



IMPACT REPORT

FISCAL
YEAR **2023**

WOUNDED WARRIOR
TIM APONTE



20 YEARS OF MAKING AN IMPACT

Over the last two decades, Wounded Warrior Project® (WWP) has been honored to serve more than 240,000 post-9/11 veterans and family members. Our direct programs provide connection, mental health and wellness treatment, physical health services, financial wellness assistance, and long-term support for the critically wounded.

More than

\$2 Billion

of life-changing services has been provided by WWP at no cost to any warrior or their families.

99,445

mental health programs and services provided to warriors and their families

Issues like anxiety, depression, and post-traumatic stress disorder can have long-lasting effects when left untreated. WWP has three mental and brain health programs designed to address the invisible wounds of military service.

9 Million+

donors and supporters

From our grassroots beginnings — bringing comfort to the hospital bedsides of warriors — generous supporters have enabled us to expand our mission to include support for physical injuries, innovative therapies that improve mental health, assistance accessing VA benefits, and much more.

133,959

warriors and family members served via physical health and wellness programs

WWP provides nutritional education, physical activity, coaching, and goal setting to help warriors live healthier lives and improve their overall well-being.

93,957

WWP Peer Support Group participants

It can be hard for veterans to find the kinds of bonds they shared in the service. Our nationwide, veteran-led peer support groups offer a way to rediscover that sense of camaraderie. WWP's veteran-led peer support groups are available nationwide and offer a way to regain that lost sense of camaraderie.

Data on this page collected from program inception through September 30, 2023.



2023 FISCAL YEAR IMPACT

WWP recognizes that warriors' needs change and evolve with each individual's journey. Our commitment to building connections and communities that serve warriors is long term and never-ending.

That is why we remain focused on fostering social support and connection among warriors and their families, breaking down barriers to mental health, empowering warriors to make changes toward a healthier life, helping them build a strong financial foundation, providing long-term rehabilitative care for the most severely injured, and advocating for policies that advance the WWP vision: to foster the most successful, well-adjusted generation of wounded service members in our nation's history. We are sharing the statistics in this document to illustrate the impact that our generous donors made in the lives of warriors, their families, and caregivers in the 2023 fiscal year.



WWP HAS SERVED
MORE THAN

240,000

WARRIORS, FAMILY MEMBERS,
AND CAREGIVERS SINCE 2003



WOUNDED WARRIORS
PAY

\$0

FOR OUR PROGRAMS
AND SERVICES



IN THE 2023 FISCAL YEAR,
WE INVESTED MORE THAN

\$260M

IN LIFE-CHANGING PROGRAMS AND
SERVICES FOR WARRIORS, FAMILY
MEMBERS, AND CAREGIVERS

The information and statistics in this report represent program activity and impact results during the 2023 fiscal year (Oct. 1, 2022 - Sept. 30, 2023) and from the 2022 Annual Warrior Survey.

WHO WE ARE

Since 2003, WWP has been committed to helping injured veterans achieve their highest ambitions. Today, our dedication and ability to serve wounded warriors and their families are stronger than ever before.

The journey does not end for our nation's bravest the day their uniforms come off for the last time. Approximately 1.6 million post-9/11 veterans have reported a service-connected injury, meaning the population of warriors eligible for our programs and services is vast and varied.

Through our direct programs and services, advocacy efforts, and collaboration with best-in-practice veteran and military organizations, WWP changes — and saves — the lives of millions of injured veterans and their families — all at no cost to them.

★ ★ ★

MISSION

To honor and empower wounded warriors.

VISION

To foster the most successful, well-adjusted generation of wounded service members in our nation's history.



WOUNDED WARRIOR
CHRIS GORDON

HOW WE SERVE

We fulfill our mission in three distinct ways:

PROVIDE direct programs and services to warriors and their families.

ADVOCATE for injured service members and their families in Washington, DC.

COLLABORATE with other military and veteran support organizations to amplify our efforts.

DIRECT PROGRAMS

Thanks to our generous supporters, WWP was able to make an impact in the lives of warriors and their families in the 2023 fiscal year through the following programs. Read more about the impact in the following pages.



CONNECTION



MENTAL HEALTH



PHYSICAL HEALTH & WELLNESS



FINANCIAL WELLNESS



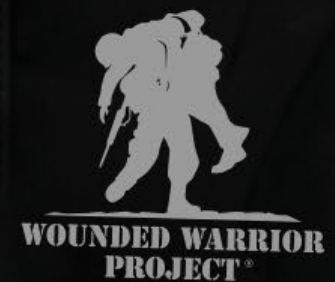
INDEPENDENCE PROGRAM



GOVERNMENT & COMMUNITY RELATIONS



COMMUNITY PARTNERSHIPS & INVESTMENTS



CONNECTION

Through the alumni connection program, WWP 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.

THE NEED:

78%

of warriors report that they often feel isolated

OUR IMPACT:

4,400+

virtual and in-person events

96%

said they feel socially connected to their peers after participating in WWP Connection events

“ I didn’t have somebody to guide me or give me good advice — somebody to say, ‘Hey, I got you.’ I want to be that person for others, so they know they’re not alone. ”

— WOUNDED WARRIOR
TIM APONTE (RIGHT)



MENTAL HEALTH

WWP knows that many wounds are invisible and can arise years after service. We help warriors, their families, and caregivers improve mental and emotional wellness, which enhances their quality of life, increases resilience, and puts them in a position to thrive.

THE NEED:

76%

of warriors report experiencing PTSD as a result of their service

OUR IMPACT:

70%

of warriors experienced fewer PTSD symptoms after receiving treatment through Warrior Care Network®

66,300+

hours of treatment provided for PTSD, traumatic brain injury, substance use disorder, and military sexual trauma

“ I learned more tools to cope with PTSD in two weeks at Warrior Care Network than I had in 10 years of therapy. Also, by including family members, they feel like they are part of the solution, not just watching from the sidelines. ”

— WOUNDED WARRIOR
BILL GEIGER



PHYSICAL HEALTH & WELLNESS

WWP empowers warriors to adopt healthier lifestyles by providing nutritional education and coaching and helping them along their path to fitness with group physical activities, adaptive sports, goal setting, and skill building.

THE NEED:

76%

of warriors report moderate or severe pain

80%

of warriors self-reported sleep problems

OUR IMPACT:

45%

experienced a reduction in pain

51%

experienced an improvement in quality of sleep

“ I realized I don't have to lose an activity just because I don't do it the same as everyone else; I am bettering myself physically, emotionally, and spiritually. Wounded Warrior Project gave me a community of people who understand the struggle is real. ”

— WOUNDED WARRIOR
BETH KING



FINANCIAL WELLNESS

WWP supports warriors and their families in building a foundation of financial wellness through employment readiness and placement, education and receipt of earned benefits, emergency financial assistance, improved financial management skills, and care for their overall mental well-being.

THE NEED:

64%

indicate not having enough money to make ends meet at some point in last 12 months

OUR IMPACT:

63,800+

career coaching services provided, resulting in 1,500+ warriors and family members achieving employment

\$175.7M

in VA benefits were secured for warriors and their families

“ Wounded Warrior Project has given me the sense of belonging and purpose I was missing after leaving the military. ”

— WOUNDED WARRIOR
MELVIN GATEWOOD



INDEPENDENCE PROGRAM

Through its Independence Program, WWP provides long-term support for warriors with moderate-to-severe traumatic brain injuries, spinal cord injuries, and neurological conditions — injuries that often leave these warriors needing help from caregivers daily.

THE NEED:

31%

of warriors need aid and assistance from another person due to service-connected injuries or health problems and need an average of 55 hours of care per week

OUR IMPACT:

241,800+

hours of in-home and local care provided to the most catastrophically injured warriors, helping them live more independent lives for as long as possible

“ Wounded Warrior Project helped me find myself. Like the ‘Me’ I was before Iraq, when everything was about music. I can’t say enough positive things about that. ”

— WOUNDED WARRIOR
ANGIE LUPE



GOVERNMENT & COMMUNITY RELATIONS

Using warriors' feedback and insights, we advocate for veteran policies and initiatives that improve the lives of millions of veterans, family members, and caregivers.

“I've always believed that in order to overcome barriers for women veterans, especially related to access to care and gender-specific care, you need to have the right policy and the right people in place,” said WWP warrior Merci McKinley, who served in the U.S. Army and now lives in Maryland.

Last September, more than 50 WWP women warriors participated in the 2023 Women Warriors Summit in Washington, DC. These warriors connected with fellow veterans and met with key government leaders to advocate for legislation to improve the lives of our nation's female veterans.

The cornerstone of the summit was the release of the 2023 Women Warriors Report, a biennial study to help policymakers better support female warriors and address the unique challenges and gaps in care that they face, especially when it comes to accessing health care, achieving financial wellness, and adjusting to civilian life.

The summit also featured presentations by Department of Veteran Affairs staff on critical programs, meetings with members of Congress and their staffs, a roundtable discussion with the Congressional Women Veterans Task Force, and discussions with White House staff on veterans issues.



WWP WOMEN WARRIORS JOIN TOGETHER TO ADVOCATE
AT THE 2023 WOMEN WARRIORS SUMMIT IN DC

COMMUNITY PARTNERSHIPS & INVESTMENTS

WWP invests in best-in-class organizations to complement its programs and services and build a collaborative support network. This work is vital to building robust and resilient veteran families and communities.

In 2023, WWP and the Community Partnerships & Investment team reinforced our programmatic efforts and expanded our impact by investing in 39 like-minded military and veteran support organizations. We believe no single organization can meet the needs of all injured veterans alone. By collaborating with other military and veteran support organizations, we augment critical WWP services and reinforce our existing efforts in communities that need them most.

COMMUNITY PARTNERSHIPS AND
INVESTMENTS PARTNER CONVENING



WOUNDED WARRIOR PROJECT, INC.

Form 990 for the
Year Ended September 30, 2023

Public Disclosure Copy

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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.

