 990) 2023

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: IMA INNOVATIONS

(H) PURPOSE OF GRANT OR ASSISTANCE: IMA INNOVATIONS (CORUS

INTERNATIONAL) - WILL RECEIVE \$1M FROM UKRAINE CRISIS RECOVERY FUND FOR A

12-MONTH PROGRAM, BEGINNING IN APRIL 2023, TO REBUILD SMALLHOLDER FARMER

AND IDP LIVELIHOODS, INCREASE LOCAL CLIMATE-ADAPTIVE AGRICULTURAL

CAPACITY AND PRODUCTION, AND IMPROVE FOOD SECURITY IN KHARKIV OBLAST.

NAME OF ORGANIZATION OR GOVERNMENT:

BOSTON FOUNDATION - HAITIAN DEVELOPMENT INSTITUTE (HDI)

(H) PURPOSE OF GRANT OR ASSISTANCE: HDI WILL RECEIVE \$505,750 FROM CDP'S

HAITI EARTHQUAKE RECOVERY FUND TO WORK WITH COMMUNITY ORGANIZATIONS IN

EARTHQUAKE AFFECTED COMMUNITIES TO SUPPORT THEIR EFFORTS TO HELP

COMMUNITY MEMBERS RECOVER FROM THEIR LOSSES AND BUILD RESILIENCE THROUGH

MICROGRANTS, CAPACITY STRENGTHENING, IMPROVED LIVELIHOODS AND BETTER

PREPAREDNESS.

NAME OF ORGANIZATION OR GOVERNMENT: DONORSCHOOSE

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP

DISASTER RECOVERY FUND, TORNADO RECOVERY FUND AND ATLANTIC HURRICANE

SEASON RECOVERY FUND, DONORSCHOOSE PROVIDES SUPPORT TO TEACHERS AND

STUDENTS IN EQUITY-FOCUSED SCHOOLS AFFECTED BY DISASTERS AND IN SUPPORT

OF STUDENTS NEW TO THE U.S. AS A RESULT OF IMMIGRATION, MIGRATION OR

REFUGEE RESETTLEMENT.

NAME OF ORGANIZATION OR GOVERNMENT: ST. BERNARD PROJECT, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP

ATLANTIC HURRICANE SEASON RECOVERY FUND, SBP AND ITS PARTNERS WILL RETURN AT LEAST 22 VULNERABLE, HURRICANE IAN-IMPACTED FAMILIES TO THE SAFETY AND SECURITY OF THEIR HOMES. SBPS LONG-TERM RECOVERY WORK WILL LAY THE GROUNDWORK FOR CONTINUED RECOVERY EFFORTS THROUGHOUT THE REGION AND POSITION LOCAL NONPROFITS TO LEVERAGE ADDITIONAL RESOURCES TO DRIVE COMMUNITY RESILIENCE.

NAME OF ORGANIZATION OR GOVERNMENT: PROJECT HOPE - THE PEOPLE-TO-PEOPLE (H) PURPOSE OF GRANT OR ASSISTANCE: PROJECT HOPE WILL RECEIVE \$190,000 TO IMPLEMENT A 5 MONTH PROJECT FROM FEB TO JUNE 2023 TO ENHANCE THE CAPACITY OF LOCAL HEALTHCARE PROVIDERS AFFECTED BY THE EARTHQUAKE IN THE SICHUAN PROVINCE TO RESPOND TO AND BE BETTER PREPARED FOR FUTURE EMERGENCIES AND WILL HELP VULNERABLE LOCAL RESIDENTS THROUGH PROVIDING PSYCHOLOGICAL SUPPORT.PROJECT HOPE WILL RECEIVE \$300,000 FROM ATLANTIC HURRICANE FUND TO PROVIDE LONG-TERM RECOVERY FOLLOWING HURRICANE FIONA BY DEVELOPING RESILIENT WATER INFRASTRUCTURE AND SYSTEMS FOR REMOTE COMMUNITIES IN DOMINICAN REPUBLIC, IN AN AREA WHERE NATURAL DISASTERS CHALLENGE THE REGION.

NAME OF ORGANIZATION OR GOVERNMENT:

ORAM - ORGANIZATION FOR REFUGE, ASYLUM AND MIGRATION (H) PURPOSE OF GRANT OR ASSISTANCE: ORAM WILL RECEIVE A TWO-YEAR GRANT OF \$485,000 TO BUILD THE CAPACITY OF INGOS, NGOS AND CSOS WORKING WITH LGBTIO REFUGEES, TO PROVIDE THEM WITH THE TOOLS TO MEET THE UNIQUE NEEDS OF LGBTIQ REFUGEES IN EUROPE AND KENYA.

NAME OF ORGANIZATION OR GOVERNMENT: CONCERN WORLDWIDE US, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CONCERN USA WILL RECEIVE \$475,000 TO

Part IV | Supplemental Information

IMPROVE RESILIENCE CAPACITIES AMONG VULNERABLE PASTORAL AND AGRO-PASTORAL HOUSEHOLDS TO RESPOND TO AND COPE POSITIVELY WITH THE EFFECTS OF THE CURRENT DROUGHT AND FUTURE CLIMATIC SHOCKS IN TURKANA AND MARSABIT COUNTIES, KENYA.

NAME OF ORGANIZATION OR GOVERNMENT: EQUAL JUSTICE WORKS (H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE ATLANTIC HURRICANE SEASON RECOVERY FUND, EQUAL JUSTICE WORKS BUILDS CAPACITY TO DELIVER LEGAL SERVICES BY MOBILIZING LEGAL FELLOWS TO PARTNER ORGANIZATIONS IN FLORIDA AND PUERTO RICO, TO SERVE LOW-INCOME COMMUNITIES IMPACTED BY HURRICANES IAN AND FIONA AND AT RISK OF FUTURE DISASTER.

