Form **990**

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning 10-01-2024 , and ending 09-30-2025

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
WOUNDED WARRIOR PROJECT INC

Doing business as
WOUNDED WARRIOR PROJECT

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
4899 BELFORT ROAD 300

City or town, state or province, country, and ZIP or foreign postal code
JACKSONVILLE, FL 32256

D Employer identification number
20-2370934

E Telephone number
(904) 296-7350

G Gross receipts $ 575,907,644

F Name and address of principal officer:
WALTER E PIATT
4899 BELFORT ROAD 300
JACKSONVILLE,FL 32256

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.

H(c) Group exemption number

I Tax-exempt status: ☑ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.WOUNDEDWARRIORPROJECT.ORG

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 2005

M State of legal domicile: VA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
TO SUPPORT POST-9/11 VETERANS WITH LIFE CHANGING PROGRAMS AND SERVICES AT NO COST.

2 Check this box ☐ 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)	**3**	13
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	13
5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	**5**	1,036
6	Total number of volunteers (estimate if necessary)	**6**	2,491
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	47,355
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	**7b**	25,706

			Prior Year	Current Year
Revenue	**8**	Contributions and grants (Part VIII, line 1h)	363,105,962	395,003,250
	9	Program service revenue (Part VIII, line 2g)	0	0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	18,813,626	32,481,519
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,250,501	4,194,601
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	385,170,089	431,679,370
Expenses	**13**	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	51,274,656	51,899,701
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	112,787,541	118,289,352
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	8,520,371	11,635,912
	b	Total fundraising expenses (Part IX, column (D), line 25) 91,425,687		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	203,235,938	208,510,593
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	375,818,506	390,335,558
	19	Revenue less expenses. Subtract line 18 from line 12	9,351,583	41,343,812

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	**20**	Total assets (Part X, line 16)	526,843,451	590,833,074
	21	Total liabilities (Part X, line 26)	73,707,541	80,208,936
	22	Net assets or fund balances. Subtract line 21 from line 20	453,135,910	510,624,138

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.

Sign Here

Signature of officer — Date 2026-08-11
CRAIG CARROLL CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN P00741490
Firm's name GRANT THORNTON ADVISORS LLC			Firm's EIN 99-1856619	
Firm's address 445 BROADHOLLOW ROAD MELVILLE, NY 11747			Phone no. (631) 577-1867	

May the IRS discuss this return with the preparer shown above? See Instructions. ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

WOUNDED WARRIOR PROJECT (WWP) IS THE NATION'S LEADING VETERANS SERVICE ORGANIZATION, FOCUSED ON THE TOTAL WELL-BEING OF POST - 9/11 VETERANS, ACTIVE-DUTY SERVICE MEMBERS, AND THEIR FAMILIES. OUR PROGRAMS, ADVOCACY, AND AWARENESS EFFORTS HELP WARRIORS (SEE SCHEDULE O)THRIVE, PROVIDE ESSENTIAL LIFELINES TO FAMILIES AND CAREGIVERS, AND PREVENT VETERAN SUICIDES.

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

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

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

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

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

4a (Code:) (Expenses $ 98,748,548 including grants of $ 35,419,052) (Revenue $ 0)

MENTAL HEALTH AND WELLNESS PROGRAMS - WOUNDED WARRIOR PROJECT KNOWS THAT MANY WOUNDS ARE UNSEEN AND CAN ARISE YEARS AFTER SERVICE. WWP HELPS WARRIORS, THEIR FAMILIES, AND CAREGIVERS IMPROVE MENTAL AND EMOTIONAL WELLNESS, WHICH ENHANCES THEIR QUALITY OF LIFE, INCREASES RESILIENCE, AND ENABLES THEM TO THRIVE IN THEIR COMMUNITIES. THROUGH WWP'S MENTAL HEALTH AND WELLNESS PROGRAMS, WWP HONORS ITS COMMITMENT TO THIS GENERATION OF WOUNDED, ILL, OR INJURED SERVICE MEMBERS NO MATTER HOW LONG OR DIFFICULT A WARRIOR'S ROAD TO RECOVERY. INTERACTIVE PROGRAMS, REHABILITATIVE RETREATS, AND PROFESSIONAL HEALTHCARE SERVICES DELIVERED BY FULL-TIME WWP STAFF AND THIRD-PARTY HEALTHCARE PROVIDERS AFFORD WARRIORS WITH THE TOOLS TO DEVELOP AND MAINTAIN HEALTHY, MEANINGFUL RELATIONSHIPS, SET GOALS FOR THE FUTURE, (SEE SCHEDULE O)AND BUILD RESILIENCE WITHOUT THE BARRIERS OR STIGMAS ASSOCIATED WITH MENTAL HEALTH ISSUES. TOTAL BRAIN HEALTH AND MENTAL HEALTH WELLNESS PROGRAMS EXPENSES WERE $98,748,548, INCLUDING GRANTS OF $35,419,052, FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2025. WWP PROVIDES THE FOLLOWING MENTAL HEALTH AND WELLNESS PROGRAMS:TRIAGE: A DEDICATED TEAM OF MENTAL HEALTH TRIAGE SPECIALISTS HELPS IDENTIFY MENTAL HEALTH AND WELLNESS OPTIONS THAT FIT INDIVIDUAL WARRIOR AND FAMILY MEMBER NEEDS. WWP CAN MAKE REFERRALS TO SPECIALIZED TREATMENT PROGRAMS, COMMUNITY PARTNERS, AND OTHER RESOURCES. 4,204 TOTAL WARRIOR AND FAMILY SUPPORT MEMBERS WERE SERVED THROUGH MENTAL HEALTH OUTREACH AND REFERRALS, AND 22,149 COUNSELING SESSIONS DELIVERED TO WARRIORS AND THEIR FAMILIES. PROJECT ODYSSEY: WWP'S PROJECT ODYSSEY IS A 12-WEEK MENTAL HEALTH PROGRAM THAT USES ADVENTURE-BASED LEARNING TO HELP WARRIORS MANAGE AND OVERCOME THEIR INVISIBLE WOUNDS, ENHANCE THEIR RESILIENCY SKILLS, AND EMPOWER THEM TO LIVE PRODUCTIVE AND FULFILLING LIVES. THE PROGRAM STARTS WITH A FIVE-DAY MENTAL HEALTH WORKSHOP, WHERE WARRIORS ARE CHALLENGED TO STEP OUTSIDE THE COMFORT OF THEIR EVERYDAY ROUTINES. THIS OPENS THEM UP TO NEW EXPERIENCES THAT HELP THEM DEVELOP THEIR COPING AND COMMUNICATION SKILLS. AFTER THE WORKSHOP, PARTICIPANTS WORK TOGETHER WITH WWP TO STAY ENGAGED, ACHIEVE THEIR PERSONAL GOALS, AND MAKE LIFELONG POSITIVE CHANGES. DURING FISCAL YEAR 2025,1,993 PARTICIPANTS ATTENDED A PROJECT ODYSSEY RETREAT.WWP TALK: WWP TALK IS A PROGRAM THAT CONNECTS VETERANS, THEIR SPOUSES, AND OTHER FAMILY MEMBERS WEEKLY WITH A DEDICATED AND EMPATHETIC LISTENER. THE WWP TALK COACH HELPS THEM SET PERSONAL GOALS AND PROVIDES EMOTIONAL SUPPORT. THOUGH THE PROGRAM IS NOT A CRISIS HELPLINE, IT OFFERS A SAFE AND NON-JUDGMENTAL SPACE WHERE PARTICIPANTS CAN DISCUSS PERSONAL ISSUES OR CONCERNS. IN THE INSTANCE OF A CRISIS, THE TALK PROGRAM TEAM WILL CREATE A WARM HAND OFF TO THE VETERANS CRISIS HOTLINE AS NEEDED. WWP SERVED 2,254 AND DELIVERED 11,466 EMOTIONAL SUPPORT CALLS,IN THE WWP TALK PROGRAM IN FISCAL YEAR 2025. 98% OF WWP TALK PARTICIPANTS WERE SATISFIED WITH THE PROGRAM.WARRIOR CARE NETWORK: WWP AND WARRIOR CARE NETWORK OFFER HIGHLY EFFECTIVE ACCELERATED BRAIN HEALTH PROGRAMS TO VETERANS AND SERVICE MEMBERS WHO SEEK HEALING FROM THE DISRUPTIVE SYMPTOMS OF POST-TRAUMATIC STRESS DISORDER (PTSD) AND OTHER MENTAL HEALTH CONCERNS. PROGRAMS ARE LED BY EXPERTS IN VETERAN BRAIN HEALTH AT ACADEMIC MEDICAL CENTERS ("AMCS") INCLUDING EMORY HEALTHCARE VETERANS PROGRAM, HOME BASE (MASSACHUSETTS GENERAL HOSPITAL), OPERATION MEND (UCLA HEALTH), AND THE ROAD HOME PROGRAM (RUSH). SINCE 2015, THOUSANDS OF PARTICIPANTS HAVE ENGAGED IN ONE-TO-THREE-WEEK PROGRAMS THAT INCLUDE INNOVATIVE CLINICAL TREATMENT, COLLABORATIVE WELLNESS WORKSHOPS AND PEER-TO-PEER SUPPORT TO REALIZE LASTING HEALING SIGNIFICANTLY FASTER THAN CONVENTIONAL APPROACHES. PROGRAMS ARE OF NO-COST TO PARTICIPANTS BECAUSE OF THE INVESTMENT BY WWP AND GENEROUS DONORS WHO SUPPORT INNOVATIVE CARE FOR MENTAL AND BRAIN HEALTH. DURING THE YEAR,WARRIOR CARE NETWORK SERVED 1,286 VETERANS THROUGH INTENSIVE OUTPATIENT PROGRAMS AND 2,623 VETERANS IN TRADITIONAL OUTPATIENT THERAPY. IN ADDITION, THE NETWORK PROVIDED TREATMENT AND PSYCHOEDUCATION TO 565 VETERAN FAMILY MEMBERS/CAREGIVERS. TREATMENT OUTCOMES SHOW SIGNIFICANT REDUCTIONS IN PTSD SYMPTOMS FOR BOTH VETERANS AND FAMILY MEMBERS. IN RESPONSE TO PATIENT DEMAND, THE NETWORK ALSO PROVIDED GRANTS TO TREAT VETERANS WITH PTSD AND CO-OCCURRING TRAUMATIC BRAIN INJURY (TBI) AND/OR SUBSTANCE USE DISORDER (SUD). IN THE INTENSIVE OUTPATIENT PROGRAM, WARRIOR CARE NETWORK HELPED VETERANS EXPERIENCING PTSD SIGNIFICANTLY REDUCE THEIR SYMPTOMS IN JUST 2-3 WEEKS. THE MAJORITY OF WARRIORS REPORTING SEVERE PTSD SYMPTOMS AT THE BEGINNING OF THE PROGRAM ARE PROVIDED EVIDENCE-BASED TREATMENT THAT REDUCES THEIR SYMPTOMS TO A MILD OR MODERATE LEVEL AT THE END OF THE PROGRAM. WARRIOR CARE NETWORK USES CLINICALLY VALIDATED ASSESSMENTS TO TRACK THIS REDUCTION IN SYMPTOMS. ADDITIONALLY, IN SATISFACTION SURVEYS, 96% OF PARTICIPANTS INDICATED THAT THEY WERE SATISFIED WITH THE CARE THEY RECEIVED AND 95% INDICATED THAT THEY WOULD TELL A FELLOW WARRIOR ABOUT THE PROGRAM. WWP ISSUES MONETARY GRANTS TO THE AMCS IN THE WARRIOR CARE NETWORK TOTALING $35,419,052, FOR THE YEAR ENDED SEPTEMBER 30, 2025. WWP'S WARRIOR CARE NETWORK GRANT AGREEMENTS HAVE SIGNIFICANT FUTURE CONDITIONS, AND ACCORDINGLY, A PORTION OF THE EXPENSE FOR THOSE GRANTS WILL NOT BE RECOGNIZED UNTIL SPECIFIC CONDITIONS ARE SATISFIED. AS OF SEPTEMBER 30, 2025, FUTURE CONDITIONAL PAYMENTS ON THESE GRANT AGREEMENTS ARE ESTIMATED TO BE PAID AS FOLLOWS:2026 $35,486,9612027 $388,769THEREAFTER $250,452TOTAL $ 38,377,182 COMPLEX CASE COORDINATION: WWP'S COMPLEX CASE COORDINATION TEAM SERVES POST 9/11 VETERANS UNDER DIFFICULT AND UNIQUE CIRCUMSTANCES WHICH ARE MULTI-FACETED AND REQUIRE URGENT ACTION. THESE CASES CANNOT BE ADDRESSED BY JUST ONE WWP PROGRAM, AS THEY SPAN ACROSS FOCUS AREAS, INVOLVING MULTIPLE PROGRAMS AND EXTERNAL RESOURCES. THIS TEAM IS COMPRISED OF SUBJECT MATTER EXPERTS FROM MULTIPLE FOCUS AREAS, ALLOWING THEM TO ADDRESS ALL COMPONENTS OF THE CASE CONCURRENTLY AND WITH AN INTEGRATED APPROACH. THIS PROGRAM CONNECTS WARRIORS TO INPATIENT AND OUTPATIENT PROGRAMS WITHIN THE VA AND ITS COMMUNITY CARE NETWORK IN A COORDINATED AND COLLABORATIVE EFFORT. WWP SERVED 428 PARTICIPANTS THROUGH THE COMPLEX CASE COORDINATION PROGRAM.

4b (Code:) (Expenses $ 47,390,694 including grants of $ 0) (Revenue $ 0)

INDEPENDENCE PROGRAM - WWP'S INDEPENDENCE PROGRAM PROVIDES LONG-TERM SUPPORT TO CATASTROPHICALLY WOUNDED WARRIORS LIVING WITH INJURIES SUCH AS A MODERATE TO SEVERE TRAUMATIC BRAIN INJURY, SPINAL CORD INJURY, OR NEUROLOGICAL CONDITIONS THAT NEGATIVELY IMPACT THEIR INDEPENDENCE. THE PROGRAM IS DESIGNED TO SUPPORT WARRIORS WHO, WITHOUT HIGH- TOUCH SERVICES, WOULD STRUGGLE TO LIVE DAY-TO-DAY DUE TO THE SEVERITY OF THEIR INJURIES. WWP PROVIDES SPECIALIZED CASE MANAGEMENT TO INCREASE ACCESS TO COMMUNITY SERVICES, OFFER REHABILITATION THROUGH THERAPY, AND EMPOWER WARRIORS TO LIVE A MORE INDEPENDENT LIFE. SUPPLEMENTING VA CARE, SERVICES ARE HIGHLY INDIVIDUALIZED AND INCLUDE IN-HOME CARE, LIFE SKILLS COACHING, TRADITIONAL THERAPIES (PHYSICAL, OCCUPATIONAL, SPEECH, ETC.), AND ALTERNATIVE (SEE SCHEDULE O)THERAPIES (ART, MUSIC, EQUINE, ETC.). BECAUSE EVERY JOURNEY IS DIFFERENT, WWP WORKS AS A TEAM WITH WARRIORS, THEIR FAMILY MEMBERS, AND THEIR CAREGIVERS TO SET INDIVIDUALIZED GOALS TO LIVE A FULFILLING LIFE, AT HOME, WITH THEIR LOVED ONES. AS OF SEPTEMBER 30, 2025, THERE WERE 971 WARRIORS RECEIVING SERVICES THROUGH THE INDEPENDENCE PROGRAM AT AN AVERAGE ANNUAL COST PER WARRIOR FOR CONTRACTED OUTSIDE SERVICES OF $29,210. TOTAL INDEPENDENCE PROGRAM EXPENSES WERE $47,390,694. WWP'S INDEPENDENCE PROGRAM ALSO PROVIDES CONTINUOUS CARE SERVICES. THE GOAL OF CONTINUOUS CARE SERVICES IS TO EMPOWER SEVERELY INJURED WARRIORS AND FAMILY MEMBERS ENROLLED IN THE INDEPENDENCE PROGRAM TO PREPARE FOR THEIR FUTURE BY DEVELOPING LIFE CARE, ESTATE, AND FINANCIAL PLANS. WWP PROVIDES AT NO COST TO WARRIORS AND THEIR FAMILY MEMBERS, THIRD-PARTY PROFESSIONAL SERVICES TO SUPPORT THIS CRITICAL LONG-TERM PLANNING. IN ADDITION, IN THE EVENT OF THE LOSS OR INABILITY OF THEIR CAREGIVER TO PROVIDE THE REQUIRED LEVEL OF IN-HOME SUPPORT, THE WARRIOR IS AFFORDED A CAPPED AMOUNT OF FINANCIAL SUPPORT TO HELP PAY FOR HOUSING, HOME CARE AID OR LONG-TERM FACILITY SUPPORT. THESE CONTINUOUS CARE SERVICES ARE FUNDED BY THE TRUST.THE PURPOSE OF THE TRUST IS TO PROVIDE THE ECONOMIC MEANS TO MAINTAIN SEVERELY WOUNDED, ILL OR INJURED WARRIORS IN SETTINGS THAT ARE AS INDEPENDENT AS POSSIBLE, AND TO ASSIST WITH LONG TERM CARE NEEDS IN THE EVENT THAT THE WARRIOR'S CAREGIVER IS NO LONGER ABLE TO PROVIDE THE REQUIRED LEVEL OF SUPPORT. SPECIFICALLY, THE TRUST PROVIDES FUNDS TO ENSURE HOME CARE, RESIDENTIAL OPTIONS AND OTHER NECESSARY SERVICES REMAIN AVAILABLE TO THESE WARRIORS, WHO UPON THE LOSS OF THEIR CAREGIVER, ARE AT RISK FOR INSTITUTIONALIZATION. WWP IS RESPONSIBLE FOR IDENTIFYING THE WARRIORS WHO ARE MEMBERS OF THE CHARITABLE CLASS OF PERSONS SERVED BY THE TRUST. THE TRUST WILL GENERALLY MAKE APPROVED DISTRIBUTIONS DIRECTLY TO SERVICE PROVIDERS TO PROVIDE FOR THE NEEDS OF WARRIORS. DISTRIBUTIONS FOR THE BENEFIT OF A SPECIFIC WARRIOR CONSIDER HIS OR HER HEALTH, FINANCIAL NEEDS, CARE REQUIREMENTS, ABILITY TO LIVE INDEPENDENTLY, COMMUNITY-BASED RESOURCES AVAILABLE, AND IN GENERAL, SERVICES REQUIRED TO PROVIDE FOR A BETTER QUALITY OF LIFE. FURTHER, WWP TAKES INTO CONSIDERATION THE AVAILABILITY OF GOVERNMENT BENEFITS AND OTHER FORMS OF PUBLIC FUNDING AND RESOURCES THAT MAY PROVIDE FOR SOME OR ALL THE NEEDS OF THE WARRIOR.THE TRUST IS A TYPE I SUPPORTING ORGANIZATION, OPERATED, SUPERVISED AND CONTROLLED BY WWP, ITS SUPPORTED ORGANIZATION. ALL FUNDS HELD BY THE TRUST MUST BE USED FOR PURPOSES DEFINED BY THE TRUST AND WILL NOT BE RETURNED TO WWP UNLESS THE TRUST IS TERMINATED. WWP DOES NOT HAVE ANY PLANS TO TERMINATE THE TRUST. A SEPARATE IRS FORM 990 IS FILED FOR THE WOUNDED WARRIOR PROJECT LONG TERM SUPPORT TRUST. ACCORDINGLY, ALL DISTRIBUTIONS OUT OF THE TRUST ARE RECORDED IN THE TRUST'S FORM 990. DISTRIBUTIONS FROM THE TRUST FOR THE FISCAL YEAR ENDING SEPTEMBER 30,

2025, TOTALED $557,970. TRUST ASSETS TOTALED $191,165,117 AS OF SEPTEMBER 30, 2025.