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the **2022** calendar year, or tax year beginning **OCT 1, 2022** and ending **SEP 30, 2023**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization WOUNDED WARRIOR PROJECT, INC.		D Employer identification number 20-2370934
	Doing business as WOUNDED WARRIOR PROJECT		E Telephone number (904) 296-7350
	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		G Gross receipts \$ 417,949,754.	
F Name and address of principal officer: WALTER E. PIATT SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
J Website: WWW.WOUNDEDWARRIORPROJECT.ORG		If "No," attach a list. See instructions	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 2005	M State of legal domicile: VA
H(c) Group exemption number			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE MISSION OF WOUNDED WARRIOR PROJECT (WWP) IS TO HONOR AND EMPOWER WOUNDED WARRIORS.		
	2 Check this box <input type="checkbox"/> 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 2022 (Part V, line 2a)	5	1037
	6 Total number of volunteers (estimate if necessary)	6	1405
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	72,420.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	48,438.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	388,364,321.	332,632,463.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10,202,810.	12,492,142.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,588,960.	3,540,649.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	402,156,091.	348,665,254.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	51,380,736.	53,769,927.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	90,629,817.	107,116,991.
	b Total fundraising expenses (Part IX, column (D), line 25)	8,904,728.	8,994,531.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	88,403,489.	
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	193,211,008.	199,615,002.
19 Revenue less expenses. Subtract line 18 from line 12	344,126,289.	369,496,451.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	58,029,802.	-20,831,197.
	21 Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	22 Net assets or fund balances. Subtract line 21 from line 20	449,653,755.	448,172,517.
		67,129,163.	58,587,282.
		382,524,592.	389,585,235.

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		
	ERIC MILLER, CFO				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	SCOTT THOMPSETT				P00741490
Preparer Use Only	Firm's name	Firm's EIN		Phone no.	
	GRANT THORNTON LLP	36-6055558		631-577-1867	
	Firm's address				
	445 BROADHOLLOW ROAD				
	MELVILLE, NY 11747				

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. WOUNDED WARRIOR PROJECT, INC.	Taxpayer identification number (TIN) 20-2370934
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 4899 BELFORT ROAD, 300	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. JACKSONVILLE, FL 32256	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

ERIC MILLER

- The books are in the care of ▶ 4899 BELFORT ROAD, SUITE 300 - JACKSONVILLE, FL 32256

Telephone No. ▶ 904-296-7350

Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until AUGUST 15, 2024, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year _____ or
- ▶ tax year beginning OCT 1, 2022, and ending SEP 30, 2023.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: THE MISSION OF WWP IS TO HONOR AND EMPOWER WOUNDED WARRIORS. WWP SERVES VETERANS AND SERVICE MEMBERS WHO INCURRED A PHYSICAL OR MENTAL INJURY, ILLNESS, OR WOUND, CO-INCIDENT TO THEIR MILITARY SERVICE ON OR AFTER SEPT 11, 2001.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 93,451,706. including grants of \$ 34,007,754.) (Revenue \$ 0.) MENTAL AND BRAIN HEALTH PROGRAMS - WOUNDED WARRIOR PROJECT KNOWS THAT MANY WOUNDS ARE INVISIBLE 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 AFFORDS WARRIORS WITH THE TOOLS TO DEVELOP AND MAINTAIN HEALTHY, MEANINGFUL RELATIONSHIPS, SET GOALS FOR THE FUTURE, AND BUILD (SEE SCHEDULE O)

4b (Code:) (Expenses \$ 41,297,051. including grants of \$ 975,000.) (Revenue \$ 0.) 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. (SEE SCHEDULE O)

4c (Code:) (Expenses \$ 39,844,652. including grants of \$ 6,721,786.) (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. FINANCIAL INSECURITY IS A SIGNIFICANT RISK FACTOR, AND WWP FINANCIAL PROGRAMS FOCUS ON STABILIZING AND EMPOWERING WOUNDED WARRIORS AND THEIR FAMILIES. TOTAL FINANCIAL WELLNESS PROGRAMS EXPENSES WERE \$39,844,652, INCLUDING GRANTS OF \$7,394,119, FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2023. WWP PROVIDES THE FOLLOWING FINANCIAL WELLNESS PROGRAMS: (SEE SCHEDULE O)

4d Other program services (Describe on Schedule O.) (Expenses \$ 86,046,876. including grants of \$ 12,065,387.) (Revenue \$ 0.)

4e Total program service expenses 260,640,285.

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 22-38 covering various organizational requirements.

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

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 1a-1c regarding Form 1096 and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

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 on Schedule O.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
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 on Schedule O		X

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?		X
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	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	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 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
 ERIC MILLER - 904-296-7350
 4899 BELFORT ROAD, SUITE 300, JACKSONVILLE, FL 32256

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

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 line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MICHAEL S LINNINGTON CHIEF EXECUTIVE OFFICER	50.00 0.00			X			462,711.	0.	38,962.	
(2) ERIC S MILLER CHIEF FINANCIAL OFFICER	50.00 0.00			X			342,394.	0.	40,740.	
(3) JENNIFER M SILVA CHIEF PROGRAM OFFICER	50.00 0.00			X			341,914.	0.	40,740.	
(4) SCOTT COSTER CHIEF INFORMATION OFFICER	50.00 0.00			X			328,822.	0.	38,669.	
(5) CHRISTOPHER TONER CHIEF OF STAFF	50.00 0.00			X			329,860.	0.	36,949.	
(6) VILMA CONSUEGRA CHIEF MKTG & COMMS OFFICER	50.00 0.00			X			304,112.	0.	34,336.	
(7) JOSE RAMOS VP GOVT & CMTY RELATIONS	50.00 0.00					X	292,836.	0.	34,865.	
(8) JOHN T HAMRE III VP RESOURCE DEVEL.: DIRECT RESPONSE	50.00 0.00					X	304,683.	0.	22,973.	
(9) KATHRYN BONGIOVANNI VP - GENERAL COUNSEL (THROUGH 04/23)	50.00 0.00			X			280,625.	0.	28,530.	
(10) ANGELA STROHL VP HUMAN RESOURCES	50.00 0.00					X	268,530.	0.	34,676.	
(11) BREA KRATZERT VP RESOURCE DEVEL.: BUSINESS DEVEL.	50.00 0.00					X	268,425.	0.	32,548.	
(12) TRACY FARRELL VP PROGRAM PARTNERSHIPS & OPS	50.00 0.00					X	268,697.	0.	19,141.	
(13) CHRIS NEEDLES (AS OF 06/2022) CHIEF DEVELOPMENT OFFICER	50.00 0.00			X			190,152.	0.	19,405.	
(14) KEN HUNZEKER VICE CHAIR / CHAIR (AS OF 09/2023)	5.00 0.00	X		X			0.	0.	0.	
(15) KATHLEEN WIDMER CHAIR (THROUGH 09/2023)	5.00 0.00	X		X			0.	0.	0.	
(16) BILL SELMAN DIRECTOR / VICE CHAIR (AS OF 09/2023)	5.00 0.00	X					0.	0.	0.	
(17) JOSEPH CARVALHO DIRECTOR	5.00 0.00	X					0.	0.	0.	

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 line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) KRISTEN ROBINSON DIRECTOR	5.00 0.00	X						0.	0.	0.
(19) TIFFANY DAUGHERTY DIRECTOR	5.00 0.00	X						0.	0.	0.
(20) LISA DISBROW DIRECTOR	5.00 0.00	X						0.	0.	0.
(21) JEFF DOLVEN DIRECTOR	5.00 0.00	X						0.	0.	0.
(22) JUAN GARCIA DIRECTOR (THROUGH 09/2023)	5.00 0.00	X						0.	0.	0.
(23) FLORENT GROBERG DIRECTOR (AS OF 09/2023)	5.00 0.00	X						0.	0.	0.
(24) MICHAEL T. HALL DIRECTOR	5.00 0.00	X						0.	0.	0.
(25) KATHY HILDRETH DIRECTOR	5.00 0.00	X						0.	0.	0.
(26) PATRICIA HOROHO DIRECTOR (THROUGH 12/2023)	5.00 0.00	X						0.	0.	0.
1b Subtotal								3,983,761.	0.	422,534.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								3,983,761.	0.	422,534.

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 185

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

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, 12521 CAPITAL BLVD, STE 401-139, WAKE FOREST, NC 27587	INDEPENDENCE PROGRAM & WCN	14,204,066.
NEURO-REHAB MANAGEMENT INC, 800 WEST CUMMINGS PARK, STE 4950, WOBURN, MA 01801	INDEPENDENCE PROGRAM & WCN	4,658,447.
CREATIVE DIRECT RESPONSE INC, 16900 SCIENCE DRIVE, STE 210, BOWIE, MD 20715	DIRECT RESPONSE	4,516,675.
CENTERSTONE MILITARY SERVICES, 44 VANGATE WAY, STE 400, NASHVILLE, TN 37228	MENTAL & BRAIN HEALTH SVCS.	3,235,209.
TV FUNDRAISING SOLUTIONS LLC DBA DIRECT DON 4200 PARLIAMENT PL, 3RD FL, LANHAM, MD 2070	DIRECT RESPONSE	2,812,895.

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 63

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a 497,184.				
	b	Membership dues	1b				
	c	Fundraising events	1c 1,617,902.				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f 330,517,377.				
	g	Noncash contributions included in lines 1a-1f	1g \$ 3,336,625.				
	h	Total. Add lines 1a-1f		332,632,463.			
Program Service Revenue	2 a	_____	Business Code				
	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)		10,270,956.		10,270,956.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties		2,027,852.	72,420.	1,955,432.	
	6 a	Gross rents	(i) Real				
			(ii) Personal				
	b	Less: rental expenses ...	6b				
	c	Rental income or (loss)	6c				
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
				70,915,238.			
	b	Less: cost or other basis and sales expenses	7b 68,694,052.				
	c	Gain or (loss)	7c 2,221,186.				
d	Net gain or (loss)		2,221,186.		2,221,186.		
8 a	Gross income from fundraising events (not including \$ 1,617,902. of contributions reported on line 1c). See Part IV, line 18		8a 318,021.				
			8b 590,448.				
c	Net income or (loss) from fundraising events		-272,427.		-272,427.		
9 a	Gross income from gaming activities. See Part IV, line 19		9a				
			9b				
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances		10a				
			10b				
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	MAILING RENTAL INCOME	900099	969,439.		969,439.	
	b	PURCHASING CARD REBATE	900099	526,266.		526,266.	
	c	_____					
	d	All other revenue	900099	289,519.		289,519.	
	e	Total. Add lines 11a-11d		1,785,224.			
12	Total revenue. See instructions		348,665,254.	0.	72,420.	15,960,371.	

