Philanthropy and COVID-19
Examining two years of giving
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About Candid

Every year, millions of nonprofits spend trillions of dollars around the world. Candid finds out where that money comes from, where it goes, and why it matters. Through research, collaboration, and training, Candid connects people who want to change the world to the resources they need to do it. Candid’s data tools on nonprofits, foundations, and grants are the most comprehensive in the world. In 2019, Foundation Center and GuideStar joined forces to become Candid, a 501(c)(3) nonprofit organization. Find out more at candid.org and on Twitter @CandidDotOrg.

About the Center for Disaster Philanthropy

The Center for Disaster Philanthropy leverages the power of philanthropy to mobilize a full range of resources that strengthen communities’ ability to withstand disasters and recover equitably when they occur. It provides expert advice and resources while managing domestic and international disaster funds on behalf of corporations, foundations and individuals through targeted, holistic and localized grantmaking. Find out more at disasterphilanthropy.org and on Twitter @funds4disaster.

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Philanthropy and COVID-19: Examining two years of giving

Foreword
By Patricia McIlreavy, President and CEO,
Center for Disaster Philanthropy

In every disaster there is an urgency expressed by all for it to be over, to have an end in sight. This sentiment hides a hard truth: Its rationale varies greatly depending on who is voicing it and why. We have all witnessed this dynamic for the past two years, as mixed messages about the pandemic continue to abound.

As the report shows, the overwhelming desire to move on, to find solace in the immediate response being time-bound or addressed solely through the vaccine, is evident in the decreased funding prioritized for COVID-19. Even with the 31% decline in giving, U.S. foundations gave more than a billion dollars, a substantial amount compared to other disaster giving. However, the scale of the recovery needs from COVID-19 vastly outstrips this supply.

The Center for Disaster Philanthropy (CDP) has been constant in our calls to donors that the best response to a disaster is to fund a community’s equitable recovery. This approach requires all funders to explore root causes and to work to address them, noting the intersectional nature of overlapping disasters. We know now, more than ever before, that structural inequities and systemic discrimination result in disproportionate impacts on marginalized and underserved communities. We welcome the report’s findings that some donors have transitioned to more flexible support and are supporting programs that address the systemic and societal inequities made more visible due to the pandemic. We call on others to join this trend.

Philanthropy can and should be innovative, drawing its programming priorities from the community itself. Our support for their recovery from the COVID-19 pandemic should be no different. We must listen to communities and fund the solutions they define. And, as hard as it may be, we must fight the inertia to equate the decreasing risk from the pandemic with our recovery from it. To do otherwise is to jeopardize the substantial investments already made.
The second year of the coronavirus pandemic began optimistically with the promise of multiple, effective vaccines. However, 2021 proved to be a challenging and complex year. Vaccines were readily available in wealthy nations, but other parts of the world were left behind, enabling the virus to spread and mutate. The pandemic was not just a public health emergency; it also continued to put pressure on economies and societies, exacerbating inequities and hitting poorer, historically marginalized communities the hardest. Ever-changing government rules and lockdowns caused frustration and fatigue. Through it all, nonprofits continued to play an essential role, providing critical services, trusted information, and other resources.

This report seeks to understand how donors responded in the second year of the global pandemic. We begin with a look at how U.S. foundations gave in 2021 compared to 2020. Although comprehensive data is not yet available, Candid's Foundation Giving Forecast Survey provides an early glimpse of how U.S. private and community foundations allocated their grants differently in 2021. We found that overall grantmaking by survey respondents increased by 11% (unadjusted for inflation), but funding specifically for COVID-19 declined by 31%.
We turn next to Candid’s coronavirus data set to examine specific funding trends from U.S. donors in 2021. Data collection is still underway, and the analysis was conducted on data collected by Candid as of December 15, 2021 from U.S. private and community foundations, companies, and high-net-worth individuals:

— To date, Candid has recorded $1 billion for COVID-19 in 2021 through 6,283 awards from 229 U.S. donors.

— 18% was explicitly designated as flexible funding or general support.

— Health, human service, and education organizations received the highest shares of funding.

— More than one in five funding dollars (22%) was directed to organizations based outside the U.S.

— For domestic funding focused in the U.S., 27% of dollars was explicitly designated for racial and ethnic identities. Of this, 71% did not indicate a specific identity and, instead, was broadly designated for “racial equity” or “communities of color.”

In the next section, the Center for Disaster Philanthropy (CDP) shares stories about its 2021 coronavirus grantmaking. CDP supported organizations working at the intersection of mental health and disasters; prioritized an intentional approach to COVID-19 philanthropy with an equity lens; and reduced barriers to vaccine access.

To understand funding flows outside the U.S., we reached out to country and regional experts to describe the philanthropic response in their localities. Since there is no global or even regional effort to collect COVID-19 giving data comprehensively, this report presents snapshots of COVID-19 funding in 11 countries.

Beyond the funding data, we wanted to understand how the pandemic impacted the philanthropic sector and civil society organizations in other countries. We offer case studies from India, Brazil, and Ukraine and lift up voices from those working in these countries who describe how the sector responded and adapted to the challenges and opportunities created by COVID-19.

Finally, we end the report with actionable recommendations from CDP on what is needed from donors now and moving forward. It will take decades for many communities to recover from the compounding effects of the pandemic. Funders will continue to play an important role in shaping an equitable, holistic recovery. The coronavirus pandemic has proven CDP correct that all funders are disaster funders. It’s time the sector took CDP’s recommendations to heart.
In early 2020, Candid, in partnership with the Center for Disaster Philanthropy (CDP), began tracking philanthropic awards addressing the coronavirus pandemic. We published our findings in two reports: *Philanthropy and COVID-19 in the first half of 2020* and *Philanthropy and COVID-19: Measuring one year of giving*. CDP and Candid noted the generous outpouring of philanthropic support, an unprecedented amount of disaster-related funding for a far-reaching global phenomenon. Did funders sustain their coronavirus philanthropy in 2021?

**Results from the Foundation Giving Forecast Survey**

To compare COVID-19 giving by private and community foundations, we turned to Candid’s Foundation Giving Forecast Survey. Every year, between January and March, Candid surveys large U.S. community, corporate, independent, and operating foundations about their grantmaking. We focus specifically on large foundations, as their giving accounts for the majority of overall grant dollars contributed. This year, in addition to asking about their total grant payments in fiscal years ending (FYE) 2020 and 2021, the survey asked respondents to estimate how much of this funding was for COVID-19-related support. Respondents had the option to provide a dollar figure and/or estimate the percentage of their giving that went toward addressing the pandemic each year.

**COVID-19 funding by survey respondents declined by 31% from FYE 2020 to 2021.** Among 490 foundations who shared data for both years, overall grantmaking increased in FYE 2021 by 11% (unadjusted for inflation). COVID-19 dollars, however, decreased. In all, 398 foundations estimated $2.1 billion in COVID-19 support in FYE 2020, and 323 foundations provided nearly $1.5 billion in FYE 2021.
Corporate foundation funding for COVID-19 decreased the most dramatically (by 76%), but community and independent foundations also saw declines. The number of respondents supporting COVID-19 also went down. Whereas 398 of 490 respondents reported COVID-19 support in FYE 2020, 323 gave support in FYE 2021.

COVID-19 funding as a proportion of overall grant dollars also declined in FYE 2021. Whereas COVID-19 funding accounted for 12% of total giving in FYE 2020, that proportion fell to 7% in FYE 2021.

The survey invited respondents to clarify their responses. Several explained that their fiscal years end in the early months of the year and, therefore, their COVID-19 support for calendar year 2020 was reflected in fiscal year ending 2021. Nonetheless, this did not change the overall trend of decreased coronavirus support in FYE 2021.

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**COVID-19 support by donor type, FYE 2020 vs. 2021**

<table>
<thead>
<tr>
<th>Donor type</th>
<th>FYE 2020 COVID-19 giving</th>
<th>FYE 2021 COVID-19 giving</th>
<th>FYE 2020–2021 % change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community foundations</td>
<td>102</td>
<td>$565M</td>
<td>93</td>
</tr>
<tr>
<td>Corporate foundations</td>
<td>31</td>
<td>74M</td>
<td>18</td>
</tr>
<tr>
<td>Independent foundations</td>
<td>265</td>
<td>1,480M</td>
<td>212</td>
</tr>
<tr>
<td>Total</td>
<td>398</td>
<td>2,119M</td>
<td>323</td>
</tr>
</tbody>
</table>

Based on the 2022 Foundation Giving Forecast Survey, in which 490 respondents provided information about their total grant payments and COVID-19 support in FYE 2020 and 2021.

**COVID-19 support as share of total grant payments, FYE 2020 vs. 2021**

- **Community foundations** (n=109): 5% (FYE 2021) vs. 10% (FYE 2020)
- **Corporate foundations** (n=33): 6% (FYE 2021) vs. 25% (FYE 2020)
- **Independent foundations** (n=347): 9% (FYE 2021) vs. 12% (FYE 2020)
- **Total** (n=490): 7% (FYE 2021) vs. 12% (FYE 2020)

Based on the 2022 Foundation Giving Forecast Survey, in which 490 respondents provided information about their total grant payments and COVID-19 support in FYE 2020 and 2021. “Total” also includes responses from one operating foundation.
Many expressed difficulties determining their COVID-19-related support. Some explained that their organizations did not track this data, and others expressed uncertainty about what to consider COVID-19-related support. The survey was deliberately open-ended, leading to different interpretations. Respondents who reported $0 in FYE 2020 COVID-19 giving explained:

— “We increased grants to many organizations providing direct services in the areas of food access and medical care but did not make any COVID-restricted grants. All grants were general operating to allow greater flexibility as each organization continued to adjust to changing needs.”