4c (Code:) (Expenses $ 42,763,171 including grants of $ 1,500,000) (Revenue $ 0)

ALUMNI CONNECTION PROGRAMS - WARRIORS FORM STRONG BONDS IN THE MILITARY. AFTER SERVICE, WOUNDED WARRIORS FREQUENTLY EXPERIENCE ISOLATION AND MENTAL HEALTH CHALLENGES, OFTEN LACKING THE SUPPORT NETWORKS NEEDED TO HELP THEM THRIVE. WWP OFFERS A WIDE VARIETY OF OPPORTUNITIES FOR WOUNDED WARRIORS, THEIR FAMILIES, AND CAREGIVERS TO SOCIALLY CONNECT, BUILD CAMARADERIE, AND HEAL. THROUGH EDUCATIONAL, RECREATIONAL, AND FAMILY-ORIENTED ACTIVITIES, WARRIORS GAIN A RENEWED SENSE OF CONNECTION WITH THEIR PEERS, COHESION, AND PURPOSE. THESE OPPORTUNITIES INTRODUCE VETERANS TO NEW EXPERIENCES, AND TO THE CARE AND SUPPORT THEY NEED THROUGHOUT THEIR JOURNEYS OF RECOVERY AND REHABILITATION. WWP HAD 242,500 WARRIORS AND 58,848 FAMILY MEMBERS REGISTERED AS OF SEPTEMBER 30, 2025. (SEE SCHEDULE O)TOTAL CONNECTION PROGRAMS EXPENSES WERE $42,763,171, INCLUDING GRANTS OF $1,500,000, FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2025. WWP PROVIDES THE FOLLOWING CONNECTION PROGRAMS:REGISTRATION: THE REGISTRATION TEAM IS WHERE WARRIORS AND FAMILY MEMBERS BEGIN THEIR JOURNEY WITH WWP. THIS TEAM CONFIRMS THE ELIGIBILITY OF WARRIORS AND FAMILY MEMBERS. REGISTRATION IS AVAILABLE VIA PHONE, ONLINE, OR IN PERSON. AN AUTOMATED VERIFICATION PROCESS TO CONFIRM MILITARY SERVICE HISTORY AND VA RATING AVAILABLE TO SOME VETERANS. RESOURCE CENTER: THE RESOURCE CENTER WELCOMES WARRIORS, FAMILIES AND CAREGIVERS INTO WWP AND HELPS THEM CONNECT TO SUPPORT THEY CAN RELY ON THROUGHOUT THEIR LIVES. TEAMMATES LISTEN COMPASSIONATELY TO UNDERSTAND NEEDS AND CONNECT WARRIORS AND THEIR LOVED ONES TO SUPPORT RESOURCES. THE RESOURCE CENTER SERVICED 64,188 INCOMING CONTACTS INCLUDING CALLS, IN-PERSON, EMAIL AND LIVE CHATS IN FISCAL YEAR 2025.ALUMNI CONNECTION: VETERANS WHO REGISTER WITH AND JOIN WWP ARE CALLED ALUMNI. WWP ALUMNI CONNECTION PROGRAM HELPS WOUNDED WARRIORS, THEIR FAMILIES, AND CAREGIVERS BUILD STRONGER SUPPORT NETWORKS AND ENHANCES THEIR MENTAL WELLNESS BY ENGAGING THEM IN SOCIAL EVENTS, SUPPORT GROUPS, AND OTHER OPPORTUNITIES TO CONNECT WITH EACH OTHER IN THEIR COMMUNITIES.WWP OFFERS A WIDE RANGE OF ACTIVITIES INCLUDING SKILL-BUILDING EDUCATIONAL SESSIONS, SPORTING EVENTS, PERSONAL AND PROFESSIONAL DEVELOPMENT SUMMITS, RECREATIONAL EVENTS, AND ONLINE VIDEO GAME COMPETITIONS TO PROVIDE WOUNDED WARRIORS AN OPPORTUNITY TO ENGAGE WITH OTHER WOUNDED WARRIORS AND FAMILY MEMBERS. 72,935 WARRIORS AND 18,279 FAMILY SUPPORT MEMBERS WERE SERVED THROUGH THE ALUMNI PROGRAM. 99% OF THOSE WHO PARTICIPATED IN ALUMNI PROGRAM ACTIVITIES WERE SATISFIED WITH THE PROGRAM.THE ALUMNI CONNECTION PROGRAM ALSO PROVIDES BEDSIDE CARE, COMFORT, AND BACKPACKS TO WOUNDED SERVICE MEMBERS ARRIVING AT U.S. MILITARY TREATMENT FACILITIES AND U.S. DEPARTMENT OF VETERANS AFFAIRS ("VA") POLYTRAUMA REHABILITATION CENTERS. WWP BACKPACKS CONTAIN CLOTHING AND PERSONAL ITEMS TO MAKE A WARRIOR'S HOSPITAL STAY MORE COMFORTABLE, ALSO SERVING AS AN ENTRY POINT INTO WWP'S PROGRAMS AS THEY TRANSITION THROUGH CARE. WARRIORS WHO ARE INJURED OVERSEAS AND EVACUATED FROM FIELD HOSPITALS TO LARGER MILITARY TREATMENT FACILITIES ABROAD RECEIVE A TRANSITIONAL CARE PACK ("TCP"), WHICH INCLUDES CLOTHING AND TOILETRIES FOR THEIR IMMEDIATE COMFORT, AND FOR THE COMFORT OF THEIR ACCOMPANYING FAMILY MEMBERS. WWP DELIVERED 100 BACKPACKS TO WOUNDED WARRIORS IN FISCAL YEAR 2025. SINCE WWP'S INCEPTION, 6,320 BACKPACKS AND 47,858 TCPS HAVE BEEN DELIVERED TO WOUNDED WARRIORS.PEER SUPPORT: DURING MILITARY SERVICE, WARRIORS FORM BONDS WITH ONE ANOTHER THAT ARE AS STRONG AS FAMILY TIES; WWP RECOGNIZES THAT NO ONE UNDERSTANDS WHAT A WARRIOR IS GOING THROUGH BETTER THAN SOMEONE WHO HAS WALKED IN THEIR SHOES. WWP'S PEER SUPPORT PROGRAM IS COMPOSED OF SMALL, WOUNDED-WARRIOR-ONLY GROUPS LED BY PEERS WHO HAVE OVERCOME CHALLENGES AND EXPERIENCED SUCCESS TRANSITIONING TO CIVILIAN LIFE. ALUMNI WHO VOLUNTEER AS PEER SUPPORT GROUP LEADERS ARE LIVING THE WWP LOGO; CARRYING OTHER WARRIORS WHEN THEY NEED IT THE MOST. THESE WARRIORS GIVE BACK TO THEIR FELLOW VETERANS BY PROVIDING THEM WITH A SAFE, JUDGMENT-FREE ENVIRONMENT TO CONNECT WITH THEIR PEERS AND STRENGTHEN THE BONDS OF SHARED SERVICE. THE PEER SUPPORT PROGRAM SERVED 12,705 WARRIORS AT PEER FACILITATED SUPPORT GROUPS IN FISCAL YEAR 2025.INTERNATIONAL SUPPORT: LANDSTUHL REGIONAL MEDICAL CENTER ("LRMC"), LOCATED IN LANDSTUHL, GERMANY, OFFERS SUPPORT ABROAD FOR WOUNDED, ILL, AND INJURED SERVICE MEMBERS WHO ARE MEDICALLY EVACUATED FROM DEPLOYED LOCATIONS. TYPICALLY, THEIR BELONGINGS ARE NOT TRANSPORTED WITH THEM. WWP ENDEAVORS TO MAKE THEIR HOSPITAL STAY AND TRAVEL BACK TO THE UNITED STATES AS COMFORTABLE AS POSSIBLE. WWP HAS DEDICATED PERSONNEL AND RESOURCES AT LRMC THAT DISTRIBUTE TCPS, PROVIDE SUPPORT FOR EVENTS AND VISITATION, AND EDUCATE WARRIORS AND FAMILIES ON WWP'S PROGRAMS AND SERVICES.

(Code:) (Expenses $ 85,746,562 including grants of $ 14,980,650) (Revenue $ 0)

FINANCIAL WELLNESS PROGRAMS - AN IMPORTANT COMPONENT OF SUCCESSFUL TRANSITION TO CIVILIAN LIFE FOR WOUNDED SERVICE MEMBERS IS THE OPPORTUNITY TO PURSUE A MEANINGFUL CAREER, ACHIEVE FINANCIAL STABILITY, AND PROVIDE FOR THEIR FAMILY. TOTAL FINANCIAL WELLNESS PROGRAMS EXPENSES WERE $38,821,354, INCLUDING GRANTS OF $3,689,987, FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2025. WWP PROVIDES THE FOLLOWING FINANCIAL WELLNESS PROGRAMS:BENEFITS SERVICES: WWP'S BENEFITS SERVICES TEAM ADVOCATES FOR INJURED VETERANS AND THEIR FAMILY MEMBERS TO OBTAIN THEIR WELL- EARNED VA GOVERNMENT BENEFITS. WWP'S VA-CERTIFIED TEAM OF REPRESENTATIVES PROVIDES WARRIORS AND FAMILY MEMBERS WITH THE SUPPORT AND QUALIFIED HELP NEEDED TO NAVIGATE THE VA BENEFITS CLAIMS PROCESS. THE BENEFITS TEAM HELPS WARRIORS AND THEIR FAMILIES TO UNDERSTAND THEIR OPTIONS, RECEIVE THEIR BENEFITS, AND REMAIN FOCUSED ON THEIR RECOVERIES. IN FISCAL YEAR 2025, ISSUES AWARDED ON BEHALF OF WARRIORS THROUGH BENEFITS SERVICE RESULTED IN AN ECONOMIC IMPACT OF $263.7 MILLION.WARRIORS TO WORK: WWP'S WARRIORS TO WORK PROGRAM PROVIDES WARRIORS AND THEIR FAMILY MEMBERS WITH THE RESOURCES AND ASSISTANCE THEY REQUIRE TO BE SUCCESSFUL IN THE CIVILIAN WORKFORCE. WARRIORS TO WORK PROVIDES TRAINING, COACHING, INTERVIEW PREPARATION, AND OTHER CAREER SERVICES, AS WELL AS ENCOURAGES AND EDUCATES EMPLOYERS ON THE BENEFITS OF HIRING WOUNDED WARRIORS. PROGRAM PARTICIPANTS LEARN THE SKILLS NECESSARY TO FIND MEANINGFUL EMPLOYMENT, LIVE FINANCIALLY RESILIENT LIVES, AND ARE EMPOWERED TO REACH THEIR HIGHEST CAREER AMBITIONS. IN FISCAL YEAR 2025, 1,279 WARRIORS AND FAMILY MEMBERS THAT PARTICIPATED IN THE WARRIORS TO WORK PROGRAM WERE PLACED IN POSITIONS, WITH AN AVERAGE FULL-TIME SALARY OF $71,619 AND AN AVERAGE PART-TIME SALARY OF $26,647, WHICH HAD AN ECONOMIC IMPACT OF $75 MILLION FROM ANNUALIZED EMPLOYMENT COMPENSATION.FINANCIAL READINESS: WWP'S FINANCIAL READINESS PROGRAM HELPS WARRIORS BUILD A SOLID FINANCIAL FOUNDATION FOR THEMSELVES AND THEIR FAMILIES. WWP OFFERS EDUCATIONAL SEMINARS, ONE-ON-ONE COUNSELING, AND ONLINE RESOURCES COVERING TOPICS LIKE PERSONAL FINANCE, BUDGETING, SAVING, DEBT MANAGEMENT, AND LONG-TERM PLANNING. THESE SERVICES EQUIP WARRIORS WITH THE TOOLS, RESOURCES, AND SUPPORT THEY NEED TO ACHIEVE FINANCIAL WELLNESS TODAY, FOR A BETTER TOMORROW. ALONG THAT JOURNEY, UNEXPECTED CHALLENGES AND EMERGENCIES CAN OCCUR THAT CAN PUT A WARRIOR'S RECOVERY PROGRESS IN JEOPARDY. IN FISCAL YEAR 2025, 4,653 WARRIORS AND FAMILY MEMBERS PARTICIPATED IN THE FINANCIAL READINESS PROGRAM. THE WWP EMERGENCY FINANCIAL ASSISTANCE SERVICE PROVIDES GRANTS TO WARRIORS FACING URGENT FINANCIAL CHALLENGES AFFECTING THEIR LIVES, SAFETY, AND SHELTER. WWP ISSUED GRANTS TO 4,859 WARRIORS TOTALING $3,689,987. SEE SCHEDULE I, PART II.PHYSICAL HEALTH AND WELLNESS - WWP'S PHYSICAL HEALTH AND WELLNESS PROGRAM EMPOWERS WARRIORS TO ADOPT HEALTHIER LIFESTYLES THROUGH MOVEMENT, NUTRITION AND SLEEP EDUCATION, COACHING, GOAL SETTING, AND SKILL- BUILDING. THE CORNERSTONE OF THE PROGRAM IS A 90-DAY COACHING PROGRAM DELIVERED IN PERSON AND VIRTUALLY BY FULL-TIME STAFF, WHICH HELPS WARRIORS ADOPT AN ACTIVE LIFESTYLE AND BETTER NUTRITIONAL HABITS. WARRIORS REACH THEIR GOALS THROUGH VARIOUS ACTIVITIES AND CHALLENGES THAT HELP THEM IMPROVE THEIR PHYSICAL HEALTH, MENTAL HEALTH, AND OVERALL WELL-BEING. IN FISCAL YEAR 2025, THERE WERE 11,593 PARTICIPANTS IN WWP PH&W PROGRAMS. OF THOSE PARTICIPANTS, 1,606 PARTICIPATED IN THE COACHING PROGRAM AND 74% SHOWED IMPROVED MOBILITY AFTER PARTICIPATION IN THE PROGRAM. THOSE WARRIORS WHO PARTICIPATED IN THE COACHING PROGRAM LOST A COMBINED 5,453 POUNDS. TOTAL PHYSICAL HEALTH & WELLNESS PROGRAM EXPENSES WERE $21,175,587, INCLUDING GRANTS OF $125,000 FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2025. WWP PROVIDES THE FOLLOWING PHYSICAL HEALTH AND WELLNESS PROGRAMS:ADAPTIVE SPORTS: THE WWP ADAPTIVE SPORTS PROGRAM EMPOWERS WARRIORS TO UNLEASH THEIR HIGHEST POTENTIAL BY PARTICIPATING IN MODIFIED ATHLETIC OPPORTUNITIES DESIGNED FOR THEIR INDIVIDUAL ABILITIES. THROUGH SINGLE AND MULTI-DAY CLINICS, WARRIORS LEARN TO USE ADAPTIVE SPORTS EQUIPMENT AND DEVELOP ATHLETIC SKILLS. ADDITIONALLY, WARRIORS ARE INTRODUCED TO SEASONED ADAPTIVE SPORTS ATHLETES AND CONNECTED WITH LOCAL RESOURCES. THIS LAYS THE GROUNDWORK FOR THEM TO CONTINUE IMPROVING THEIR PHYSICAL FITNESS WHILE CONNECTING WITH OTHER VETERANS AND THEIR COMMUNITY THROUGH SPORT. IN FISCAL YEAR 2025, 649 TOTAL WARRIORS AND FAMILY SUPPORT MEMBERS PARTICIPATED IN AN ADAPTIVE SPORTS EVENT.SOLDIER RIDE: WWP'S SOLDIER RIDE ORIGINATED AS A UNIQUE, MULTI-DAY CYCLING EVENT THAT HELPS WARRIORS BUILD THEIR CONFIDENCE AND STRENGTH THROUGH SHARED PHYSICAL ACTIVITIES AND BONDS OF SERVICE IN A SUPPORTIVE ENVIRONMENT. THE PROGRAM INCORPORATES SKILL-BUILDING PRACTICES THAT ACCOMMODATE ALL ABILITY LEVELS. WARRIORS NEVER RIDE ALONE; THEY MOVE FORWARD TOGETHER, AS A UNIT, JUST AS THEY DID DURING THEIR MILITARY SERVICE. OVER THE YEARS, SOLDIER RIDE HAS EXPANDED TO INCORPORATE A VARIETY OF OPTIONS TO SERVE WARRIORS. THESE INCLUDE TRADITIONAL AND ADAPTIVE ROAD BIKING, MOUNTAIN BIKING, SKIING, SNOWBOARDING, VIRTUAL EVENTS, TRAINING CHALLENGES, AS WELL AS SKILLS DEVELOPMENT CAMPS. SOLDIER RIDE SERVED 1,832 PARTICIPANTS IN FISCAL YEAR 2025. 100% FELT TEMPORARILY RELIEVED FROM DAILY STRESS.GOVERNMENT AND COMMUNITY RELATIONS - AS A TRUSTED ADVOCATE FOR OUR NATION'S WOUNDED VETERANS, WWP'S WASHINGTON, DC - BASED GOVERNMENT AND COMMUNITY RELATIONS TEAM STRIVES TO ADDRESS THE ISSUES THAT MATTER MOST TO VETERANS. USING FEEDBACK AND INSIGHTS FROM WARRIORS, THE GOVERNMENT RELATIONS TEAM ADVOCATES FOR POLICIES AND INITIATIVES THAT MAKE A DIFFERENCE - IMPROVING THE LIVES OF MILLIONS OF VETERANS, THEIR FAMILY MEMBERS, AND CAREGIVERS. ON THE FRONT LINES OF MILITARY AND VETERAN ISSUES, WWP ADVOCATES FOR SOLUTIONS IN AREAS SUCH AS MENTAL HEALTH, ACCESS TO COMMUNITY CARE, WOMEN VETERAN'S CARE, RESEARCH FOR BRAIN INJURIES, TOXIC EXPOSURES, TRANSITION ASSISTANCE BENEFITS AND MORE. TOTAL GOVERNMENT RELATIONS EXPENSES WERE $6,133,702, INCLUDING GRANTS OF $100,000, FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2025.COMMUNITY PARTNERSHIPS - WWP BELIEVES THAT NO SINGLE ORGANIZATION CAN MEET ALL THE NEEDS OF WOUNDED, INJURED, OR ILL VETERANS ALONE. THROUGH ITS COMMUNITY PARTNERSHIPS PROGRAM, WWP COLLABORATES WITH AND INVESTS IN OTHER MILITARY AND VETERAN SUPPORT ORGANIZATIONS TO AMPLIFY THE IMPACT OF WWP'S MISSION AND EXPAND OUR REACH, CREATING SYSTEMS OF SUPPORT TO FULFILL THE WIDE RANGE OF CHALLENGES OUR NATION'S INJURED VETERANS FACE. TOTAL COMMUNITY PARTNERSHIP EXPENSES WERE $19,615,919, INCLUDING MONETARY GRANTS OF $11,065,662, FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2025. SEE SCHEDULE I.

