State of Alaska, Department of Law 2017 Charitable Organization Registration and Renewal

General Information

Legal Name	NATIONAL FOUNDATION FOR THE CENTERS FOR DISEASE CONTROL AND PREVENTION, INC.			
Other Names	Name			
	CDC FOUNDATION			
Mailing Address	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308			
Location Address	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308			
Telephone Number	404.653.0790			
Email Address	KCALABRESE@CDCFOUNDATION.ORG			
Website	WWW.CDCFOUNDATION.ORG			
ld Type	FEIN			
ld	58-2106707			
Is your organization incorporated?				
X Yes	Year of Incorporation: 1993			
No	State of Incorporation: GEORGIA			
1				

CO'

Has the organization:

A. Registered to solicit charitable contributions in any other state?

X Yes No

Armed Forces America	Indiana	New York
AF Africa/Can/Eur/ME	Kansas	Ohio
Alaska	Kentucky	Oklahoma
Alabama	Louisiana	Oregon
Armed Forces Pacific	Massachusetts	Pennsylvania
Arkansas	Maryland	Puerto Rico
American Somoa	Maine	Palau
Arizona	Marshall Islands	Rhode Island
California	Michigan	South Carolina
Colorado	Minnesota	South Dakota
Connecticut	Missouri	Tennessee
District of Columbia	North Mariana Islands	Texas
Delaware	Mississippi	Utah
Florida	Montana	Virginia
Fed State Micronesia	North Carolina	Virgin Islands
Georgia	North Dakota	Vermont
Guam	Nebraska	Washington
Hawaii	New Hampshire	Wisconsin
Idaho	New Jersey	West Virginia
lowa	New Mexico	Wyoming
Illinois	Nevada	All States
	-	

B. Been enjoined or otherwise prohibited by a government agency or court from soliciting charitable contributions in any state or jurisdiction?

Yes

X No

Has the organization app	olied for or b	een granted IRS t	ax exempt stat	tus?
X Yes	Date of determination letter: If no letter, date of application:		September 01, 1994	
No				
	501(c) Type:	:	501(c)(3)	
Has the organization's ta	ax exempt st	atus ever been de	nied, revoked,	, or modified?
Yes				
X No				
How does the organizati	on solicit do	onations? (select a	all that apply)	\sim
Mail	х	Email		X Personal Contact
X Telephone Calls	Telephone Calls Mobile/Text Mess		aging	X Internet
X Special Events	Other (describe)		\sim	
Describe how you	solicit othe	r donations:		0
Website				5
Primary purpose of the o	organization	(select all that ap	ply)	V~
Arts, culture, humanitie	S	Employment, job r	elated	Community improvement, capacity building
Educational institutions related activities	s &	Food, nutrition, ag	riculture	Philanthropy, voluntarism and Grantmaking
Environmental quality, protection & beautificat	ion	Housing, shelter		Science and technology research
Animal related	Х	Public safety, disa preparedness & re		Social science research
X Health-general & rehat	oilative	Recreation, sports athletics	s, leisure,	Public affairs, society benefit
Mental health, crisis intervention		Youth development	nt	Religion, spiritual development
X Disease, disorders, me disciplines	dical	Civil rights, social advocacy	action,	Mutual/membership benefit
X Medical research	\sim	International, forei national security	gn affairs,	Unknown, unclassifiable
Crime, legal related	Ŧ	Human services		

Describe the purposes and programs of the organization for which funds are solicited.

Together our impact is greater when we join forces to create hundreds of innovative, high-impact programs that save and improve millions of lives worldwide. Each CDC-led program includes a talented team of CDC experts and at least one outside funding partner.

Paid Solicitors

Did the organization use one or more paid solicitors to solicit contributions in Alaska during the past year?

Yes X No "Paid solicitor" means a person who is required to be registered under AS 45.68.010(b) or as defined by AS 45.68.900(4).

Financial Information

Fiscal or Accounting Year:

Start Date:July 01, 2015End Date:June 30, 2016

Based on the organization's last fiscal or accounting year, please state:

A. Total Revenue from all sources:	\$34,698,606.00
B. Total Expenses:	\$48,132,111.00

Did the organization file a Form 990 with the IRS for the last fiscal year?

Х	Yes	Form Type:	990	990-T
~	100	i onn i jpo.	000	000 1

No

For the purpose of completing this section, "Form 990" means Forms 990, 990-EZ, 990-PF, 990-N or 990-T.

Did the organization complete an audited financial statement for the last fiscal year?

- X Yes
 - No

For the purpose of completing this section, "audited financial statement" means an independent audit, prepared in accordance with generally accepted accounting principles, and accompanied by the opinion of a certified public accountant.

List the names, titles, and addresses of the current officers, trustees, directors and executive director (or equivalent) of the organization.

Name	Title	Mailing Address
DAVID ALDRIDGE	Brd Mem	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
RAYMOND BAXTER	Brd Mem	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
GARY COHEN	Brd Mem	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
LEAH MCCALL DEVLIN	Brd Mem	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
MATT JAMES	Brd Mem	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
RUTH KATZ	Brd Mem	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
PHIL KENT	Brd Mem	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
BETTY KING	Brd Mem	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
CHARLES MCTIER	Brd Mem	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
DIKEMBE MUTOMBO	Brd Mem	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
DOUGLAS NELSON	Chair	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
DAVID RATCLIFFE	Secretary	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
JOHN RICE	Brd Mem	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
JUDITH MONROE	President	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
MONIQUE PATRICK	Other	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
PAULA JASINA	Other	600 PEACHTREE STREET NE STE 1000 ATLANTA GA 30308
0		
\mathbf{O}		

Signature

Date:	August 30, 2017
Title:	SENIOR ACCOUNTANT
First Name:	KATHRYN
Last Name:	CALABRESE
	please