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 X

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 ...	48,348,141.	48,348,141.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	5,421,786.	5,421,786.		
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	3,048,372.	730,836.	1,987,935.	329,601.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	79,691,238.	65,884,986.	2,921,146.	10,885,106.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,321,785.	1,911,899.	94,588.	315,298.
9 Other employee benefits	16,460,810.	13,760,277.	696,787.	2,003,746.
10 Payroll taxes	5,594,786.	4,564,054.	294,370.	736,362.
11 Fees for services (nonemployees):				
a Management				
b Legal	346,038.		346,038.	
c Accounting	264,915.		264,915.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	8,994,531.			8,994,531.
f Investment management fees	814,998.		814,998.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	364,967.		364,967.	
12 Advertising and promotion	10,722,313.	10,072,824.		649,489.
13 Office expenses	1,575,780.	869,726.	228,853.	477,201.
14 Information technology	9,287,178.	6,125,334.	1,642,018.	1,519,826.
15 Royalties				
16 Occupancy	7,489,585.	4,808,037.	1,571,877.	1,109,671.
17 Travel	5,518,971.	4,964,822.	74,666.	479,483.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	767,704.	604,697.	74,188.	88,819.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	960,860.	644,662.	185,350.	130,848.
23 Insurance	643,090.	421,606.	129,830.	91,654.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a PROGRAM/OTHER PROVIDER	44,757,547.	36,644,695.	1,606,240.	6,506,612.
b DIRECT RESPONSE MAIL	32,623,532.	9,954,864.		22,668,668.
c DIRECT RESP TV & ONLINE	30,843,526.	15,136,237.		15,707,289.
d WARRIOR EVENTS	20,646,525.	20,646,525.		
e All other expenses	31,987,473.	9,124,277.	7,153,911.	15,709,285.
25 Total functional expenses. Add lines 1 through 24e	369,496,451.	260,640,285.	20,452,677.	88,403,489.
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 <input checked="" type="checkbox"/> X if following SOP 98-2 (ASC 958-720)	40,718,004.	29,447,341.	0.	11,270,663.

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	0.	1	1,216,825.
	2 Savings and temporary cash investments	10,306,087.	2	22,921,143.
	3 Pledges and grants receivable, net	46,812,690.	3	24,460,990.
	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	11,382,378.	9	9,694,423.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 28,158,655.		
	b Less: accumulated depreciation	10b 23,939,997.		
	11 Investments - publicly traded securities	2,966,670.	10c	4,218,658.
	12 Investments - other securities. See Part IV, line 11	335,301,372.	11	341,000,771.
	13 Investments - program-related. See Part IV, line 11	20,474,865.	12	21,492,971.
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	22,409,693.	14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	449,653,755.	15	23,166,736.	
		16	448,172,517.	
Liabilities	17 Accounts payable and accrued expenses	44,007,367.	17	38,544,551.
	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	23,121,796.	25	20,042,731.
	26 Total liabilities. Add lines 17 through 25	67,129,163.	26	58,587,282.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	376,313,962.	27	383,861,816.
	28 Net assets with donor restrictions	6,210,630.	28	5,723,419.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> 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	382,524,592.	32	389,585,235.
33 Total liabilities and net assets/fund balances	449,653,755.	33	448,172,517.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	348,665,254.
2	Total expenses (must equal Part IX, column (A), line 25)	2	369,496,451.
3	Revenue less expenses. Subtract line 2 from line 1	3	-20,831,197.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	382,524,592.
5	Net unrealized gains (losses) on investments	5	26,819,897.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	1,071,943.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	389,585,235.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____
If the organization changed either its oversight process or selection process during the tax year, explain on 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? _____
- 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 on Schedule O and describe any steps taken to undergo such audits _____

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2022)

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 fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	266,271,219.	268,836,639.	316,069,220.	388,364,321.	332,632,463.	1572173862.
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	266,271,219.	268,836,639.	316,069,220.	388,364,321.	332,632,463.	1572173862.
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.						1572173862.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	266,271,219.	268,836,639.	316,069,220.	388,364,321.	332,632,463.	1572173862.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	10,556,652.	11,492,063.	11,355,972.	12,114,895.	12,226,388.	57,745,970.
9 Net income from unrelated business activities, whether or not the business is regularly carried on		56,197.	77,296.	79,787.	72,420.	285,700.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	2,504,476.	3,104,840.	1,781,584.	2,200,198.	2,103,245.	11,694,343.
11 Total support. Add lines 7 through 10						1641899875.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	95.75 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	95.64 %
16a 33 1/3% support test - 2022. 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		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2021. 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		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. 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		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. 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		<input type="checkbox"/>
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		<input type="checkbox"/>

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

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c 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

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2021 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2021 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2022. 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 - 2021. 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, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> 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 2022 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-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2022		
a	From 2017		
b	From 2018		
c	From 2019		
d	From 2020		
e	From 2021		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2022 distributable amount		
i	Carryover from 2017 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2022 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2022 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2023. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2018		
b	Excess from 2019		
c	Excess from 2020		
d	Excess from 2021		
e	Excess from 2022		

Schedule A (Form 990) 2022

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.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MAILING RENTAL INCOME

2018 AMOUNT: \$ 1,262,662.

2019 AMOUNT: \$ 1,693,329.

2020 AMOUNT: \$ 1,280,691.

2021 AMOUNT: \$ 1,238,401.

2022 AMOUNT: \$ 969,439.

PURCHASE CARD REBATES

2018 AMOUNT: \$ 562,567.

2019 AMOUNT: \$ 305,973.

2020 AMOUNT: \$ 194,721.

2021 AMOUNT: \$ 528,354.

2022 AMOUNT: \$ 526,266.

SPECIAL EVENTS REVENUE

2018 AMOUNT: \$ 312,367.

2019 AMOUNT: \$ 107,295.

2020 AMOUNT: \$ 156,228.

2021 AMOUNT: \$ 174,559.

2022 AMOUNT: \$ 318,021.

MISCELLANEOUS

2018 AMOUNT: \$ 366,880.

2019 AMOUNT: \$ 998,243.

2020 AMOUNT: \$ 149,944.

2021 AMOUNT: \$ 258,884.

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.)

2022 AMOUNT: \$ 289,519.

Multiple horizontal lines for supplemental information.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

WOUNDED WARRIOR PROJECT, INC.

Employer identification number

20-2370934

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization WOUNDED WARRIOR PROJECT, INC.	Employer identification number 20-2370934
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>7,765,803.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization WOUNDED WARRIOR PROJECT, INC.	Employer identification number 20-2370934
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization WOUNDED WARRIOR PROJECT, INC.	Employer identification number 20-2370934
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

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 organization WOUNDED WARRIOR PROJECT, INC.	Employer identification number 20-2370934
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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-.

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

Schedule C (Form 990) 2022

LHA

232041 11-08-22

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 (grassroots 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.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
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-														
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?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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) 2019	(b) 2020	(c) 2021	(d) 2022	(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)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?	X		30,271.
e Publications, or published or broadcast statements?	X		
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		126,399.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			156,670.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
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 campaign activity 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 expenditures 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.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

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 VIRTUAL MEETINGS ON

LEGISLATION AND PHYSICAL VISITS TO WASHINGTON, D.C.

Part IV Supplemental Information (continued)

SCHEDULE C, PART II-B, LINE 1B

WWP EMPLOYS PUBLIC POLICY PROFESSIONALS TO HELP EDUCATE COMMUNITY LEADERS ABOUT THE ISSUES AFFECTING VETERANS AND CAREGIVERS. THIS MEANS THAT, OCCASIONALLY, WWP MEETS WITH GOVERNMENT OFFICIALS TO PROVIDE INSIGHT ON PROPOSED CHANGES TO LAWS AND REGULATIONS AFFECTING VETERAN AND CAREGIVER HEALTH AND BENEFITS.

SCHEDULE C, PART II-B, LINE 1D

WWP 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 NEWS LETTER 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

Schedule C (Form 990) 2022

Part IV Supplemental Information (continued)

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 WWP ALUMNI FROM ACROSS THE COUNTRY
 TRAVELED TO WASHINGTON, DC TO PARTICIPATE IN OPERATION ADVOCACY FLY-IN,
 PROVIDING A FIRSTHAND PERSPECTIVE TO CONGRESSIONAL LEADERS ON ISSUES
 IMPACTING VETERANS AND THEIR FAMILIES.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

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?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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 (for example, recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 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 \$ _____

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2022

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 make 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 program
 - 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 on 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	1,178,186.	1,507,893.	1,353,536.	1,319,466.	1,324,845.
b Contributions	25,000.				
c Net investment earnings, gains, and losses	117,781.	-255,614.	222,193.	101,061.	59,312.
d Grants or scholarships					
e Other expenditures for facilities and programs	71,726.	74,093.	67,836.	66,991.	64,691.
f Administrative expenses					
g End of year balance	1,249,241.	1,178,186.	1,507,893.	1,353,536.	1,319,466.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 0.0000 %
 - b Permanent endowment 82.0500 %
 - c Term endowment 17.9500 %
- 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 | X | |
| (ii) Related organizations | X | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		7,253,562.	6,466,738.	786,824.
d Equipment		4,678,623.	3,628,084.	1,050,539.
e Other		16,226,470.	13,845,175.	2,381,295.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				4,218,658.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (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) RIGHT OF USE LEASE ASSETS	18,929,743.
(2) DEPOSITS	847,949.
(3) SUPPLIES	104,177.
(4) OTHER ACCOUNTS RECEIVABLE	3,284,867.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	23,166,736.

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	
(2) RIGHT OF USE LEASE LIABILITY	20,042,731.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	20,042,731.

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 FASB 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	475,010,579.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	26,819,897.	
b	Donated services and use of facilities	2b	82,730,345.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	17,610,081.	
e	Add lines 2a through 2d		2e	127,160,323.
3	Subtract line 2e from line 1		3	347,850,256.
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	814,998.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	814,998.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	348,665,254.