NAME OF ORGANIZATION OR GOVERNMENT: TRANSGENDER LAW CENTER (H) PURPOSE OF GRANT OR ASSISTANCE: THE TRANSGENDER LAW CENTER RECEIVED A \$450,000 GRANT TO PROVIDE LEGAL SERVICES AND ADDRESS THE HUMANITARIAN NEEDS OF LGBTQIA+ ASYLUM SEEKERS AND MIGRANTS ENTERING THE U.S. AT THE SOUTHERN BORDER WITH MEXICO THROUGH ITS COLLABORATIVE PROGRAM, THE BORDER BUTTERFLIES PROJECT.

NAME OF ORGANIZATION OR GOVERNMENT: IMPACT ON EDUCATION (H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP COLORADO WILDFIRES RECOVERY FUND, IMPACT ON EDUCATION WILL EXPAND IT'S PROGRAMMING IN BOULDER COUNTY SCHOOLS TO SUPPORT STUDENT AND FACULTY MENTAL HEALTH RECOVERY FROM FIRES AND OTHER ISSUES EXPERIENCED IN THE COMMUNITY.

NAME OF ORGANIZATION OR GOVERNMENT: HABITAT FOR HUMANITY OF FLORIDA (H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM CDP'S ATLANTIC Schedule I (Form 990) HURRICANE SEASON RECOVERY FUND, HABITAT FOR HUMANITY FLORIDA PROVIDES

LONG-TERM SUPPORT TO ASSIST HURRICANE IAN-AFFECTED AFFILIATES WITH FUNDING TO REPAIR AND REBUILD LOW-INCOME HOUSEHOLDS AND HELPING AFFECTED FAMILIES AND CHILDREN RETURN TO SAFE, SANITARY, AND SECURE HOMES.

NAME OF ORGANIZATION OR GOVERNMENT: VIBRANT EMOTIONAL HEALTH (H) PURPOSE OF GRANT OR ASSISTANCE: VIBRANT EMOTIONAL HEALTH AND ITS CRISIS EMOTIONAL CARE TEAM RECEIVED A \$300,000 GRANT FROM THE TORNADO RECOVERY, ATLANTIC HURRICANE SEASON RECOVERY, AND DISASTER RECOVERY FUNDS TO SUSTAIN AND EXPAND ITS DISASTER BEHAVIORAL HEALTH TRAINING AND PREPAREDNESS PROGRAM TO SUPPORT LOCAL DISASTER-RESPONDING ORGANIZATIONS THROUGHOUT THE U.S.

NAME OF ORGANIZATION OR GOVERNMENT: REBUILDING TOGETHER TAMPA BAY (H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP ATLANTIC HURRICANE SEASON RECOVERY FUND, REBUILDING TOGETHER TAMPA BAY WILL SUPPORT REBUILD AND REPAIR OPERATIONS IN THE STATE OF FLORIDA IN MARGINALIZED COMMUNITIES AFFECTED BY HURRICANE IAN.

NAME OF ORGANIZATION OR GOVERNMENT: TALLER SALUD, INC. (H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP ATLANTIC HURRICANE SEASON RECOVERY FUND, TALLER SALUD WILL EXPAND CAPACITY IN THE COMMUNITIES MOST AFFECTED BY CLIMATE CHANGE TO PREPARE, RESPOND MITIGATE AND ADAPT. THEY WILL DO THIS BY TRUSTING AND ELEVATING WOMEN OF COLOR'S LEADERSHIP IN THOSE COMMUNITIES.

NAME OF ORGANIZATION OR GOVERNMENT: UNITED POLICYHOLDERS

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING FROM THE CDP ATLANTIC

HURRICANE SEASON RECOVERY FUND SUPPORTS UP'S EFFORTS TO DELIVER RECOVERY ASSISTANCE SERVICES TO HOUSEHOLDS IMPACTED BY HURRICANES IAN AND NICOLE THROUGH TIME-TESTED ROADMAP TO RECOVERY(R) (R2R) AND ADVOCACY AND ACTION PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT:

NORTH BAY ORGANIZING PROJECT (NORTH BAY JOBS WITH JUSTICE)

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP CALIFORNIA WILDFIRES RECOVERY FUND AND THE CDP DISASTER RECOVERY FUND DESIGNATED FOR CALIFORNIA FLOOD RECOVERY, NORTH BAY JOBS WITH JUSTICE (NBJWJ) PROVIDES TRAINING AND WORK OPPORTUNITIES FOR AND BY IMMIGRANT AND INDIGENOUS FARMWORKERS THAT BUILD RESILIENCE IN THE COMMUNITY WHILE CREATING GOOD JOBS WITH FAMILY SUSTAINING WAGES.

NAME OF ORGANIZATION OR GOVERNMENT: NEAR EAST FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: NEAR EAST FOUNDATION WILL RECEIVE \$250,000 TO SUPPORT COVID, CONFLICT, CLIMATE, AND CRISIS-IMPACTED PEOPLE IN SOUTH SUDAN, TO REDUCE THEIR RISK OF FOOD INSECURITY, RECOVER LIVELIHOODS, AND BUILD RESILIENCE TO FUTURE SHOCKS.