4d Other program services (Describe in Schedule O.)

(Expenses $ 85,746,562 including grants of $ 14,980,650) (Revenue $ 0)

4e **Total program service expenses** 274,648,975

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	236		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	

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

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	**2a** 1,036			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		**3a**	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*		**3b**	Yes	
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**	Yes	
b	If "Yes," enter the name of the foreign country: GM See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		**5b**		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		**6a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		**7a**	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		**7b**	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		**7c**		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		**7f**		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		**7h**	Yes	
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		**8**		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?		**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		**9b**		
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	**10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	**11a**			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	**11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	**12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O.		**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	**13b**			
c	Enter the amount of reserves on hand	**13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in 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**		No
16	Is the organization an educational institution subject to the section 4968 excess tax on net investment income? If "Yes," complete Form 4720, Schedule O.		**16**		No
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? If "Yes," complete Form 6069.		**17**		

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

Check if Schedule O contains a response or note to any line in this Part VI . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a	13		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	13		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3			No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			No
6	Did the organization have members or stockholders?	6			No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			No

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed

AL,AR,CA,CT,DC,FL,GA,HI,IL,KS,KY,LA,ME,MD,MA,MI,MN,MS,NV,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI,CO

18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
CRAIG CARROLL 4899 BELFORT ROAD SUITE 300 JACKSONVILLE,FL 32256 (904) 296-7350

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

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) KEN HUNZEKER CHAIR	5.00 0.00	X		X				0	0	0
(2) BILL SELMAN VICE CHAIR	5.00 0.00	X		X				0	0	0
(3) JOHN CAMPBELL DIRECTOR	5.00 0.00	X						0	0	0
(4) JOSEPH CARAVALHO DIRECTOR	5.00 0.00	X						0	0	0
(5) TIFFANY DAUGHERTY DIRECTOR	5.00 0.00	X						0	0	0
(6) LISA DISBROW DIRECTOR (THRU 09/25)	5.00 0.00	X						0	0	0
(7) JEFF DOLVEN DIRECTOR	5.00 0.00	X						0	0	0
(8) DR KEITA FRANKLIN DIRECTOR	5.00 0.00	X						0	0	0
(9) FLORENT GROBERG DIRECTOR	5.00 0.00	X						0	0	0
(10) KATHY HILDRETH DIRECTOR	5.00 0.00	X						0	0	0
(11) SCOTT HOWELL DIRECTOR	5.00 0.00	X						0	0	0
(12) KRISTEN ROBINSON DIRECTOR	5.00 0.00	X						0	0	0
(13) SCOTT STALKER DIRECTOR	5.00 0.00	X						0	0	0
(14) LINDSEY STREETER DIRECTOR	5.00 0.00	X						0	0	0
(15) WALTER E PIATT CHIEF EXECUTIVE OFFICER(AS OF 03/24)	50.00 0.00			X				374,953	0	29,429
(16) JENNIFER M SILVA CHIEF PROGRAM OFFICER	50.00 0.00			X				342,523	0	40,168
(17) CHRISTOPHER TONER CHIEF OF STAFF (THRU 01/25)	50.00 0.00			X				336,395	0	38,480

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) CHRISTOPHER NEEDLES CHIEF DEVELOPMENT OFFICER	50.00 0.00			X				331,605	0	37,716
(19) VILMA CONSUEGRA CHIEF MKTG & COMMS OFFICER	50.00 0.00			X				328,947	0	37,458
(20) CRAIG CARROLL CHIEF FINANCIAL OFFICER(AS OF 09/24)	50.00 0.00			X				281,487	0	38,518
(21) CHRIS STUART CHIEF INFORMATION OFF (AS OF 11/24)	50.00 0.00			X				173,946	0	23,883
(22) JOHN T HAMRE III VP RESOURCE DEVEL. (THRU 02/25)	50.00 0.00					X		313,457	0	37,017
(23) JOSE RAMOS VP GOVT & CMTY RELATIONS	50.00 0.00					X		298,336	0	36,282
(24) BREA KRATZERT VP RESOURCE DEVEL.: BUSINESS DEVEL.	50.00 0.00					X		279,582	0	35,876
(25) MELANIE MOUSSEAU VP STRATEGY, INNOVATION & PMO	50.00 0.00					X		273,583	0	38,117
(26) ANGELA STROHL VP HUMAN RESOURCES	50.00 0.00					X		273,754	0	37,766
(27) ERIC S MILLER - FORMER CHIEF FINANCIAL OFFICER (THRU 06/24)	0.00 0.00						X	308,729	0	20,695
(28) SCOTT COSTER - FORMER CHIEF INFORMATION OFFICER (THRU 08/24)	0.00 0.00						X	181,132	0	25,009
(29) ADAM VANEK - FORMER VP GEN. COUNSEL/CORP SEC.(THRU 05/24)	0.00 0.00						X	143,888	0	16,620
(30) MICHAEL LINNINGTON CHIEF EXCEUTIVE OFFICER(THRU 03/24)	0.00 0.00						X	358,645	0	16,748
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								4,600,962	0	509,782

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 257

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NEURO COMMUNITY CARE 12520 CAPITAL BLVD STE 401-139 WAKE FOREST, NC 27587	INDEPENDENCE PROGRAM	16,762,863
NEURO-REHAB MANAGEMENT INC 800 WEST CUMMINGS PARK STE 4950 WOBURN, MA 01801	INDEPENDENCE PROGRAM	6,024,412
CX MARKETING LLC DBA MOORE A SERICES LLC 4200 PARLAIMENT PLACE 3RD FLOOR LANHAM, MD 20706	FUNDRAISING MANAGEMENT SERVICES	6,003,208
CENTERSTONE MILITARY SERVICES 44 VANTAGE WAY STE 400 NASHVILLE, TN 37228	MENTAL & BRAIN HEALTH SERVICES	2,241,478
CGI TECHNOLOGIES AND SOLUTIONS INC 11325 RANDOM HILLS ROAD FAIRFAX, VA 22030	IT CONSULTATION AND STAFFING	2,088,359

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization 55

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and OtherAmt Similar Amounts	1a Federated campaigns . . 1a 435,862				
	b Membership dues . . 1b				
	c Fundraising events . . 1c 2,041,322				
	d Related organizations 1d				
	e Government grants (contributions) 1e				
	f All other contributions, gifts, grants, and similar amounts not included above 1f 392,526,066				
	g Noncash contributions included in lines 1a - 1f:$ 1g 7,684,751				
	h **Total.** Add lines 1a-1f				395,003,250
Program Service Revenue		Business Code			
2a					
b					
c					
d					
e					
f All other program service revenue.					
g **Total.** Add lines 2a–2f.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	14,062,403			14,062,403
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties	1,558,514		47,355	1,511,159
	6a Gross rents 6a (i) Real (ii) Personal				
	b Less: rental expenses 6b				
	c Rental income or (loss) 6c				
	d Net rental income or (loss)				
	7a Gross amount from sales of assets other than inventory 7a (i) Securities 162,006,162 (ii) Other				
	b Less: cost or other basis and sales expenses 7b 143,587,046				
	c Gain or (loss) 7c 18,419,116				
	d Net gain or (loss)	18,419,116			18,419,116
	8a Gross income from fundraising events (not including $ 2,041,322 of contributions reported on line 1c). See Part IV, line 18 . . . . 8a 591,946				
	b Less: direct expenses 8b 641,228				
	c Net income or (loss) from fundraising events . .	-49,282			-49,282
	9a Gross income from gaming activities. See Part IV, line 19 . . . 9a				
	b Less: direct expenses 9b				
	c Net income or (loss) from gaming activities . .				
	10a Gross sales of inventory, less returns and allowances . . 10a				
	b Less: cost of goods sold 10b				
	c Net income or (loss) from sales of inventory . .				
OtherRevenueMiscAmt		Business Code			
	11a REFUNDS/REBATES	900099	935,829		935,829
	b MAILING RENTAL INCOME	900099	921,893		921,893
	c PURCHASING CARD REBATE	900099	476,739		476,739
	d All other revenue		350,908		350,908
	e **Total.** Add lines 11a–11d		2,685,369		
	12 **Total revenue.** See instructions		431,679,370	0	47,355	36,628,765

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	48,209,714	48,209,714		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	3,689,987	3,689,987		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,250,973	875,015	2,058,933	317,025
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	70,110		70,110	
7 Other salaries and wages	87,715,379	71,853,310	3,744,036	12,118,033
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,713,719	2,201,053	131,645	381,021
9 Other employee benefits	18,486,386	15,275,386	927,482	2,283,518
10 Payroll taxes	6,052,785	4,884,148	361,782	806,855
11 Fees for services (non-employees):				
a Management				
b Legal	1,107,583		1,107,583	
c Accounting	313,796		313,796	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	11,635,912			11,635,912
f Investment management fees	908,892		908,892	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	138,671		138,671	
12 Advertising and promotion	10,673,202	9,828,058		845,144
13 Office expenses	1,473,237	809,525	233,834	429,878
14 Information technology	12,001,751	7,970,321	2,024,242	2,007,188
15 Royalties				
16 Occupancy	8,041,979	5,111,900	1,779,158	1,150,921
17 Travel	5,639,692	4,966,315	89,846	583,531
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,121,267	920,227	82,112	118,928
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,517,100	975,080	329,117	212,903
23 Insurance	793,748	515,344	169,048	109,356
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PROGRAM/OTHER PROVIDER	48,922,526	39,311,361	1,454,262	8,156,903
b DIRECT RESP TV & ONLINE	38,856,281	19,383,050		19,473,231
c DIRECT RESPONSE MAIL	24,637,427	9,601,001		15,036,426
d WARRIOR EVENTS	20,185,826	20,185,826		
e All other expenses	32,177,615	8,082,354	8,336,347	15,758,914
25 **Total functional expenses.** Add lines 1 through 24e	390,335,558	274,648,975	24,260,896	91,425,687
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).	52,591,482	33,168,598	0	19,422,884

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		265,090	1	508,840
	2	Savings and temporary cash investments		41,856,129	2	42,854,569
	3	Pledges and grants receivable, net		18,449,651	3	16,890,124
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		5,295,129	9	6,534,003
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 28,310,474			
	b	Less: accumulated depreciation	10b 24,090,235	4,439,162	10c	4,220,239
	11	Investments—publicly traded securities		396,347,286	11	456,745,145
	12	Investments—other securities. See Part IV, line 11		31,219,631	12	34,017,908
	13	Investments—program-related. See Part IV, line 11		0	13	0
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		28,971,373	15	29,062,246
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		526,843,451	16	590,833,074
Liabilities	17	Accounts payable and accrued expenses		45,427,902	17	52,904,536
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		28,279,639	25	27,304,400
	26	**Total liabilities.** Add lines 17 through 25		73,707,541	26	80,208,936
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ☑ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		446,436,968	27	504,836,930
	28	Net assets with donor restrictions		6,698,942	28	5,787,208
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		453,135,910	32	510,624,138
	33	Total liabilities and net assets/fund balances		526,843,451	33	590,833,074

Part XI Reconcilliation 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	431,679,370
2	Total expenses (must equal Part IX, column (A), line 25)	2	390,335,558
3	Revenue less expenses. Subtract line 2 from line 1	3	41,343,812
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	453,135,910
5	Net unrealized gains (losses) on investments	5	14,692,065
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,452,351
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column	10	510,624,138

Part XII Financial Statements and Reporting

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

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

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization
WOUNDED WARRIOR PROJECT INC

Employer identification number
20-2370934

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

f Enter the number of supported organizations . . . . . .

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . .	316,069,220	388,364,321	332,632,463	363,105,962	396,003,250	1,796,175,216
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. .						
4 **Total.** Add lines 1 through 3	316,069,220	388,364,321	332,632,463	363,105,962	396,003,250	1,796,175,216
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) . .						
6 **Public support.** Subtract line 5 from line 4.						1,796,175,216

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4. .	316,069,220	388,364,321	332,632,463	363,105,962	396,003,250	1,796,175,216
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .	11,355,972	12,114,895	12,226,388	14,447,951	14,573,562	64,718,768
9 Net income from unrelated business activities, whether or not the business is regularly carried on. .	77,296	79,787	72,420	67,625	47,355	344,483
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). .	1,781,584	2,200,198	2,103,245	2,072,089	3,277,315	11,434,431
11 **Total support.** Add lines 7 through 10						1,872,672,898

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

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

Section C. Computation of Public Support Percentage

14	Public support percentage for 2024 (line 6, column (f) divided by line 11, column (f))	**14**	95.920 %
15	Public support percentage for 2023 Schedule A, Part II, line 14	**15**	95.800 %

16a **33 1/3% support test—2024.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶☑

b **33 1/3% support test—2023.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶☐

17a **10%-facts-and-circumstances test—2024.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶☐

b **10%-facts-and-circumstances test—2023.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b. .						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .						
13 **Total support.** (Add lines 9, 10c, 11, and 12.). .						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2024 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2023 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2024** (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from **2023** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests-2024.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶☐

b **33 1/3% support tests—2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . ▶☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	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.*	3a		
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.*	3b		
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.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
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.*	4b		
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.*	4c		
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).*	5a		
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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
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.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990) .*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
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.***	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in **Part VI.***	9b		
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.***	9c		
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.*	10a		
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).*	10b		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**:

a ☐ The organization satisfied the Activities Test. Complete **line 2** below.

b ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.

c ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

2 Activities Test. **Answer lines 2a and 2b below.**

			Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	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.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations?*If "Yes" or "No", provide details in* ***Part VI.***	3a		
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.*	3b		

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

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

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

Section B - Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**Discount** claimed for blockage or other factors (*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		

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

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

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

Section D - Distributions		**Current Year**
1 Amounts paid to supported organizations to accomplish exempt purposes	**1**	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	**2**	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	**3**	
4 Amounts paid to acquire exempt-use assets	**4**	
5 Qualified set-aside amounts (*prior IRS approval required - provide details in* ***Part VI***)	**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 organization is responsive (*provide details in* ***Part VI***). See instructions	**8**	
9 Distributable amount for 2024 from Section C, line 6	**9**	
10 Line 8 amount divided by Line 9 amount	**10**	

Section E - Distribution Allocations (see instructions)	**(i) Excess Distributions**	**(ii) Underdistributions Pre-2024**	**(iii) Distributable Amount for 2024**
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required-- *explain in* ***Part VI***). See instructions.			
3 Excess distributions carryover, if any, to 2024:			
a From 2019.			
b From 2020.			
c From 2021.			
d From 2022.			
e From 2023.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, *explain in* ***Part VI***. See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, *explain in* ***Part VI***. See instructions.			
7 **Excess distributions carryover to 2025.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020.			
b Excess from 2021.			
c Excess from 2022.			
d Excess from 2023.			
e Excess from 2024.			

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

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME:	MAILING RENTAL INCOME - 2020 AMOUNT: $ 1,280,691. 2021 AMOUNT: $ 1,238,401. 2022 AMOUNT: $ 969,439. 2023 AMOUNT: $ 893,256. 2024 AMOUNT: $ 921,893. PURCHASE CARD REBATES - 2020 AMOUNT: $ 194,721. 2021 AMOUNT: $ 528,354. 2022 AMOUNT: $ 526,266. 2023 AMOUNT: $ 535,727. 2024 AMOUNT: $ 476,739. SPECIAL EVENTS REVENUE - 2020 AMOUNT: $ 156,228. 2021 AMOUNT: $ 174,559. 2022 AMOUNT: $ 318,021. 2023 AMOUNT: $ 436,988. 2024 AMOUNT: $ 591,946. MISCELLANEOUS - 2020 AMOUNT: $ 149,944. 2021 AMOUNT: $ 258,884. 2022 AMOUNT: $ 289,519. 2023 AMOUNT: $ 206,118. 2024 AMOUNT: $ 1,286,737.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶**Complete if the organization is described below.** ▶**Attach to Form 990 or Form 990-EZ.**
▶**Go to** ***www.irs.gov/Form990*** **for instructions and the latest information.**

OMB No. 1545-0047

2024

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization	**Employer identification number**
WOUNDED WARRIOR PROJECT INC	20-2370934

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."

2 Political campaign activity expenditures. See instructions ▶ $

3 Volunteer hours for political campaign activities. See instructions

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ **Yes** ☐ **No**

4a Was a correction made? ☐ **Yes** ☐ **No**

b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ **Yes** ☐ **No**

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-.		
i Subtract line 1f from line 1c. If zero or less, enter -0-.		