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	448,365,790.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	82,730,345.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	-3,046,008.	
e	Add lines 2a through 2d		2e	79,684,337.
3	Subtract line 2e from line 1		3	368,681,453.
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	814,998.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	814,998.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	369,496,451.

Part XIII Supplemental Information.

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

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 ENDOWMENTS \$1,025,000

TEMPORARILY RESTRICTED ENDOWMENTS \$224,241

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

Part XIII Supplemental Information (continued)

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

IN ACCORDANCE WITH ASU NO. 2016-02, LEASES(TOPIC 842), 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.

WWP ELECTED THE SHORT-TERM LEASE PRACTICAL EXPEDIENT AND ACCORDINGLY, DOES
NOT RECORD ROU LEASE ASSETS OR LEASE LIABILITIES WITH TERMS LESS THAN 12

Part XIII Supplemental Information (continued)

MONTHS. WWP ALSO ELECTED THE PRACTICAL EXPEDIENT NOT TO SEPARATE THE
 NON-LEASE COMPONENTS OF A CONTRACT FROM THE LEASE COMPONENT TO WHICH THEY
 RELATE FOR ALL ASSET CLASSES. IN ADDITION, WWP UTILIZES THE PORTFOLIO
 APPROACH TO GROUP LEASES WITH SIMILAR CHARACTERISTICS. THE VALUE OF THE
 RIGHT OF USE LEASE LIABILITY BASED ON THE PRESENT VALUE OF THE FUTURE
 LEASE PAYMENT IS \$20,042,731. THE VALUE OF THE RIGHT OF USE LEASE ASSET IS
 \$18,929,743.

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:

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 FREE 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 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.

Part XIII Supplemental Information (continued)

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

\$16,580,627 - INVESTMENT INCOME EARNED BY THE WWP LONG TERM SUPPORT TRUST

AS SHOWN ON A CONSOLIDATED BASIS.

\$1,029,454 - REVERSAL OF PRIOR YEAR ACCRUALS.

SCHEDULE D, PART XII, LINE 2D

OTHER RECONCILING ITEMS

\$ -3,046,008 AMOUNT REPRESENTS A \$4,000,000 GRANT FROM WOUNDED WARRIOR

Part XIII Supplemental Information (continued)

PROJECT, INC. TO THE WOUNDED WARRIOR PROJECT LONG TERM SUPPORT TRUST (THE

"TRUST"), A TYPE 1 SUPPORTING ORGANIZATION, LESS \$953,992 IN EXPENSES

INCURRED BY THE TRUST. THE TRUST IS CONSOLIDATED IN ACCORDANCE WITH

AUTHORITATIVE GUIDANCE BECAUSE, AMONG OTHER FACTORS, WWP HAS THE POWER TO

REMOVE THE TRUSTEE AND APPOINT A SUCCESSOR TRUSTEE, AND THE TRUST IS

OPERATED, SUPERVISED AND CONTROLLED BY WWP, ITS SUPPORTED ORGANIZATION.

THE TRUST FILES A SEPARATE IRS FORM 990. SEE SCHEDULE O.

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.

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 2023.

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.

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.

Multiple horizontal lines for supplemental information.

**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2022

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

Name of the organization WOUNDED WARRIOR PROJECT, INC.	Employer identification number 20-2370934
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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
- 2 a 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?		(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
		Yes	No			
CREATIVE DIRECT RESPONSE - 16900 SCIENCE DRIVE, SUITE	DIRECT RESPONSE		X	117,416,336.	3,310,674.	114,105,662.
TV FUNDRAISING SOLUTIONS LLC DBA DIRECT DONOR TV - 16900	DIRECT RESPONSE		X	13,328,294.	2,362,723.	10,965,571.
THOMPSON, HABIB, & DENISON INC - 80 HAYDEN AVE, SUITE	DIRECT RESPONSE		X	3,006,378.	780,915.	2,225,463.
INKIND DBA GOODUNITED - 796 MEETING STREET, CHARLESTON,	DIRECT RESPONSE		X	2,136,072.	66,830.	2,069,242.
RUE CLAIR DIGITAL LLC DBA STREETLIGHT DIGITAL - 13396	PEER TO PEER		X	952,570.	660,275.	292,295.
GLOBALFACES DIRECT CORP - 30 LESMIL ROAD, UNIT 2, TORONTO,	DIRECT RESPONSE		X	772,688.	1,813,114.	-1,040,426.
Total				137,612,338.	8,994,531.	128,617,807.

- 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	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		CARRY FORWARD 5K (event type)	COURAGE AWARDS BENEFIT DINNER (event type)	2 (total number)		
Revenue	1	Gross receipts	1,121,307.	441,262.	373,354.	1,935,923.
	2	Less: Contributions	912,539.	395,262.	310,101.	1,617,902.
	3	Gross income (line 1 minus line 2)	208,768.	46,000.	63,253.	318,021.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	39,300.	29,347.	29,932.	98,579.
	7	Food and beverages	1,360.	119,214.	20,726.	141,300.
	8	Entertainment				
	9	Other direct expenses	220,985.	95,808.	33,776.	350,569.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				590,448.
11	Net income summary. Subtract line 10 from line 3, column (d)				-272,427.	

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			
	2	Cash prizes			
Direct Expenses	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> 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 to be 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.

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

Part IV Supplemental Information (continued)

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.

**SCHEDULE I
(Form 990)**

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 the latest information.

OMB No. 1545-0047

2022

**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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AMERICAN NATIONAL RED CROSS 431 18TH STREET, NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	975,000.	0.			SEE SCHEDULE I, PART IV
AMERICA'S WARRIOR PARTNERSHIP 1190 INTERSTATE PARKWAY AUGUSTA, GA 30909	47-1606321	501(C)(3)	250,000.	0.			SEE SCHEDULE I, PART IV
ANCHORAGE COMMUNITY MENTAL HEALTH SERVICES INC. - 4020 FOLKER STREET - ANKORAGE, AK 99508	51-0152394	501(C)(3)	200,000.	0.			SEE SCHEDULE I, PART IV
ARMED SERVICES YMCA OF THE USA 14040 CENTRAL LOOP WOODBIDGE, VA 22193	36-3274346	501(C)(3)	150,000.	0.			SEE SCHEDULE I, PART IV
ASSOCIATION FOR MENTAL HEALTH AND WELLNESS INC. - 939 JOHNSON AVE - RONKONKOMA, NY 11779	11-3012392	501(C)(3)	25,000.	0.			SEE SCHEDULE I, PART IV
BASTION COMMUNITY OF RESILIENCE 1607 JOLIET STREET NEW ORLEANS, LA 70118	27-4383654	501(C)(3)	300,000.	0.			SEE SCHEDULE I, PART IV

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **53.**
- 3** Enter total number of other organizations listed in the line 1 table **0.**

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

Schedule I (Form 990) 2022

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOULDER CREST FOUNDATION (BCF) 18370 BLUEMONT VILLAGE LANE BLUEMONT, VA 20135	27-3228310	501(C)(3)	200,000.	0.			SEE SCHEDULE I, PART IV
CAMP CORRAL 801 N WEST ST. RALEIGH, NC 27603	45-3555807	501(C)(3)	150,000.	0.			SEE SCHEDULE I, PART IV
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
CITY OF SAN DIEGO P.O. BOX 129030 SAN DIEGO, CA 92112	95-6000776	501(C)(3)	50,000.	0.			SEE SCHEDULE I, PART IV
CODE OF SUPPORT FOUNDATION 4220 KING STREET ALEXANDRIA, VA 22302	27-3485502	501(C)(3)	100,000.	0.			SEE SCHEDULE I, PART IV
COHEN VETERANS NETWORK INC 72 CUMMINGS POINT ROAD STAMFORD, CT 06902	47-3950655	501(C)(3)	200,000.	0.			SEE SCHEDULE I, PART IV
COMFORT CREW MILITARY KIDS 8127 MESA DRIVE B206 #117 AUSTIN, TX 78759	26-0141940	501(C)(3)	20,000.	0.			SEE SCHEDULE I, PART IV
DOG TAG INC 3206 GRANCE STREET NW WASHINGTON, DC 20007	45-2130904	501(C)(3)	200,000.	0.			SEE SCHEDULE I, PART IV
EMORY UNIVERSITY 1599 CLIFTON ROAD, 3RD FLOOR ATLANTA, GA 30322	58-0566256	501(C)(3)	5,700,671.	0.			SEE SCHEDULE I, PART IV

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EOD WARRIOR FOUNDATION (EOD) 716 CRESTVIEW AVENUE NICEVILLE, FL 32578	20-8618412	501(C)(3)	75,000.	0.			SEE SCHEDULE I, PART IV
GOLD STAR PEAK INC P.O. BOX 772413 EAGLE RIVER, AK 99577	82-5258523	501(C)(3)	90,000.	0.			SEE SCHEDULE I, PART IV
GREEN BERET FOUNDATION 14351 BLANCO ROAD SAN ANTONIO, TX 78216	27-1206961	501(C)(3)	300,000.	0.			SEE SCHEDULE I, PART IV
HILLVETS FOUNDATION 127 12TH STREET SE WASHINGTON, DC 20003	47-3616097	501(C)(3)	25,000.	0.			SEE SCHEDULE I, PART IV
HOMES FOR OUR TROOPS INC 6 MAIN STREET TAUNTON, MA 02780	54-2143612	501(C)(3)	634,350.	0.			SEE SCHEDULE I, PART IV
HOPE FOR THE WARRIORS 8003 FORBES PLACE, STE 201 SPRINGFIELD, VA 22151	20-5182295	501(C)(3)	100,000.	0.			SEE SCHEDULE I, PART IV
MASSACHUSETTS GENERAL HOSPITAL 100 CAMBRIDGE ST STE 1310 BOSTON, MA 02114	04-1564655	501(C)(3)	14,361,089.	0.			SEE SCHEDULE I, PART IV
MILITARY CHILD EDUCATION COALITION 909 MOUNTAIN LION CIRCLE HARKER HEIGHTS, TX 76548	74-2889416	501(C)(3)	75,000.	0.			SEE SCHEDULE I, PART IV
MILITARY FAMILY ADVISORY NETWORK 22015 W 66TH BOX 860635 SHAWNEE, KS 66286	46-3173337	501(C)(3)	225,000.	0.			SEE SCHEDULE I, PART IV