NAME OF ORGANIZATION OR GOVERNMENT: INTERNEWS NETWORK

(H) PURPOSE OF GRANT OR ASSISTANCE: INTERNEWS WILL RECEIVE A GRANT OF \$250,000 FROM CDP'S COVID-19 FUND TO EXPAND THE CAPACITIES OF LOCAL ORGANIZATIONS, LEADERS, AND MEDIA IN BORDER AREAS OF COLOMBIA AND VENEZUELA TO ADDRESS CRITICAL HEALTH NEEDS CONSIDERING THE COVID-19 PANDEMIC AND EMERGING CRISES MORE EFFECTIVELY.

NAME OF ORGANIZATION OR GOVERNMENT: HONOLULU CIVIL BEAT, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP HAWAII WILDFIRES FUND, CIVIL BEAT COMMITS TO PROVIDING A LOCAL, DEDICATED JOURNALISM TEAM IN MAUI FOCUSED ON PROVIDING ACCURATE AND FREE COMMUNITY INFORMATION, INFORMED DEBATE, LEADERSHIP ACCOUNTABILITY AND ENCOURAGING ACTION.

NAME OF ORGANIZATION OR GOVERNMENT: CASA JUANA COLON

(H) PURPOSE OF GRANT OR ASSISTANCE: CASA JUANA COLN RECEIVED A \$250,000 GRANT TO PROVIDE RECOVERY AND MITIGATION SUPPORT TO THE MOST VULNERABLE PEOPLE IN THE COMMUNITIES IN COMERO, PUERTO RICO ON ISSUES RELATED TO HEALTH AND FOOD SECURITY AND PREPARE THEIR ORGANIZATION TO ACTIVATE IN THE FACE OF THE NEXT DISASTER.

NAME OF ORGANIZATION OR GOVERNMENT: HOUSING DEVELOPMENT ALLIANCE, INC. (H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP DISASTER RECOVERY FUND DESIGNATED TO SUPPORT RECOVERY FROM THE 2022 FLOODING IN APPALACHIA, THE HOUSING DEVELOPMENT ALLIANCE WILL SUPPORT AFFORDABLE HOUSING RECOVERY IN THE AREA, HELPING RETURN THOSE MOST IN NEED TO THEIR HOMES.

NAME OF ORGANIZATION OR GOVERNMENT:

FUNDACION DE MUJERES EN PUERTO RICO, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP ATLANTIC HURRICANE SEASON RECOVERY FUND DESIGNATED FOR HURRICANE FIONA RECOVERY, THE FUNDACION DE MUJERES EN PUERTO RICO SUPPORTS LOCAL, WOMEN-LED AND WOMEN-SERVING ORGANIZATIONS IN SOME OF THE ISLANDS MOST MARGINALIZED COMMUNITIES AFFECTED BY HURRICANE IAN.

NAME OF ORGANIZATION OR GOVERNMENT: BUILDING MARKETS LTD

(H) PURPOSE OF GRANT OR ASSISTANCE: BUILDING MARKETS WILL RECEIVE

\$250,000 FROM TURKEY-SYRIA EARTHQUAKE FUND TO PROVIDE MARGINALIZED

REFUGEE ENTREPRENEURS WITH TOOLS AND FINANCIAL RECOVERY PLANS TO RESTART

THEIR SMALL BUSINESSES, SUPPORTING ECONOMIC RECOVERY OF THEIR OWN

HOUSEHOLDS AND THEIR VULNERABLE AFFECTED EMPLOYEES.

NAME OF ORGANIZATION OR GOVERNMENT: MIYAMOTO GLOBAL DISASTER RELIEF

(H) PURPOSE OF GRANT OR ASSISTANCE: MIYAMOTO RELIEF WILL RECEIVE

\$250,000 TO DEVELOP GUIDELINES AND TRAINING TO ENABLE THE SAFE DEMOLITION

OF ASBESTOS-CONTAINING STRUCTURES IN WAR-DAMAGED UKRAINE, WHICH POSE A

SIGNIFICANT HEALTH HAZARD TO COMMUNITIES RECOVERING FROM IMPACT OF WAR.

NAME OF ORGANIZATION OR GOVERNMENT:

OUR DAILY BREAD FOOD PANTRY, INC. (COLLIER DISASTER ALLIANCE, INC)

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING FROM THE CDP ATLANTIC

HURRICANE SEASON RECOVERY FUND PROVIDES COLLIER DISASTER ALLIANCE THE

CAPACITY TO SUPPORT SURVIVORS OF HURRICANE IAN THROUGH COMMUNITY

COLLABORATION, CASEWORK, CASE MANAGEMENT PARTNERSHIP, VOLUNTEER LABOR

ORGANIZATION, REFERRALS, INFORMATION SHARING, FINANCIAL REPAIR AND

REBUILD ASSISTANCE AND ALLOCATING FINANCIAL ASSISTANCE TO INDIVIDUALS

THROUGH UNMET NEEDS ALLOCATIONS.

NAME OF ORGANIZATION OR GOVERNMENT: LA FAMILIA SANA

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM GOOGLE AND THE
CDP DISASTER RECOVERY FUND DESIGNATED TO SUPPORT RECOVERY FROM THE 2023

CALIFORNIA STORMS AND FROM THE CDP CALIFORNIA WILDFIRES RECOVERY FUND, LA
FAMILIA SANA WILL PROVIDE LONG-TERM BILINGUAL/BICULTURAL THERAPY TO

SUPPORT TRAUMA RECOVERY AND BUILD RESILIENCY FOR THE DISASTER AFFECTED AREAS OF RURAL NORTHERN SONOMA COUNTY.