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2021	**(b)** 2022	**(c)** 2023	**(d)** 2024	**(e)** Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

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

		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?	Yes		65,159
e	Publications, or published or broadcast statements?	Yes		
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		664,250
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?		No	
j	Total. Add lines 1c through 1i			729,409
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV **Supplemental Information**

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

Return Reference	Explanation
PART II-B, LINE 1:	SCHEDULE C, PART II-B, LINE 1A WWP HAS USED VOLUNTEERS TO SUPPORT LOBBYING ACTIVITIES BEFORE THE U.S. CONGRESS. WWP HAS DIRECTLY FACILITATED MEETINGS BETWEEN VETERANS AND THEIR ELECTED REPRESENTATIVES, TO INCLUDE PHYSICAL VISITS TO WASHINGTON, D.C. TO INTERACT WITH COVERED OFFICIALS. WWP ALSO PROVIDES TRAINING AND LEGISLATIVE UPDATES TO INFORM DIRECT VOLUNTEER ENGAGEMENT WITH FEDERAL LEGISLATIVE OFFICES IN REGIONAL AND FIELD OFFICES AROUND THE UNITED STATES. SCHEDULE C, PART II-B, LINE 1B WWP EMPLOYS PUBLIC POLICY PROFESSIONALS TO HELP EDUCATE COMMUNITY LEADERS AND COVERED OFFICIALS ABOUT THE ISSUES AFFECTING VETERANS AND CAREGIVERS. OVER THE COURSE OF THESE INTERACTIONS, WWP POLICY PROFESSIONALS MAY DISCUSS ORGANIZATIONAL POSITIONS ON SPECIFIC LEGISLATION OR FEDERAL AGENCY OPERATIONS AND POLICIES THAT AFFECT VETERANS AND CAREGIVERS. SCHEDULE C, PART II-B, LINE 1D WWP HAS PAID FOR SOFTWARE SERVICES TO DELIVER LOBBYING MESSAGES FROM SUPPORTERS TO MEMBERS OF CONGRESS. SOFTWARE CAPABILITIES INCLUDE HOSTING PRE-WRITTEN MESSAGES ON THE WWP WEBSITE IN SUPPORT OF SPECIFIC LEGISLATION THAT INTERESTED USERS CAN POPULATE WITH ADDRESS INFORMATION TO DETERMINE HIS/HER MEMBERS OF CONGRESS AND SUBSEQUENTLY DELIVER ELECTRONIC MAIL ON HIS/HER BEHALF. SOFTWARE CAPABILITIES ALSO INCLUDE MASS E-MAILING FUNCTIONS TO DISTRIBUTE A QUARTERLY NEWSLETTER WITH INFORMATION ABOUT BILLS THAT WWP SUPPORTS TO CONGRESSIONAL STAFF AND VETERANS.
SCHEDULE C, PART II-B, LINE 1E	WWP WRITES AND DISTRIBUTES A QUARTERLY NEWSLETTER DISTRIBUTED TO VETERANS AND THEIR ELECTED REPRESENTATIVES THAT OCCASIONALLY INCLUDES CALLS TO ACTION AND SUPPORT FOR SPECIFIC LEGISLATION. THE NEWSLETTER IS IN DIGITAL FORM, DELIVERED OVER E-MAIL, AND IS AVAILABLE FOR VIEWING ON THE WWP WEBSITE.
SCHEDULE C, PART II-B, LINE 1G	THIS INCLUDES COMPENSATION AND TRAVEL RELATED EXPENSES FOR WWP EMPLOYEES AND VOLUNTEERS RELATED TO DIRECT CONTACT WITH LEGISLATORS, THEIR STAFF, GOVERNMENT OFFICIALS, OR A LEGISLATIVE BODY. EXAMPLES INCLUDE RESEARCH AND OFFICE VISITS TO DISCUSS AND SUPPORT FEDERAL LEGISLATION TO IMPROVE VETERAN HEALTH CARE AND BENEFITS. ADDITIONALLY VETERAN VOLUNTEERS FROM ACROSS THE COUNTRY TRAVELED TO WASHINGTON D.C. TO PARTICIPATE IN AN ADVOCACY FLY-IN AND WOMEN WARRIOR SUMMIT, PROVIDING A FIRSTHAND PERSPECTIVE TO CONGRESSIONAL LEADERS ON ISSUES IMPACTING VETERANS AND THEIR FAMILIES.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE D
(Form 990)

(Rev. January 2025)
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.**

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
WOUNDED WARRIOR PROJECT INC

Employer identification number
20-2370934

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (e.g., recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

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

- **a** ☐ Public exhibition
- **b** ☐ Scholarly research
- **c** ☐ Preservation for future generations
- **d** ☐ Loan or exchange programs
- **e** ☐ Other

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

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?. . . ☐ **Yes** ☐ **No**

Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . ☐ **Yes** ☐ **No**

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

		Amount
c Beginning balance	**1c**	
d Additions during the year	**1d**	
e Distributions during the year	**1e**	
f Ending balance	**1f**	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . ☐ **Yes** ☐ **No**

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

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,732,109	1,249,241	1,178,186	1,507,893	1,353,536
b Contributions		260,000	25,000		
c Net investment earnings, gains, and losses	174,931	292,414	117,781	-255,614	222,193
d Grants or scholarships					
e Other expenditures for facilities and programs	66,457	69,546	71,726	74,093	67,836
f Administrative expenses					
g End of year balance	1,840,583	1,732,109	1,249,241	1,178,186	1,507,893

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

- **a** Board designated or quasi-endowment ▶ 0 %
- **b** Permanent endowment ▶ 69.810 %
- **c** Term endowment ▶ 30.190 %

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations		No
(ii) Related organizations		No
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?		

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		8,393,337	7,316,405	1,076,932
d Equipment		4,996,603	3,984,451	1,012,152
e Other		14,920,534	12,789,379	2,131,155
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				4,220,239

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) STRUCTURED NOTES	14,372,012	F
(B) PRIVATE EQUITY	14,277,974	F
(C) INVESTMENT - OTHER	5,367,922	F
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶	34,017,908	

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

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

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

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

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
RIGHT OF USE LEASE LIABILITY	27,304,400
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	27,304,400

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

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	531,984,319
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	14,692,065		
b	Donated services and use of facilities	2b	65,088,195		
c	Recoveries of prior year grants	2c	58,062		
d	Other (Describe in Part XIII.)	2d	21,375,519		
e	Add lines **2a** through **2d**			2e	101,213,841
3	Subtract line **2e** from line **1**			3	430,770,478
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	908,892		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	908,892
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	431,679,370

Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	455,072,830
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	65,088,195		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	557,969		
e	Add lines **2a** through **2d**			2e	65,646,164
3	Subtract line **2e** from line **1**			3	389,426,666
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	908,892		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	908,892
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	390,335,558

Part XIII

Supplemental Information

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

Return Reference	Explanation
PART V, LINE 4:	INTENDED USES OF ENDOWMENT FUNDS WWP HAS TWO DONOR-RESTRICTED ENDOWMENTS, THE EARNINGS FROM WHICH ARE TO BE USED IN SUPPORT OF THE INDEPENDENCE PROGRAM AND MENTAL HEALTH & WELLNESS PROGRAMS (SEE SCHEDULE O). PERMANENT ENDOWMENT $1,285,000 TEMPORARILY RESTRICTED ENDOWMENT $555,583
PART X, LINE 2:	THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXATION UNDER 501(C)(3) OF THE INTERNAL REVENUE CODE ("CODE"), BUT IS SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS EXCLUDED BY THE CODE. THE ORGANIZATION HAS PROCESSES IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS, TO IDENTIFY AND REPORT UNRELATED INCOME, TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS WHERE IT HAS NEXUS, AND TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. THE ORGANIZATION FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN ONLY BE RECOGNIZED IF THE POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED. THE ORGANIZATION HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE. IN ADDITION, THE ORGANIZATION HAS DETERMINED THAT IT HAS NOT GENERATED MATERIAL UNRELATED BUSINESS INCOME AND, THEREFORE, NO INCOME TAX PROVISION IS REQUIRED.
SCHEDULE D, PART IX & PART X	WWP AS LESSEE, ACCOUNTS FOR LEASE AGREEMENTS BY RECORDING ON ITS CONSOLIDATED STATEMENT OF FINANCIAL POSITION A RIGHT-OF-USE ("ROU") LEASE ASSET AND LIABILITY TO REFLECT THE RIGHTS AND OBLIGATIONS OF THE LEASE AGREEMENTS, RESPECTIVELY. THE VALUE OF THE RIGHT OF USE LEASE LIABILITY BASED ON THE PRESENT VALUE OF THE FUTURE LEASE PAYMENT IS $27,304,400. THE VALUE OF THE RIGHT OF USE LEASE ASSET IS $25,012,128.
SCHEDULE D, PART XI, LINE 2B AND PART XII, LINE 2A	DONATED SERVICES AND USE OF FACILITIES, REVENUE AND EXPENSE: WWP'S CONSOLIDATED FINANCIAL STATEMENTS INCLUDE THE FOLLOWING IN-KIND CONTRIBUTION REVENUE AND ASSOCIATED EXPENSE FOOTNOTE: PUBLIC SERVICE ANNOUNCEMENTS: PUBLIC SERVICE ANNOUNCEMENTS ("PSAS") HELP IMPROVE THE AMERICAN PUBLIC'S AWARENESS AND UNDERSTANDING OF THE NEEDS OF WOUNDED WARRIORS AND THEIR FAMILY MEMBERS, WHILE ALSO MAKING WARRIORS AND THEIR FAMILIES AWARE OF THE NO-COST PROGRAMS AND SERVICES AVAILABLE TO THEM THROUGH THE ORGANIZATION. THE ORGANIZATION PRODUCES AND DISTRIBUTES PUBLIC SERVICE TELEVISION, RADIO, INTERNET, AND NEWSPAPER ANNOUNCEMENTS THAT FOCUS ATTENTION ON THE CHALLENGES OF WOUNDED WARRIORS AND FAMILY MEMBERS, AND THE PROGRAMS AND SERVICES THE ORGANIZATION PROVIDES. THESE PSAS ARE BROADCASTED OR DELIVERED

Return Reference	Explanation
	NATIONWIDE, AT NO CHARGE TO THE ORGANIZATION, TO ASSIST IN THE ACHIEVEMENT OF ITS MISSION. THESE PSAS ARE RECOGNIZED AS IN-KIND CONTRIBUTIONS AT FAIR VALUE, WITH A CORRESPONDING PSA EXPENSE ALLOCATED TO THE PROGRAMS BENEFITTED, AS THEY ARE DELIVERED TO THE PUBLIC. THE ORGANIZATION CONTRACTS WITH INDEPENDENT OUTSIDE AGENCIES TO TRACK AND ESTIMATE THE FAIR VALUE OF EACH PSA BASED ON THE DATE, TIME, AND MARKET IN WHICH IT IS DISPLAYED. PUBLIC AWARENESS: THE ORGANIZATION RECEIVES FREE ADVERTISING THROUGH BILLBOARD, MAGAZINE, AND RENTAL TRUCK ADVERTISEMENTS THAT SERVE AS PLATFORMS TO MARKET AND BRAND ITS MISSION. THESE DONATED ADVERTISEMENTS ARE RECOGNIZED AS IN-KIND CONTRIBUTIONS AT FAIR VALUE, WITH A CORRESPONDING EXPENSE ALLOCATED TO THE PROGRAMS BENEFITTED, AS THEY ARE DELIVERED TO THE PUBLIC. THE VALUATION OF THESE ADVERTISEMENTS IS PROVIDED BY THE SERVICE PROVIDER, WHO ESTIMATES THE FAIR VALUE BASED ON THE DATE, TIME, AND MARKET IN WHICH EACH IS DISPLAYED. PROFESSIONAL PROVIDERS AND CONTRACT SERVICES: THE ORGANIZATION RECEIVES DONATED PROFESSIONAL SERVICES THAT WOULD TYPICALLY BE PURCHASED IF NOT PROVIDED AS AN IN-KIND CONTRIBUTION. THESE SERVICES, WHICH REQUIRE SPECIALIZED SKILLS, ARE RECOGNIZED AS IN-KIND CONTRIBUTIONS AT FAIR VALUE WHEN THE PLEDGE IS MADE AND ARE EXPENSED WHEN THE SERVICES ARE RENDERED. THE ESTIMATED FAIR VALUE OF THESE PROFESSIONAL SERVICES IS PROVIDED BY THE SERVICE PROVIDER, WHO ESTIMATES THE FAIR VALUE BASED ON THE DATE, TIME, AND MARKET IN WHICH EACH SERVICE IS RENDERED.
SCHEDULE D, PART XI, LINE 2D	OTHER RECONCILING ITEMS $19,994,700 - INVESTMENT INCOME EARNED BY THE WWP LONG TERM SUPPORT TRUST AS SHOWN ON A CONSOLIDATED BASIS FOR FINANCIAL STATEMENT PURPOSES $510,012 - REVERSAL OF PRIOR YEAR ACCRUALS $870,807 - PRIOR YEAR EXPENSE REIMBURSEMENT SCHEDULE D, PART XII, LINE 2D OTHER RECONCILING ITEMS $557,969 - EXPENSES INCURRED BY THE WWP LONG TERM SUPPORT TRUST SHOWN ON A CONSOLIDATED BASIS FOR FINANCIAL STATEMENT PURPOSES

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE F (Form 990)
(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.**
▶ **Attach to Form 990.**
▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
WOUNDED WARRIOR PROJECT INC

Employer identification number
20-2370934

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

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☐ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

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

	(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in the region	**(d)** Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in the region	**(f)** Total expenditures for and investments in the region
(1)	EUROPE (INCLUDING ICELAND & GREENLAND)	1	4	PROGRAM SERVICES	SEE PART V	609,522
(2)	EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	INVESTMENTS		10,655,386
(3)	CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		3,802,693
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Sub-total	1	4			15,067,601
b	Total from continuation sheets to Part I . . .	0	0			0
c	**Totals** (add lines 3a and 3b)	1	4			15,067,601

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

1	**(a)** Name of organization	**(b)** IRS code section and EIN (if applicable)	**(c)** Region	**(d)** Purpose of grant	**(e)** Amount of cash grant	**(f)** Manner of cash disbursement	**(g)** Amount of noncash assistance	**(h)** Description of noncash assistance	**(i)** Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

3 Enter total number of other organizations or entities . . . . . ▶

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

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

Part IV Foreign Forms

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

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.

ReturnReference	Explanation
PART I, LINE 2:	PROCEDURE FOR MONITORING PROGRAM SERVICES OUTSIDE THE U.S. WWP DELIVERED PROGRAM SERVICES OUTSIDE OF THE UNITED STATES AS PART OF ITS INTERNATIONAL SUPPORT CONNECTION PROGRAM, WHICH ARE MONITORED BY PROGRAM DIRECTORS IN A CONSISTENT MANNER AS THOSE PROGRAM SERVICES DELIVERED INSIDE THE UNITED STATES. SEE BELOW FOR A DESCRIPTION OF THE INTERNATIONAL SUPPORT CONNECTION PROGRAM. WWP DID NOT MAKE ANY GRANTS OUTSIDE OF THE UNITED STATES IN FISCAL YEAR 2025.
SCHEDULE F, PART I, LINE 3, COLUMN E	DESCRIPTION OF ACTIVITY IN EUROPE INTERNATIONAL SUPPORT - LANDSTUHL REGIONAL MEDICAL CENTER ("LRMC"), LOCATED IN LANDSTUHL, GERMANY, OFFERS SUPPORT ABROAD FOR WOUNDED, ILL, AND INJURED SERVICE MEMBERS WHO ARE MEDICALLY EVACUATED FROM DEPLOYED LOCATIONS. TYPICALLY, THEIR BELONGINGS ARE NOT TRANSPORTED WITH THEM. WWP ENDEAVORS TO MAKE THEIR HOSPITAL STAY AND TRAVEL BACK TO THE UNITED STATES AS COMFORTABLE AS POSSIBLE. WWP HAS DEDICATED PERSONNEL AND RESOURCES AT LRMC THAT DISTRIBUTE TCPS, PROVIDE SUPPORT FOR EVENTS AND VISITATION, AND EDUCATE WARRIORS AND FAMILIES ON WWP'S FREE PROGRAMS AND SERVICES.
SCHEDULE F, PART IV, LINES 1 & 3	WWP INVESTS A PORTION OF ITS PORTFOLIO IN OFFSHORE PASSIVE FOREIGN CORPORATIONS; NEVERTHELESS ITS OWNERSHIP ACTIVITIES MAY NOT REACH THE THRESHOLDS REQUIRED FOR FILING THE FORMS 926 AND/OR 5471. TO THE EXTENT SUCH A FORM WAS REQUIRED, IT HAS BEEN FILED WITH THE ORGANIZATION'S FORM 990-T.

Additional Data

Software ID:

Software Version:

SCHEDULE G (Form 990) (Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

▶ **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

Name of the organization
WOUNDED WARRIOR PROJECT INC

Employer identification number
20-2370934

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- **a** ☑ Mail solicitations
- **b** ☑ Internet and email solicitations
- **c** ☑ Phone solicitations
- **d** ☑ In-person solicitations
- **e** ☑ Solicitation of non-government grants
- **f** ☐ Solicitation of government grants
- **g** ☑ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ **Yes** ☐ **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
1	CX MARKETING LLC DBA MOORE A SERIES LLC 4200 PARLIAMENT PL 3RD FLOOR LANHAM, MD 20706	DIRECT RESPONSE		No	139,383,558	7,499,909	131,883,649
2	RUE CLAIR DIGITAL LLC DBA STREETLIGHT DIGITAL 13396 LAFAYETTE WAY THORNTON, CO 80241	PEER TO PEER		No	1,029,888	739,733	290,155
3	GLOBALFACES DIRECT CORP 30 LESMIL ROAD UNIT 2 TORONTO, ONTARIO CA M3B2T3	DIRECT RESPONSE		No	914,317	3,126,836	-2,212,519
4	THE STELTER COMPANY 10435 NEW YOUR AVE DES MOINES, IA 50322	PLANNED GIVING CONSULTANT		No	0	269,434	-269,434
5							
6							
7							
8							
9							
10							
Total . . . . . ▶					141,327,763	11,635,912	129,691,851

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

Part II **Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 CARRY FORWARD 5K (event type)	(b) Event #2 COURAGE AWARDS BENEFIT DINNER (event type)	(c) Other events 3 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	1,781,650	442,345	409,273	2,633,268
	2 Less: Contributions	1,342,307	407,345	291,670	2,041,322
	3 Gross income (line 1 minus line 2)	439,343	35,000	117,603	591,946
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	17,570	64,318	24,655	106,543
	7 Food and beverages	1,354	100,118	66,524	167,996
	8 Entertainment				
	9 Other direct expenses	234,104	92,253	40,332	366,689
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				641,228
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-49,282

Part III **Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? . . . . . ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	**13a**	%
b	An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____.