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL MILITARY FAMILY ASSOCIATION INC (NMFA) - 2800 EISENHOWER AVE - ALEXANDRIA, VA 22314	52-0899384	501(C)(3)	450,000.	0.			SEE SCHEDULE I, PART IV
NAVY SEAL FOUNDATION INC 1619 D STREET VIRGINIA BEACH, VA 23459	31-1728910	501(C)(3)	100,000.	0.			SEE SCHEDULE I, PART IV
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
OPERATION HOMEFRONT 17319 SAN PEDRO AVE, STE 505 SAN ANTONIO, TX 78232	32-0033325	501(C)(3)	1,000,000.	0.			SEE SCHEDULE I, PART IV
OPERATION NEW UNIFORM 8825 PERIMETER PARK BLVD, STE 503 JACKSONVILLE, FL 32216	80-0962807	501(C)(3)	75,000.	0.			SEE SCHEDULE I, PART IV
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
REGENTS UCLA DBA UCLA HEALTH SCIENCES DEVELOPMENT - 11000 KINROSS AVE BLDG, SUITE 211 - LOS ANGELES, CA 90095	95-6006143	501(C)(3)	7,420,231.	0.			SEE SCHEDULE I, PART IV
ROSALYNN CARTER INSTITUTE FOR CAREGIVERS INC (RCI) - P.O. BOX 6473 - AMERICUS, GA 31709	84-5152046	501(C)(3)	25,000.	0.			SEE SCHEDULE I, PART IV
RUSH UNIVERSITY MEDICAL CENTER 1653 W. CONGRESS PARKWAY CHICAGO, IL 60612	36-2174823	501(C)(3)	6,325,763.	0.			SEE SCHEDULE I, PART IV

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RUTGERS UNIVERSITY FOUNDATION 335 GEORGE STREET NEW BRUNSWICK, NJ 08901	23-7318742	501(C)(3)	250,000.	0.			SEE SCHEDULE I, PART IV
SALUTE INC 18 N. BOTHWELL PALATINE, IL 60007	06-1718308	501(C)(3)	200,000.	0.			SEE SCHEDULE I, PART IV
SESAME WORKSHOP 1900 BROADWAY NEW YORK, NY 10023	13-2655731	501(C)(3)	250,000.	0.			SEE SCHEDULE I, PART IV
SOLDIERS TO SIDELINES (STS) 8234 BURNLEY RD TOWNSON, MD 21204	46-5638383	501(C)(3)	175,000.	0.			SEE SCHEDULE I, PART IV
SYRACUSE UNIVERSITY 640 SKYTOP RD, SKYTOP OFFICE BLDG SYRACUSE, NY 13244	15-0532081	501(C)(3)	75,000.	0.			SEE SCHEDULE I, PART IV
THE HONOR FOUNDATION 11055 ROSELLE STREET, STE 120 SAN DIEGO, CA 92121	46-2952873	501(C)(3)	325,000.	0.			SEE SCHEDULE I, PART IV
THE MISSION CONTINUES 1141 SOUTH 7TH STREET SAINT LOUIS, MO 63104	20-8742553	501(C)(3)	100,000.	0.			SEE SCHEDULE I, PART IV
THE ROSIE NETWORK (TRN) 15336 MESA ESTATES COURT RAMONA, CA 92065	46-1522625	501(C)(3)	225,000.	0.			SEE SCHEDULE I, PART IV
THREE RANGERS FOUNDATION P.O. BOX 713 SHERIDAN, OR 97378	47-2067593	501(C)(3)	100,000.	0.			SEE SCHEDULE I, PART IV

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRAVIS MANION FOUNDATION (TMF) 164 EAST STATE STREET DOYLESTOWN, PA 18901	41-2237951	501(C)(3)	750,000.	0.			SEE SCHEDULE I, PART IV
U.S. CHAMBER OF COMMERCE (HIRING OUR HEROS) - 1615 H STREET NW - WASHINGTON, DC 20062	46-1561597	501(C)(3)	75,000.	0.			SEE SCHEDULE I, PART IV
UNITED STATES VETERANS INITIATIVE (U.S. VETS) - 800 W 6TH STREET, STE 1505 - LOS ANGELES, CA 90017	95-4382752	501(C)(3)	400,000.	0.			SEE SCHEDULE I, PART IV
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
VAIL VETERANS FOUNDATION INC DBA VAIL VETERANS PROGRAM - P.O. BOX 6473 - VAIL, CO 81658	20-5254885	501(C)(3)	50,000.	0.			SEE SCHEDULE I, PART IV
VETERANS OF FOREIGN WARS FOUNDATION (VFW) - 406 WEST 34TH STREET - KANSAS CITY, MO 64111	43-1758998	501(C)(3)	250,000.	0.			SEE SCHEDULE I, PART IV
VETERANS PATH INC P.O. BOX 1408 SAN RAFAEL, CA 94915	47-4428490	501(C)(3)	91,037.	0.			SEE SCHEDULE I, PART IV
WARRIOR CANINE CONNECTION (WCC) 14934 SCHAEFFER ROAD BOYDS, MD 20841	45-2981579	501(C)(3)	100,000.	0.			SEE SCHEDULE I, PART IV
WARRIOR REUNION FOUNDATION 35 HICKORY MEADOW RD COCKEYSVILLE, MD 21030	81-5360521	501(C)(3)	30,000.	0.			SEE SCHEDULE I, PART IV

Schedule I (Form 990)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
EMERGENCY FINANCIAL ASSISTANCE	2626	5,421,786.	0.		

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

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, GRANTEEES 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.

GRANTEEES ARE INVITED THROUGH AN INVITATION-ONLY PROCESS AND ARE EVALUATED

Part IV Supplemental Information

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.

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

Part IV Supplemental Information

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 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.

ASSOCIATION FOR MENTAL HEALTH AND WELLNESS INC. - OFFERING THE SUFFOLK
COUNTY (NY) AREA COMPREHENSIVE SERVICES AND ADVOCACY THAT FOCUSES ON
MENTAL HEALTH AS WELL AS OVERALL HEALTH AND WELLNESS, SERVING THE
SPECIAL NEEDS OF MILITARY VETERANS, ESPECIALLY THOSE WITH POST
TRAUMATIC STRESS DISORDER AND TRAUMATIC BRAIN INJURY.

BASTION COMMUNITY OF RESILIENCE - TO SUPPORT BASTION'S HEADWAY PROGRAM,
PROVIDING TWO DAYS OF GROUP PROGRAMMING AND THREE DAYS OF OCCUPATIONAL
THERAPY PER WEEK 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

Part IV Supplemental Information

VOCATIONAL REHABILITATION, CAREGIVER WORKSHOPS, AND FAMILY SUPPORT

ACTIVITIES THROUGH THE PROGRAM.

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 SUPPORT THE

STRUGGLE WELL TRAINING PROGRAM IN ALASKA, 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 A FIVE-DAY STRUGGLE WELL

WORKSHOP IN SUPPORT OF SERVICE MEMBERS AND THEIR FAMILIES BY TRAINING

INDIVIDUALS FROM VETERAN SERVICE ORGANIZATIONS, CLERGY, AND MILITARY

CHAPLAINS.

CAMP CORRAL - TO SUPPORT CAMP CORRAL'S ONE-WEEK RESIDENTIAL CAMP

EXPERIENCES FOR CHILDREN OF POST-9/11 WOUNDED, ILL, AND INJURED

VETERANS. THE CAMP EXPERIENCES ARE COMPRISED OF EVIDENCE-BASED

RECREATIONAL AND EDUCATIONAL ACTIVITIES AND ARE DESIGNED TO PROVIDE

RESPITE FOR MILITARY-CONNECTED CHILDREN, BUILD SELF-CONFIDENCE, FOSTER

PEER CONNECTION, AND INTRODUCE COPING SKILLS.

CARING FOR MILITARY FAMILIES (THE ELIZABETH DOLE FOUNDATION) - TO

SUPPORT THE DESIGN AND DELIVERY OF PROGRAMS AND INITIATIVES TO MEET THE

Part IV Supplemental Information

NEEDS OF CHILD AND YOUTH CAREGIVERS OF WOUNDED, INJURED, AND ILL
POST-9/11 VETERANS; INCLUDING THE CREATION AND BUILDING OF A YOUTH
CAREGIVER JOURNEY MAP BUILDING ON HUMAN-CENTERED DESIGN AND THE PAST
SUCCESS OF THE ADULT CAREGIVER JOURNEY MAP. TO SUPPORT RESEARCH AND A
NEEDS ASSESSMENT TO UNDERSTAND THE CHALLENGES AND OPPORTUNITIES OF THE
YOUNG ADULT CAREGIVER POPULATION AND THEIR TRANSITION INTO ADULTHOOD,
RESULTING IN THE DEVELOPMENT OF A TRANSITION TOOLKIT AND DIRECT
PROGRAMMING EFFORTS.

CITY OF SAN DIEGO - TO CREATE A POSITION AT THE CITY OF SAN DEIGO 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.

CODE OF SUPPORT FOUNDATION - TO SUPPORT THE IMPLEMENTATION AND
EXPANSION OF INDIVIDUALIZED SUPPORT THROUGH CODE OF SUPPORT
FOUNDATION'S CASE COORDINATION PROGRAM WITH A FOCUS ON POST-9/11
VETERANS, CAREGIVERS, AND FAMILY MEMBERS.

COHEN VETERANS NETWORK INC - TO SUPPORT THERAPY SESSIONS FOR POST-9/11
MILITARY AND VETERAN YOUTH CAREGIVERS AGE 6-18.

COMFORT CREW FOR MILITARY KIDS - TO SUPPORT THE COMFORT KIT RESILIENCY
PROGRAM FOR MILITARY CHILDREN WHOSE PARENT(S) ARE DEPLOYED OR WOUNDED,

Part IV Supplemental Information

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.

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.

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.