— “Much of our funding is general operating support. At the beginning of the pandemic, our board decided to prioritize stabilizing existing grantees. So, while none of our grants were specifically related to COVID-19, we provided renewed general operating support to almost all organizations with the intention of helping stabilize them during an unpredictable time.”

Respondents that reported low proportions of COVID-19 support made similar comments, defining COVID-19 funding narrowly. They appeared to count grants with an explicit purpose to address the pandemic but did not include unrestricted support—even if it likely supported COVID-19 programs and even if the new flexibility was due to the pandemic. Some noted that their foundations increased grant payments overall because of the pandemic but did not count it in their COVID-19 figures.

Other respondents, however, chose the opposite approach. A foundation that reported that 95% of FYE 2020 grant payments were for COVID-19 wrote:

— “Almost all grants made in 2020 were for general operating support as opposed to for projects, in recognition of the challenges posed by COVID-19 for nonprofit organizations.”

It is worth noting that only five foundations indicated that 100% of their grants addressed COVID-19 in FYE 2020; in FYE 2021, only one foundation did so. An additional 21 foundations reported that they dedicated more than 50% of their total FYE 2020 grant payments to COVID-19; in FYE 2021, it was only 12 foundations. It appears, therefore, that most foundations did not define COVID-19 funding broadly.

**There is no universal definition or criteria for COVID-19 funding.** CDP and Candid are not inclined to create one, leaving it to each foundation to decide for itself. The survey, similarly, allowed foundations to use their own criteria, with the analysis focusing on the relative change from year to year.
What is of continuing interest is whether foundations intend to sustain more flexible, trust-based support for grantees. Several respondents indicated that though COVID-19 dollars decreased in FYE 2021, their organizations found other ways to continue to address the many needs of nonprofits:

— “The pandemic hit our region in a way that lifted the inequities in our region. Our Board made a commitment to invest in a data- and community-informed manner to address the systemic and structural systems that the pandemic lifted.”

— “In 2021, while not directly related to COVID-19 support, we opened up our applications to any organization, regardless of the last time they had received an award from us—rather than the ‘skip a year’ rule usually in place.”

— “Although funding specifically directed for COVID-19 relief declined, more funds were directed to capacity building and helping organizations come out of the pandemic.”

— “In 2021 we did more general operating support grants, which were no doubt due to nonprofits trying to regain ground from COVID-19 closures and cutbacks.”

— “Many of the organizations we partner with were affected by and had clients severely affected by COVID-19. We did not break that out as a separate funding need, but in many cases increased funding to those organizations based on their increased need.”

These comments demonstrate that some funders continued to address the pandemic through their organizations’ practices and processes. It remains to be seen, however, if these changes will take more permanent hold.
A closer look at U.S. COVID-19 awards in 2021

In early 2020, Candid, in partnership with the Center for Disaster Philanthropy (CDP), began tracking data on how philanthropy responded to the coronavirus pandemic. It was our eighth year of collaboration collecting near-real-time data on philanthropic funding for disasters—and, by far, the biggest data collection effort yet. We visualized the data on two online platforms—the Measuring the State of Disaster Philanthropy funding map and a special issue coronavirus web page—which continue to be freely accessible. CDP and Candid also analyzed the funding data in two reports: *Philanthropy and COVID-19 in the first half of 2020* and *Philanthropy and COVID-19: Measuring one year of giving*. This section follows these prior analyses by examining coronavirus funding trends in 2021.

**About the data**

*What are the sources of data used in this analysis?* Candid collects data from publicly available sources, including press releases, websites, membership reports and surveys, local reporting, and IRS Forms 990-PF and 990. More than 850 grantmakers also share data directly with Candid. Data from these disparate sources are cleaned, harmonized, and coded according to Candid’s Philanthropy Classification System (PCS). (See Candid’s grants data fact sheet to learn more about how Candid collects data.)

*How comprehensive is the data?* The analysis is based on Candid’s coronavirus data, as of December 15, 2021. Data collection is ongoing. This report, therefore, provides a snapshot of funding based on the data available thus far. Candid collects data primarily about U.S. grantmaking institutions, but the data set also includes large publicly announced gifts by high-net-worth individuals. Because of when Candid closed the data set, however, it excludes some major late-2021 announcements about MacKenzie Scott and Dan Jewett’s grants. It also does not include the many small donations from individuals which account for a significant portion of total philanthropic giving.

To learn more about the data used in this analysis, see the Appendix on p. 45.
What did funding look like?

The analysis that follows uses Candid’s Philanthropy Classification System (PCS). Candid applies PCS codes based on available information about the specific award (i.e., grant description) and/or recipient organization (e.g., a mission statement). These codes enable us to identify trends around populations served, support strategy, and issue area. Funders who share data with Candid sometimes provide their own coding for grants.

18% of COVID-19 dollars in 2021 was explicitly designated as flexible or general support. At face value, this would appear to be a decline from 2020, when 43% of funding was unrestricted. But 2020 trends were driven by MacKenzie Scott, whose outsized grants were mostly unrestricted. Excluding her grants from the analysis, 16% of dollars in 2021 were unrestricted, double the 8% in 2020. (See more about the impact of Scott’s grantmaking on p. 16.) Overall, 29% of total awards were unrestricted, an increase from 20% in 2020. Seventy-five donors awarded at least one unrestricted grant. Community foundations made more of their funding unrestricted (49%) than other donor types.

17% of dollars was coded for policy, advocacy, and systems change. Awards for policy, advocacy, and systems change were directed both internationally and for the U.S. The Ford Foundation gave $1.5 million to the United Kingdom-based Frontline AIDS to “support the People’s Vaccine Alliance to advocate for an equitably distributed and free people’s COVID-19 vaccine and access to health for all.” In the U.S., the Cedars-Sinai Medical Center awarded $1.8 million to the Community Clinic Association of Los Angeles County for the Transforming Health

Funding explicitly designated as unrestricted/flexible per donor type, 2021

<table>
<thead>
<tr>
<th>Donor Type</th>
<th>Dollars</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community foundations</td>
<td>$55M</td>
<td>49%</td>
</tr>
<tr>
<td>Public charities</td>
<td>$134M</td>
<td>23%</td>
</tr>
<tr>
<td>Corporations/corporate foundations/LLCs</td>
<td>$317M</td>
<td>15%</td>
</tr>
<tr>
<td>Independent foundations</td>
<td>$497M</td>
<td>11%</td>
</tr>
<tr>
<td>All donor types</td>
<td>$1B</td>
<td>18%</td>
</tr>
</tbody>
</table>

Data set is based on transactions in Candid’s database as of December 15, 2021. Excludes awards made by donors to other donors included in the analysis to avoid double counting of dollars. “All donor types” also includes five grants from high-net-worth individuals and two grants from operating foundations.
Center Recovery project. This project aims to “improve community health center capacity” and will engage “20 health centers in a learning collaborative with training and technical assistance focused on systems transformation.”

**Most funding for policy, advocacy, and systems reform addressed “equal access.”** According to Candid’s taxonomy, equal access describes efforts to ensure equal opportunity and access to services, resources, and/or advancement in particular fields of activity. Equal access is a sub-category of policy, advocacy, and systems change. During the pandemic, equitable access to COVID-19 vaccines, testing, and treatment became critical—alongside continued access to broader health and mental health care, education, and other services. Funding in this category included grants from the Bill & Melinda Gates Foundation for COVID-19 support in India, Bangladesh, Nigeria, Mozambique, Nepal, and other countries. The Gates Foundation also awarded grants in the U.S. to increase access to COVID-19 testing at historically black colleges and universities and their local communities.

To understand who was served by COVID-19 funding, we analyzed Candid’s population data, looking at codes applied to the award and the recipient organization, when available. When awards or recipient organizations address multiple population groups, the full dollar amount was included in aggregates for each group. For example, the California Community Foundation awarded $10,000 to Koreatown Youth and Community Center. The entire $10,000 was included in the categories: children and youth; ethnic and racial identity (specifically, people of Asian descent); and immigrants, migrants, and refugees.

**Ethnic and racial groups were the explicit focus of 17% of dollars.** In 2020, 33% of COVID-19 funding was specifically designated for ethnic

<table>
<thead>
<tr>
<th>Population group</th>
<th>U.S. dollars awarded</th>
<th>%</th>
<th>2020-2021 change in percentage points</th>
<th>No. of awards</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethnic/Racial identity [Ethnic and racial groups]</td>
<td>$175M</td>
<td>17</td>
<td>-16</td>
<td>1,363</td>
</tr>
<tr>
<td>Children and youth</td>
<td>149M</td>
<td>14</td>
<td>+2</td>
<td>1,491</td>
</tr>
<tr>
<td>Women and girls</td>
<td>94M</td>
<td>9</td>
<td>+4</td>
<td>564</td>
</tr>
<tr>
<td>Immigrants, migrants, and refugees</td>
<td>54M</td>
<td>5</td>
<td>+2</td>
<td>540</td>
</tr>
<tr>
<td>People with disabilities</td>
<td>32M</td>
<td>3</td>
<td>-3</td>
<td>227</td>
</tr>
<tr>
<td>Older adults/Seniors</td>
<td>16M</td>
<td>2</td>
<td>-1</td>
<td>204</td>
</tr>
<tr>
<td>LGBTQ people</td>
<td>14M</td>
<td>1</td>
<td>0</td>
<td>133</td>
</tr>
<tr>
<td>Incarcerated people and ex-offenders</td>
<td>10M</td>
<td>1</td>
<td>0</td>
<td>122</td>
</tr>
</tbody>
</table>

Data set is based on transactions in Candid’s database as of December 15, 2021. Population categories are based on the Philanthropy Classification System (PCS) codes applied to either the award or the recipient organization. Awards and/or recipient organizations may address multiple population groups and may, therefore, be counted in more than one category. Excludes awards made by donors to other donors included in the analysis to avoid double counting of dollars.
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and racial groups—but Scott’s grants, again, heavily influenced this proportion in 2020. Her grants also impacted funding proportions for people with disabilities (see more on p. 16). Otherwise, in many categories, funding proportions did not change much from 2020 to 2021. One slight exception was funding for women and girls, which increased to 9%, even accounting for Scott’s grants.

We took a closer look at funding specifically for ethnic and racial groups in the United States. Whereas the table on p. 13 examines funding to U.S. and non-U.S.-based organizations for both domestic and global purposes, the following analysis focuses on funding to U.S. organizations with a domestic purpose.

Among work focused in the U.S., 27% of dollars was explicitly designated for ethnic and racial groups. Companies allocated 35% of domestic COVID-19 dollars specifically for ethnic and racial groups. This was aided by the Citi Foundation, which awarded $25 million in unrestricted funding to 50 organizations supporting small businesses owned by people of color. The diverse group receiving funding included Prospera (Hispanic Business Initiative Fund of Florida), California Asian Chamber of Commerce, the South Dakota-based Lakota Funds, and the Urban League of Essex County (in New Jersey).

The twin pandemics of COVID-19 and systemic racism in the U.S. have been inextricably linked. Because of this, donors may have been more likely to direct their funding toward communities of color. It was not uncommon to see the term “racial equity” in the award description—something we typically have not seen in funding for other disasters.

Data set is based on transactions in Candid’s database as of December 15, 2021. Analysis is limited to awards to U.S.-based organizations with a domestic purpose. Excludes awards made by donors to other donors included in the analysis to avoid double counting of dollars. “All donor types” also includes four awards from high-net-worth individuals.
But it remains to be seen if this pattern will continue as more data comes in. (See “CDP’s recommendations for philanthropy” on p. 43.)

**Among COVID-19 funding for ethnic and racial groups in the U.S., 71% did not indicate a specific identity.** Instead, most dollars were directed broadly, using terms like “racial equity” or “communities of color.” For example, the Robert Wood Johnson Foundation awarded $1.5 million to the JUST Capital Foundation to expand its research and activities to include “efforts critical to workers’ financial wellness and racial equity in a post-pandemic economy.”

When specific ethnic or racial groups were identified, awards or recipient organizations often addressed multiple groups. For example, the Rockefeller Foundation gave $200,000 to Accelerate 500 for “targeted, competitive capital with contextual technical assistance to Latinx and Black entrepreneurs in Baltimore, MD and Jackson, MS.”

In some cases, funders provided coding specifying nearly every ethnic and racial identity as an intended beneficiary.

The breakdown of funding designated toward specific ethnic and racial identities is visualized below. This chart presents the total for each identity as well how much went exclusively to that population group. Of the $19 million that specified African Americans and Blacks as an intended beneficiary, 64% of dollars was directed only for African Americans and Blacks and did not identify any other racial or ethnic group. People of Middle Eastern descent received the lowest proportion of exclusive funding—they were the sole focus of only 5% of dollars that specifically identified them as a beneficiary. They were also the population receiving the fewest number of awards—30 in all, seven exclusively.

<table>
<thead>
<tr>
<th>Ethnic/Racial Group</th>
<th>U.S. dollars awarded exclusively for ethnic/racial group</th>
<th>U.S. dollars awarded for ethnic/racial group in combination with other ethnic/racial groups</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black/African Americans</td>
<td>$12M</td>
<td>$7M</td>
</tr>
<tr>
<td>Hispanics and Latinos</td>
<td>$10M</td>
<td>$5M</td>
</tr>
<tr>
<td>Asians</td>
<td>$9M</td>
<td>$3M</td>
</tr>
<tr>
<td>Indigenous peoples</td>
<td>$4M</td>
<td>$4M</td>
</tr>
<tr>
<td>Middle Eastern Americans</td>
<td>$2M</td>
<td>$0.1M</td>
</tr>
</tbody>
</table>

Data set is based on transactions in Candid’s database as of December 15, 2021. Analysis is limited to awards to U.S.-based organizations with a domestic purpose. Excludes awards made by donors to other donors included in the analysis to avoid double counting of dollars.
Impact of MacKenzie Scott’s grantmaking on the analysis

Since MacKenzie Scott began publicly announcing her grantmaking in 2020, she has given over $12 billion to 1,257 organizations. Her general practice has been to post a blog on Medium, revealing the cumulative amount donated to a group of organizations that are individually listed. She then leaves it up to each nonprofit that received a grant to decide whether to disclose more information. The exception was one round of giving in 2021 when she declined to state both the total amount donated and to whom. Candid has collected the available aggregate and detailed grants data. (Candid and CDP were both recipients of Scott’s grants.)

Candid’s database contained 258 grants totaling $4.2 billion by Scott (with her husband Dan Jewett) related to COVID-19. Only five are from 2021, as Scott and Jewett’s 2021 grant announcements were not framed as a response to the pandemic. Some recipient organizations, however, described their intent to use funds to address those most affected by the pandemic, and, in these cases, the grants were included in the analysis. It should be noted that the coronavirus data set excludes some late-year announcements made by recipients after this report’s data set was finalized.

Scott’s large grants in 2020 inevitably swing trends in our COVID-19 analysis. Some funding shifts from 2020 to 2021 are entirely attributable to her grantmaking. General operating support as a proportion of COVID-19 giving decreased from 43% in 2020 to 18% in 2021. When we excluded Scott’s grants, however, the proportions shifted from 8% of dollars in 2020 to 16% in 2021. Similarly, funding designated for ethnic and racial groups declined from 33% of giving in 2020 to 17% in 2021. Scott’s 2020 grants influenced these trends, as she awarded large grants to colleges and universities educating historically marginalized and underserved people. Recipients included historically Black institutions and institutions enrolling large numbers of Native Americans. When we excluded her grants, 16% of 2020 COVID-19 dollars were designated for ethnic and racial groups versus 17% in 2021. Scott’s grants also contributed to the 6% of COVID-19 dollars in 2020 for people with disabilities. By excluding her giving, the proportion declined to 2% in 2020, compared with 3% in 2021.
About the recipients

COVID-19 philanthropy in 2021 continued to support a variety of organizations and causes. Similar to funding in 2020, we lacked details about many recipients. Of the $1 billion in U.S. funding for COVID-19 in 2021, 28% went to unspecified recipient organizations (see the Appendix on p. 45).

Awards supported a broad array of organizations rather than being concentrated around a select group. Among the awards to 5,725 specified recipient organizations, 4,164 received only one award.

U.S. donors gave internationally. Although U.S. donors allocated most of their funding to U.S.-based organizations, $223.8 million (22%) went to recipients based outside the U.S. Awards to unspecified recipients may still have indicated where recipients were located. In all, cross-border funding went to organizations in 89 different countries, including India ($96.5 million), South Africa ($34 million), and the United Kingdom ($16.6 million). The Bill & Melinda Gates Foundation awarded the most cross-border COVID-19 funding through 61 grants totaling more than $70 million.

Many grants to U.S.-based organizations also funded activities outside the United States. For example, StartSmall LLC, Jack Dorsey’s charitable vehicle, awarded $10 million to CARE, a global humanitarian organization, to address the second wave of COVID-19 infections in India. He awarded another $2.5 million each to Sewa International USA and Association for India’s Development, also to address the pandemic in India. Both are U.S.-registered nonprofits doing work that is primarily focused outside the country.

Recipient location, 2021

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recipients based in the U.S.</td>
<td>$662M</td>
<td>64%</td>
</tr>
<tr>
<td>Recipients based outside the U.S.</td>
<td>$224M</td>
<td>22%</td>
</tr>
<tr>
<td>Unspecified recipient location</td>
<td>$150M</td>
<td>14%</td>
</tr>
</tbody>
</table>

Data set is based on transactions in Candid’s database as of December 15, 2021. Excludes awards made by donors to other donors included in the analysis to avoid double counting of dollars.
Health, human service, and education organizations continued to receive the most COVID-19 funding. These were also the three main areas of funding in 2020, though ordered differently: Human service organizations were at the top in 2020, receiving 23% of dollars. Funding for international relations and human rights grew in focus in 2021 compared to 2020. CARE, United States Fund for UNICEF, and Clinton Health Access Initiative were among the international development organizations receiving funding. Human rights organizations included a variety of groups, including those engaged in environmental rights (e.g., Publish What You Pay Indonesia) and labor rights (e.g., National Employment Law Project).

Of the $209 million to health organizations, 6% addressed mental health.

Of the $209 million to health organizations, nearly 6% of dollars and 20% of awards addressed mental health. Community foundations, like the East Bay Community Foundation, Greater Washington Community Foundation, and Seattle Foundation, supported a variety of mental health organizations, clinics, and services. The largest mental health grant was from the Charles Stewart Mott Foundation to the Flint-based Genesee Health System, which offers services for mental health, developmental disabilities, and substance use disorders. The foundation awarded $5.5 million for a new facility to house children’s mental health and integrated medical care program areas in one building, recognizing the specific needs of children and families as the community addressed the effects of Flint’s water crisis and COVID-19.

### Issue focus of recipient organizations, 2021

<table>
<thead>
<tr>
<th>Issue</th>
<th>U.S. dollars awarded</th>
<th>%</th>
<th>2020-2021 change in percentage points</th>
<th>No. of awards</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>$209M</td>
<td>20</td>
<td>+8</td>
<td>722</td>
</tr>
<tr>
<td>Human services</td>
<td>138M</td>
<td>13</td>
<td>-10</td>
<td>1,876</td>
</tr>
<tr>
<td>Education</td>
<td>133M</td>
<td>13</td>
<td>-2</td>
<td>622</td>
</tr>
<tr>
<td>Community and economic development</td>
<td>118M</td>
<td>11</td>
<td>+2</td>
<td>792</td>
</tr>
<tr>
<td>International relations</td>
<td>67M</td>
<td>7</td>
<td>+4</td>
<td>147</td>
</tr>
<tr>
<td>Human rights</td>
<td>64M</td>
<td>6</td>
<td>+3</td>
<td>431</td>
</tr>
</tbody>
</table>

Data set is based on transactions in Candid's database as of December 15, 2021. Organizations may address multiple issue areas (e.g., health and human services) and may, therefore, be counted in more than one category. Awards to unspecified recipients were unclassified. Excludes awards made by donors to other donors included in the analysis to avoid double counting of dollars.
**Location of recipient organizations by U.S. state, 2021**

- **New York**
  - $117M
  - 468 awards
- **California**
  - $111M
  - 789 awards
- **District of Columbia**
  - $73M
  - 874 awards
- **Massachusetts**
  - $67M
  - 216 awards
- **Illinois**
  - $30M
  - 145 awards

Data set is based on transactions in Candid's database as of December 15, 2021. Excludes awards made by donors to other donors included in the analysis to avoid double counting of dollars.

**Top 10 specified recipient organizations, 2021**

<table>
<thead>
<tr>
<th>Name</th>
<th>Location</th>
<th>U.S. dollars awarded</th>
<th>No. of awards</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Thermo Fisher Scientific</td>
<td>MA</td>
<td>$30M</td>
<td>1</td>
</tr>
<tr>
<td>2 Wits Health Consortium</td>
<td>South Africa</td>
<td>$23M</td>
<td>8</td>
</tr>
<tr>
<td>3 William Rainey Harper College</td>
<td>IL</td>
<td>$18M</td>
<td>1</td>
</tr>
<tr>
<td>4 The Salvation Army</td>
<td>VA</td>
<td>$10M</td>
<td>2</td>
</tr>
<tr>
<td>5 CARE</td>
<td>NY</td>
<td>$10M</td>
<td>1</td>
</tr>
<tr>
<td>6 CDC Foundation</td>
<td>GA</td>
<td>$8M</td>
<td>5</td>
</tr>
<tr>
<td>7 United States Fund for UNICEF</td>
<td>NY</td>
<td>$8M</td>
<td>9</td>
</tr>
<tr>
<td>8 Center at Sierra Health Foundation</td>
<td>CA</td>
<td>$8M</td>
<td>6</td>
</tr>
<tr>
<td>9 Social Science Research Council</td>
<td>NY</td>
<td>$8M</td>
<td>1</td>
</tr>
<tr>
<td>10 Instituto D’Or de Pesquisa e Ensino</td>
<td>Brazil</td>
<td>$6M</td>
<td>1</td>
</tr>
</tbody>
</table>

Data set is based on transactions in Candid's database as of December 15, 2021. Nearly $291 million went to unspecified recipients through 633 awards.

COVID-19 health checks in India.
*Photo: Gwydion M. Williams*
About the donors

Top donors in the 2021 coronavirus data set included a mix of independent foundations, companies, and public charities. The table below lists their giving according to the data set, which may not necessarily reflect funders’ complete COVID-19 giving. We reached out to the top donors to see how the data set compared to funders’ own calculations. Their responses, where available, are reflected in the “additional details” column.

<table>
<thead>
<tr>
<th>Name</th>
<th>State</th>
<th>Type*</th>
<th>U.S. dollars awarded</th>
<th>No. of awards</th>
<th>Additional details</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  Bill &amp; Melinda Gates Foundation</td>
<td>WA</td>
<td>IN</td>
<td>$159M</td>
<td>156</td>
<td>Foundation reports that total COVID-19 grants awarded in 2021 was $230 million</td>
</tr>
<tr>
<td>2  Pfizer Inc. Corporate Giving Program</td>
<td>NY</td>
<td>CG</td>
<td>70M</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>3  The Rockefeller Foundation</td>
<td>NY</td>
<td>IN</td>
<td>52M</td>
<td>59</td>
<td></td>
</tr>
<tr>
<td>4  The Kroger Co. Contributions Program</td>
<td>OH</td>
<td>CG</td>
<td>50M</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>5  StartSmall LLC</td>
<td>CA</td>
<td>LLC</td>
<td>49M</td>
<td>42</td>
<td>Based on publicly-shared grants list (grants with COVID-19 in the description were also included, even if not categorized as such)</td>
</tr>
<tr>
<td>6  Ford Foundation</td>
<td>NY</td>
<td>IN</td>
<td>40M</td>
<td>53</td>
<td>Foundation reports that total COVID-19 grants awarded in 2021 was $55 million</td>
</tr>
<tr>
<td>7  Google.org Corporate Giving Program</td>
<td>CA</td>
<td>CG</td>
<td>40M</td>
<td>10</td>
<td>Donor reports that total COVID-19 grants awarded in 2021 was $53.5 million</td>
</tr>
<tr>
<td>8  The California Endowment</td>
<td>CA</td>
<td>IN</td>
<td>39M</td>
<td>223</td>
<td>This figure accurately reflects COVID-19 giving in fiscal year ending 2021</td>
</tr>
<tr>
<td>9  Direct Relief</td>
<td>CA</td>
<td>PC</td>
<td>35M</td>
<td>5</td>
<td>This figure accurately reflects COVID-19 giving, though funding was ultimately allocated to 324 unique organizations</td>
</tr>
<tr>
<td>10 RF Catalytic Capital</td>
<td>NY</td>
<td>PC</td>
<td>30M</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

*IN=independent foundation; CG=corporate giving program; LLC=limited liability company; PC=public charity

Data set is based on transactions in Candid’s database as of December 15, 2021. Dollars awarded in the data set may not reflect the full scope of donors’ COVID-19 grantmaking in 2021, and the “additional details” column contains funders’ own calculations of their COVID-19 giving, if it was provided.
When a disaster strikes, corporations and corporate foundations are often some of the first and most public donors. What did their giving look like in the second year of the pandemic?

More than two-thirds of corporate funding came from the manufacturing and retail trade sectors (as defined by the North American Industry Classification System). Pfizer, Coca-Cola, and Boeing led among the manufacturing companies. The top retail trade companies were Kroger, Amazon, and Wal-Mart. The dollar value of awards from these two sectors increased from just 18% of total corporate giving in Candid's 2020 COVID-19 data set to 69% in 2021. On the other hand, the dollar value of awards from the finance/insurance and information sectors decreased from 52% in 2020 to 28% in 2021.

### COVID-19 corporate philanthropy

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### Corporate giving by industrial sector, 2021

Data set is based on transactions in Candid’s database as of December 15, 2021. Classification by industrial sector is by the NAICS Association or Dun & Bradstreet’s Hoovers business database. Excludes giving from LLCs.
In 2021, the Center for Disaster Philanthropy (CDP) continued implementing a flexible, adaptive approach to coronavirus grantmaking. By monitoring and assessing the evolving context, CDP ensures that grants address the most urgent, pressing needs, with an eye toward medium- and long-term recovery. What follows is a description of CDP’s approach to pandemic grantmaking, specifically addressing mental health, equity, and vaccine access.

**Mental health**

According to mentalhealth.gov, “Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood.”

CDP pays close attention to mental health after natural hazards and extreme weather events, so it quickly recognized the needs that would emerge from the pandemic. The first round of grantmaking from CDP’s COVID-19 Response Fund in 2020 addressed psychosocial health and wellbeing, and that focus has continued throughout all funding cycles.

The pandemic’s impacts on mental health will likely follow a different trajectory than those from other disasters, which have an established pattern. As noted in CDP’s Disaster Philanthropy Playbook’s Mental Health, Grief and Bereavement Toolkit, “We know from the descriptions of researchers such as David Abramson at New York University, that people and communities who have experienced a weather-related disaster event go through a series of reactions to the event over the long arc of recovery.”

The pandemic has followed the beginning of the path—the heroism of health care and essential workers and neighbors helping neighbors, thereby building community cohesion. The next stages, however, are less clear. Certainly, there has been a great deal of disillusionment and distrust from all sides of the political spectrum, but there is no...
clear “reconstruction” agenda. Given the breadth of the pandemic in affecting everyone, not just select members of a community, recovery is likely to take much longer.

The intersection of mental health and disasters is one of the more sensitive aspects of response and recovery work. It is also one of the least-funded among philanthropic disaster investments. Recognizing this gap, CDP granted nearly $2.6 million in 2021 to address psychosocial health and wellbeing needs after disasters. Of this, just short of $2 million was specifically allocated for COVID-19 recovery. Among them were:

— $95,326 from the Midwest Early Recovery Fund to the Boys and Girls Club of the Leech Lake Area in northern Minnesota to develop programming on wellness, resilience, and mental health that is culturally grounded and appropriate for children.

— $250,000 from the COVID-19 Response Fund to the American Nurses Association to provide much-needed support and mental health care for America’s nursing population. More than 90% of the nation's registered nurses are women and approximately 20% are Black, Indigenous, Asian, Hispanic, or multiracial.

— $1 million from the COVID-19 Response Fund to Project HOPE for coronavirus response in South America, Asia, Europe, and Africa to support their mental health resiliency program to train health care workers.

CDP’s COVID-19 grantmaking from 2020 to 2021 addressed the need to move mental health support into the virtual space more concretely than may have been practiced before. CDP recommends funders
provide community resources that can be delivered online, by phone, or in-person, especially in those communities that are experiencing multiple disasters such as farmers in the Midwest who are also confronted with drought, fires, and floods and grade-school youth who have been transitioning in and out of school for the course of the pandemic.

Based on CDP’s experiences and research, along with the wisdom of grantee partners and other experts, CDP strongly believes that mental health is an area that will need ongoing funding to support recovery in the U.S. and worldwide. Many racialized communities face challenges in accessing culturally appropriate care, so incorporating an equity lens into mental health funding is critical.

Equity

From the beginning of COVID-19’s impact in the United States, it was clear that the pandemic was not affecting all races the same. As of March 25, 2022, the Centers for Disease Control and Prevention (CDC) shared that compared to the white, non-Hispanic population:

- American Indian or Alaska Native, Non-Hispanic persons had 1.6 times as many cases, 3.1 times as many hospitalizations, and 2.1 times as many deaths.
- Asian, Non-Hispanic persons had 0.7 times as many cases, 0.8 times as many hospitalizations, and 0.8 times as many deaths.
- Black or African American, Non-Hispanic persons had 1.1 times as many cases, 2.4 times as many hospitalizations, and 1.7 times as many deaths.
- Hispanic or Latino persons had 1.5 times as many cases, 2.3 times as many hospitalizations, and 1.8 times as many deaths.

The CDC also said, “Race and ethnicity are risk markers for other underlying conditions that affect health, including socioeconomic status, access to health care, and exposure to the virus related to occupation, e.g., frontline, essential, and critical infrastructure workers.”

Consequently, CDP encourages grantmakers and donors to intentionally approach their COVID-19 philanthropy with an equity lens, which entails explicitly addressing the needs of marginalized populations disproportionately affected by the pandemic. Funders can do this by:

CDP strongly believes that mental health is an area that will need ongoing funding to support COVID-19 recovery worldwide.
CDP believes all grants should be examined through an equity lens to assess and respond to the needs of the most marginalized communities.

- **Directly supporting Black, Indigenous, and other people of color-led and -serving organizations.**

- **Embedding equity into grants as a strategic component and treating it as a separate issue meriting its own funding portfolio.** CDP believes all grants should be examined through an equity lens to assess and respond to the needs of the most marginalized communities. There may also be times when having a discrete fund for a specific population (e.g., LGBTQIA+ communities, people living with disabilities, Indigenous families, etc.) is called for.

- **Supporting organizations led by members of at-risk communities.** Grassroots and local organizations that are led by members of communities that are marginalized because of their race, ethnicity, religion, gender, physical disability, or other identities do not usually attract the attention of funders. Grantmakers need to research these frontline organizations that are most closely connected to the community.

CDP did not include equity as a discrete portfolio in its 2021 grantmaking because all of its grants are made with a racial and intersectional equity lens. CDP fund directors work to ensure that the most marginalized populations are being addressed through their grants, as they recognize that communities’ pre-existing needs are enhanced by disasters and the pandemic.

For example, CDP granted a total of $715,000 to specifically address the needs of LGBTQIA+ people including:

- $65,000 to ORAM (Organization for Refuge, Asylum and Migration) for economic empowerment and capacity building of vulnerable LGBTQIA+ asylum seekers and refugees in Mexico and Kenya.

- $500,000 to Outright Action International to provide for response and recovery needs of the LGBTQIA+ communities in the Asian Pacific, Latin American, and African areas of the world.

Of the $500,000 granted for advocacy by CDP in 2021, $100,000 was granted to the National Domestic Workers Alliance for COVID-19 response in the United States to expand capacity for advocacy for safe workplaces and equitable access to resources for domestic workers. The majority of domestic workers are immigrant and migrant women and/or women of color.

Nearly $3.4 million was granted by CDP in 2021 for capacity-building efforts, many of which had a direct or indirect connection to COVID-19 response and recovery. Sometimes, this funding linked COVID-19 and another disaster. For example:

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— $60,000 to the Quad Cities Latino Foundation to support COVID-19 and flood recovery in Louisa County, Iowa to provide an advocate/coordinator to support needs of impacted community members with a focus on Latinx and Chin communities.

— $214,000 to the Latino Community Fund of Washington State to provide sub-grants to local, grassroots organizations working to support recovery from the wildfires and the pandemic for immigrant and farmworker populations in the areas hardest hit.

— $500,000 to Doctors Without Borders for COVID-19 response in Brazil to help the Brazilian Ministry of Health meet the health needs of vulnerable populations through capacity building and human resources.

CDP provided $435,000 in grants to support educational needs of young people. Donors Choose was given $250,000 for COVID-19 response in the United States to equip teachers and students in low-income, mostly minority schools, with resources that address learning needs that have arisen as a result of COVID-19.

All three of CDP’s food security grants, totaling $629,100, targeted marginalized and at-risk populations, including:

— $250,000 to International Medical Corps for COVID-19 response in Gaza for malnutrition screening, food vouchers, nutrition counseling, and psychosocial support for children and mothers.

— $129,100 to the Wambli Ska Society in Rapid City, South Dakota, for Native-led COVID-19 recovery to include a Native food pantry, needs assessment, case management, and spiritual and mentoring support to Native American youth.
Vaccine access

Within the U.S., “There are many reasons eligible people are not vaccinated or boosted,” according to The New York Times. “Surveys have indicated that some people are adamant in their refusal of the coronavirus vaccines, while others are open to getting a shot but have been putting it off or want to wait and see before making a decision for themselves or for their children. The first group, surveys have shown, tends to be disproportionately white, rural, evangelical Christian and Republican. The second group tends to be a more diverse and urban group, including many younger people, Black and Latino residents, and Democrats.”

Internationally, the reasons vary depending upon the country but include inability to store vaccines; a shortage of vaccines, equipment or medical personnel; fear of the medical system/Western medicine; mistrust of government; as well as all the concerns in the U.S. listed above.

As of April 14, 2022, 21% of people worldwide who have received at least one vaccination are from North America or Europe, and 25% are from high-income countries. The wealthiest 30 countries have just 10.9% of the world’s population but have access to 14.4% of the vaccines. In the U.S., this works out to 5% of the vaccines for only 4.3% of the global population. To look at the flip side, the least wealthy 30 countries have 1.4% of the vaccines but are home to 8.5% of the population.

Throughout the pandemic, research has shown that the virus can mutate easiest in people who have not been vaccinated. Increasing the global vaccination rate, therefore, is key to containing the virus and moving it from a pandemic to endemic, similar to the flu.

CDP recognized the barriers to vaccine access and the acute needs that exist in ensuring everyone gets inoculated. In 2021, CDP granted $4,351,039 for vaccine access, the top-funded area in its overall grantmaking.

Two of CDP’s many health grants also targeted vaccine access.

— $500,000 to Direct Relief for COVID-19 response in the Bahamas, Dominica, Dominican Republic, Jamaica, and Puerto Rico to procure pharmaceutical refrigerators and freezers and other equipment to expand vaccine storage capacity.

— $250,000 to Plan International to ensure safe and sanitary public spaces and access to vaccine information for hard-to-reach populations (including refugees, internally displaced people, Indigenous peoples, children, and youth, especially girls) in the far north and southwest regions of Cameroon.
Other vaccine access grants included:

— $450,000 to Internews Network for COVID-19 response in Bolivia, Colombia, and Peru to strengthen Indigenous, Afro-descendant, and last-mile health networks, and build trust around COVID-19 vaccines.

— $1 million to Community Organized Relief Effort (better known as CORE) to expand COVID-19 vaccine access to neighborhoods comprised of Black, Indigenous, and other people of color by increasing technical and operational support to underserved and high-risk communities.

— $300,000 grant to National Association of Free and Charitable Clinics to expand COVID-19 vaccination access in the United States by investing in the necessary infrastructure and materials for current and future vaccination sites. They also increased access for underserved populations by supporting translation services, health literacy development, transportation, training, and education.

As the range of grants demonstrates, vaccine access goes beyond providing actual vaccines or medical personnel (although, certainly, that remains critical, especially in lower-income nations). It entails mobile outreach for rural and hard-to-reach communities. It supports the development and translation of materials into multiple formats and languages. It assists in identifying and training community leaders who can educate their community members and build trust in the medical system.

CDP encourages funders to support vaccine access domestically and internationally, by:

— Looking to CDP’s work and other examples to understand what kinds of activities are having success in increasing vaccination rates.

— Identifying at-risk populations to support in your community and/or internationally.

— Joining with other funders to create collaborative opportunities for bigger impact.
Who is tracking COVID-19 philanthropy around the globe?

The coronavirus pandemic disrupted lives everywhere. It is, therefore, unsurprising that philanthropic efforts also arose everywhere. Individuals, communities, and organizations across industries and sectors responded to the global crisis. We turned to country and regional experts to describe the philanthropic response to the pandemic in their part of the world. What follows are snapshots of COVID-19 funding flows in 11 countries. Some figures are from broad-based data collection efforts; others are from specific COVID-19 funds. Organizations collected data using different methodologies and at different times during the pandemic; distributions, therefore, cannot be compared.

Brazil

Associação Brasileira de Captadores de Recursos (ABCR) created Monitor das Doações COVID-19 to track all private donations addressing COVID-19 in Brazil. The site was last updated in August 2020 and captured R$7.1 billion (over US$1.3 billion) donated by 731,974 donors.

According to Comunitas’ 2020 edition of Benchmarking do Investimento Social Corporativo, companies invested R$2 billion (US$388 million) in the first half of 2020, which accounted for more than a third of the total grants awarded to combat COVID-19, as captured by ABCR’s donation monitor.

Institute for the Development of Social Investment (IDIS) partnered with BSocial and Movimento Bem Maior in mid-March 2020 to launch the Health Emergency Fund – Coronavirus Brazil. More than 10,000 donors contributed a total of US$8 million which was distributed to 58 hospitals, one research center (Fiocruz), and one nonprofit (Comunitas).
Canada

Philanthropy Responds, a joint project between the Philanthropic Foundations of Canada, Community Foundations of Canada, Environment Funders Canada, and The Circle on Philanthropy and Aboriginal Peoples in Canada, with technical and design support provided by Grantbook, recorded that C$192.3 million (US$143.4 million) was mobilized based on 239 records. The site is an interactive data mapping tool designed to identify initiatives and encourage collaboration within the Canadian grantmaking community to better serve Canadians impacted by the COVID-19 crisis.

The Government of Canada made a C$350 million (US$260.9 million) investment in the Emergency Community Support Fund, hosted by the Community Foundations of Canada, the Canadian Red Cross, and United Way Centraide Canada. The purpose of the fund is to support charities and nonprofit organizations serving populations experiencing vulnerability amid COVID-19. As of March 1, 2022, Community Foundations of Canada redirected emergency funding to support 5,000 projects across the country. Over 3,100 projects address social inclusion and learning, more than 3,000 address mental health issues, almost 2,000 projects keep people safe from the virus through health and hygiene measures, and approximately 1,800 projects are directly supporting food security needs.
China

In November 2021, China Charity Alliance published their annual *China Charity Donation Report* which documents that in the first half of 2020, charitable organizations in the country received RMB39.6 billion (US$5.7 billion) and 1.1 billion pieces of equipment to address COVID-19.

In addition, as of March 15, 2022, Give2Asia has donated US$15.6 million to China through its COVID-19 Coronavirus Fund.

Ghana

Ghana Philanthropy Forum’s COVID-19 Donation Tracker, which was last updated in September 2021, has identified 424 donations. Individuals, faith-based organizations, non-governmental organizations, and public and private sector actors have contributed US$13.7 million to address COVID-19 in the country.

India

In April 2020, GiveIndia launched the India COVID Response Fund-1 (ICRF-1) to support relief initiatives. A year later, it launched ICRF-2 to support the country’s healthcare infrastructure and provide humanitarian aid. As of March 1, 2022, the platform had raised US$70.5 million from 1.6 million donors.
During the second wave of COVID-19 in India, from April to December 2021, Dasra raised US$10.2 million from 474 funders and disbursed US$6.5 million to 140 nonprofits. Dasra is currently building out a five-year initiative to help organizations move from relief to resilience.

In addition, as of March 15, 2022, Give2Asia has donated US$7.7 million to India through its COVID-19 Coronavirus Fund.

**Indonesia**

Filantropi Indonesia's Filantropi Tanggap COVID-19 online platform contains data and the latest developments from various philanthropic initiatives. As of March 1, 2022, the site has captured Rp905 million (US$64,162) going to 416 communities through 470 initiatives across the country.

Separately, Give2Asia has donated US$993,392 to Indonesia through its COVID-19 Coronavirus Fund, as of March 15, 2022.

**Italy**

Fondazione Italia Sociale aggregated data from multiple sources and estimated at least €877 million (US$1 billion) in cash donations addressing the COVID-19 pandemic in 2020. Corporations and corporate foundations represented the majority of giving, with donations also coming from banking and community foundations, major individual and family donors, crowdfunding platforms, and other organizations. This figure is an underestimate because of the

SpesaSospesa was one of the many initiatives created in Italy to face the extraordinary circumstances caused by the pandemic. They collect donations and recover potential waste and surplus of basic necessities to support economically disadvantaged families.

*Photo: Fondazione Italia Sociale*
difficulties of data collection, particularly around tracking small individual citizen donations which are not included in this total. Fondazione Italia Sociale collected data from publicly available information, including: Italia Non Profit COVID-19 dashboard; Corriere Della Sera Dataroom, Covid, donati oltre 800 milioni: come sono stati spesi?; and Vita International, Crowdfunding e Covid-19: il boom delle piattaforme.

In December 2020, Fondazione Italia Sociale published a working paper, Philanthropic resources for nonprofits during COVID-19. In it, they document the tepid government response to support the Italian nonprofit sector, the outpouring of private capital to address the pandemic, particularly in the regions of Italy that were most impacted, and the need for a more coordinated, strategic response from institutional philanthropy.

**Mexico**

Centro Mexicano para la Filantropia (Cemefi), using information from the country’s tax administration service, estimates that 1,148 organizations received MEX$5.6 billion (US$260.6 million) to address COVID-19 in 2020. At the same time, 1,077 of recipient organizations granted MEX$7.4 billion (US$344.4 million) to other organizations to support relief efforts. Of that, MEX$5 billion (US$232.7 million) was donated in cash, while MEX$2.3 billion (US$107 million) was donated through in-kind giving. Based on these figures, it appears that organizations not only re-granted donations they received, but also mobilized resources to allocate on average an additional 33%. These
figures underestimate the sector’s contributions, because they counted only donations that directly supported those with COVID-19, such as food and medical services. They did not include any financial support to address other impacts of the pandemic, such as to arts and culture or educational organizations or volunteering efforts.

These figures and more can be found in Cemefi’s Compendio estadístico del sector no lucrativo 2021, published in November 2021.

South Africa

The Solidarity Fund was designed as a rapid response vehicle to mobilize South Africa in the fight against the COVID-19 pandemic and the resulting health, humanitarian, and social consequences. As of March 1, 2022, R3.46 billion (US$210 million) in donations have been received with R2.95 billion (US$179.1 million) disbursed across all nine provinces.

Ukraine

The Zagoriy Foundation carried out several funding activities in response to COVID-19. In partnership with the Darnitsa Pharmaceutical Company, the foundation purchased and donated six medical ventilators to four hospitals in Kyiv which totaled US$238,200. In March 2020, the Zagoriy Foundation and the Ukrainska Birzha Blagodiynosti (Ukrainian Charity Platform) jointly announced a nationwide fundraiser to purchase medical ventilators and other medical equipment, which raised a total of UAH4.2 million (US$156,046). Finally, in 2020, the foundation launched an anti-COVID-19 grant competition to mobilize resources to combat the pandemic and support projects aimed at protecting the population. From this, the foundation donated UAH1.8 million (US$66,732) to seven organizations.

The Ukrainian charity platform Dobro.ua ran fundraisers in March and April 2020, which raised a total of UAH4.6 million (US$170,538) from 4,107 donors. In addition, the International Renaissance Foundation (IRF) ran a joint grant competition with the Delegation of the European Union to Ukraine to support public initiatives aimed at strengthening solidarity, self-sufficiency, and mutual assistance in the country during the COVID-19 pandemic. The initiative granted UAH5 million (US$185,367) to 191 projects.

Over the past two years, Ukrainian businesses have launched several charitable initiatives to combat the COVID-19 pandemic. A comprehensive list of all the activities can be found on the Ukraine CSR website.
United Kingdom

According to 360Giving's report *U.K. COVID relief and recovery grants: Data analysis*, released in December 2021, almost £2.4 billion (US$3 billion) was donated by 174 grantmakers through 66,000 grants. This figure is based on data published by funders about the grants they made between March 2020 and October 2021 and represents a large proportion (though not all) of philanthropy during the time. The report finds that most grants (67%) were small (£10,000 (US$12,824) or less) and many were distributed quickly (42% were awarded in or before June 2020).

The Disasters Emergency Committee, a group of 15 U.K. aid charities raising funds to respond to disasters, has raised £62 million (US$79.5 million) for its coronavirus appeal. The donations are being spent in eight countries: Afghanistan, Bangladesh, DR Congo, India, Somalia, South Sudan, Syria, and Yemen.
Funding flows only tell part of the story. To understand how the pandemic impacted the philanthropic sector and civil society organizations around the world, we reached out to local experts who shared their observations and experiences over the past two years. The following case studies from Brazil, India, and Ukraine reveal how the social sector responded and adapted to the challenges and opportunities created by COVID-19.

**Philanthropy during COVID-19 in Brazil**

Brazil’s culture of giving and philanthropy has been growing since the 1980s. The COVID-19 pandemic accelerated this development, as Brazilian philanthropy mobilized to support civil society organizations, projects, and individuals in the face of crisis—providing more direct funding than ever before. According to a donation monitor, the number of funded social initiatives fighting the impacts of the pandemic rose to unprecedented numbers, totaling over US$1.3 billion by the summer of 2020.
Candid spoke with staff from three different organizations—Associação Brasileira de Captadores de Recursos (ABCR), Grupo de Institutos, Fundações e Empresas (GIFE), and the Institute for the Development of Social Investment (IDIS)—to gain a better understanding of the systemic changes taking place in Brazilian philanthropy, stimulated by the pandemic.

The social sector in Brazil is locally referred to as the “private social investment” sector and it consists of over 815,000 nonprofit organizations, as well as institutional donors. On the donor side, it is dominated by corporate investors who largely execute their own projects rather than administer grants. Community foundations, family foundations, and other private foundations make up a smaller portion of the sector.

COVID-19 placed unparalleled pressure on the country’s health systems, economy, and the well-being of Brazilians. In response, the philanthropic sector mobilized significant resources to support pandemic relief efforts, donating money, food, and medical equipment directly to civil society organizations including hospitals. These organizations played a crucial role in spreading necessary information, distributing food, and fighting the overall effects of COVID-19.

Innovative technologies helped mobilize fundraising campaigns and increase donations to support these efforts. Crowdfunding platforms amplified the needs on the ground to reach more potential donors and improved the process of connection, contributing to the resilience of the sector. João Paulo Vergueiro, executive director of ABCR, shared that these platforms coupled with the pandemic “helped foster the sector in Brazil in a way never seen before, including generating donations from the general public.” But he also noted that organizations with access to technologies, fundraising plans, and marketing campaigns fared better than those without.

As highlighted in IDIS’s white paper, *Perspectives for Brazilian Philanthropy in 2022*, there is new energy from younger generations. They are more confident both in civil society organizations and in the power of giving, in comparison with the rest of Brazilian society.

However, this sentiment is slowly changing, including among institutional funders. Family and corporate foundations realized during the pandemic that it would be more efficient to support projects led by civil society organizations, rather than starting up their own. This is perhaps the most noteworthy shift made by Brazilian philanthropists, who have traditionally sought to build their own solutions and programs rather than donate to third parties. ABCR was able to strategically track these donations as donors became more vocal about their activities for the first time, inspiring others both to give and to be transparent about their own giving. Of the corporate, family, and
Philanthropy and COVID-19: Examining two years of giving

Independent foundations and institutes surveyed by GIFE, 87% of donations directed for COVID-19 response were awarded to other organizations, a notable increase from previous giving practices.

Patrícia Kunrath Silva, knowledge coordinator at GIFE, explained, “We have a movement in Brazil called ‘movement for a culture of donation’ which is based on the belief that empowered civil society organizations enable democracy. The movement aims to advance trust-based relationships and grantmaking between funding institutions and civil society organizations through partnership and collaboration.”

She also noted that funders shifted their giving strategies in more ways than simply increasing donations. To meet rapid response needs, funders also participated in collaborative initiatives, sped up their processes, reduced bureaucracy, increased flexibility, and operated with more trust in civil society organizations.

One such collaborative effort was the Health Emergency Fund – Coronavirus Brazil, promoted by IDIS, BSocial, and Movimento Bem Maior. They built a program to collect funds from companies, foundations, and individuals specifically to support Brazil’s health system. This centralized fund raised over US$8 million, and enabled donations to be distributed quickly to 58 hospitals, a research center, and a nonprofit. “Philanthropy has realized collaboration can take us forward. Trust had to be built quickly with organizations, and they proved they can do the work and that they know the local problems because they are close to beneficiaries. We hope this trust will stay,” shared Luisa Lima, communication manager at IDIS.

The pandemic has shone a light on the possibilities for Brazilian philanthropy. There is hope that the sector can move forward with greater trust in civil society organizations by supporting them strategically with funds for both programs and institutional development. As Brazil, along with the rest of the world, continues to meet economic and social challenges in the years to come, there is hope that the learnings from this moment can shape the sector’s actions in the future.

Philanthropy during COVID-19 in India

Private philanthropy in India stems from four sources: foreign contributions, corporate funding, individual donors (also called retail donors), and high-net-worth individuals or families residing in and outside of India. During the pandemic, family philanthropy grew significantly, tripling in FY2020 compared to FY2019. Despite this rise in funding, several hurdles remain for philanthropy to achieve its potential and meet the growing needs of nonprofit organizations across India.
We spoke with Ingrid Srinath, founder and director of the Centre for Social Impact and Philanthropy (CSIP) at Ashoka University, to learn more about the impact of COVID-19 on India’s social sector, the role philanthropy and nonprofits played in disaster relief, and her hopes for the future.

Setting the context for the gravity of the situation in India, Srinath noted, “Before the pandemic, economic and development indicators like nutrition, employment, and GDP growth were already declining. Then, COVID-19 exacerbated all of them. We are still a long way away from being where we were economically and socially even in 2019.” She described how human rights abuses, such as child labor and violence against women, increased especially among marginalized society in India—lower castes, LGBTQIA+ communities, people with disabilities, artisans, and others.

Throughout the pandemic, the nonprofit sector played a critical role in alleviating stresses across a range of needs. Organizations leveraged their existing grassroots networks and expertise to mitigate health, economic, and social crises in their communities. According to a CSIP study, 63% of surveyed organizations across the country experienced a rise in demand for their services between February 2020 and February 2021. Many nonprofits also engaged in disaster relief efforts out of necessity, despite having no previous experience in relief work.

At the same time, financial insecurity has been one of the biggest challenges for nonprofits during the pandemic. Srinath noted that, “Indian nonprofits are already functioning close to the margins—often operating with no endowment, or large reserves, or committed multi-year funding.”
India’s civil society indisputably stepped up to take on vital work in the face of crisis, but the enabling environment has worsened. Civil society organizations found themselves competing for funding with the Prime Minister’s Citizen Assistance and Relief in Emergency Situations Fund or PM CARES Fund which garnered US$1.88 billion of India’s COVID-19 relief philanthropy. Donors of all kinds, including but not limited to individuals, private business, government agencies, and foreign funders, received generous tax incentives. But many have criticized the fund for its lack of transparency and accountability, with little information available publicly on where and how the money collected has been spent.

As the government incentivized contributions to the PM CARES Fund, it also constrained international support to local organizations and further limited how those funds can be used. UN bodies and others have criticized new amendments to India’s Foreign Contribution Regulation Act (FCRA) for inhibiting civil society’s ability to develop financial sustainability and resilience, intensifying challenges during an already distressing time.

On the bright side, foundations and individuals in India and the diaspora gave generously during the pandemic, providing support in cash, kind, and advocacy. Family foundations, having stronger connections with the organizations they support, remained loyal to their existing grantees. Corporations increased support for cash transfers, shifting from funding ongoing programs to supporting direct relief, medical hardware, and livelihoods.

The pandemic was an eye opener for donors of all kinds, who got a “behind the scenes” look at what organizations they support do, and under what circumstances they operate. For example, donors became more aware of the gaps in access to technology and transportation for nonprofit staff. “In some cases, this has led to more investment in building organizational capacity, rather than focusing solely on program expenses,” shared Srinath. The Grassroots Resilience Ownership and Wellness (GROW) Fund is one philanthropy collaborative that came out of the pandemic, working to scale civil society and build resiliency, and Srinath hopes more efforts like this will sprout.

Optimistically, philanthropy and civil society have responded with creativity and flexibility. Funders have learned that they can reduce the bureaucracy involved in grantmaking and that they can trust their nonprofit partners to know what the best solutions for their communities are. New philanthropists emerged during this time, providing civil society organizations with hope for a wider diversity of financial support and sustainability. Overall, Srinath hopes that the growing appreciation for a support ecosystem builds the foundation for a stronger, more connected civil society in India.
Philanthropy during COVID-19 in Ukraine

Institutional philanthropy in Ukraine is relatively new. However, a culture of supporting others is not. According to a poll by the Zagoriy Foundation, many Ukrainians support their community by donating time and money directly to others. Fewer people financially contribute to charities and foundations. This had significant impacts on these charitable organizations, many of which were underfunded and under-resourced, yet found themselves at the center of pandemic relief efforts.

The Zagoriy Foundation is a family foundation based in Kyiv working to promote a culture of philanthropy throughout Ukraine and increase trust in charitable foundations. We spoke with Liubov Rainchuk, head of the program department, to learn how the social sector in Ukraine is developing and how the pandemic shaped the sector’s role.

COVID-19 and the strict lockdown impacted every area of life in Ukraine. The negative economic effects contributed to rising unemployment and an increased demand for humanitarian assistance across issue areas. Simultaneously, human and financial resources to meet those demands were limited. Nonetheless, the sector stepped up quickly to meet urgent needs and disseminate information, medical equipment, and more to their communities.

One significant role civil society organizations played was in executing social awareness campaigns to inform the general public about the coronavirus. Ukrainian charities helped develop commercials and utilized social media in interactive ways to promote both the spread of safety information and the important work of charitable organizations. Charitable foundations like the Zagoriy Foundation also realized the value of social media to share about their work, engage individuals, and broaden trust.

One tool in particular that supported this transformation is Dobro.ua, a platform aimed at enabling a more cohesive sector based on accountability, transparency, and the involvement of citizens. Relaunched in 2020, the platform makes it easy to raise funds and see where the money is going. “This digitization can help us develop more long-term, sustainable, and integrated systems in the sector,” reflected Rainchuk.

The pandemic led to a surge in volunteer activity, according to the Zagoriy Foundation’s report, Charity in the time of coronavirus. Many Ukrainians were eager to help, and volunteer-led initiatives sprung up. These initiatives, though positive in intention, also created challenges around coordination. In a sector trying to establish trust through transparency, ad hoc initiatives that raise funds without accountability...
can also create risk. “The crisis is a growth area,” observed a representative from a Kyiv-based charitable foundation. Nonetheless, there is continued hope that the volunteer community will strengthen as a result of COVID-19 and people will continue to engage even after the pandemic. “We want people to know that if they don’t have a lot of resources or money, they can still be a part of the solution,” shared Rainchuk.

Another overarching challenge for the sector has been limited funds. Donors played a big role in providing financial support and medical equipment to hospitals but also had to divert funds away from organizations focused on non-coronavirus-related issues such as culture, education, and community development. Some of these organizations struggled to stay afloat. Foundations that also rely on donations themselves are concerned about declining funds in the future, as there is a high risk that the capacity of business and population will be exhausted.

On the bright side, the pandemic has enabled more organizations and funders to gain competencies around streamlining processes, using technology to reach wider audiences, and embracing collaboration. While it is still too early to know about what changes and practices will stick in the long term, Rainchuk is hopeful that the ethos of working together and supporting one another will bring the sector to a collaborative future.
Year three of COVID-19 brings with it the wisdom we have gained as funders in watching our communities and grantee partners respond to the crisis. It also brings the knowledge that even if COVID-19 was to be eradicated, the damage the pandemic has done, and the inequities it has exposed, will take decades to repair.

We are also clear, however, that this pandemic will not magically disappear. In the second COVID-19 report, we said, “The pandemic is leaving behind broken systems and fractured communities, families, and individuals.” This continues to be true.

Research has shown that marginalized communities within the U.S. and countries around the world do not have equitable access to health care, including vaccines. Lower-income countries will continue to struggle if vaccines are not made cheaply and easily accessible. The combination of racial discrimination in health care within the U.S. makes it more challenging for racialized communities to get informed and accessible care. People with disabilities, those living in poverty, LGBTQIA+ communities, children and youth, older adults, and many others have also been disproportionately affected by the broader impacts of COVID-19.

This year, we are asking funders to recognize that sustained financial attention is at the heart of effective recovery from the pandemic. As the report shared, COVID-19 funding dropped from 2020 to 2021, in the number of donors, the dollar amount awarded, and as a percentage of total grants paid. Yet, we also know that recovery from the pandemic will take decades. It is incumbent upon funders to continue to provide support for this crisis.

It is important to note that we do not see COVID-19-related giving as moving money away from other pressing issues. Instead, we invite funders to increase their giving and to consider their existing grant programs with a COVID-19 lens. How are you ensuring that your education funding addresses the lost learning and socialization time children and youth experienced during the pandemic? Is your funding for California wildfire recovery taking into account the need for
non-congregate sheltering due to the pandemic? Does your funding for humanitarian recovery in Ukraine allocate for health care resources to address the compounded traumas of COVID-19 and displacement? Here are four steps you can take right now that can help invigorate your COVID-19 giving strategy.

1. **Build an equitable response.** Recognize the ways in which the pandemic has had a disproportionate impact on marginalized communities. This will look different in every region, but there will always be populations and sectors that have increased negative experiences. Provide additional financial and technical support to those communities. Support capacity-building work and fund operational costs of organizations addressing the needs of Black, Indigenous, and other people of color as well as the root causes of systemic inequities that stand in the way of equitable outcomes.

2. **Flex your funding.** MacKenzie Scott’s grantmaking is a wonderful example of an important approach in philanthropy: flexibility. Fund operating expenses. Support capacity building. Fill gaps in funding that your grantee partners are challenged to get met elsewhere. The pandemic has taught CDP staff that we need to be fluid in our response and work. We share that with grantees so that they know they can reach out and tell us how their needs have changed throughout the work.

3. **Give trust.** Our grantee partners are the experts; we need to treat them as such. Let them guide you in your funding. Trust-based philanthropy includes being transparent, responsive, providing technical support and other resources, and reducing the paperwork burden.

4. **Go local.** Localization—the centering of power in the hands of those people who are most affected by the issue and focusing on local decision making—is often seen as an international issue. However, it is equally as important for domestic funding. Fund as locally and grassroots as possible. Who are the groups that are going to be supporting recovery from the pandemic for years to come? We at CDP tend to follow the adage that “disasters begin and end at the local level.” Build relationships with local organizations and bring them into your grantmaking portfolio.

CDP and Candid have a long-term partnership to collect and analyze data about humanitarian crises and disasters. To ensure we can capture the true intent and meaning of your grantmaking, we encourage you to [share your data with Candid](https://www.candid.org/). This transparency is the only way the sector can understand funding patterns, identify critical needs, and make informed giving decisions. We thank the more than 850 donors who have shared their latest grants data with Candid.
Appendix


**How were COVID-19 awards identified?** The coronavirus data set consists of awards with descriptions containing the term “coronavirus” or “COVID-19.” Grantmakers who shared data with Candid also flagged grants as COVID-19 support. At times, an award addressed the pandemic alongside other activities. In these cases, the full award amount was included in the data set, as there was not enough information to separate the portion that was specifically allocated to address COVID-19.

**When will we have a complete account of COVID-19 giving in 2021?** Companies and individuals are not obliged to publicly disclose the details of their giving, so we will never know the full extent of their pandemic-related grants. U.S. private foundations and public charities, on the other hand, are required to share basic information about their grants in IRS Forms 990-PF and 990. Unfortunately, it can take more than two years for the IRS to make this information available. Candid and CDP will re-visit 2021 funding for the coronavirus pandemic and all other disasters in the 2023 *Measuring the State of Disaster Philanthropy* report.

Even as we wait for the IRS to release all 990 filings to the public, we will likely never know philanthropy’s full response to the COVID-19 crisis, due to the lack of specificity in grant descriptions found in these documents. An assessment of fiscal year ending (FYE) 2020 990-PF and 990 filings available in October 2021 revealed that only 3% contained grant lists making any reference to COVID-19. Unless funders share more details about their giving, we have little data to analyze (see “CDP recommendations for philanthropy” on p. 43).

**How comprehensive is the coronavirus data in this analysis?** Currently, we do not have anything close to a full picture of even foundation grantmaking. Among the roughly 126,000 total private
foundations, Candid had 39,516 990-PF filings for FYE 2020 (31%) and 1,053 for FYE 2021 (under 1%). This does not include the additional grants data Candid collected directly from funders or from funder websites. But it does clearly indicate that there is far more data collection needed to have a complete picture of funding in both 2021 and 2020.

What donors are represented in the 2021 data set? Funding came from 229 donors—including private and community foundations, companies, public charities, and high-net-worth individuals.

Is the 2021 data set only based on cash grants? What about in-kind support? Candid collects data beyond cash grants. The 2021 data set includes in-kind gifts (i.e., contributions of equipment, supplies, or other property or services given a monetary value) and program-related investments (i.e., loans or other investments to support charitable activities that involve the potential return of capital, usually below market rates). But most awards were cash grants.
Is funding always directed to a specified recipient? No, 28% of coronavirus dollars in 2021 went to unspecified recipients. This happens when funders: 1) do not identify recipients of funding; 2) list a group of recipients without disclosing the amount awarded to each; or 3) anonymize recipients due to privacy or security concerns. Ten of the largest 13 awards went to unspecified recipients. Corporations awarded the majority (76%) of funding to unspecified recipients. Awards to unspecified recipients were included in most analyses.

How does the analysis and methodology in this report differ from prior COVID-19 reports released by CDP and Candid? This report’s COVID-19 funding analysis contains a few key differences. For one, this report’s analysis includes data only from U.S. donors, as Candid’s data collection relies heavily on sources written in English. Candid collected an additional 10,803 awards totaling $542 million from funders outside the U.S., which was not included in the analysis. To understand the funding picture outside the U.S., we cite country experts who reported this data (see “Who is tracking COVID-19 philanthropy around the globe?” on p. 29).

Prior COVID-19 reports restricted some analyses to specified recipients only. This report, on the other hand, uses all information available, even for unspecified recipients.

In addition, this report’s analysis excludes two specific transaction types that were included in previous COVID-19 reports: pledges and matching grants that were not specifically identified as having been paid. In response to a crisis, donations may be announced in the form of pledges, reflecting a funder’s intent to make a monetary or in-kind contribution of a specified value. Announcements about matching grants are also often intentions to provide support by matching up to a certain amount raised from another source. Tracking progress on how a pledge or matching grant commitment is ultimately allocated...
can be challenging, if not impossible, based on public records. Candid occasionally identifies specific award details following a pledge, which leads to the complication of double counting dollars when both are combined in the analysis. For these reasons, this year’s analysis does not aggregate grants and pledges/matching commitments. We caution against direct comparisons in this report to previous publications’ figures, which included both.

**What 2021 data did Candid leave off the table by not analyzing pledges and matching grant commitments?** Candid's 2021 coronavirus data contained 31 pledges totaling nearly $1.3 billion by 24 U.S. donors. The pledged amount totaled more than the granted amount ($1 billion) used in the analysis. Corporations represented 46% of pledged dollars. For example, Facebook committed $120 million in ad credits to health agencies around the world to run campaigns about COVID-19 vaccines. Another 43% of pledged dollars came from independent foundations, such as Open Society Foundations’ $30.5 million to address vaccine inequity. An additional 12% came from operating foundations.

**What comparisons can we make to funding in 2020?** Since data collection is still underway for both 2020 and 2021, we do not compare funding dollars. Instead, to analyze shifts in foundation funding, we provide results from the Foundation Giving Forecast Survey in “U.S. foundations’ COVID-19 giving in 2020 vs. 2021” on p. 7. We also offer comparisons in funding trends based on proportions. Proportions are, also, subject to change as we collect additional information—and may shift widely if large, new awards are later disclosed. We still opted to make these comparisons available, since the early data can point to important giving patterns and reveal donor priorities, as we understand them now. The 2020 data set used as the comparison is also from Candid’s coronavirus database, as of December 15, 2021.
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