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
SCHEDULE G, PART I, LINE 2B, COLUMN IV	THESE AMOUNTS REPRESENT THE CONTRIBUTIONS RECEIVED DURING THE CURRENT TAX YEAR THAT HAVE BEEN GENERATED BY THE ACTIVITIES OF THE PROFESSIONAL FUNDRAISING SERVICE PROVIDERS LISTED ON SCHEDULE G. THESE AMOUNTS DO NOT INCLUDE CONTRIBUTIONS RECEIVED IN THE CURRENT TAX YEAR THAT WERE ATTRIBUTABLE TO ACTIVITIES PERFORMED BY THESE PROFESSIONAL FUNDRAISING SERVICE PROVIDERS IN PRIOR TAX YEARS.
SCHEDULE G, PART I, LINE 2B, COLUMN V	THESE AMOUNTS REPRESENT THE CONTRACTUAL FEES PAID TO THESE PROFESSIONAL FUNDRAISING SERVICE PROVIDERS FOR THEIR ACTIVITIES PERFORMED DURING THE CURRENT TAX YEAR. THE ORGANIZATION ANTICIPATES THAT THESE FEES AND ASSOCIATED ACTIVITIES WILL GENERATE CONTRIBUTIONS IN THE CURRENT TAX YEAR, AS WELL AS IN FUTURE TAX YEARS.
SCHEDULE G, PART I, LINE 2B, COLUMN VI	GLOBALFACES DIRECT CORP IS A FACE-TO-FACE (F2F) FUNDRAISING SERVICE PROVIDER. F2F FUNDRAISING HAS BEEN SUCCESSFUL FOR WWP IN SECURING ONGOING MONTHLY DONORS. THIS SERVICE PROVIDER IS PAID WHEN THEY SIGN UP A NEW DONOR, AND WWP RECEIVES ONGOING FUTURE DONATIONS AT NO ADDITIONAL COST. CONSEQUENTLY, IT IS ANTICIPATED THAT THE DONATIONS FOR EACH INDIVIDUAL DONOR OVER THE TIME THAT THEY CONTRIBUTE TO WWP WILL EXCEED THE UPFRONT FEE PAID TO THE SERVICE PROVIDER. SIMILARLY, THE STELTER COMPANY IS A PLANNED GIVING CONSULTANT THAT PROVIDES EXPERTISE ON CULTIVATING VALUABLE, LONG-TERM DONOR RELATIONSHIPS THROUGH A UNIQUE COMBINATION OF INDUSTRY INSIGHT, DONOR EDUCATION, AND CREATIVE SERVICES. STELTER PROVIDES VALUABLE FUNDRAISING INSIGHT TO THE WOUNDED WARRIOR PROJECT, AS WELL AS PERFORMING CERTAIN MINISTERIAL TASKS, LIKE MAILINGS, DATABASE MANAGEMENT AND WEBSITE DEVELOPMENT. THE FEES PAID TO STELTER (AND REPORTED ON SCHEDULE G) ARE REFLECTIVE OF THIS SUITE OF SERVICES PROVIDED TO WWP AND SINCE IDENTIFYING TOUCHPOINTS THAT MAY RESULT IN CONTRIBUTIONS IN THE CURRENT YEAR IS DIFFICULT (AS OPPOSED TO BEING REALIZED IN FUTURE YEARS), WWP CHOSE THE CONSERVATIVE ROUTE OF REPORTING $0 AS FUNDS RAISED.

Additional Data

Return to Form

Software ID:

Software Version:

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ **Attach to Form 990.**
▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
WOUNDED WARRIOR PROJECT INC

Employer identification number
20-2370934

Part I General Information on Grants and 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 criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) AMERICAN NATIONAL RED CROSS 431 18TH STREET NW WASHINGTON,DC 20006	53-0196605	501(C)(3)	1,300,000	0			SEE SCHEDULE I, PART IV
(2) AMERICA'S WARRIOR PARTNERSHIP 1190 INTERSTATE PARKWAY AUGUSTA,GA 30909	47-1606321	501(C)(3)	250,000	0			SEE SCHEDULE I, PART IV
(3) ANCHORAGE COMMUNITY MENTAL HEALTH SERVICES INC 4020 FOLKER STREET ANKORAGE,AK 99508	51-0152394	501(C)(3)	300,000	0			SEE SCHEDULE I, PART IV
(4) ARMED SERVICES ARTS PARTNERSHIP 2461 EISENHOWER AVE FLOOR 2 ALEXANDRIA,VA 20001	47-4007504	501(C)(3)	100,000	0			SEE SCHEDULE I, PART IV
(5) ARMED SERVICES YMCA OF ALASKA PO BOX 6272 JBER,AK 99506	92-0016680	501(C)(3)	150,000	0			SEE SCHEDULE I, PART IV
(6) BASTION COMMUNITY OF RESILIENCE 1607 JOLIET STREET NEW ORLEANS,LA 70118	27-4383654	501(C)(3)	620,000	0			SEE SCHEDULE I, PART IV
(7) BOULDER CREST FOUNDATION (BCF) 18370 BLUEMONT VILLAGE LANE BLUEMONT,VA 20135	27-3228310	501(C)(3)	250,000	0			SEE SCHEDULE I, PART IV
(8) CARING FOR MILITARY FAMILIES (THE ELIZABETH DOLE FOUNDATION) 600 NEW HAMPSHIRE AVE NW WASHINGTON,DC 20037	45-4292692	501(C)(3)	400,000	0			SEE SCHEDULE I, PART IV
(9) CITY OF SAN DIEGO PO BOX 129030 SAN DIEGO,CA 92112	95-6000776	GOVERNMENT	100,000	0			SEE SCHEDULE I, PART IV
(10) COHEN VETERANS NETWORK INC 72 CUMMINGS POINT ROAD STAMFORD,CT 06902	47-3950655	501(C)(3)	400,000	0			SEE SCHEDULE I, PART IV
(11) COMFORT CREW MILITARY KIDS 8127 MESA DRIVE B206 117 AUSTIN,TX 78759	26-0141940	501(C)(3)	50,000	0			SEE SCHEDULE I, PART IV
(12) CREATIVETS 672A WESTBORO DRIVE NASHVILLE,TN 37209	46-3617663	501(C)(3)	120,000	0			SEE SCHEDULE I, PART IV
(13) DOG TAG INC 3206 GRANCE STREET NW WASHINGTON,DC 20007	45-2130904	501(C)(3)	200,000	0			SEE SCHEDULE I, PART IV
(14) EMORY UNIVERSITY 1599 CLIFTON ROAD 3RD FLOOR ATLANTA,GA 30322	58-0566256	501(C)(3)	6,244,688	0			SEE SCHEDULE I, PART IV
(15) EOD WARRIOR FOUNDATION (EOD) 716 CRESTVIEW AVENUE NICEVILLE,FL 32578	20-8618412	501(C)(3)	100,000	0			SEE SCHEDULE I, PART IV
(16) FARMER VETERAN COALITION 1516 AUSTIN AVE SUITE 2 WACO,TX 76701	46-2362098	501(C)(3)	200,000	0			SEE SCHEDULE I, PART IV
(17) FISHER HOUSE FOUNDATION INC 111 ROCKVILLE PIKE STE 420 ROCKVILLE,MD 20850	11-3158401	501(C)(3)	100,000	0			SEE SCHEDULE I, PART IV
(18) GOLD STAR PEAK INC PO BOX 772413 EAGLE RIVER,AK 99577	82-5258523	501(C)(3)	100,173	0			SEE SCHEDULE I, PART IV
(19) GREEN BERET FOUNDATION 14351 BLANCO ROAD SAN ANTONIO,TX 78216	27-1206961	501(C)(3)	300,000	0			SEE SCHEDULE I, PART IV
(20) HOMES FOR OUR TROOPS INC 6 MAIN STREET TAUNTON,MA 02780	54-2143612	501(C)(3)	426,250	0			SEE SCHEDULE I, PART IV
(21) HOPE FOR THE WARRIORS 8003 FORBES PLACE STE 201 SPRINGFIELD,VA 22151	20-5182295	501(C)(3)	180,000	0			SEE SCHEDULE I, PART IV
(22) MASSACHUSETTS GENERAL PHYSICIANS ORGANIZATION INC 100 CAMBRIDGE ST STE 1310 BOSTON,MA 02114	04-1564655	501(C)(3)	13,912,172	0			SEE SCHEDULE I, PART IV
(23) NATIONAL MILITARY FAMILY ASSOCIATION INC (NMFA) 2800 EISENHOWER AVE ALEXANDRIA,VA 22314	52-0899384	501(C)(3)	600,009	0			SEE SCHEDULE I, PART IV
(24) NAVY SEAL FOUNDATION INC 1619 D STREET VIRGINIA BEACH,VA 23459	31-1728910	501(C)(3)	300,000	0			SEE SCHEDULE I, PART IV
(25) OPERATION HEALING FORCES INC 380 PARK PLACE BLVD STE 175 CLEARWATER,FL 33759	45-3798803	501(C)(3)	400,000	0			SEE SCHEDULE I, PART IV
(26) OPERATION HOMEFRONT INC 17319 SAN PEDRO AVE STE 505 SAN ANTONIO,TX 78232	32-0033325	501(C)(3)	500,000	0			SEE SCHEDULE I, PART IV
(27) OUR MILITARY KIDS INC 2911 HUNTER MILL ROAD STE 203 OAKTON,VA 22124	56-2483648	501(C)(3)	200,000	0			SEE SCHEDULE I, PART IV
(28) REGENTS UCLA DBA UCLA HEALTH SCIENCES DEVELOPMENT 11000 KINROSS AVE BLDG SUITE 211 LOS ANGELES,CA 90095	95-6006143	501(C)(3)	6,796,705	0			SEE SCHEDULE I, PART IV
(29) RUSH UNIVERSITY MEDICAL CENTER 1653 W CONGRESS PARKWAY CHICAGO,IL 60612	36-2174823	501(C)(3)	8,465,487	0			SEE SCHEDULE I, PART IV
(30) RUTGERS UNIVERSITY FOUNDATION 335 GEORGE STREET NEW BRUNSWICK,NJ 08901	23-7318742	501(C)(3)	300,000	0			SEE SCHEDULE I, PART IV
(31) SHEPHERD CENTER FOUNDATION INC 2020 PEACHTREE ROAD ATLANTA,GA 30309	20-1238224	501(C)(3)	300,000	0			SEE SCHEDULE I, PART IV
(32) SOLDIERS TO SIDELINES (STS) 8234 BURNLEY RD TOWNSON,MD 21204	46-5638383	501(C)(3)	250,000	0			SEE SCHEDULE I, PART IV
(33) SONGWRITINGWITH INC DBA SONGWRITINGWITH SOLDIERS 632 FOGG STREET SUITE 8 NASHVILLE,TN 37211	26-1626709	501(C)(3)	56,000	0			SEE SCHEDULE I, PART IV
(34) SPECIAL OPERATIONS WARRIOR FOUNDATION 1137 MARBELLA PLAZA DRIVE TAMPA,FL 33619	52-1183585	501(C)(3)	50,000	0			SEE SCHEDULE I, PART IV
(35) SYRACUSE UNIVERSITY (D'ANIELLO INSTITUTE FOR VETERANS AND MILITARY FAMILIES 640 SKYTOP ROAD SKYTOP OFFICE BLDG SYRACUSE,NY 13244	15-0532081	501(C)(3)	400,000	0			SEE SCHEDULE I, PART IV
(36) THE DONOVAN AND BANK FOUNDATION 214 TWO CHOPT ROAD WILMINGTON,NC 28405	87-2789816	501(C)(3)	75,000	0			SEE SCHEDULE I, PART IV
(37) THE FIRE WATCH PROJECT INC 5011 GATE PARKWAY BLDG 100 STE 100 JACKSONVILLE,FL 32256	85-3790585	501(C)(3)	25,000	0			SEE SCHEDULE I, PART IV
(38) THE HENRY M JACKSON FOUNDATION FOR THE ADVANCEMENT OF MILITARY 6720 A ROCKLEDGE DR STE 100 BETHESDA,MD 20817	52-1317896	501(C)(3)	399,230	0			SEE SCHEDULE I, PART IV
(39) THE HONOR FOUNDATION 11055 ROSELLE STREET STE 120 SAN DIEGO,CA 92121	46-2952873	501(C)(3)	300,000	0			SEE SCHEDULE I, PART IV
(40) THIRD OPTION FOUNDATION 12007 SUNRISE VALLEY DRIVE STE 105 RESTON,VA 20191	46-4884866	501(C)(3)	500,000	0			SEE SCHEDULE I, PART IV
(41) THREE RANGERS FOUNDATION PO BOX 713 SHERIDAN,OR 97378	47-2067593	501(C)(3)	150,000	0			SEE SCHEDULE I, PART IV
(42) TRAVIS MANION FOUNDATION (TMF) 164 EAST STATE STREET DOYLESTOWN,PA 18901	41-2237951	501(C)(3)	950,000	0			SEE SCHEDULE I, PART IV
(43) US CHAMBER OF COMMERCE (HIRING OUR HEROS) 1615 H STREET NW WASHINGTON,DC 20062	46-1561597	501(C)(3)	220,000	0			SEE SCHEDULE I, PART IV
(44) UNITED STATES VETERANS INITIATIVE (US VETS) 800 W 6TH STREET STE 1505 LOS ANGELES,CA 90017	95-4382752	501(C)(3)	600,000	0			SEE SCHEDULE I, PART IV
(45) US ARMY COMMUNITY & FAMILY SUPPORT PO BOX 340309 FORT SAM HOUSTON,TX 78234	54-1911272	501(C)(3)	100,000	0			SEE SCHEDULE I, PART IV
(46) VA NATIONAL VETERANS SUMMER SPORTS CLINIC 3350 LA JOLLA VILLAGE DRIVE SAN DIEGO,CA 92121	23-7262137	501(C)(3)	100,000	0			SEE SCHEDULE I, PART IV
(47) VETERANS OF FOREIGN WARS FOUNDATION (VFW) 406 WEST 34TH STREET KANSAS CITY,MO 64111	43-1758998	501(C)(3)	100,000	0			SEE SCHEDULE I, PART IV
(48) WARRIOR CANINE CONNECTION (WCC) 14934 SCHAEFFER ROAD BOYDS,MD 20841	45-2981579	501(C)(3)	100,000	0			SEE SCHEDULE I, PART IV
(49) WARRIOR REUNION FOUNDATION 35 HICKORY MEADOW RD COCKEYSVILLE,MD 21030	81-5360521	501(C)(3)	25,000	0			SEE SCHEDULE I, PART IV
(50) WARRIORS AND QUIET WATERS FOUNDATION INC 351 EVERGREEN DR SUITE A BOZEMAN,MT 59715	20-8837637	501(C)(3)	144,000	0			SEE SCHEDULE I, PART IV