HILLVETS FOUNDATION - TO SUPPORT HILLVETS' MISSION OF SUPPORTING THOSE

Part IV Supplemental Information

WHO SERVED IN THEIR PURSUIT OF CONTINUED SERVICE THROUGH CONGRESSIONAL FELLOWSHIPS. SPECIFICALLY, WWP'S WILL SUPPORT THE HILLVETS LEAD PROGRAM FOR POST 9/11 VETERANS AND ASSIST WITH STAFF COSTS AND OTHER HILLVETS EVENTS. WWP WILL ALSO BE ABLE TO INTERACT WITH HILLVETS FELLOWS AT MULTIPLE EVENTS, INCLUDING THREE DINNERS, THEIR ANNUAL HOLIDAY GATHERING, AND ALL OF THE LEAD ASSOCIATED EVENTS.

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.

MASSACHUSETTS GENERAL HOSPITAL - 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.

MILITARY CHILD EDUCATION COALITION - TO SUPPORT STUDENT LEADERSHIP PROGRAMMING FOR MILITARY AND VETERAN CHILD AND YOUTH CAREGIVERS, AS WELL AS VIDEO SUPPORTED E-LEARNING MODULES SHOWCASING BEST PRACTICES TO HELP TEACHERS BETTER UNDERSTAND AND MORE EFFECTIVELY MEET THE NEEDS ASSOCIATED WITH YOUTH CAREGIVING.

MILITARY FAMILY ADVISORY NETWORK - TO SUPPORT THE DEVELOPMENT OF A

Part IV Supplemental Information

STANDARDIZED APPROACH TO MEASURING IMPACT FOR THE HIDDEN HELPERS

COALITION, ENSURING THAT PROGRAMMING FOR MILITARY CHILDREN AND YOUTH

CAREGIVERS ARE ADHERING TO RIGOROUS PROGRAM EVALUATION METRICS. IN

ADDITION, TO SUPPORT THE IMPLEMENTATION OF THE 2023 MILITARY FAMILY

SUPPORT PROGRAMMING SURVEY WITH ADDITIONAL ANALYSIS THAT INVESTIGATES

ISSUES UNIQUE TO POST-9/11 VETERANS AND THEIR FAMILIES.

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 - TO SUPPORT CRITICAL FINANCIAL ASSISTANCE TO

WARRIORS SPECIFICALLY FOR FOOD, RENT, MORTGAGE, AND HOME REPAIRS

ASSISTANCE.

OPERATION NEW UNIFORM - TO SUPPORT TRANSITION SERVICES FOR SERVICE

MEMBERS LEAVING THE MILITARY. THE INTENDED OUTCOMES OF THIS PROGRAM

Part IV Supplemental Information

ARE EMPLOYMENT READY VETERANS WHO SEEK JOB OPPORTUNITIES.

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.

ROSALYNN CARTER INSTITUTE FOR CAREGIVERS INC (RCI) - TO SUPPORT THE DEVELOPMENT OF FOUR WEBINARS FOCUSING ON MILITARY CAREGIVING ISSUES WITH REAL-WORLD IMPLEMENTATION SUGGESTIONS BASED ON FEEDBACK FROM CAREGIVERS ON COMMON AND ONGOING AREAS OF NEED, WHICH COULD INCLUDE CREATING A CARE TEAM, DISASTER PREPAREDNESS, AND YOUTH IN CAREGIVING HOMES.

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.

Part IV Supplemental Information

SALUTE INC - PROVIDE FINANCIAL ASSISTANCE TO REDUCE BARRIERS TO CARE

FOR WARRIORS ATTENDING WARRIOR CARE NETWORK. ASSISTANCE INCLUDES

MORTGAGE OR RENT PAYMENTS, VEHICLE PAYMENTS, INSURANCE PAYMENTS, AND/OR

UTILITIES PAYMENTS WHILE WARRIOR IS AWAY FROM HOME ATTENDING WARRIOR

CARE NETWORK PROGRAM.

SESAME WORKSHOP - TO SUPPORT SESAME WORKSHOP'S DEVELOPMENT OF A NEW SET

OF FREE, BILINGUAL, DIGITAL RESOURCES THAT SUPPORT THE EMOTIONAL

WELL-BEING OF YOUNG CHILDREN AND THEIR FAMILIES OF POST-9/11 MILITARY

AND VETERAN CAREGIVING HOUSEHOLDS. RESOURCES INCLUDE A DIGITAL

STORYBOOK ON TEACHING CHILDREN HOW TO EXPRESS FEELINGS AND EMOTIONS

THROUGHOUT THE FAMILY CAREGIVING JOURNEY, A DIGITAL FAMILY GUIDE WITH

INTERACTIVE TOOLS, ARTICLES TO GUIDE PARENTS AND CAREGIVERS IN

STRATEGIES THEY CAN SHARE WITH YOUNG CHILDREN, AND A PARTNER TOOLKIT TO

AID IN USING AND PROMOTING THESE RESOURCES.

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.

SYRACUSE UNIVERSITY (D'ANIELLO INSTITUTE FOR VETERANS AND MILITARY

FAMILIES) - TO SUPPORT THE 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

Part IV Supplemental Information

VENTURE, AND PROGRAMMING INCLUDES TRAINING, MENTORSHIP, AND EXPOSURE TO THE FULL PORTFOLIO OF INSTITUTE FOR VETERANS AND MILITARY FAMILIES SUITE OF SERVICES.

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.

THE MISSION CONTINUES - TO SUPPORT THE MISSION CONTINUES' ABILITY TO ACTIVATE VOLUNTEERS THROUGH THE SERVICE PLATOON MODEL. VETERANS BECOME LEADERS AND BUILD NEW SKILLS AND NETWORKS THAT HELP THEM SUCCESSFULLY REINTEGRATE INTO LIFE AFTER THE MILITARY WHILE MAKING VISIBLE TRANSFORMATIONS IN THE COMMUNITIES THEY SERVE WITHIN.

THE ROSIE NETWORK (TRN) - CONDUCT ENTREPRENEURIAL EDUCATION/PREPARATION COURSES FOR WARRIORS. BASED IN SAN DIEGO, CA, TRN CONDUCTED THREE COHORTS FOR WARRIORS IN 2023; EACH COHORT LASTING 10 WEEKS CONSISTING OF CUSTOMIZED CLASSES TEACHING WARRIORS THE 101 OF STARTING A BUSINESS.

THREE RANGERS FOUNDATION - TO SUPPORT COUNSELORS FOR THE RANGERS FOR LIFE PROGRAM, PROVIDING COUNSELING TO TRANSITIONING RANGERS AT HUNTER ARMY AIRFIELD AND JOINT BASE LEWIS-MCCHORD.

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

Part IV Supplemental Information

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 AT RESIDENTIAL SITES IN HAWAII, SOUTHERN CALIFORNIA, NEVADA, ARIZONA, TEXAS, AND WASHINGTON, DC. IN ADDITION, TO SUPPORT WOMEN VETERAN-SPECIFIC PROGRAMMING INCLUDING WOMEN VETS ON POINT AND THE ADVANCE PROGRAM.

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 MEMBERS. HIRING OUR HEROES AND WWP WORK TOGETHER TO PROMOTE EMPLOYMENT OPPORTUNITIES AND RESOURCES FOR WOUNDED WARRIORS AND THEIR CAREGIVERS. 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.

VAIL VETERANS FOUNDATION INC DBA VAIL VETERANS PROGRAM - TO SUPPORT THE SUMMER FAMILY PROGRAM, MILITARY CAREGIVER RETREAT, AND MILITARY CAREGIVER REUNION, SERVING POST-9/11 WOUNDED VETERANS AND THEIR

Part IV Supplemental Information

CAREGIVERS AND FAMILY MEMBERS.

VETERANS OF FOREIGN WARS FOUNDATION (VFW) - TO SUPPORT OPERATIONS FOR THE BENEFITS DELIVERY AT DISCHARGE COMPONENT OF VFW'S NATIONAL VETERANS SERVICE PROGRAM AT TWELVE MILITARY BASES AND INSTALLATIONS.

VETERANS PATH INC - TO SUPPORT POST-9/11 WOMEN VETERANS PARTICIPATION IN BRAVE (BREATHWORK, RECALIBRATION, AND VETERAN EMPOWERMENT) PROGRAMMING, DESIGNED TO EMPOWER WOMEN WITH THE TOOLS AND ENVIRONMENT TO FOSTER HEALING AND STRENGTHEN SELF-COMPASSION AND SOCIAL CONNECTION.

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 RECOVERING POST-9/11 VETERANS COPE WITH POST-DEPLOYMENT CHALLENGES.

WARRIOR REUNION FOUNDATION - TO SUPPORT REUNIONS FOR POST-9/11 MILITARY UNITS/BATTALIONS, BRINGING TOGETHER SERVICE MEMBERS AND GOLD STAR FAMILY MEMBERS TO SUPPORT CHALLENGES OF POST-MILITARY TRANSITION.

WOUNDED WARRIOR PROJECT LONG TERM SUPPORT TRUST - FURTHER INVESTMENT TO THE LONG-TERM SUPPORT TRUST, DIRECTLY FUNDING CONTINGENCY CARE PLANNING AND LONG-TERM CARE SERVICES TO ALL CURRENT AND FUTURE ENROLLEES OF THE INDEPENDENCE PROGRAM. SEE INDEPENDENCE PROGRAM DESCRIPTION ON SCHEDULE O FOR FURTHER EXPLANATION.

Part IV Supplemental Information

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.

**SCHEDULE J
(Form 990)**

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

2022

Open to Public
Inspection

Name of the organization

WOUNDED WARRIOR PROJECT, INC.