NAME OF ORGANIZATION OR GOVERNMENT:

CREATE FOUNDATION, INC. (LOVE WITHOUT WALLS)

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP TORNADO RECOVERY FUND, LOVE WITHOUT WALLS PROVIDES RESOURCE NAVIGATION, CASE MANAGEMENT, AND PSYCHOSOCIAL, SPIRITUAL AND FINANCIAL RECOVERY ASSISTANCE TO SURVIVORS OF THE EGYPT-NEW WREN-AMORY-SMITHVILLE TORNADO IN AMORY, MISSISSIPPI.

NAME OF ORGANIZATION OR GOVERNMENT: THE HEIGHTS CENTER, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP ATLANTIC HURRICANE SEASON RECOVERY FUND, THE HEIGHTS CENTER WILL PROVIDE MUCH NEEDED KITCHEN CABINETRY AND APPLIANCES TO HELP FINALIZE THE REPAIR AND REBUILD OF HOMES DAMAGED BY HURRICANE IAN IN THE MOSTLY MINORITY COMMUNITY OF HARLEM HEIGHTS IN FLORIDA.

NAME OF ORGANIZATION OR GOVERNMENT: TOOLBANK

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE ATLANTIC HURRICANE SEASON RECOVERY FUND DESIGNATED TO SUPPORT RECOVERY FROM HURRICANE IAN, TOOLBANK DISASTER SERVICES WILL SUPPORT A SOUTHEAST TERRITORY HUB IN TAMPA TO PROVIDE TOOLS AND SUPPLIES TO COMMUNITY-BASED ORGANIZATIONS PROVIDING RESPONSE AND/OR LONG-TERM RECOVERY TO HURRICANE IAN.

NAME OF ORGANIZATION OR GOVERNMENT:

ARCADIA-DESOTO COUNTY HABITAT FOR HUMANITY INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP

ATLANTIC HURRICANE RECOVERY FUND, HOPE DESOTO LONG TERM RECOVERY GROUP

WILL SUPPORT LONG-TERM RECOVERY EFFORTS IN DESOTO COUNTY FLORIDA

NECESSITATED BY HURRICANE IAN AND BUILD A MORE RESILIENT COMMUNITY.

NAME OF ORGANIZATION OR GOVERNMENT: GOOD360

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP

DISASTER RECOVERY FUND AND THE CDP ATLANTIC HURRICANE SEASON RECOVERY

FUND, GOOD360 AND CDP WILL CONTINUE A PARTNERSHIP IN EXPANDING ACCESS TO

MUCH NEEDED PRODUCTS FOR DISASTER PREPARATION, RELIEF AND RESPONSE. THE

DISASTER WAREHOUSE PROJECT ALLOWS CDP TO CONNECT LOCAL GRANTEE PARTNERS

TO MUCH-NEEDED NATIONAL RESOURCES.

NAME OF ORGANIZATION OR GOVERNMENT:

NORTHERN VALLEY CATHOLIC SOCIAL SERVICE INC

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP

CALIFORNIA WILDFIRES RECOVERY FUND, NORTHERN VALLEY CATHOLIC SOCIAL

SERVICES WILL IMPLEMENT THE WILDFIRE RESILIENCE AND RISK REDUCTION

PROGRAM WITH FOCUS ON OUTREACH AND EDUCATIONAL EFFORTS ON COMMUNITIES IN

HIGH FIRE DANGER AREAS IN SHASTA, SISKIYOU, TRINITY, BUTTE, TEHAMA, AND

GLENN COUNTIES.

NAME OF ORGANIZATION OR GOVERNMENT:

SAFE PLACE INTERNATIONAL (AMAN PROJECT)

(H) PURPOSE OF GRANT OR ASSISTANCE: AMAN PROJECT WILL RECEIVE \$199,680

TO SUPPORT VULNERABLE EARTHQUAKE-AFFECTED LGBTQIA+ REFUGEES IN TURKEY

WITH TEMPORARY SHELTER, CASH ASSISTANCE AND SUPPORT ACCESSING SERVICES TO

ENSURE THEIR BASIC NEEDS ARE MET AND THEY ARE ABLE TO RECOVER THEIR LIVES

AND LIVELIHOODS.

NAME OF ORGANIZATION OR GOVERNMENT: EMERGENCY LEGAL RESPONDERS (H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP TORNADO RECOVERY FUND, EMERGENCY LEGAL RESPONDERS WILL CREATE "LEGAL TOOLS FOR SOUTHERN TORNADO SURVIVORS" TO USE AS THEY NAVIGATE THROUGH THE RECOVERY PROCESS.

NAME OF ORGANIZATION OR GOVERNMENT: ARKANSAS COMMUNITY FOUNDATION (H) PURPOSE OF GRANT OR ASSISTANCE: \$180,000 TO ARKANSAS COMMUNITY FOUNDATION TO SUPPORT DISASTER CASE MANAGEMENT AND CHILDCARE PROVIDER NEEDS IN RESPONSE TO 2023 ARKANSAS TORNADOES.

NAME OF ORGANIZATION OR GOVERNMENT: REFUGEES INTERNATIONAL (H) PURPOSE OF GRANT OR ASSISTANCE: REFUGEES INTERNATIONAL WILL RECEIVE \$160,000 TO HELP OPERATIONALIZE THE LOCALIZATION AGENDA IN UKRAINE THROUGH THE RECENTLY LAUNCHED ALLIANCE FOR UKRAINIAN CSOS, WHO HAVE REQUESTED THAT REFUGEES INTERNATIONAL (RI) CONTINUE TO PROVIDE EXPERTISE AND INTERNATIONAL ADVOCACY SUPPORT ACROSS THE ALLIANCES MULTIPLE LINES OF EFFORT.