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 50

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) EMERGENCY FINANCIAL ASSISTANCE	4859	3,689,987			
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2:	PROCEDURE FOR MONITORING THE USE OF GRANT FUNDS IN THE U.S. WWP MONITORS GRANT FUNDS ACCORDING TO THE TERMS OF AN APPLICABLE WRITTEN AGREEMENT. UNDER SUCH AGREEMENTS, GRANTEES ARE RESPONSIBLE FOR PROVIDING PERIODIC IMPACT REPORTS. WWP USES THESE REPORTS TO ENSURE THAT GRANT FUNDS ARE SPENT FOR THEIR INTENDED PURPOSES. IN SOME CASES, SITE VISITS ARE CONDUCTED. GRANTEES ARE INVITED THROUGH AN INVITATION-ONLY PROCESS AND ARE EVALUATED FOR FUNDING BASED ON HOW PROGRAMMING COMPLEMENTS WWP, TO INCLUDE: FILLING A GAP IN DIRECT SERVICES, AUGMENTING DIRECT SERVICES, PREVENTING DUPLICATIVE EFFORTS, SCALING IMPACT IN THE VETERAN COMMUNITY, AMPLIFYING MESSAGING AROUND ISSUES AFFECTING POST-9/11 WOUNDED/ILL/INJURED VETERANS AND THEIR FAMILIES, BUILDING RELATIONSHIPS AND COLLABORATION WITH ORGANIZATIONS SERVING VETERANS AND FAMILIES, AND GROWING OR INCUBATING SMALL ORGANIZATIONS WITH THE ABILITY TO SCALE INNOVATIVE PROGRAMMING. ORGANIZATIONS SUBMIT PROPOSALS, ENSURING INTENT AND FUNDING OBJECTIVES ARE MET. WWP CONDUCTS DUE DILIGENCE IN REVIEWING AND VETTING GRANTEES AND ESTABLISHES REQUIRED REPORTING ELEMENTS AS PART OF THE GRANT AGREEMENT. GRANTEES PARTICIPATE IN ONGOING CHECK-IN MEETINGS AND PROVIDE PERIODIC IMPACT REPORTS DURING THE YEAR-LONG GRANT TERM. WWP ENSURES COMPLIANCE AND SUCCESSFUL COMPLETION OF ALL GRANT REQUIREMENTS.
MASSACHUSETTS GENERAL PHYSICIANS ORGANIZATION INC -	AN ACADEMIC MEDICAL CENTER IN THE WARRIOR CARE NETWORK. PLEASE REFER TO THE PROGRAM DESCRIPTION IN PART III, LINE 4A AND SCHEDULE O FOR MORE INFORMATION ON THE WARRIOR CARE NETWORK. NATIONAL MILITARY FAMILY ASSOCIATION INC (NMFA) -TO SUPPORT NMFA'S OPERATION PURPLE CAMPS FOR MILITARY-CONNECTED CHILDREN, WITH A FOCUS ON CHILDREN WITH A RECENTLY DEPLOYED PARENT OR GUARDIAN OR A PARENT WITH A POST-9/11 WOUND, ILLNESS, OR INJURY. NAVY SEAL FOUNDATION INC - TO SUPPORT THE NAVY SEAL FOUNDATION'S WARRIOR FITNESS PROGRAM FOR POST-9/11 VETERANS OR SERVICE MEMBERS. FUNDING FACILITATES DIRECT SERVICES IN BRAIN AND MENTAL HEALTH, AS WELL AS OVERARCHING HUMAN PERFORMANCE PROGRAMS THAT ADDRESS COMPLEX ISSUES NAVY SEAL OPERATORS FACE. OPERATION HEALING FORCES INC - SUPPORT OPERATION HEALING FORCES' SOAR IMMEDIATE NEEDS PROGRAM, WHICH PROVIDES DIRECT CRISIS SUPPORT TO SPECIAL OPERATIONS FORCES AND THEIR FAMILIES. OPERATION HOMEFRONT INC - TO SUPPORT THE CRITICAL FINANCIAL ASSISTANCE PROGRAM PROVIDING FINANCIAL ASSISTANCE TO TRANSITIONING SERVICE MEMBERS, POST-9/11 VETERANS, AND FAMILY MEMBERS. ASSISTANCE MAY INCLUDE AUTO PAYMENTS AND REPAIRS, CHILD AND DEPENDENT CARE, CRITICAL BABY ITEMS, MEDICAL, DENTAL, AND/OR VISION EXPENSES, ESSENTIAL HOME ITEMS, FOOD ASSISTANCE, HOME REPAIRS, MOVING AND RELOCATION COSTS, RENT AND MORTGAGE ASSISTANCE, TRAVEL AND TRANSPORTATION COSTS, AND UTILITIES AMONG OTHER BASIC NEEDS. OUR MILITARY KIDS INC - TO SUPPORT THE SEVERELY INJURED PROGRAM, WHICH PROVIDES SCHOLARSHIPS FOR ENRICHMENT ACTIVITIES AND TUTORING FOR CAREGIVING CHILDREN AND YOUTH OF POST-9/11 SEVERELY INJURED SERVICE MEMBERS. REGENTS UCLA DBA UCLA HEALTH SCIENCES DEVELOPMENT - AN ACADEMIC MEDICAL CENTER IN THE WARRIOR CARE NETWORK. PLEASE REFER TO THE PROGRAM DESCRIPTION IN PART III, LINE 4A AND SCHEDULE O FOR MORE INFORMATION ON THE WARRIOR CARE NETWORK. RUSH UNIVERSITY MEDICAL CENTER - AN ACADEMIC MEDICAL CENTER IN THE WARRIOR CARE NETWORK. PLEASE REFER TO THE PROGRAM DESCRIPTION IN PART III, LINE 4A AND SCHEDULE O FOR MORE INFORMATION ON THE WARRIOR CARE NETWORK. RUTGERS UNIVERSITY FOUNDATION - TO SUPPORT THE VETS4WARRIORS 24/7 PEER SUPPORT SERVICE PROGRAM FOR POST-9/11 VETERANS AND ACTIVE DUTY SERVICE MEMBERS AND THEIR FAMILIES, AS WELL AS OUTREACH EFFORTS THROUGH THE AMBASSADOR PROGRAM. SHEPHERD CENTER FOUNDATION, INC. - TO SUPPORT THE SHARE MILITARY INITIATIVE FOR POST-9/11 VETERANS AND ACTIVE DUTY SERVICE MEMBERS WITH BRAIN INJURY AND RELATED PHYSICAL AND PSYCHOLOGICAL HEALTH CONCERNS. SHARE IS A COMPREHENSIVE REHABILITATION PROGRAM WITH FLEXIBLE PROGRAMMING OPTIONS, COLLABORATIVE CARE, TRANSITION SUPPORT, AND COMMUNITY REINTEGRATION. SOLDIERS TO SIDELINES (STS) - TO SUPPORT STS'S COACHING SEMINAR PROGRAMS TO EDUCATE POST-9/11 VETERANS THROUGH COACHING SEMINARS TARGETED TO ADAPTIVE SPORTS, IN COLLABORATION WITH WWP ADAPTIVE SPORTS PROGRAM, WOMEN VETERANS, AND SPECIAL OPERATION FORCES. IN ADDITION, TO SUPPORT COACHING CERTIFICATION EVENTS TARGETED TO WWP ALUMNI. SONGWRITINGWITH INC (DBA SONGWRITINGWITH SOLDIERS) - TO SUPPORT ONE THREE-DAY RETREAT FOR POST-9/11 VETERANS, INCLUDING WWP ALUMNI, WITH AN OPTION TO EXPAND TO A COUPLE'S RETREAT, FOCUSED ON FOSTERING CREATIVITY THROUGH SONGWRITING, BUILDING CONNECTIONS, AND PROVIDING TOOLS FOR PERSONAL GROWTH. SPECIAL OPERATIONS WARRIOR FOUNDATION (SOWF) - TO SUPPORT ACTIVE-DUTY SPECIAL OPERATIONS FORCES (SOF) SERVICE MEMBERS AND THEIR FAMILIES RECEIVING SUPPORT FROM THE SEVERELY WOUNDED, ILL, AND INJURED PROGRAM. THE USSOCOM CARE COALITION REFERS THE SERVICE MEMBER TO SOWF WHERE THEY ENSURE THE SERVICE MEMBER RECEIVES A GRANT AS WELL AS AN IPAD. AT TIMES, THE GRANT MAY BE SPLIT BETWEEN THEM AND ANOTHER SOF SPECIFIC ORGANIZATION IF THE SERVICE MEMBER IS ELIGIBLE. SYRACUSE UNIVERSITY (D'ANIELLO INSTITUTE FOR VETERANS AND MILITARY FAMILIES "IVMF") - TO SUPPORT IVMF'S WOUNDED WARRIOR ENTREPRENEURSHIP & SMALL BUSINESS TRAINING (WWESBT) PROGRAM FOR WOUNDED, INJURED, AND ILL POST-9/11 VETERANS AND THEIR CAREGIVERS. WWESBT DEVELOPS COMPETENCIES AND PROVIDES THE BASIC TOOLS TO CREATE AND SUSTAIN AN ENTREPRENEURIAL VENTURE, AND PROGRAMMING INCLUDES TRAINING, MENTORSHIP, AND EXPOSURE TO THE FULL PORTFOLIO OF INSTITUTE FOR VETERANS AND MILITARY FAMILIES SUITE OF SERVICES. TO ALSO SUPPORT IVMF'S ONWARD TO OPPORTUNITY (O2O) PROGRAM. OFFERED AT NO COST TO PARTICIPANTS, THE O2O PROGRAM PROVIDES IN-DEMAND, INDUSTRY VALIDATED SKILLS TRAINING AND EMPLOYMENT PLACEMENT SERVICES TO THE MILITARY-CONNECTED COMMUNITY VIA 50 DIFFERENT LEARNING PATHWAYS (I.E. PMP, SPHR, SAS, CISSP, ETC.). ADDITIONALLY, TO SUPPORT POST-9/11 WOMEN VETERANS AND SERVICE MEMBERS IN IVMF'S VETERAN WOMEN IGNITING THE SPIRIT OF ENTREPRENEURSHIP (V-WISE) COHORT. THE AIM OF THIS PROGRAM IS TO OPEN THE DOOR TO ENTREPRENEURIAL OPPORTUNITIES FOR FEMALE VETERANS, FEMALE MILITARY FAMILY MEMBERS, AND TRANSITIONING FEMALE SERVICE MEMBERS, BY DEVELOPING THEIR COMPETENCIES IN THE MANY STEPS AND ACTIVITIES ASSOCIATED WITH CREATING AND SUSTAINING AN ENTREPRENEURIAL VENTURE. THE DONOVAN AND BANK FOUNDATION - TO SUPPORT ACTIVE-DUTY SPECIAL OPERATIONS FORCES SERVICE MEMBERS, POST-9/11 VETERANS, AND ACTIVE-DUTY FAMILY MEMBERS THROUGH THE EXECUTION OF THE JANUS PROGRAM TRANSITION WORKSHOPS AND ONE-ON-ONE COUNSELING SESSIONS. THE FIRE WATCH PROJECT INC - TO SUPPORT THE GROWTH OF THE WATCH STANDER PROGRAM AND MOBILIZING SAFE PLACES. THE HENRY M. JACKSON FOUNDATION FOR THE ADVANCEMENT OF MILITARY - TO SUPPORT THE EXECUTION OF 7 EAST'S BRAIN INJURY MEDICINE/NEUROPSYCHIATRY PROGRAMMING IN BETHESDA, MD THROUGH THE SALARY, BENEFTS AND RELATED EXPENSES OF A PSYCHOLOGIST, WHOSE POSITION CONTRIBUTES TO PROVIDING COMPREHENSIVE AND HOLISTIC CARE TO VETERANS, SERVICE MEMBERS, AND THE FAMILY UNIT, AS WELL AS RESEARCH. THE HONOR FOUNDATION - TO SUPPORT CAREER TRANSITION PROGRAMMING FOR SPECIAL OPERATIONS FORCES COHORTS AT HIGH-DEMAND MILITARY INSTALLATIONS IN FLORIDA, NORTH CAROLINA, AND WASHINGTON, AS WELL AS VIRTUAL OPPORTUNITIES, TO ADDRESS CRITICAL TRANSITION SERVICE ASSISTANCE CAPACITY SHORTFALLS FOR THE SPECIAL OPERATIONS

	FORCES COMMUNITY. THIRD OPTION FOUNDATION - TO SUPPORT POST-9/11 VETERANS THROUGH THIRD OPTION FOUNDATION'S MEDICAL SUPPORT PROGRAM. ADDITIONALLY, TO SUPPORT POST-9/11 VETERANS AND FAMILY MEMBERS THROUGH THEIR BEHAVIORAL/MENTAL HEALTH (BMH) SERVICES PROGRAM; SERVICES INCLUDE INDIVIDUAL, COUPLES, AND FAMILY COUNSELING, MARRIAGE INTENSIVES, AND SKILLS-BASED PSYCHOSOCIAL EDUCATION SEMINARS. THREE RANGERS FOUNDATION - TO SUPPORT COUNSELORS FOR THE RANGERS FOR LIFE PROGRAM, PROVIDING COUNSELING TO TRANSITIONING RANGERS AT HUNTER ARMY AIRFIELD, JOINT BASE LEWIS-MCCHORD, AND FORT MOORE (TO INCLUDE THE 75TH REGIMENTAL HEADQUARTERS, MILITARY INTELLIGENCE BATTALION, AND SPECIAL TROOPS BATTALION). TRAVIS MANION FOUNDATION (TMF) - TO SUPPORT CHARACTER DOES MATTER, LEADING WITH YOUR STRENGTHS, OPERATION LEGACY, AND SPARTAN LEADERSHIP PROGRAMS THROUGH TMF'S HOLISTIC PREVENTION MODEL WITH THE GOAL OF INCREASED ENGAGEMENT, MEANINGFUL RELATIONSHIPS, AND IMPROVED MENTAL HEALTH AND WELL-BEING. IN ADDITION, SUPPORTING TAILORED CURRICULUM FOR WWP ALUMNI. UNITED STATES VETERANS INITIATIVE (U.S. VETS) - TO SUPPORT THERAPEUTIC COMMUNITIES, PROVIDING DIRECT CASE MANAGEMENT TO HOMELESS AND AT-RISK VETERANS THROUGHOUT ITS SITES AND VIRTUALLY. IN ADDITION, TO SUPPORT WOMEN VETERAN-SPECIFIC PROGRAMMING INCLUDING WOMEN VETS ON POINT AND THE ADVANCE PROGRAM. TO ALSO SUPPORT TWO PREVENTION HUBS IN WASHINGTON, D.C. AND WEST LOS ANGELES, CA. US ARMY COMMUNITY & FAMILY SUPPORT - TO SUPPORT THE 2025 DEFENSE WARRIOR GAMES WHICH LEVERAGES PARALYMPIC-STYLE SPORTS AS A MEANS TO AID THE RECOVERY PROCESS OF WOUNDED, ILL, AND INJURED SERVICE MEMBERS AND VETERANS. US CHAMBER OF COMMERCE FOUNDATION (HIRING OUR HEROES) - TO SUPPORT CAREER SUMMITS IN LOCATIONS CHOSEN BY WOUNDED WARRIOR PROJECT, IN COLLABORATION WITH WWP'S WARRIORS TO WORK PROGRAM, TO MEET THE NEEDS OF WWP ALUMNI AND FAMILY MEMBER. IN ADDITION, TO SUPPORT THE POST-9/11 MILITARY SPOUSE AND CAREGIVER FELLOWSHIP PROGRAM, PROVIDING THEM AN INTERNSHIP-STYLE OPPORTUNITY TO REDUCE BARRIERS TO MEANINGFUL AND LASTING EMPLOYMENT.
VA NATIONAL VETERANS SUMMER SPORTS CLINIC -	TO SUPPORT THE FIVE (5) DAY ADAPTIVE SPORTS CLINIC, TO PROMOTE REHABILITATION AND ENHANCE THE HEALTH AND WELL-BEING OF OUR NATION'S VETERANS VETERANS OF FOREIGN WARS FOUNDATION (VFW) - TO SUPPORT OPERATIONS FOR THE BENEFITS DELIVERY AT DISCHARGE COMPONENT OF VFW'S NATIONAL VETERANS SERVICE PROGRAM AT FIVE MILITARY BASES AND INSTALLATIONS. WARRIOR CANINE CONNECTION (WCC) - TO SUPPORT WCC'S MISSION BASED TRAUMA RECOVERY PROGRAM ACROSS THE COUNTRY AND THROUGH PROGRAMMING TAILORED SPECIFICALLY FOR WWP ALUMNI, WHICH INCLUDES 8 WEEKS OF PROGRAMMING FOCUSING ON THE FUNDAMENTALS OF CANINE BEHAVIOR AND LEARNING STRATEGIES WHILE HELPING TO RECOVER POST-9/11 VETERANS COPE WITH POST-DEPLOYMENT CHALLENGES. WARRIOR RANCH FOUNDATION -TO SUPPORT MENTAL HEALTH FOR VETERANS AND FIRST RESPONDERS, FOCUSING ON THOSE SUFFERING FROM PTSD. SPECIFICALLY THROUGH PROGRAMS THAT RESCUE, RETRAIN AND REPURPOSE HORSES, WHICH IN TURN PROMOTES SELF-AWARENESS AND SELF-CONFIDENCE. WARRIORS AND QUIET WATERS FOUNDATION INC - TO SUPPORT THE FIRST-EVER 8-PERSON PHOTOGRAPHY COHORT IN THE BUILT FOR MORE PROGRAM, EMPOWERING POST-9/11 VETERANS TO IMPROVE THEIR WELL-BEING AND MOVE FROM SURVIVING TO THRIVING, FOSTERING A PROFOUND INCREASE IN THEIR SENSE OF PURPOSE AND CONNECTION.
SCHEDULE I, PART II, LINE 1, COLUMN H	PURPOSE OF GRANT OR ASSISTANCE AMERICAN NATIONAL RED CROSS - IN COLLABORATION WITH THE AMERICAN RED CROSS TO PROVIDE RESOURCES TO LANDSTUHL REGIONAL MEDICAL CENTER, ASSIGNED COMMANDS, AND THE WARRIORS/FAMILY SUPPORT MEMBERS TO ENSURE THAT WOUNDED, INJURED, AND/OR ILL RECEIVE THE UTMOST IN CARE AS THEY TRANSITION TO A STATESIDE MEDICAL TREATMENT FACILITY. AMERICA'S WARRIOR PARTNERSHIP INC (AWP) - TO SUPPORT AWP'S COMMUNITY INTEGRATION EFFORTS ACROSS NINE COMMUNITIES, INCLUDING THE PANHANDLE OF FL; ORANGE COUNTY, CA; BUFFALO, NY; ATLANTA, GA; GREENEVILLE, SC; INDIANAPOLIS, IN; PERMIAN BASIN AREA IN TX AND NM; THE STATE OF ALASKA; AND THE NAVAJO NATION. THESE ONE-STOP LOCATIONS CONNECT WARRIORS AND THEIR FAMILIES TO DIVERSE LOCAL RESOURCES FOR EMPLOYMENT, HOMELESSNESS, HEALTH, AND FINANCIAL ASSISTANCE. ANCHORAGE COMMUNITY MENTAL HEALTH SERVICES INC (STEVEN A COHEN MILITARY FAMILY CLINIC AT ALASKA BEHAVIORAL HEALTH) - TO SUPPORT 1.2 FULL-TIME CLINICIANS WHO WILL PROVIDE CASE MANAGEMENT, THERAPEUTIC SERVICES, PSYCHOEDUCATIONAL TRAINING, AND REFERRALS FOR POST-9/11 VETERANS, SERVICE MEMBERS, AND THEIR FAMILIES. ARMED SERVICES ARTS PARTNERSHIP - TO SUPPORT THEIR VIRTUAL CHAPTER PROVIDING COMMUNITY ARTS PROGRAMMING TO VETERANS AND THEIR FAMILIES WHEREVER THEY ARE. THE CHAPTER WILL OFFER VIRTUAL CLASSES AND WORKSHOPS FOCUSED ON A VARIETY OF ARTS PROGRAMMING WHICH COULD INCLUDE COMEDY, STORYTELLING, IMPROV, CREATIVE WRITING, AND VISUAL ARTS. TO ALSO FACILITATE THE LAUNCH OF A NEW ASAP CHAPTER IN SAN ANTONIO, TX, PROVIDING IN-PERSON ARTS PROGRAMMING TO LOCAL POST-9/11 VETERANS AND FAMILY MEMBERS. ARMED SERVICES YMCA OF ALASKA (ASYMCA) - TO SUPPORT ASYMCA WELLNESS OPPORTUNITIES, INCLUDING THE COMBAT FISHING TOURNAMENT FOR JUNIOR ENLISTED ACTIVE DUTY; EQUIPMENT, OUT-OF-SCHOOL MEAL SUPPORT, AND FOOD SUPPLIES FOR MARKETPLACES; MILITARY SPOUSE CAMPS; AND MILITARY TEEN MINDFUL HEALTH AND WELLNESS RETREATS. SUPPORT ALSO INCLUDES THE GUARDIAN ANGEL PROGRAM FOR ASSISTANCE DURING CATASTROPHIC EVENTS AND UNIT AND SQUADRON CASUALTY SUPPORT. BASTION COMMUNITY OF RESILIENCE - TO SUPPORT BASTION'S HEADWAY PROGRAM IN NEW ORLEANS, LA, AND IN SAN ANTONIO, TX, PROVIDING COMMUNITY-BASED CARE FIVE DAYS PER WEEK IN INDIVIDUAL AND GROUP SETTINGS FOR POST-9/11 VETERANS WHO ARE LIVING WITH A TRAUMATIC BRAIN INJURY, POST-TRAUMATIC STRESS, SPINAL CORD INJURY, OR OTHER NEUROLOGICAL CONDITIONS. VETERANS AND FAMILY MEMBERS HAVE ACCESS TO VOCATIONAL REHABILITATION, CAREGIVER WORKSHOPS, AND FAMILY SUPPORT ACTIVITIES THROUGH THE PROGRAM. ALSO TO SUPPORT THE ACQUISITION OF A WHEELCHAIR-ACCESSIBLE PASSENGER VAN FOR THE HEADWAY PROGRAM IN SAN ANTONIO, WHICH WILL BE USED TO TRANSPORT PARTICIPANTS TO COMMUNITY ACTIVITIES AND PROGRAM EVENTS, ENHANCING ACCESSIBILITY AND ENGAGEMENT. BOULDER CREST FOUNDATION (BCF) - TO SUPPORT THE WARRIOR PROGRESSIVE ALTERNATIVE TRAINING ("PATHH") PROGRAM FOCUSING ON POSTTRAUMATIC GROWTH FOR POST-9/11 MILITARY AND VETERANS, TARGETING SUPPORT FOR SPECIAL OPERATIONS FORCES AND WOMEN VETERANS. IN THE SEVEN-DAY INTENSIVE AND IMMERSIVE STAY AND 12 WEEKS OF FOLLOW-UP, WARRIOR PATHH INCLUDES JOURNALING, PHYSICAL TRAINING, AND PROVEN WARRIOR-SPECIFIC MODALITIES THAT EMPOWER PARTICIPANTS TO MAKE PEACE WITH THEIR PAST, LEARN TO LIVE IN THE PRESENT, AND CREATE PLANS FOR THEIR FUTURE. TO ALSO SUPPORT THE STRUGGLE WELL TRAINING PROGRAM IN CAMP LEJEUNE AND PARRIS ISLAND, ROOTED IN THE POSTTRAUMATIC GROWTH FRAMEWORK AND ENABLING PARTICIPANTS TO PREPARE, PRACTICE, AND IMPLEMENT INDIVIDUALIZED PLANS FOR PERSONAL GROWTH BY TRANSFORMING STRUGGLE INTO STRENGTH. BCF WILL DELIVER STRUGGLE WELL WORKSHOPS IN SUPPORT OF SERVICE MEMBERS AND THEIR FAMILIES. CARING FOR MILITARY FAMILIES (THE ELIZABETH DOLE FOUNDATION) - TO SUPPORT THE OPERATIONS AND CO-CHAIRING OF THE HIDDEN HELPERS COALITION, INCLUDING COALITION RECRUITMENT, ENGAGEMENT, AND SUSTAINABILITY. TO ALSO SUPPORT THE LAUNCH OF A HIDDEN HELPER PUBLIC AWARENESS CAMPAIGN AIMED AT INCREASING PUBLIC AWARENESS OF HIDDEN HELPERS AND THEIR VITAL CAREGIVING ROLES, AND AT CONNECTING HIDDEN HELPERS AND THEIR FAMILIES TO CRITICAL RESOURCES THAT SUPPORT THEIR CAREGIVING RESPONSIBILITIES AND OVERALL WELLBEING. CITY OF SAN DIEGO - TWO-YEAR GRANT TO CREATE A POSITION AT THE CITY OF SAN DIEGO FOR A POST-9/11 VETERAN WITH A SERVICE-CONNECTED DISABILITY TO DEVELOP EXPERIENCE AND EXPOSURE TO BROADEN CAREER OPPORTUNITIES WITHIN LOCAL GOVERNMENT. SPECIFICALLY, THIS INDIVIDUAL WILL WORK IN THE HUMAN RESOURCES DEPARTMENT AND WORK CLOSELY WITH THE CITY'S DEPARTMENT OF GOVERNMENT AFFAIRS, THE MAYOR'S COMMUNITY ENGAGEMENT TEAM AND LOCAL MILITARY INSTALLATIONS, VETERAN SERVICE ORGANIZATIONS AND OTHER COMMUNITY PARTNERS. COHEN VETERANS NETWORK INC - TO SUPPORT THERAPY SESSIONS FOR POST-9/11 VETERANS, SERVICE MEMBERS, AND FAMILY MEMBERS, INCLUDING CAREGIVER CHILDREN. COMFORT CREW FOR MILITARY KIDS - TO SUPPORT THE COMFORT KIT RESILIENCY PROGRAM FOR MILITARY CHILDREN WHOSE PARENT(S) ARE DEPLOYED OR WOUNDED, INJURED, OR ILL AS A RESULT OF POST-9/11 MILITARY SERVICE. GRANT SUPPORTS THE FOLLOWING KITS: WITH YOU ALL THE WAY! DEALING WITH DEPLOYMENT KITS, TOGETHER AGAIN! HELPING MILITARY FAMILIES RECONNECT KITS, TAKING CARE OF YOU! SUPPORT FOR KIDS OF INJURED HEROES KITS, AND HELPING MILITARY CHILDREN HANDLE LOSS MEMORY BOX/GRIEF KIT. CREATIVETS - TO SUPPORT POST-9/11 VETERANS AND CAREGIVERS THROUGH TWO SONGWRITING PROGRAMS. CREATIVETS'S SONGWRITING PROGRAMS PAIR VETERANS WITH PROFESSIONAL SONGWRITERS TO COLLABORATIVELY CREATE ORIGINAL SONGS. THROUGH GUIDED SESSIONS, VETERANS EXPLORE THEIR EMOTIONS, EXPERIENCES, AND CHALLENGES, TRANSFORMING THEM INTO MEANINGFUL LYRICS AND MELODIES. TO ALSO SUPPORT ONE VISUAL ART PROGRAM HOSTED AT THE SCHOOL OF THE ART INSTITUTE OF CHICAGO (SAIC) FOR POST-9/11 VETERANS. CREATIVETS'S VISUAL ART PROGRAM PROVIDES VETERANS WITH OPPORTUNITIES TO EXPLORE VARIOUS ART FORMS UNDER THE GUIDANCE OF PROFESSIONAL ARTISTS. TO ALSO SUPPORT AN ASTROPHOTOGRPAHY PROGRAM, ALLOWING POST-9/11 VETERANS TO ENGAGE IN A UNIQUE BLEND OF MINDFULNESS, IDENTITY, AND EMOTIONAL HEALING WHILE LEARNING TECHNICAL SKILLS IN PHOTOGRAPHY. TO ALSO SUPPORT A SCARS TO SCRIPTS PROGRAM, EMPOWERING POST-9/11 VETERANS TO TRANSFORM TRAUMA INTO STORY, AS THEY CRAFT COMPELLING NARRATIVES ROOTED IN THEIR PERSONAL EXPERIENCES ALONGSIDE PROFESSIONAL SCREENWRITERS AND ACTORS. DOG TAG INC - TO SUPPORT DOG TAG INC.'S INNOVATIVE FELLOWSHIP PROGRAM FOR POST-9/11 VETERANS WITH SERVICE-CONNECTED DISABILITIES, MILITARY SPOUSES, AND CAREGIVERS IN WASHINGTON, DC AND CHICAGO, IL. EMORY UNIVERSITY - AN ACADEMIC MEDICAL CENTER IN THE WARRIOR CARE NETWORK. PLEASE REFER TO THE PROGRAM DESCRIPTION IN PART III, LINE 4A AND SCHEDULE O FOR MORE INFORMATION ON THE WARRIOR CARE NETWORK. EOD WARRIOR FOUNDATION (EOD) - TO SUPPORT EOD WARRIOR FOUNDATION'S FINANCIAL RELIEF PROGRAM FOR POST-9/11 EOD SERVICE MEMBERS, VETERANS, AND THEIR FAMILIES. FARMER VETERAN COALITION - TO SUPPORT POST-9/11 DISABLED VETERANS RECEIVING GRANTS THROUGH THE FELLOWSHIP FUND. THE FELLOWSHIP FUND PROVIDES DIRECT ASSISTANCE TO AWARDEES THROUGH THE PURCHASE OF EQUIPMENT THAT THE COMMITTEE HAS IDENTIFIED AS CRITICAL TO LAUNCH A SUCCESSFUL AGRICULTURAL OR RANCH BUSINESS, SUCH AS IRRIGATION EQUIPMENT, LIVESTOCK, FENCING, STORAGE FREEZERS, AND TRACTOR IMPLEMENTS. FISHER HOUSE FOUNDATION INC - TO SUPPORT THE 2025 DEFENSE WARRIOR GAMES WHICH LEVERAGES PARALYMPIC-STYLE SPORTS AS A MEANS TO AID THE