Employer identification number

20-2370934

Part I Questions Regarding Compensation

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

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

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

Schedule J (Form 990) 2022

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 aren't 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 and/or 1099-MISC and/or 1099-NEC compensation			(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) MICHAEL S LINNINGTON CHIEF EXECUTIVE OFFICER	(i)	357,711.	105,000.	0.	12,200.	26,762.	501,673.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ERIC S MILLER CHIEF FINANCIAL OFFICER	(i)	285,940.	56,454.	0.	12,200.	28,540.	383,134.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JENNIFER M SILVA CHIEF PROGRAM OFFICER	(i)	285,460.	56,454.	0.	12,200.	28,540.	382,654.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) SCOTT COSTER CHIEF INFORMATION OFFICER	(i)	275,769.	53,053.	0.	10,130.	28,539.	367,491.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) CHRISTOPHER TONER CHIEF OF STAFF	(i)	275,769.	54,091.	0.	8,410.	28,539.	366,809.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) VILMA CONSUEGRA CHIEF MKTG & COMMS OFFICER	(i)	254,745.	49,367.	0.	5,796.	28,540.	338,448.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JOSE RAMOS VP GOVT & CMTY RELATIONS	(i)	244,446.	48,390.	0.	6,329.	28,536.	327,701.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JOHN T HAMRE III VP RESOURCE DEVEL.: DIRECT RESPONSE	(i)	263,069.	41,614.	0.	9,693.	13,280.	327,656.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) KATHRYN BONGIOVANNI VP - GENERAL COUNSEL (THROUGH 04/23)	(i)	234,252.	46,373.	0.	0.	28,530.	309,155.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) ANGELA STROHL VP HUMAN RESOURCES	(i)	224,174.	44,356.	0.	6,152.	28,524.	303,206.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) BREA KRATZERT VP RESOURCE DEVEL.: BUSINESS DEVEL.	(i)	224,069.	44,356.	0.	5,801.	26,747.	300,973.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) TRACY FARRELL VP PROGRAM PARTNERSHIPS & OPS	(i)	224,341.	44,356.	0.	8,955.	10,186.	287,838.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) CHRIS NEEDLES (AS OF 06/2022) CHIEF DEVELOPMENT OFFICER	(i)	177,459.	12,693.	0.	5,077.	14,328.	209,557.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

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,

BASED ON RANGES SET BY THE BOARD OF DIRECTORS. COMPARABILITY DATA IS USED

IN DETERMINING APPROPRIATE AND REASONABLE BONUS RANGES FOR OFFICERS AND

HIGHLY COMPENSATED EMPLOYEES. 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 M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

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 instructions and the latest information.

Department of the Treasury
Internal Revenue Service

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	922	1,494,459.	FMV
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous	X	383	1,642,778.	FMV
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	89	81,131.	FMV
26 Other (WARRIOR GEAR)	X	2	59,437.	FMV
27 Other (EVENT TICKETS)	X	1,353	58,050.	FMV
28 Other (CRYPTO CURRENCY)	X	5	770.	FMV

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

	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 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
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?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
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.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

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.

SCHEDULE M, PART I, COLUMN (B):

AMOUNTS IN COLUMN B REPRESENT THE NUMBER OF INDIVIDUAL CONTRIBUTIONS OF ONE OR MORE ITEMS.

SCHEDULE M, 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.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

WOUNDED WARRIOR PROJECT, INC.

Employer identification number

20-2370934

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

RESILIENCE WITHOUT THE BARRIERS OR STIGMAS ASSOCIATED WITH MENTAL

HEALTH ISSUES. TO ENSURE THAT WARRIORS AND FAMILY MEMBERS RECEIVE

HIGH-QUALITY CARE IN A TIMELY MANNER, WWP UTILIZES A DEDICATED TRIAGE

TEAM THAT PROVIDES APPROPRIATE REFERRALS INTO WWP'S MENTAL HEALTH

PROGRAMS. 4,937 TOTAL WARRIORS AND FAMILY SUPPORT MEMBERS WERE SERVED

THROUGH MENTAL HEALTH OUTREACH AND REFERRALS, AND 26,614 COUNSELING

SESSIONS WERE DELIVERED TO WARRIORS AND THEIR FAMILIES. TOTAL BRAIN

HEALTH AND MENTAL HEALTH WELLNESS PROGRAMS EXPENSES WERE \$93,451,706,

INCLUDING GRANTS OF \$34,007,754, FOR THE FISCAL YEAR ENDED SEPTEMBER

30, 2023. WWP PROVIDES THE FOLLOWING MENTAL HEALTH AND WELLNESS

PROGRAMS:

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 2023, 2,028

PARTICIPANTS ATTENDED A PROJECT ODYSSEY RETREAT.

WWP TALK: WWP TALK IS A FREE PROGRAM THAT CONNECTS VETERANS, THEIR

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

Schedule O (Form 990) 2022

232211 10-28-22

Name of the organization WOUNDED WARRIOR PROJECT, INC.	Employer identification number 20-2370934
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SPOUSES, AND OTHER FAMILY MEMBERS WITH A DEDICATED AND EMPATHETIC LISTENER. IN ADDITION TO EMOTIONAL SUPPORT AND GOAL-SETTING GUIDANCE, WWP TALK CAN PROVIDE RESOURCES FOR THINGS LIKE ANGER MANAGEMENT, COUPLES COUNSELING, POST-TRAUMATIC STRESS DISORDER, OTHER MILITARY THERAPIES, AND EVEN FINANCIAL EDUCATION. 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 2,215 PARTICIPANTS THROUGH MORE THAN 19,541 EMOTIONAL SUPPORT CALLS, IN THE WWP TALK PROGRAM IN FISCAL YEAR 2023. 95% OF WWP TALK PARTICIPANTS WERE SATISFIED WITH THE PROGRAM.

WARRIOR CARE NETWORK: TO ACCELERATE THE DEVELOPMENT OF ADVANCED MODELS OF MENTAL HEALTH CARE, WWP PARTNERS WITH FOUR WORLD-RENOWNED ACADEMIC MEDICAL CENTERS ("AMCS") TO FORM WARRIOR CARE NETWORK, LEVERAGING OUR COLLECTIVE COMMITMENT AND EXPERTISE. PARTNERING WITH EMORY HEALTHCARE VETERANS PROGRAM, MASSACHUSETTS GENERAL HOSPITAL'S HOME BASE, RUSH UNIVERSITY MEDICAL CENTER'S ROAD HOME PROGRAM, AND UCLA HEALTH'S OPERATION MEND, THE WARRIOR CARE NETWORK TREATMENT MODEL PROVIDES A YEAR'S WORTH OF CLINICAL MENTAL HEALTH CARE DURING A TWO-WEEK INTENSIVE OUTPATIENT PROGRAM. WARRIORS WHO COMPLETE THE PROGRAM HAVE SEEN A SIGNIFICANT IMPROVEMENT IN PTSD AND DEPRESSION SYMPTOMS, TRANSLATING TO INCREASED RESILIENCY AND IMPROVED QUALITY OF LIFE. WARRIOR CARE NETWORK PROVIDES VETERANS WITH A PATH TO LONG-TERM WELLNESS, IMPROVING MENTAL HEALTHCARE TREATMENT OPTIONS, AND MENTAL HEALTHCARE FOR THE FUTURE. DURING THE YEAR, WARRIOR CARE NETWORK SERVED 911 VETERANS THROUGH INTENSIVE OUTPATIENT PROGRAMS AND 2,394 VETERANS IN TRADITIONAL

Name of the organization WOUNDED WARRIOR PROJECT, INC.	Employer identification number 20-2370934
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OUTPATIENT THERAPY. IN ADDITION, THE NETWORK PROVIDED TREATMENT AND PSYCHOEDUCATION TO 587 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 PROVIDE 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 GRANTS TO THE AMCS IN THE WARRIOR CARE NETWORK TOTALING \$33,807,751, FOR THE YEAR ENDED SEPTEMBER 30, 2023.

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, 2023, FUTURE CONDITIONAL PAYMENTS ON THESE GRANT AGREEMENTS ARE ESTIMATED TO BE PAID AS FOLLOWS:

2024 \$32,316,343

2025 \$34,404,468

Name of the organization WOUNDED WARRIOR PROJECT, INC.	Employer identification number 20-2370934
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2026 \$35,400,266

THEREAFTER \$2,385,522

TOTAL \$104,506,599

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 553 PARTICIPANTS

THROUGH THE COMPLEX CASE COORDINATION PROGRAM.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

WWP HAD 197,539 WARRIORS AND 49,188 FAMILY MEMBERS REGISTERED AS OF

SEPTEMBER 30, 2023. TOTAL CONNECTION PROGRAMS EXPENSES WERE

\$41,297,051, FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2023. WWP PROVIDES

THE FOLLOWING CONNECTION PROGRAMS:

ALUMNI: 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.

Name of the organization WOUNDED WARRIOR PROJECT, INC.	Employer identification number 20-2370934
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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. 69,915 WARRIORS AND 19,179

FAMILY SUPPORT MEMBERS WERE SERVED THROUGH THE ALUMNI PROGRAM. 97% 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 77 BACKPACKS TO WOUNDED

WARRIORS IN FISCAL YEAR 2023. SINCE WWP'S INCEPTION, 6,154 BACKPACKS

AND 47,718 TCPS HAVE BEEN DELIVERED TO WOUNDED WARRIORS.

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

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

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 10,980 WARRIORS AT PEER FACILITATED SUPPORT GROUPS IN FISCAL YEAR 2023.

RESOURCE CENTER: WARRIORS AND FAMILY MEMBERS REGISTERING WITH WWP OFTEN INITIALLY COMMUNICATE WITH WWP'S RESOURCE CENTER. THE RESOURCE CENTER HELPS WARRIORS AND THEIR FAMILIES UNDERSTAND, IDENTIFY, AND ACCESS WWP PROGRAMS, SERVICES, AND SUPPORT, AS WELL AS OTHER AVAILABLE COMMUNITY RESOURCES. IT SERVES AS A CONNECTION POINT AT EVERY STEP ALONG THEIR INDIVIDUAL JOURNEYS. THE RESOURCE CENTER SERVICED 67,875 INCOMING CONTACTS INCLUDING CALLS, IN-PERSON, FAX, EMAIL AND LIVE CHATS IN FISCAL YEAR 2023.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

Name of the organization WOUNDED WARRIOR PROJECT, INC.	Employer identification number 20-2370934
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BENEFITS: WWP'S BENEFITS 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 2023, THERE WERE

APPROXIMATELY 45,993 ISSUES AWARDED ON BEHALF OF WARRIORS THROUGH

BENEFITS SERVICE, WITH AN ECONOMIC IMPACT OF \$175.7 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 2023,

1,515 WARRIORS AND FAMILY MEMBERS THAT PARTICIPATED IN THE WARRIORS TO

WORK PROGRAM WERE PLACED IN POSITIONS, WITH AN AVERAGE FULL-TIME SALARY

OF \$65,042 AND AN AVERAGE PART-TIME SALARY OF \$23,434, RESPECTIVELY,

WHICH HAD AN ECONOMIC IMPACT OF \$89 MILLION FROM ANNUALIZED EMPLOYMENT

COMPENSATION.