NAME OF ORGANIZATION OR GOVERNMENT: MENNONITE DISASTER SERVICE (H) PURPOSE OF GRANT OR ASSISTANCE: \$154,000 TO MENNONITE DISASTER SERVICES FOR USE IN RED LAKE NATION (NORTHERN MINNESOTA) TO CREATE A VOLUNTEER ACCOMMODATION CENTER AS PHASE ONE OF A HOUSING REPAIR MISSION. THE WORK IS IN RESPONSE TO 2021 SEVERE STORMS.

NAME OF ORGANIZATION OR GOVERNMENT: HELPAGE USA

(H) PURPOSE OF GRANT OR ASSISTANCE: HELPAGE WILL RECEIVE \$153,000 TO PROVIDE HIGH-LEVEL TECHNICAL ADVICE AND LEADERSHIP TO THE DISABILITY INCLUSION TASK TEAM AS WELL AS THE WIDER TRKIYE REFUGEE AND EARTHQUAKE RESPONSE, ON UPHOLDING THE RIGHTS OF OLDER PEOPLE IN ALL THEIR DIVERSITY.

NAME OF ORGANIZATION OR GOVERNMENT:

RECOVERING OKLAHOMANS AFTER DISASTERS (ROAD)

(H) PURPOSE OF GRANT OR ASSISTANCE: \$150,000 TO RECOVERING OKLAHOMANS AFTER DISASTER (ROAD) TO SUPPORT STAFFING CAPACITY FOR HOME REPAIR WORK AFTER MULTIPLE 2023 SEVERE STORMS THROUGHOUT OKLAHOMA. FUNDING COMES FROM THE MIDWEST EARLY RECOVERY FUND AND THE TORNADO RECOVERY FUND.

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY FARM ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP DISASTER RECOVERY FUND, COMMUNITY FARM ALLIANCE WILL BUILD ROBUST COALITIONS WITH BROADER REACH AND DEEPER ROOTS THAT ULTIMATELY BUILD COMMUNITIES THAT ARE MORE RESILIENT TO CLIMATE CHANGE AND BOTH NATURAL AND MAN-MADE DISASTERS AS IT RELATES TO THE REGIONAL FOOD SYSTEM.

NAME OF ORGANIZATION OR GOVERNMENT:

DISASTER SERVICES CORPORATION - SOCIETY OF ST. VINCENT DE PAUL (H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP TORNADO RECOVERY FUND, DISASTER SERVICES CORPORATION - SOCIETY OF ST. VINCENT DE PAUL CONTINUES ITS DISASTER CASE MANAGEMENT WORK IN ROLLING FORK, MS, AND SURROUNDING COMMUNITIES AFFECTED BY TORNADOES EARLIER IN 2023.

NAME OF ORGANIZATION OR GOVERNMENT: MAUI UNITED WAY

(H) PURPOSE OF GRANT OR ASSISTANCE: WITH SUPPORT FROM CDP'S HAWAII

Part IV | Supplemental Information

WILDFIRES RECOVERY FUND, AND IN ORDER TO EMPOWER FIRE-IMPACTED RESIDENTS

OF WEST MAUI TO DETERMINE AND PRIORITIZE THEIR OWN UNMET NEEDS IN THE AFTERMATH OF DEVASTATING WILDFIRES, MAUI UNITED WAY WILL PROVIDE DIRECT FINANCIAL ASSISTANCE OF \$1,000 TO ADULTS WHO LIVED WITHIN THE FIRE IMPACT ZONE USING A CULTURALLY COMPETENT OUTREACH STRATEGY AND SIMPLE APPLICATION PROCESS.

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITIES FOUNDATION OF OKLAHOMA (H) PURPOSE OF GRANT OR ASSISTANCE: \$107,415 TO COMMUNITIES FOUNDATION OF OKLAHOMA TO SUPPORT A DISASTER RECOVERY COORDINATOR FOR SEMINOLE, OKLAHOMA IN RESPONSE TO 2022 TORNADOES.

NAME OF ORGANIZATION OR GOVERNMENT:

THE OKLAHOMA CONFERENCE OF THE UNITED METHODIST CHURCH (CRISIS CARE MINISTRI (H) PURPOSE OF GRANT OR ASSISTANCE: WITH THE FISCAL SPONSORSHIP OF THE OKLAHOMA CONFERENCE OF THE UNITED METHODIST CHURCH, CRISIS CARE MINISTRIES RECEIVED A \$101,200 GRANT FROM CDP'S MIDWEST EARLY RECOVERY FUND TO SUPPORT TRAUMA-INFORMED CARE IN FAITH-BASED COMMUNITIES THROUGHOUT OKLAHOMA. THIS GRANT WAS MADE IN RESPONSE TO MULTIPLE DISASTERS IN OKLAHOMA, INCLUDING THE 2023 CENTRAL OKLAHOMA TORNADOES.

NAME OF ORGANIZATION OR GOVERNMENT: NORTHERN CALIFORNIA GRANTMAKERS (H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE DISASTER RECOVERY FUND, NORTHERN CALIFORNIA GRANTMAKERS WILL INCREASE PHILANTHROPIC INVESTMENTS IN BUILDING CLIMATE AND DISASTER RESILIENCE FOR VULNERABLE COMMUNITIES ACROSS THE STATE AND ENSURING DISASTER-AFFECTED COMMUNITIES ACHIEVE RESILIENT RECOVERIES.

NAME OF ORGANIZATION OR GOVERNMENT:

APPALACHIAN CITIZENS' LAW CENTER, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM CDP'S DISASTER RECOVERY FUND, THE APPALACHIAN CITIZENS' LAW CENTER SUPPORTS ENVIRONMENTAL SUSTAINABILITY AND HELPS PROTECT MARGINALIZED POPULATIONS AFFECTED BY THE 2022 FLOODING IN APPALACHIA.

NAME OF ORGANIZATION OR GOVERNMENT:

INFORMATION TECHNOLOGY DISASTER RESOURCE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE ATLANTIC HURRICANE SEASON RECOVERY FUND AND THE DISASTER RECOVERY FUND, ITDRC WILL PROVIDE THE COMMUNITIES IN KENTUCKY AND FLORIDA IMPACTED BY NATURAL DISASTERS WITH THE NECESSARY TECHNICAL RESOURCES TO REBUILD AND RESTORE CRITICAL INFRASTRUCTURE.

NAME OF ORGANIZATION OR GOVERNMENT: UNITED WAY OF POTTAWATOMIE COUNTY (H) PURPOSE OF GRANT OR ASSISTANCE: \$91,520 TO UNITED WAY OF POTTAWATOMIE COUNTY TO SUPPORT DISASTER RECOVERY COORDINATION IN RESPONSE TO 2023 CENTRAL OKLAHOMA TORNADOES.

NAME OF ORGANIZATION OR GOVERNMENT: ROSE ROCK HABITAT FOR HUMANITY (H) PURPOSE OF GRANT OR ASSISTANCE: \$82,500 GRANT FROM CDP'S EARLY RECOVERY FUND TO ROSE ROCK HABITAT FOR HUMANITY. THE FUNDS WILL SUPPORT A CONSTRUCTION MANAGER AND THE REBUILD/REPAIR OF 24 HOUSES FOR ECONOMICALLY DISADVANTAGED HOUSEHOLDS IN RESPONSE TO A 2023 TORNADO IN THE SHAWNEE, OKLAHOMA AREA.

NAME OF ORGANIZATION OR GOVERNMENT: CENTER FOR RURAL STRATEGIES INC

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM CDP'S DISASTER RECOVERY FUND DESIGNATED FOR APPALACHIA FLOOD RECOVERY, THE CENTER FOR RURAL STRATEGIES AND THE DAILY YONDER, HELPS SHINE THE LIGHT ON THE NEEDS OF THE MARGINALIZED COMMUNITIES AFFECTED BY THESE STORMS, ADVOCATING FOR EQUITABLE RECOVERY.

NAME OF ORGANIZATION OR GOVERNMENT: PEOPLES ADVOCACY INSTITUTE (H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM GOOGLE AND THE CDP DISASTER RECOVERY FUND, THE PEOPLES ADVOCACY INSTITUTE WILL ORGANIZE AND ADVOCATE ON BEHALF OF THE MOST MARGINALIZED POPULATIONS IN JACKSON, MS TO ENSURE ALL HAVE ACCESS TO SAFE, AFFORDABLE WATER.

NAME OF ORGANIZATION OR GOVERNMENT: THE CITIZENS FOUNDATION (H) PURPOSE OF GRANT OR ASSISTANCE: THE CITIZEN'S FOUNDATION WILL RECEIVE \$78,846.65 TO PROVIDE REMEDIAL EDUCATION INTERVENTIONS TO MITIGATE AND RECOVER LEARNING LOSSES AMONGST STUDENTS IN SCHOOLS THAT WERE CLOSED IN 2022 IN FLOOD-AFFECTED COMMUNITIES IN SINDH, PAKISTAN.

NAME OF ORGANIZATION OR GOVERNMENT: LOST AND FOUND ASSOCIATION (H) PURPOSE OF GRANT OR ASSISTANCE: \$78,210 TO LOST AND FOUND ASSOCIATION IN WESTERN SOUTH DAKOTA. FUNDING WILL PROVIDE PSYCHOSOCIAL SUPPORT TO YOUTH AND FAMILIES IN WESTERN SOUTH DAKOTA IN RESPONSE TO 2022 WESTERN SOUTH DAKOTA SEVERE STORMS (WINTER), PANDEMIC RECOVERY AND OTHER CLIMATE AND WEATHER-RELATED DISASTERS IN WESTERN SOUTH DAKOTA.

NAME OF ORGANIZATION OR GOVERNMENT: NORTH BAY ORGANIZING PROJECT (H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP DISASTER RECOVERY FUND DESIGNATED FOR RECOVERY FROM THE CALIFORNIA STORMS Schedule I (Form 990)

Part IV | Supplemental Information

AND FLOODING, UNDOCUFUND OF SONOMA COUNTY WILL EXPAND THEIR CAPACITY TO SERVE UNDOCUMENTED RESIDENTS IN THE AREA TO KNOW THEIR RIGHTS AND ACCESS RESOURCES FOR RECOVERY AND PREPARATION,

NAME OF ORGANIZATION OR GOVERNMENT: ARKANSAS COALITION OF MARSHALLESE (H) PURPOSE OF GRANT OR ASSISTANCE: \$70,400 WAS AWARDED TO THE ARKANSAS COALITION OF MARSHALLESE (ACOM) FOR THEIR RESILIENT TO DISASTERS PROGRAM IN RESPONSE TO THE 2021 SPRINGDALE, ARKANSAS TORNADO. FUNDING WILL BE UTILIZED TO HIRE STAFF AND PROVIDE OUTREACH AND EDUCATIONAL OPPORTUNITIES TO MARSHALLESE HOUSEHOLDS ACROSS NW ARKANSAS.

NAME OF ORGANIZATION OR GOVERNMENT:

FERNCLIFF CAMP AND CONFERENCE CENTER, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: \$66,000 TO FERNCLIFF CAMP AND CONFERENCE CENTER TO PROVIDE PSYCHOSOCIAL SUPPORT FOR CHILDREN AND YOUTH AND DISASTER PREPAREDNESS KITS AFTER THE 2023 CENTRAL ARKANSAS TORNADOES.

NAME OF ORGANIZATION OR GOVERNMENT:

CHEYENNE RIVER LONG-TERM RECOVERY GROUP

(H) PURPOSE OF GRANT OR ASSISTANCE: \$66,000 FROM THE MIDWEST EARLY RECOVERY FUND TO SUPPORT THE CHEYENNE RIVER LONG TERM RECOVERY GROUP. THE FUNDS WILL BE UTILIZED TO SUPPORT RECOVERY COORDINATION, DISASTER CASE MANAGEMENT, HOUSING ASSESSMENT AND PROJECT MANAGEMENT AS THE CRLTRG WORKS TO ASSIST MEMBERS OF THE CHEYENNE RIVER SIOUX TRIBE AND THE SURROUNDING COMMUNITY WITH RECOVERY FROM MULTIPLE SEVERE STORMS.

NAME OF ORGANIZATION OR GOVERNMENT: VIA LINK

(H) PURPOSE OF GRANT OR ASSISTANCE: VIA LINK RECEIVED A \$57,500 GRANT TO Schedule I (Form 990)

REPLICATE AND IMPROVE UPON THEIR HURRICANE IDA DATA TOOL DASHBOARD FOR THE FLORIDA ALLIANCE OF INFORMATION AND REFERRAL SYSTEMS, FLORIDA'S 211 NETWORK, TO SUPPORT SOCIAL SERVICES AGENCIES AND OTHER COMMUNITY RESOURCES IN EFFECTING EQUITABLE RECOVERIES FROM HURRICANES IAN AND IDALIA ACROSS FLORIDA.

NAME OF ORGANIZATION OR GOVERNMENT:

MISSISSIPPI JOURNALISM AND EDUCATION GROUP

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM CDP AND GOOGLE, THE MISSISSIPPI FREE PRESS WILL CONTINUE TO HOLD ELECTED LEADERS AND GOVERNMENT OFFICIALS ACCOUNTABLE FOR AN EQUITABLE RECOVERY IN JACKSON FROM THE WATER CRISIS AND FLOODING THAT DEVASTATED THIS MOSTLY BLACK COMMUNITY IN 2022.

NAME OF ORGANIZATION OR GOVERNMENT: UNITED WAY OF SANTA CRUZ COUNTY (H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM GOOGLE IN SUPPORT OF THE CDP DISASTER RECOVERY FUND, A RELIEF AND RESPONSE GRANT OF \$50,000 TO THE UNITED WAY OF SANTA CRUZ COUNTY WILL PROVIDE TEMPORARY LODGING FOR RESIDENTS NOT ABLE TO SAFELY REMAIN IN THEIR HOME DURING RECOVERY. THE FOCUS WILL BE ON UNINSURED RESIDENTS AS THEY WILL NOT RECEIVE REIMBURSEMENT FOR THEIR TEMPORARY HOUSING.

NAME OF ORGANIZATION OR GOVERNMENT: CALMATTERS

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM THE CDP DISASTER RECOVERY FUND FOR CALIFORNIA STORMS RECOVERY AND FROM THE CDP CALIFORNIA WILDFIRES RECOVERY FUND, CALMATTERS WILL SUSTAIN AND EXPAND ITS FACT-BASED REPORTING ON THE IMPACT OF CLIMATE CHANGE ON CALIFORNIA COMMUNITIES TO BEST INFORM THE PUBLIC AND HOLD LEADERS ACCOUNTABLE TO

THOSE THEY SERVE.

NAME OF ORGANIZATION OR GOVERNMENT:

REGARDLESS OF THEIR ABILITY TO PAY.

EPISCOPAL CHURCH IN THE DIOCESE OF NORTHERN CALIFORNIA

(H) PURPOSE OF GRANT OR ASSISTANCE: EPISCOPAL CHURCH IN THE DIOCESE OF

NORTHERN CALIFORNIA RECEIVED A \$50,000 GRANT TO PROVIDE REGULAR,

CULTURALLY COMPETENT, CONTEXTUALLY APPROPRIATE AND TRAUMA-INFORMED

POST-DISASTER MENTAL HEALTHCARE SERVICES TO SURVIVORS OF 2022'S MILL FIRE

WHO WERE RESIDENTS OF THE HISTORICALLY BLACK LINCOLN HEIGHTS SETTLEMENT

NAME OF ORGANIZATION OR GOVERNMENT: MAPACTION

(H) PURPOSE OF GRANT OR ASSISTANCE: MAPACTION WILL RECEIVE \$40,000 FROM

CDP'S TUEKY/SYRIA EARTHQUAKE FUND TO ALLOW THEM TO PROVIDE ESSENTIAL MAPS

AND DATA INSIGHTS AFTER THE EARTHQUAKES TO ASSIST PARTNERS (UNDAC & WHO)

RESPOND TO THE HUMANITARIAN EMERGENCIES IN TURKIYE AND SYRIA.

NAME OF ORGANIZATION OR GOVERNMENT:

CATHOLIC CHARITIES OF SOUTHERN MISSOURI

(H) PURPOSE OF GRANT OR ASSISTANCE: \$31,428 TO CATHOLIC CHARITIES OF

SOUTHERN MISSOURI TO SUPPORT DISASTER CASE MANAGEMENT IN RESPONSE TO THE

2023 BOLLINGER COUNTY, MISSOURI TORNADO.

NAME OF ORGANIZATION OR GOVERNMENT: SCOPA HAS A DREAM

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH FUNDING FROM GOOGLE AND THE

CDP DISASTER RECOVERY FUND, CORAZON HEALDSBURG CAN PROVIDE EMERGENCY

DIRECT ASSISTANCE TO MIGRANT FARMWORKERS IN THEIR AREA WHO ARE AFFECTED

BY WORK LOSS AND OTHER FACTORS ASSOCIATED WITH THE CALIFORNIA STORMS.

SCHEDULE J (Form 990)

Compensation Information

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

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

Attach to Form 990.

ZUZ3

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Part I Questions Regarding Compensation

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

CENTER FOR DISASTER PHILANTHROPY, INC.

Employer identification number 45-5257937

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a	Х	
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2023

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII. Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

		(B) Breakdown of W	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	3 and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) PATRICIA MCILREAVY	€	320,867.	30,000.	0	13,200.	416.	364,483.	0
PRESIDENT & CEO	≘		0.	0		0.		0
(2) REGINE WEBSTER (END 10/27/23)	Ξ	207,816.	8,000.	0	7,706.	364.	223,886.	0
VICE PRESIDENT	▣	0.	0.	0	0	0 •	0 •	0
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	I. Also complete this part for any additional information.
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	4c, 5a
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SONUSES ARE ACCRUED BASED ON THE ORGANIZATION'S NET INCOME.	

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 Form 990-EZ.

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

2023
Open to Public Inspection

Name of the organization

CENTER FOR DISASTER PHILANTHROPY, INC.

Employer identification number 45-5257937

PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: CDP PROVIDED IMMEDIATE INFORMATION ON ON-GOING DISASTERS AND LONGERTERM FOCUSED INFORMATION VIA ITS ISSUE INSIGHTS AND DISASTER PROFILES. CDP STAFF LEVERAGED ITS KNOWLEDGE THROUGH SPEAKING ADDITIONALLY, ENGAGEMENTS, MEDIA OUTREACH AND COMMENTARIES. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: ALIGNED WITH AN ORGANIZATION'S GOALS. TECHNICAL ASSISTANCE TO ASSIST ORGANIZATIONS THAT NEED ORGANIZATIONAL OR MANAGEMENT SUPPORT TO STRENGTHEN INTERNAL EXPERTISE AND SUCCESSFULLY IMPLEMENT DISASTER-GIVING INITIATIVES. TO ASSIST ORGANIZATIONS WITH ANNUAL DISASTER MANAGEMENT SUPPORT CUSTOMIZED DISASTER CONTENT AND NGO INFORMATION IMMEDIATELY FOLLOWING A DISASTER. CDP SERVED ITS CLIENTS IN 2023 WITH CUSTOM APPROACHES IN THE DISASTER PHILANTHROPY AREAS OF DEVELOPING STRATEGIC PLANS TO INCREASE DISASTER FUNDING EFFECTIVENESS, CREATING GRANT MAKING PROCESSES CONDUCTING WORKSHOPS DESIGNED TO EDUCATE AND INNOVATE DISASTER RESPONSE AND FACILITATING GRANT MAKING BY IDENTIFYING GRANTEES. FORM 990, PART VI, SECTION B, LINE THE FORM 990 IS PROVIDED TO THE BOARD OF DIRECTORS IN ORDER TO ALLOW THEIR COMMENT AND APPROVAL BEFORE IT IS FILED. REVIEW,

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

Schedule O (Form 990) 2023 Page 2

Name of the organization

CENTER FOR DISASTER PHILANTHROPY, INC.

Employer identification number 45-5257937

FORM 990, PART VI, SECTION B, LINE 12C:

ALL BOARD MEMBERS AND KEY EMPLOYEES ARE REQUIRED TO ANNUALLY SIGN A

CONFLICT OF INTEREST POLICY STATEMENT. IF ANY POTENTIAL AREAS OF CONFLICT

ARISE, ACTIONS WILL BE TAKEN TO ENSURE THAT ALL CONFLICTS ARE HANDLED

APPROPRIATELY.

FORM 990, PART VI, SECTION B, LINE 15A:

THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS THE COMPENSATION

OF THE PRESIDENT & CEO ANNUALLY IN ORDER TO DETERMINE COMPARABLE

COMPENSATION FOR ORGANIZATIONS OF SIMILAR SIZE AND SCALE TO CDP. THE

EXECUTIVE COMMITTEE MAY ALSO REVIEW COMPENSATION REPORTS. THE EXECUTIVE

COMMITTEE PROVIDES A RECOMMENDATION TO THE BOARD OF DIRECTORS FOR FINAL

APPROVAL. COMPENSATION OF ALL OTHER EMPLOYEES IS DETERMINED BY THE

PRESIDENT & CEO. THE PRESIDENT & CEO REVIEWS COMPENSATION STUDIES FOR

ORGANIZATIONS OF SIMILAR SIZE AND SCALE AND SEEKS GENERAL GUIDANCE FROM THE

BOARD OF DIRECTORS AND SENIOR MANAGEMENT.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

CA,CO,CT,FL,GA,HI,IL,KS,KY,LA,ME,MD,MA,MI,MN,MS,NH,NJ,NM,NY,NC,ND,OH,OK,OR

PA,RI,SC,TN,UT,VA,WA,WV,WI,NV,AL,AK,AR

FORM 990, PART VI, SECTION C, LINE 18:

CDP'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

CDP'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL

STATEMENTS ARE AVAILABLE UPON REQUEST.

Schedule O (Form 990) 2023	Page 2
Name of the organization CENTER FOR DISASTER PHILANTHROPY, INC.	Employer identification number 45-5257937
FORM 990, PART XII, LINE 2C:	
THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.	