	RECOVERY PROCESSES OF WOUNDED, ILL, AND INJURED SERVICE MEMBERS AND VETERANS. GOLD STAR PEAK INC - TO SUPPORT THE OPERATIONS AND EXPANSION OF GOLD STAR PEAK IN ALASKA TO HOLD SINGLE AND MULTI-DAY ADVENTURES, EVENTS, AND TRAININGS FOR CAMP GOLD STAR PARTICIPANTS INCLUDING POST-9/11 VETERANS AND GOLD STAR FAMILIES. GREEN BERET FOUNDATION - TO SUPPORT POST-9/11 GREEN BERETS AND THEIR FAMILIES THROUGH THE CASUALTY SUPPORT, HEALTH & WELLNESS SUPPORT, AND FAMILY SUPPORT PROGRAMS. HOMES FOR OUR TROOPS INC - TO SUPPORT SEVERAL KEY ADAPTATIONS IN HOMES AND 360-DEGREE WALKWAYS AROUND HOMES FOR POST-9/11 INJURED VETERANS. HOPE FOR THE WARRIORS - TO SUPPORT HOPE'S CRITICAL NEEDS PROGRAM WHICH PROVIDES INTEGRATED CASE MANAGEMENT, FINANCIAL EDUCATION WITH AN EMPHASIS ON LONG-TERM FINANCIAL STABILITY, AND RESOURCE REFERRALS TO ASSIST POST-9/11 SERVICE MEMBERS, VETERANS, CAREGIVERS, AND THEIR FAMILIES.
SCHEDULE I, PART III, LINE 1(A)	WWP'S EMERGENCY FINANCIAL ASSISTANCE PROGRAM PROVIDES FINANCIAL ASSISTANCE TO WARRIORS AND IMMEDIATE FAMILY MEMBERS WHO ENCOUNTER EMERGENT SITUATIONS WHICH IMPACT THEIR LIFE, SAFETY, OR SHELTER. SEE FINANCIAL ASSISTANCE PROGRAM DESCRIPTION ON SCHEDULE O FOR FURTHER INFORMATION.

Additional Data

Return to Form

Software ID:

Software Version:

Schedule J
(Form 990)
(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
WOUNDED WARRIOR PROJECT INC

Employer identification number
20-2370934

Part I Questions Regarding Compensation

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

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

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

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

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 WALTER E PIATT CHIEF EXECUTIVE OFFICER(AS OF 03/24)	(i)	374,953	0	0	8,668	20,761	404,382	0
	(ii)	0	0	0	0	- 0	- 0	0
2 JENNIFER M SILVA CHIEF PROGRAM OFFICER	(i)	290,358	52,165	0	11,147	29,021	382,691	0
	(ii)	0	0	0	0	- 0	- 0	0
3 MICHAEL LINNINGTON CHIEF EXCEUTIVE OFFICER(THRU 03/24)	(i)	143,542	215,103	0	10,450	6,298	375,393	0
	(ii)	0	0	0	0	- 0	- 0	0
4 CHRISTOPHER TONER CHIEF OF STAFF (THRU 01/25)	(i)	280,501	55,894	0	9,459	29,021	374,875	0
	(ii)	0	0	0	0	- 0	- 0	0
5 CHRISTOPHER NEEDLES CHIEF DEVELOPMENT OFFICER	(i)	276,602	55,003	0	9,731	27,985	369,321	0
	(ii)	0	0	0	0	- 0	- 0	0
6 VILMA CONSUEGRA CHIEF MKTG & COMMS OFFICER	(i)	274,944	54,003	0	8,437	29,021	366,405	0
	(ii)	0	0	0	0	- 0	- 0	0
7 JOHN T HAMRE III VP RESOURCE DEVEL. (THRU 02/25)	(i)	268,062	45,395	0	9,860	27,157	350,474	0
	(ii)	0	0	0	0	- 0	- 0	0
8 JOSE RAMOS VP GOVT & CMTY RELATIONS	(i)	248,653	49,683	0	7,261	29,021	334,618	0
	(ii)	0	0	0	0	- 0	- 0	0
9 ERIC S MILLER - FORMER CHIEF FINANCIAL OFFICER (THRU 06/24)	(i)	156,824	0	151,905	6,244	14,451	329,424	0
	(ii)	0	0	0	0	- 0	- 0	0
10 CRAIG CARROLL CHIEF FINANCIAL OFFICER(AS OF 09/24)	(i)	237,984	43,503	0	9,506	29,012	320,005	0
	(ii)	0	0	0	0	- 0	- 0	0
11 BREA KRATZERT VP RESOURCE DEVEL.: BUSINESS DEVEL.	(i)	233,040	46,542	0	8,592	27,284	315,458	0
	(ii)	0	0	0	0	- 0	- 0	0
12 MELANIE MOUSSEAU VP STRATEGY, INNOVATION & PMO	(i)	228,039	45,544	0	9,109	29,008	311,700	0
	(ii)	0	0	0	0	- 0	- 0	0
13 ANGELA STROHL VP HUMAN RESOURCES	(i)	228,210	45,544	0	8,758	29,008	311,520	0
	(ii)	0	0	0	0	- 0	- 0	0
14 SCOTT COSTER - FORMER CHIEF INFORMATION OFFICER (THRU 08/24)	(i)	181,132	0	0	7,209	17,800	206,141	0
	(ii)	0	0	0	0	- 0	- 0	0
15 CHRIS STUART CHIEF INFORMATION OFF (AS OF 11/24)	(i)	138,965	34,981	0	6,537	17,346	197,829	0
	(ii)	0	0	0	0	- 0	- 0	0
16 ADAM VANEK - FORMER VP GEN. COUNSEL/CORP SEC.(THRU 05/24)	(i)	111,553	0	32,335	4,343	12,277	160,508	0
	(ii)	0	0	0	0	- 0	- 0	0

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 4A	FORMER CHIEF FINANCIAL OFFICER, ERIC S MILLER, RECEIVED A SEVERANCE PAYMENT OF $151,905 AND FORMER VP GENERAL COUNSEL, ADAM VANEK, RECEIVED A SEVERANCE PAYMENT OF $32,335 IN CALENDAR YEAR 2024. THIS AMOUNT IS REPORTED IN SCHEDULE J, PART II, COLUMN B(III)
PART I, LINE 7	NON-FIXED PAYMENTS DISCRETIONARY BONUSES ARE REPORTED ON SCHEDULE J, PART II, COLUMN B(II). DISCRETIONARY BONUSES FOR OFFICERS AND HIGHLY COMPENSATED EMPLOYEES ARE BASED ON OBJECTIVE, INDIVIDUAL PERFORMANCE CRITERIA AND JOB COMPETENCIES. THE CEO'S BONUS IS DETERMINED BY THE BOARD OF DIRECTORS, AND ALL OTHER OFFICER AND HIGHLY COMPENSATED EMPLOYEE BONUSES ARE DETERMINED BY THE CEO. COMPARABILITY DATA IS USED IN DETERMINING APPROPRIATE AND REASONABLE BONUS RANGES FOR DISQUALIFIED PERSONS. WWP DOCUMENTS THE BASIS FOR ITS BONUS DETERMINATION IN MEETING MINUTES OR OTHER INTERNAL DOCUMENTS, WHICH ARE PREPARED AT THE TIME BONUSES ARE APPROVED, AND REFLECT THE UNDERLYING PARTICULAR BONUS DETERMINATIONS.
SCHEDULE J, PART II:	MIKE LINNINGTON LEFT THE ORGANIZATION ON 3/22/2024. THE BONUS REFLECTED IN SCHEDULE J, PART II, COLUMN (B)(II) REFLECTS COMPENSATION IN CALENDAR YEAR 2024 THAT INCLUDES THE INCENTIVE COMPENSATION HE EARNED IN FY23, FY24, AS WELL AS A RETENTION BONUS.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**
▶ **Go to *www.irs.gov/Form990* for the latest information.**

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization
WOUNDED WARRIOR PROJECT INC

Employer identification number
20-2370934

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles	X	2,758	3,693,015	FMV
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	398	3,602,325	FMV
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (SUPPLIES)	X	87	188,246	FMV
26 Other ▶ (EVENT TICKETS)	X	1,969	168,094	FMV
27 Other ▶ (CRYPTO CURRENCY)	X	1	28,071	FMV
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement | 29 | 0

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes," describe the arrangement in Part II.			
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	Yes	
b If "Yes," describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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

Return Reference	Explanation
PART I, LINE 32B:	USE OF THIRD PARTY TO SELL NONCASH CONTRIBUTIONS TO THE EXTENT THAT WWP RECEIVES CONTRIBUTIONS OF NONCASH ITEMS, SUCH AS STOCKS OR DONATED VEHICLES, IT TASKS A THIRD-PARTY AGENT OR INVESTMENT BROKER TO CONVERT THOSE NON-CASH ITEMS INTO CASH FOR USE IN FULFILLING THE ORGANIZATION'S MISSION.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE O
(Form 990)
(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or 990-EZ.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
WOUNDED WARRIOR PROJECT INC