FINANCIAL EDUCATION: THE WWP FINANCIAL EDUCATION PROGRAM EMPOWERS

WARRIORS TO TAKE CHARGE CONTROL OF AND MANAGE THEIR FINANCES TO BUILD A

STRONG FOUNDATION FOR THEMSELVES AND THEIR FAMILIES. THE PROGRAM OFFERS

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A VARIETY OF OPPORTUNITIES SUCH AS 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. IN FISCAL YEAR 2023, 2,274 WARRIORS AND FAMILY MEMBERS THAT PARTICIPATED IN THE FINANCIAL EDUCATION PROGRAM.

EMERGENCY FINANCIAL ASSISTANCE: WWP'S PROGRAMS AND SERVICES ARE BUILT TO GUIDE WARRIORS TOWARD THEIR NEXT MISSION IN LIFE. ALONG THAT JOURNEY, UNEXPECTED CHALLENGES AND EMERGENCIES CAN OCCUR THAT CAN PUT A WARRIOR'S RECOVERY PROGRESS IN JEOPARDY. THE WWP EMERGENCY FINANCIAL ASSISTANCE SERVICE PROVIDES FINANCIAL GRANTS TO WARRIORS WHO ARE STRUGGLING WITH THE MOST URGENT AND CRITICAL FINANCIAL CHALLENGES SO THEY CAN BUILD THE BEST LIVES FOR THEMSELVES AND THEIR FAMILIES. WWP ISSUED GRANTS TO 2,626 WARRIORS TOTALING \$5,421,786. SEE SCHEDULE I, PART II.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
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 CONTRACTS WITH SPECIALIZED CASE MANAGER TEAMS TO INCREASE ACCESS TO COMMUNITY SERVICES, OFFER REHABILITATION THROUGH THERAPY, AND EMPOWER WARRIORS TO LIVE A MORE INDEPENDENT LIFE.

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SUPPLEMENTING VA CARE, SERVICES ARE HIGHLY INDIVIDUALIZED AND INCLUDE
 IN-HOME CARE, LIFE SKILLS COACHING, TRADITIONAL THERAPIES (PHYSICAL,
 OCCUPATIONAL, SPEECH, ETC.), AND ALTERNATIVE 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, 2023, THERE WERE 849 WARRIORS RECEIVING
 SERVICES THROUGH THE INDEPENDENCE PROGRAM AT AN AVERAGE ANNUAL COST PER
 WARRIOR FOR CONTRACTED OUTSIDE SERVICES OF \$25,457. TOTAL INDEPENDENCE
 PROGRAM EXPENSES WERE \$46,787,443, INCLUDING GRANTS OF \$4,000,000 TO
 WOUNDED WARRIOR PROJECT LONG TERM SUPPORT TRUST (THE "TRUST"), SEE
 BELOW.

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
 WITH, 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

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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 TAKE INTO
 ACCOUNT 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 OF 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 FOR THE FISCAL YEAR ENDING SEPTEMBER 30, 2023 TOTALED
 \$953,992. TRUST NET ASSETS TOTALED \$141,913,284 AS OF SEPTEMBER 30,
 2023.

PHYSICAL HEALTH AND WELLNESS PROGRAMS - WWP'S PHYSICAL HEALTH AND

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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 2023, THERE WERE 5,712 PARTICIPANTS IN WWP PH&W PROGRAMS. OF THOSE PARTICIPANTS, 1,257 PARTICIPATED IN THE COACHING PROGRAM AND 32% REPORTED AN IMPROVEMENT IN THEIR NUTRITIONAL QUALITY AFTER PARTICIPATION IN THE PROGRAM. 52% OF PARTICIPANTS REPORTED THAT THEY MET THE PHYSICAL ACTIVITY GUIDELINES AFTER PARTICIPATION IN THE PROGRAM.

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 2023, 215 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

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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 1,800 PARTICIPANTS IN FISCAL YEAR 2023. 93% OF

PARTICIPANTS SAID SOLDIER RIDE INCREASED THEIR OVERALL SELF-CONFIDENCE.

TOTAL PHYSICAL HEALTH & WELLNESS PROGRAM EXPENSES WERE \$19,184,999

INCLUDING GRANTS OF \$125,000 FOR THE FISCAL YEAR ENDED SEPTEMBER 30,

2023.

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 \$14,593,983,

INCLUDING GRANTS OF \$7,865,387, FOR THE FISCAL YEAR ENDED SEPTEMBER 30,

2023. SEE SCHEDULE I.

GOVERNMENT 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

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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 \$5,480,451 INCLUDING GRANTS OF
 \$75,000 FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2023.
 EXPENSES \$ 86,046,876. INCLUDING GRANTS OF \$ 12,065,387. REVENUE \$ 0.

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 POLICY
 ("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 POLICY
 REQUIRES DIRECTORS, OFFICERS, EXECUTIVES, AND EMPLOYEES TO DISCLOSE ANY

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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 NOMINATING AND GOVERNANCE COMMITTEE, IN CONSULTATION WITH THE GENERAL

COUNSEL, REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH

THE POLICY BY REVIEWING ANNUAL STATEMENTS AND TAKING SUCH OTHER ACTIONS AS

ARE NECESSARY FOR EFFECTIVE OVERSIGHT.

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

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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, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AL, AR, CA, CT, FL, GA, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NC, OH, OR, PA, RI, SC, VA, WV
WI

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 VIII, LINE 1, ROW H
CONTRIBUTIONS AND GRANTS REVENUE TOTALED \$332,632,463 FOR THE CURRENT YEAR ENDING SEPTEMBER 30, 2023, AND \$388,364,321 FOR THE PRIOR YEAR ENDING SEPTEMBER 30, 2022. CONTRIBUTIONS AND GRANTS REVENUE INCLUDES REVENUE FROM CHARITABLE BEQUESTS AND TRUSTS. CURRENT YEAR CONTRIBUTIONS AND GRANT REVENUES INCLUDES \$19M IN BEQUEST REVENUES ACCRUED AS REVENUE DURING THE FISCAL YEAR ENDING SEPTEMBER 30, 2023, AND PRIOR YEAR CONTRIBUTIONS AND GRANTS REVENUE INCLUDES \$44M IN BEQUEST REVENUES ACCRUED AS REVENUE DURING THE FISCAL YEAR ENDING SEPTEMBER 30, 2022. A

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CHARITABLE BEQUEST IS A WRITTEN STATEMENT DIRECTING THAT A 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, AND A CORRESPONDING PLEDGES AND GRANTS RECEIVABLE, ARE

RECORDED AT FAIR VALUE WHEN AVAILABILITY OF THE GIFTED ASSET IS

SUBSTANTIALLY ASCERTAINED. IN ADDITION, A \$15,000,000 INDIVIDUAL CASH

DONATION WAS RECEIVED DURING THE FISCAL YEAR ENDING SEPTEMBER 30, 2022.

ACCORDINGLY, WWP'S CONTRIBUTIONS AND GRANTS REVENUE FOR THE PRIOR YEAR

EXCEEDS REVENUE FOR THE CURRENT YEAR.

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 STATEMENT OF FUNCTIONAL EXPENSES, LINE 12

ADVERTISING AND PROMOTION

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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. THESE ADVERTISEMENTS DO NOT HAVE ANY
FUNDRAISING COMPONENT.

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 FREE OF CHARGE 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, LINE 24C, AND LINE 24D
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.

WARRIOR EVENTS - THIS AMOUNT CONSISTS OF THE COSTS RELATED TO WWP'S
PROGRAM EVENTS AND ACTIVITIES THAT ARE DELIVERED AT NO COST TO

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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 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 \$40,718,004

OF JOINT COSTS FOR THE YEAR ENDED SEPTEMBER 30, 2023. OF THESE COSTS,

\$29,447,341 WAS ALLOCATED TO PROGRAM EXPENSES AND \$11,270,663 WAS

ALLOCATED TO FUNDRAISING EXPENSES.

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

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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 X, INVESTMENTS

THE ORGANIZATION HAS AN INVESTMENT MANAGEMENT AND OVERSIGHT POLICY AUTHORIZED BY THE BOARD OF DIRECTOR 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.

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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, 2023.

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. 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. \$10,000,000 WAS DISTRIBUTED FROM THE STRATEGIC FUND DURING THE FISCAL YEAR ENDED SEPTEMBER 30, 2023.

SINCE THE BOARD OF DIRECTORS FIRST APPROVED USE OF THIS FUND IN JUNE 2016, THROUGH SEPTEMBER 30, 2023, WWP HAS DISBURSED APPROXIMATELY \$55,000,000 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

Name of the organization WOUNDED WARRIOR PROJECT, INC.	Employer identification number 20-2370934
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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 XI, LINE 9, CHANGES IN NET ASSETS:

LONG TERM SUPPORT TRUST ACCOUNT PAYABLE AND ACCRUED

EXPENSES	42,489.
REVERSAL OF PY ACCRUALS	1,029,454.
TOTAL TO FORM 990, PART XI, LINE 9	1,071,943.

**SCHEDULE R
(Form 990)**

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

2022

Open to Public Inspection

Name of the organization <p align="center">WOUNDED WARRIOR PROJECT, INC.</p>	Employer identification number <p align="center">20-2370934</p>
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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
WWP LONG TERM SUPPORT TRUST - 37-6558533 100 SOUTH WEST STREET WILMINGTON, DE 19801	TRUST	DELAWARE	501(C)(3)	LINE 12A, I	WWP	X	

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.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)	X	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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
(1) WOUNDED WARRIOR PROJECT LONG TERM SUPPORT TRUST	B	4,000,000. FMV	
(2)			
(3)			
(4)			
(5)			
(6)			

Every donation helps warriors achieve their highest ambition. When they're ready to start their next mission, **we stand ready to serve.**

woundedwarriorproject.org/donate



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woundedwarriorproject.org

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