Employer identification number
20-2370934

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	FORM 990 REVIEW PROCESS THE FORM 990 IS PREPARED BY A NATIONALLY RECOGNIZED ACCOUNTING FIRM IN CONJUNCTION WITH WWP'S MANAGEMENT. ALL INFORMATION REPORTED ON THE FORM 990 WAS PROVIDED BY MANAGEMENT AND REVIEWED BY THE ACCOUNTING FIRM. THE FORM 990 IS PRESENTED TO THE AUDIT AND RISK OVERSIGHT COMMITTEE WHO REVIEWS, APPROVES AND RECOMMENDS TO THE FULL BOARD THAT IT BE APPROVED FOR FILING. FOLLOWING FULL BOARD APPROVAL, THE FORM 990 IS ELECTRONICALLY FILED WITH THE INTERNAL REVENUE SERVICE.
FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST POLICY MONITORING AND ENFORCEMENT WWP ADHERES TO A CONFLICT OF INTEREST AND RELATED PARTY TRANSACTION POLICIES ("POLICY") DESIGNED TO FOSTER PUBLIC CONFIDENCE IN THE INTEGRITY OF WWP AND TO PROTECT WWP'S INTERESTS WHEN IT IS CONTEMPLATING ENTERING INTO A TRANSACTION OR ARRANGEMENT THAT MIGHT BENEFIT THE PRIVATE INTERESTS OF A DIRECTOR, OFFICER, EXECUTIVE OR EMPLOYEE. AMONG OTHER THINGS, THE POLICIES REQUIRE DIRECTORS, OFFICERS, EXECUTIVES, AND EMPLOYEES TO DISCLOSE ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST. EACH NEW DIRECTOR, OFFICER, EXECUTIVE, AND EMPLOYEE WHO JOINS WWP COMPLETES A GOVERNANCE/CONFLICT OF INTEREST INTAKE FORM. NEW EMPLOYEES RECEIVE A COPY OF THE POLICY AND SIGN A STATEMENT AFFIRMING SUCH PERSON HAS RECEIVED A COPY OF THE POLICY, HAS READ AND UNDERSTANDS THE POLICY, AND HAS AGREED TO COMPLY WITH IT. ON AN ANNUAL BASIS, EACH DIRECTOR, OFFICER, EXECUTIVE, AND EMPLOYEE COMPLETES A CONFLICT OF INTEREST DISCLOSURE FORM AND ACKNOWLEDGES THE POLICY. COMPLETED ANNUAL FORMS ARE REVIEWED IN ACCORDANCE WITH THE PROCEDURES SET FORTH IN THE POLICY. ADDITIONALLY, ON AN ANNUAL BASIS, EACH CURRENT DIRECTOR COMPLETES A QUESTIONNAIRE TO DETERMINE "INDEPENDENCE" FOR PURPOSES OF FORM 990, PART VI, LINE 1(B). THE AUDIT AND RISK OVERSIGHT COMMITTEE, IN CONSULTATION WITH THE GENERAL COUNSEL, REGULARLY AND CONSISTENTLY MONITORS AND OVERSEES COMPLIANCE WITH THE POLICY INCLUDING BY REVIEWING THE CONFLICT OF INTEREST POLICY AND ANY DISCLOSURES IN CONSULTATION WITH THE GENERAL COUNSEL.
FORM 990, PART VI, SECTION B, LINE 15	PROCESS FOR DETERMINING COMPENSATION COMPENSATION FOR THE ORGANIZATION'S CEO IS DETERMINED BY THE BOARD OF DIRECTORS. COMPENSATION FOR ALL OTHER OFFICERS, EXECUTIVES, AND EMPLOYEES IS DETERMINED BY THE CEO IN COORDINATION WITH THE HUMAN RESOURCE DEPARTMENT AND AN INDEPENDENT COMPENSATION CONSULTING FIRM. COMPARABILITY DATA IS USED IN DETERMINING SALARIES FOR THE CEO, OFFICERS, EXECUTIVES AND EMPLOYEES. COMPENSATION REVIEW AND DETERMINATION IS DONE ON A CONSISTENT AND RECURRING BASIS AND MORE FREQUENTLY, IF NEEDED BASED ON MARKET CONDITIONS. THE ORGANIZATION DOCUMENTS THE BASIS FOR ITS COMPENSATION DETERMINATION IN MEETING MINUTES OR OTHER INTERNAL DOCUMENTS, WHICH ARE PREPARED AT THE TIME COMPENSATION IS APPROVED, AND REFLECT THE REASONS UNDERLYING PARTICULAR COMPENSATION DETERMINATIONS.
FORM 990, PART VI, SECTION C, LINE 19	HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC FORM 990 AND AUDITED CONSOLIDATED FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC VIA THE ORGANIZATION'S WEBSITE AT WWW.WOUNDEDWARRIORPROJECT.ORG. WWP'S FORM 1023 AND 990-T ARE AVAILABLE UPON REQUEST. OTHER DOCUMENTS ARE AVAILABLE UPON REQUEST AT MANAGEMENT'S DISCRETION FROM THE CORPORATE HEADQUARTERS AT 4899 BELFORT ROAD, SUITE 300, JACKSONVILLE, FL 32256.
FORM 990, PART IX STATEMENT OF FUNCTIONAL EXPENSES, LINE 12	ADVERTISING AND PROMOTION ADVERTISING AND PROMOTION EXPENSE PRIMARILY CONSISTS OF THE COSTS FOR WWP TO PRODUCE AND PLACE MEDIA ADVERTISEMENTS THAT HELP IMPROVE THE AMERICAN PUBLIC'S AWARENESS AND UNDERSTANDING OF THE NEEDS OF WOUNDED WARRIORS AND THEIR FAMILY MEMBERS, WHILE ALSO MAKING WARRIORS AND THEIR FAMILIES AWARE OF THE FREE PROGRAMS AND SERVICES AVAILABLE TO THEM THROUGH THE ORGANIZATION.
FORM 990, PART IX	FUNCTIONAL EXPENSE ALLOCATION THE COSTS OF PROVIDING PROGRAM SERVICES AND SUPPORTING SERVICES HAVE BEEN SUMMARIZED ON A FUNCTIONAL BASIS, SEE PART IX STATEMENT OF FUNCTIONAL EXPENSES. WWP INCURS EXPENSES THAT DIRECTLY RELATE TO, AND CAN BE ASSIGNED TO, A SPECIFIC PROGRAM OR SUPPORTING SERVICES. WWP ALSO CONDUCTS A NUMBER OF ACTIVITIES WHICH BENEFIT BOTH ITS PROGRAM OBJECTIVES AS WELL AS SUPPORTING SERVICES (I.E., FUNDRAISING AND MANAGEMENT AND GENERAL SERVICES). THESE COSTS, WHICH ARE NOT SPECIFICALLY ATTRIBUTABLE TO A SPECIFIC PROGRAM OR SUPPORTING SERVICES, ARE ALLOCATED BY MANAGEMENT ON A CONSISTENT BASIS AMONG PROGRAM AND SUPPORTING SERVICES BENEFITED, BASED ON EITHER FINANCIAL OR NONFINANCIAL DATA, SUCH AS HEADCOUNT OR ESTIMATES OF TIME AND EFFORT INCURRED BY PERSONNEL.
FORM 990, PART IX, LINE 24A	PROGRAM/OTHER PROVIDER SERVICES THIS AMOUNT PRIMARILY CONSISTS OF THE COSTS OF THIRD PARTY PROVIDERS THAT DELIVER DIRECT SERVICES AT NO COST TO WARRIORS, THEIR CAREGIVERS AND FAMILY MEMBERS, WITHIN WWP PROGRAM EVENTS AND ACTIVITIES. EXAMPLES OF THESE SERVICES INCLUDE CASE MANAGEMENT, LIFE SKILLS TRAINING, HOMECARE AND SUPPORT WITHIN THE INDEPENDENCE PROGRAM, AND LICENSED MENTAL HEALTH COUNSELING WITHIN WWP'S MENTAL HEALTH WELLNESS PROGRAMS. THIS AMOUNT ALSO INCLUDES THIRD PARTY PROVIDERS THAT SUPPORT DONATION PLATFORMS WITHIN FUNDRAISING.
FORM 990, PART IX, LINE 24B AND LINE 24C	DIRECT RESPONSE MAIL, TV & ONLINE THESE AMOUNTS PRIMARILY CONSISTS OF THE COSTS RELATED TO CONTENT DEVELOPMENT, THE COSTS RELATED TO THE PRODUCTION AND BROADCAST OF TELEVISION SPOTS, DEVELOPMENT AND DISTRIBUTION OF ONLINE CAMPAIGNS, AND THE COST OF THE MAILING OF CAMPAIGNS. FORM 990, PART IX, LINE 24D WARRIOR EVENTS THIS AMOUNT CONSISTS OF THE COSTS RELATED TO WWP'S PROGRAM EVENTS AND ACTIVITIES THAT ARE DELIVERED AT NO COST TO WARRIORS, THEIR CAREGIVERS, AND FAMILY MEMBERS. EXAMPLES OF THESE EVENTS AND ACTIVITIES ARE OUTLINED IN GREATER DETAIL WITHIN THE INDIVIDUAL PROGRAM DESCRIPTIONS FOUND IN PART III

Return Reference	Explanation
	AND SCHEDULE O. INCLUDED IN THIS AMOUNT ARE EXPENSES FOR TRAVEL, HOTEL, MEALS, MATERIALS, AND OTHER RELATED ACTIVITY COSTS FOR EVENT PARTICIPANTS.
FORM 990, PART IX, JOINT COSTS	IN ACCORDANCE WITH ASC 958, NOT-FOR-PROFIT ENTITIES, WWP ALLOCATES JOINT ADVERTISING COSTS THAT MEET THE CRITERIA FOR PURPOSE, AUDIENCE AND CONTENT BETWEEN FUNDRAISING EXPENSES AND PROGRAM EXPENSES. ACCORDINGLY, WWP ALLOCATES JOINT COSTS THAT BENEFIT PROGRAM SERVICES AND INCLUDE A FUNDRAISING APPEAL. THE PROGRAMMATIC COMPONENT OF THESE ACTIVITIES INCLUDES THE EDUCATION AND RECRUITMENT OF WOUNDED VETERANS AND SERVICE MEMBERS THAT HAVE NOT YET ENGAGED WITH WWP, A CALL TO ACTION TO ENLIST THE PUBLICS AID IN IDENTIFYING WOUNDED VETERANS AND SERVICE MEMBERS THAT WOULD BENEFIT FROM WWP'S FREE PROGRAMS AND SERVICES, AND AN OPPORTUNITY TO THANK WOUNDED WARRIORS FOR THEIR SACRIFICES IN SERVING OUR COUNTRY. THESE JOINT COSTS ARE INCURRED THROUGH DIRECT RESPONSE TELEVISION AND CERTAIN DIRECT MAIL CAMPAIGNS. THE COST OF CONDUCTING THESE ACTIVITIES INCLUDED A TOTAL OF $52,591,482 OF JOINT COSTS FOR THE YEAR ENDED SEPTEMBER 30, 2025. OF THESE COSTS, $33,168,598 WAS ALLOCATED TO PROGRAM EXPENSES AND $19,422,884 WAS ALLOCATED TO FUNDRAISING EXPENSES.
FORM 990, PART X, INVESTMENTS	THE ORGANIZATION HAS AN INVESTMENT MANAGEMENT AND OVERSIGHT POLICY AUTHORIZED BY THE BOARD OF DIRECTORS THAT PROVIDES GOVERNANCE AND GUIDANCE ON THE MANAGEMENT OF CASH AND CASH EQUIVALENTS AND INVESTMENTS. THE POLICY PROVIDES THAT THE ORGANIZATION MAINTAIN AN ADEQUATE LEVEL OF CASH TO MEET ITS ON-GOING OPERATIONAL REQUIREMENTS. IN ADDITION, THE POLICY SETS FORTH THE STRUCTURE FOR INVESTMENT OF EXCESS CASH BASED ON THE FINANCIAL NEEDS OF THE ORGANIZATION, THE TIME HORIZON OF THOSE NEEDS AND THE BOARD OF DIRECTORS' INVESTMENT PHILOSOPHY. DURING THE FISCAL YEAR, THE INVESTMENT POLICY WAS AMENDED TO ALIGN FUND BALANCES WITH EACH FUND'S INTENDED PURPOSE, WHICH RESULTED IN A REBALANCING AND TRANSFER BETWEEN FUNDS. THE BOARD OF DIRECTORS HAS DESIGNATED A RISK RESERVE FUND TO ENSURE THE LONG-TERM SUSTAINABILITY OF THE MISSION, PROGRAMS, AND ONGOING OPERATIONS OF THE ORGANIZATION. THE RISK RESERVE FUND SERVES AS AN INTERNAL RESOURCE THAT ENABLES THE ORGANIZATION TO RESPOND TO VARYING CONDITIONS AND EVENTS THAT NEGATIVELY IMPACT ITS FINANCIAL POSITION, SUCH AS A SUDDEN AND SIGNIFICANT DECREASE IN DONOR CONTRIBUTIONS, A SUDDEN AND SIGNIFICANT INCREASE IN EXPENSES, OR A SIGNIFICANT UNINSURED/UNDERINSURED LOSS. BOARD OF DIRECTORS APPROVAL IS REQUIRED FOR ANY REQUESTED USE OF THE RISK RESERVE FUND. THE RISK RESERVE FUND MINIMUM AND MAXIMUM BALANCE IS ESTABLISHED IN ACCORDANCE WITH THE WWP RISK RESERVE POLICY. NO FUNDS WERE DISTRIBUTED FROM THE RISK RESERVE FUND DURING THE FISCAL YEAR ENDED SEPTEMBER 30, 2025. AS A RESULT OF THE INVESTMENT POLICY AMENDMENT TO ALIGN FUND BALANCES EACH FUND'S INTENDED PURPOSE, $33,000,000 WAS TRANSFERRED FROM THE RISK RESERVE FUND TO THE STRATEGIC FUND. THE BOARD OF DIRECTORS HAS DESIGNATED A STRATEGIC FUND FOR INVESTMENT IN STRATEGIC INITIATIVES AND INNOVATION THAT ENABLE AND SUPPORT WWP'S MISSION. USES OF THE STRATEGIC FUND INCLUDE RESEARCH AND DEVELOPMENT, PILOT PROGRAMS, THIRD-PARTY GRANTS, AND CAPACITY EXPANSION, TECHNOLOGY, AND INFRASTRUCTURE INVESTMENTS. TO ENSURE FUTURE SUSTAINABILITY OF THE ORGANIZATION, MANAGEMENT IS ASSESSING THE PURCHASE OF REAL ESTATE FOR PROGRAM LOCATIONS. BOARD OF DIRECTORS APPROVAL IS REQUIRED FOR ANY REQUESTED USE OF THE STRATEGIC FUND. THE STRATEGIC FUND MINIMUM BALANCE IS ESTABLISHED IN ACCORDANCE WITH THE WWP STRATEGIC FUND POLICY. $11,000,000 WAS DISTRIBUTED FROM THE STRATEGIC FUND DURING THE FISCAL YEAR ENDED SEPTEMBER 30, 2025. AS A RESULT OF THE INVESTMENT POLICY AMENDMENT TO ALIGN FUND BALANCES WITH EACH FUND'S INTENDED PURPOSE, APPROXIMATELY $92,000,000 WAS TRANSFERRED TO THE STRATEGIC FUND, $33,000,000 FROM THE RISK RESERVE FUND AND $59,000,000 FROM OPERATING/ UNDESIGNATED FUNDS. WITHIN THE TRANSFER FROM OPERATING FUNDS TO STRATEGIC FUND ARE $10.6M OF MEGA GIFTS. MEGA GIFTS ARE DEFINED BY WWP AS A GIFT THAT WILL EXCEED $5M FROM A SINGLE DONOR, WHETHER TO BE RECEIVED IN ONE OR MORE DISTRIBUTIONS IN A SINGLE YEAR OR IN MULTIPLE DISTRIBUTIONS SPANNING YEARS, BASED ON INFORMATION PROVIDED BY THE DONOR AND/OR TRUSTEE/EXECUTOR. WWP'S INTERNAL POLICY IS TO TRANSFER ALL UNRESTRICTED MEGA GIFT GIFTS TO THE STRATEGIC FUND AND MAY ONLY BE USED WITH BOARD APPROVAL. SINCE THE BOARD OF DIRECTORS FIRST APPROVED USE OF THIS FUND IN JUNE 2016, THROUGH SEPTEMBER 30, 2025, WWP HAS DISBURSED APPROXIMATELY $84,000,000 FOR STRATEGIC INITIATIVES IN SUPPORT OF ITS MISSION, INCLUDING BRAIN HEALTH, SUICIDE PREVENTION, SUBSTANCE USE DISORDER, AND WOMEN VETERANS INITIATIVE, THE LONG-TERM SUPPORT TRUST, COMMUNITY PARTNERSHIP GRANTS, AND RAISING PUBLIC AWARENESS ON THE CHALLENGES OF THE POST 9/11 WOUNDED, ILL AND INJURED WARRIORS THAT WWP SERVES.
FORM 990, PART X, LINE 3	PLEDGES AND GRANTS RECEIVABLE, NET: ACCOUNTS RECEIVABLE INCLUDES RECEIVABLES FROM BEQUESTS AND TRUSTS. A CHARITABLE BEQUEST IS A WRITTEN STATEMENT DIRECTING THAT GIFT BE MADE TO A CHARITY UPON THE DEATH OF THE DONOR. BEQUEST REVENUES ARE CONSIDERED UNCONDITIONAL PROMISES TO GIVE WHEN THE BEQUEST HAS GONE THROUGH PROBATE AND WWP'S INTEREST IS REASONABLY ESTIMATED. BEQUEST REVENUES ARE RECORDED AT FAIR MARKET VALUE WHEN AVAILABILITY OF THE GIFTED ASSET IS SUBSTANTIALLY ASCERTAINED. SUBSEQUENT ADJUSTMENTS TO BEQUEST REVENUE ESTIMATES ARE RECORDED AS ADJUSTMENTS TO CONTRIBUTIONS REVENUE, AND THE CORRESPONDING CONTRIBUTION RECEIVABLE, IN THE PERIOD THEY BECOME KNOWN. AMOUNTS ARE CONSIDERED TO BE AVAILABLE FOR UNRESTRICTED USE, UNLESS SPECIFICALLY RESTRICTED BY THE DONOR. AMOUNTS RECEIVED THAT ARE DESIGNATED FOR FUTURE PERIODS, OR ARE RESTRICTED BY THE DONOR FOR SPECIFIC PURPOSES ARE REPORTED IN THE STATEMENT OF ACTIVITIES AS CONTRIBUTIONS WITH DONOR RESTRICTIONS. ADDITIONALLY, WHEN WWP IS A BENEFICIARY OF A REVOCABLE TRUST, CONTRIBUTION REVENUE IS NOT RECOGNIZED UNTIL THE TRUST BECOMES IRREVOCABLE, TYPICALLY UPON THE DEATH OF THE DONOR, AND WWP'S INTERESTS IN THE TRUST IS REASONABLY ESTIMATED AND ASSURED TO BE RECEIVED.
FORM 990, PART XI, LINE 9:	LONG TERM SUPPORT TRUST ACCOUNT PAYABLE AND ACCRUED EXPENSES 13,470. GRANT REFUNDS 58,062. REVERSAL OF PY ACCRUALS 510,012. EXPENSE REIMBURSEMENT AND RECLASS TO MISC INCOME 870,807.

Additional Data

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Software ID:

Software Version:

SCHEDULE R (Form 990)
(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
WOUNDED WARRIOR PROJECT INC

Employer identification number
20-2370934

Part I **Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1) WWP LONG TERM SUPPORT TRUST 100 SOUTH WEST STREET WILMINGTON, DE 19801 37-6558533	TRUST	DE	501(C)(3)	LINE 12A, I	WWP	Yes	

Part III **Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) CHARITABLE LEAD ANNUITY TRUST (1)	INVESTMENT	FL	WWP						No

Part V **Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	**1a**		No
b Gift, grant, or capital contribution to related organization(s)	**1b**		No
c Gift, grant, or capital contribution from related organization(s)	**1c**		No
d Loans or loan guarantees to or for related organization(s)	**1d**		No
e Loans or loan guarantees by related organization(s)	**1e**		No
f Dividends from related organization(s)	**1f**		No
g Sale of assets to related organization(s)	**1g**		No
h Purchase of assets from related organization(s)	**1h**		No
i Exchange of assets with related organization(s)	**1i**		No
j Lease of facilities, equipment, or other assets to related organization(s)	**1j**		No
k Lease of facilities, equipment, or other assets from related organization(s)	**1k**		No
l Performance of services or membership or fundraising solicitations for related organization(s)	**1l**	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	**1m**	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	**1n**	Yes	
o Sharing of paid employees with related organization(s)	**1o**	Yes	
p Reimbursement paid to related organization(s) for expenses	**1p**		No
q Reimbursement paid by related organization(s) for expenses	**1q**		No
r Other transfer of cash or property to related organization(s)	**1r**		No
s Other transfer of cash or property from related organization(s)	**1s**		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved

Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version: