_	99	n	Doturn	of Organization Exampt	rom Inc		Tox		OMB No. 1545-0047
Form	33	•	Return	of Organization Exempt F	-rom inc	come	lax		2020
			Under section 501(c),	527, or 4947(a)(1) of the Internal Reven	ue Code (ex	cept pri	ivate found	dations)	
Departm	ent of th	e Treasury	Do not er	nter social security numbers on this for	m as it may	be made	e public.		Open to Public
Internal	Inspection								
A Fo	or the 2	2020 calend	ar year, or tax year begi	nning	, 2020, a	and end	ing		, 20
B Ch	eck if ap	plicable:	C Name of organizatiorCe	enter for Arms Control and				D Employ	ver identification number
=	dress ch	ange	Doing business as No	on-Proliferation					04-2693322
_	me chan	ige	Number and street (or F	P.O. box if mail is not delivered to street address)		Room/sui	ite	E Telepho	one number
	ial return	1	820 1st St NE				LL 180		(202) 546-0795
Fin	al return	/terminated	City or town, state or pro	ovince, country, and ZIP or foreign postal code				G Gross	receipts
An	nended re	eturn	Washington, D	C 20002				\$	514,898
Ap	plication	pending	F Name and address of p	rincipal officer: John Tierney			H(a) Is this a	group return for	subordinates? Yes X No
			Same as C abo	ve			H(b) Are all	subordinates	included? Yes No
I Tax	k-exempt	t status: 🛛 🗙	501(c)(3) 501(c) () < (insert no.) 4947(a)(1) or 5	27		lf "No,"	attach a list.	See instructions
J We	bsite:		.armscontrolcent	er.org			H(c) Group	exemption n	umber 🕨
K Fo	rm of org	anization: 🗴	Corporation Trust As	sociation Other ►	. Year of formation	on: 198	30 м з	State of legal	I domicile: DC
Part	: 1	Summar	y						
	1 E	Briefly descri	be the organization's miss	sion or most significant activities: A NC	N-PROFIT	, NON	-PARTIS	AN RES	EARCH
ð				DENHANCING INTERNATIONAL P	EACE AND	SECUE	RITY IN	THE 21	LST CENTURY,
anc.	_		RETAINING ITS FOO						HER PRESENT
rna	-		SECURITY THREATS						
Activities & Governance	2 (Check this bo	ox 🕨 🗌 if the organizatio	n discontinued its operations or disposed	of more than	25% of i	ts net asse	ets.	
Ŭ								1 1	8
s s	4	Number of in	dependent voting membe	ers of the governing body (Part VI, line 1b)				. 4	8
/itie	5 7	Total number	of individuals employed i	n calendar year 2020 (Part V, line 2a)				. 5	12
ctiv	6 7	Total number	of volunteers (estimate if	necessary)				. 6	50
Ā	7a 1	Total unrelate	ed business revenue from	Part VIII, column (C), line 12				. 7a	0
	b١	Net unrelated	business taxable income	e from Form 990-T, Part I, line 11 • • • •				. 7b	0
				· · · · ·			Prior Year	-	Current Year
	8 (Contributions	and grants (Part VIII, line	e 1h)			1,570		424,846
ne			-	e 2g)			_,	,	0
Revenue		-	•	(A), lines 3, 4, and 7d)			92	2,838	53,379
Rev				ines 5, 6d, 8c, 9c, 10c, and 11e)				3,543	36,673
-				(must equal Part VIII, column (A), line 12)			1,707		514,898
			ů –	IX, column (A), lines 1-3)				5,000	150,000
				X, column (A), line 4)				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0
		•	,	ee benefits (Part IX, column (A), lines 5-10	489	,702	558,982		
Expenses				column (A), line 11e)				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0
eus			sing expenses (Part IX, co		71,835				
х д				ines 11a-11d, 11f-24e)		. —	338	3,331	281,376
-		•	,	t equal Part IX, column (A), line 25)				3,033	990,358
		•	,	18 from line 12				,215	(475,460)
res se			1				nning of Curr		End of Year
anci	20	Total assets ((Part X. line 16)				5,654		5,466,178
Net Assets or Fund Balances			· ,					3,424	255,728
Net.			· ,	line 21 from line 20			5,371		5,210,450
Part			re Block				-, -	/*	-,,
		of perjury, I dec	lare that I have examined this ret	urn, including accompanying schedules and statement			wledge and b	elief, it is	
true, co	orrect, an	nd complete. Dec	claration of preparer (other than o	fficer) is based on all information of which preparer has	any knowledge.				
		John	Tierney						
Sign			e of officer					Date	
Here	ĥ	John	Tierney, Executi	ive Director					
			print name and title						
		Print/Type pre	parer's name	Preparer's signature	Date		Check	if F	PTIN
Paid		John Mu	llins	John Mullins	11-12-20	21	self-em	_	P01429307
Prep	arer	Firm's name	 Mullins 	•	20		irm's EIN		
	Only			, PC sconsin Avenue			hone no.		
	,	i ini s audress		a MD 20814				202-7	70-6371
May th	e IRS	L discuss this							
			on Act Notice, see the se						
	ahei M(on Act Notice, see the se	ะหลายเล แอน แบบเอ.					Form 990 (2020)

Form	990 (2020) Center for Arms Control and	04-2693322	Page 2
Par	t III Statement of Program Service Accomplishments		_
	Check if Schedule O contains a response or note to any line in this Part III		🗌
1	Briefly describe the organization's mission:		
	A NON-PROFIT, NON-PARTISAN RESEARCH ORGANIZATION DEDICATED TO ENHANCING INTER		
	SECURITY IN THE 21ST CENTURY, THEREBY RETAINING ITS FOCUS ON NUCLEAR WEAPONS	BUT EXPA	NDING TO
	INCLUDE OTHER PRESENT EMERGING SECURITY THREATS.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
-	prior Form 990 or 990-EZ?	🗌 Yes	x No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	🗌 Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	d by	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to of	hers,	
	the total expenses, and revenue, if any, for each program service reported.		
4-			
	(Code:) (Expenses \$ 600,383 including grants of \$ 150,000) (Revenue NON-PROLIFERATION: THE GOAL OF THE CENTER FOR ARMS CONTROL AND NON-PROLIFERAT	\$	
	A REDUCTION IN NUCLEAR WEAPONS AND WEAPONS-GRADE MATERIALS; TO EDUCATE AND IN		
	ADMINISTRATION POLICYMAKERS (DIRECTLY AND THROUGH POLICY AMPLIFICATION VIA ME		
	TOWARD LEGISLATIVE AND BUDGET ACTIONS THAT SUPPORT THAT GOAL; TO ENCOURAGE AF		
	EFFORTS TO HALT PROLIFERATION AND TO NEGOTIATE REDUCTIONS AND SECURE AND ELIM		
	MATERIALS WORLDWIDE. CENTER ENCOURAGES DIPLOMATIC EFFORTS OVER MILITARY RESPO	NSES WHENEN	/ER
	POSSIBLE AND FEASIBLE CONCERNING RELATIONS WITH IRAN, NORTH KOREA, RUSSIA, CH	INA, ETC.	
4b	(Code:) (Expenses \$ 99,362 including grants of \$) (Revenue	\$)
40	CONGRESSIONAL POLICY ANALYSIS AND EDUCATION OUTREACH: THE CENTER SEEKS TO EDU		/ 25 OF
	CONGRESS AND THEIR STAFF ON GLOBAL NUCLEAR THREATS. OUR LONG-TERM GOAL, WORKI		
	COMMUNITY, IS TO EXPAND OUR EDUCATIONAL EFFORTS TO ALL 535 OFFICES IN CONGRES		
	INFORMED LEGISLATORS. SINCE THE END OF THE COLD WAR, CONGRESSIONAL KNOWLEDGE	ABOUT NUCLE	LAR
	THREATS HAS FUNDAMENTALLY DIMINISHED SO BY ENGAGING WITH THE COUNTRY'S DECISI	ON-MAKING A	PPARATUS
	ON A RANGE OF NUCLEAR RISKS, WE ARE ABLE TO FILL THIS KNOWLEDGE GAP.		
4c	(Code:) (Expenses \$ 44,208 including grants of \$) (Revenue	\$)
	THE FISSILE MATERIALS WORKING GROUP (FMWG) IS A NON-GOVERNMENTAL COALITION OF	OVER 80 CI	VIL /
	SOCIETY ORGANIZATIONS FROM AROUND THE WORLD WORKING TO PROVIDE ACTIONABLE POI	ICY SOLUTIC	ONS TO
	KEEP THE WORLD SAFE FROM NUCLEAR TERRORISM. SINCE SEPTEMBER 2017, IT HAS BEEN	HOSTED BY	THE
	CENTER FOR ARMS CONTROL AND NON-PROLIFERATION.		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 743,953		
EEA		For	m 990 (2020)

Form 990 (2	2020)
Part IV	C

:0)	Center	for	Arms	Control	and	
Checklist of	Require	d Sc	hedul	es		

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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	•		
40	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40		
44	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
-	VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes,"</i>			
а	complete Schedule D, Part VI	11a	v	
b		11a	X	
, D	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more	110		~
Ŭ	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d				A
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	x	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
~~	If "Yes," complete Schedule G, Part III	19		x
20 a ⊾		20a		х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic approximation or the second secon	24		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	

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Pa	rt IV Checklist of Required Schedules (continued)				
		r		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on				
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the				
	organization's current and former officers, directors, trustees, key employees, and highest compensated				
	employees? If "Yes," complete Schedule J	••••	23		<u>x</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b				
	through 24d and complete Schedule K. If "No," go to line 25a		24a		<u>x</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	••••	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year				
_	to defease any tax-exempt bonds?		24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	••••	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit				
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior				
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?				
	If "Yes," complete Schedule L, Part I		25b		<u>x</u>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%				
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II		26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key				
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee				
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these				
	persons? If "Yes," complete Schedule L, Part III		27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part				
	IV instructions, for applicable filing thresholds, conditions, and exceptions):				
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If				
	"Yes," complete Schedule L, Part IV		28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		28b		х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If				
	"Yes," complete Schedule L, Part IV		28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified				
	conservation contributions? If "Yes," complete Schedule M		30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"				
	complete Schedule N, Part II		32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations				
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,				
	or IV, and Part V, line 1 • • • • • • • • • • • • • • • • • •		34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		35a		х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a				
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		35b		L
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable				
	related organization? If "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·		36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization				
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and				
	19? Note: All Form 990 filers are required to complete Schedule O.		38	х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response or note to any line in this Part V				
		r		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	7			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and				
	reportable gaming (gambling) winnings to prize winners?		1c	х	

		593322	F	9age 5
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	12		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			х
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?.			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
•	required to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year			<u></u>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			x
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	-		
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
U	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a h	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			
ь 10	Section 501(c)(7) organizations. Enter:			
10	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·			
a h	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
b 44		-		
11	Section 501(c)(12) organizations. Enter:			
a h	Gross income from members or shareholders	_		
b				
120	against amounts due or received from them.)	40-		
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	· · 12a		
b		_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-		
а	Is the organization licensed to issue qualified health plans in more than one state?	· · 13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?			x
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	· · 14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
	If "Yes," complete Form 4720, Schedule O.			

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Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	"No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			_
	Check if Schedule O contains a response or note to any line in this Part VI			. x
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	4		
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
-	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
•	any other officer, director, trustee, or key employee?	2		x
3	Did the organization delegate control over management duties customarily performed by or under the direct			
4	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	4 5		X
6	Did the organization have members or stockholders?	6		x x
0 7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	–		~
74	one or more members of the governing body?	7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			~
	stockholders, or persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			~
-	the year by the following:			
а	The governing body?	8a	x	
b	Each committee with authority to act on behalf of the governing body?	8b	x	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	x	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	x	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13	x	
14	Did the organization have a written document retention and destruction policy?	14	x	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-		
a L	The organization's CEO, Executive Director, or top management official	15a	x	
b	Other officers or key employees of the organization	15b		x
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
Toa	with a taxable entity during the year?	16a		v
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	Toa		x
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Cain Farmer (202)546-0795, 820 1st St NE, Washington, DC 20002			
		F	000 /	0000

Form 990 (202	0) Center for Arms Control and	04-2693322	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Cor Independent Contractors	mpensated Employe	es, and
	Check if Schedule O contains a response or note to any line in this Part VII		x
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete t	his table for all persons required to be listed. Report compensation for the calendar year ending with or wi	thin the	
organization's	ax year.		

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

			mpe		C)	any ou	in on			
					sition					
(A)	(B)	(do r	not che			nan one		(D)	(E)	(F)
Name and title	Average hours					s both a /trustee)		Reportable compensation	Reportable compensation	Estimated amount of other
	per week	0110		a a an	00101	, 110000	,	from the	from related	compensation
	(list any	or In	'n	Q	Ā	ęΞ	F	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and
	hours for related	divid	stitut	Officer	Key employee	nplo	Former	(₩-2/1099-10130)	(11 2/1000 11100)	related organizations
	organizations	ual t ctor	iona		nplo	/ee	r			
	below	Individual trustee or director	nstitutional trustee		yee	mper				
	dotted line)	õ	tee			Highest compensated employee				
						ă				
(1) John Tierney	20.00									
Executive Director				x				136,719	0	5,239
(2) Cain_Farmer	<u>20.00</u>									
Controller				x				41,256	0	8,546
(3) Peter_Galbraith	<u>1.00</u>									
Board Member		х						0	0	0
(4) Phil_Coyle	<u>1.00</u>									
Board Member		х						0	0	0
(5) Jim Walsh	<u>1.00</u>									
Board Member		х						0	0	0
(6) Susan_Burk	<u>1.00</u>									
Board Member		х						0	0	0
(7) Spencer P_Boyer	<u>1.00</u>									
Board Member		х						0	0	0
(8) Mallory Stewart	<u>1.00</u>									
Board Member		х						0	0	0
(9) Ed Levine	<u>1.00</u>							_		
Chair (40)		х		x				0	0	0
(10)Sam Knight	<u>1.00</u>									
Treasurer		х		x				0	0	0
(11)										
<u>(12)</u>										
<u>(13)</u>										
(14)										
										Form 000 (2020)

	90 (2020) Center for Arms C										-2693	322	Pa	age 8
Part	VII Section A. Officers, Directors, Trustees	s, Key Empl	oyees	, and	d Hig	ghes	st Con	nper	nsated Employees	s (continued	<u>/)</u>			
	(A) Name and title	hours officer and a director/trustee) comp per week fro						(D) Reportable compensation from the organization	(E) Reportati compensati from relati organizati	tion ed	cor	(F) ated amo of other npensatio		
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-M		orga	nization a	
<u>(15)</u>														
<u>(16)</u>														
<u>(17)</u>														
<u>(18)</u>														
<u>(19)</u>														
<u>(20)</u>														
<u>(21)</u>														
<u>(22)</u>														
<u>(23)</u>														
<u>(24)</u>														
<u>(25)</u>														
1b c	Subtotal	tion A .	 	 	 	 	 	• •						
d 2	Total (add lines 1b and 1c) Total number of individuals (including but not limit	ed to those I							1	of	0		13,7	<u>85</u>
	reportable compensation from the organization	•											Yes	1 No
3	Did the organization list any former officer, directed employee on line 1a? <i>If "Yes," complete Schedule</i>			-		-			oensated			3		x
4	For any individual listed on line 1a, is the sum of r organization and related organizations greater that													
5	individual	compensati	on fror	n an	y un	rela	ted or	ganiz	zation or individual			4		x
Secti	for services rendered to the organization? If "Yes, on B. Independent Contractors	" complete S	Schedu	le J	for s	such	perso	n				5		Х
1	Complete this table for your five highest compens	ated indepe	ndent o	contr	acto	ors th	nat rec	eive	d more than \$100,	000 of				
	compensation from the organization. Report comp										ax year.			
	(A) Name and business address	5S							(B) Description of service	ces		(C) Compens	ation	
2	Total number of independent contractors (includin received more than \$100,000 of compensation from the structure of the struc	-				sted	above) wh	0					

Form 99		0) Cente	r f	or Arms (Cont	rol and			04-26933	3 22 Page 9
Part	VIII	Statement of Rev	eni	he						
		Check if Schedule O cc	ontair	ns a response	or no	ote to any line in thi	A) (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns .			1a					
<i>s</i> . "	b	Membership dues			1b					
unts	с	Fundraising events		[1c					
ũ ũ	d	Related organizations .			1d					
Sifts ar A	е	Government grants (conti	ributi	ions)	1e					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gif	ˈts, g	rants,						
ar Si		and similar amounts not i	ncluo	ded above	1f	424,846				
othe	g	Noncash contributions inc	clude	ed in						
ont nd 0		lines 1a-1f			1g	\$				
ສັບ	h	Total. Add lines 1a-1f		.			424,846			
						Business Code				
e	2a									
Ś	b									
Ser	с									
Program Service Revenue	d									
л Бол	е									
Pro	f A	All other program service r	ever	1ue	<u>.</u> .					
	g 1	Total. Add lines 2a-2f								
	3 1	nvestment income (includ	ing c	lividends, inte	rest,	and				
		other similar amounts)					53,379			53,379
	4 I	ncome from investment of	f tax-	exempt bond	proce	eeds 🕨				
	5 F	Royalties				🕨				
				(i) Real		(ii) Personal				
	6a (Gross rents	6a	28,	673					
	b L	_ess: rental expenses	6b							
	C F	Rental income or (loss)	6c	28,	673					
		Net rental income or (loss)	<u>.</u>				28,673			28,673
		Gross amount from		(i) Securities	5	(ii) Other				
		sales of assets		()	-	(, • • • • • • • • • • • • • • • • • •				
		other than inventory	7a							
		Less: cost or other basis								
e	a	and sales expenses	7b							
eni		Gain or (loss)	-							
Other Revenu	1	Net gain or (loss)								
erF		Gross income from fundra								
f		events (not including \$								
U		of contributions reported o	n line	<u> </u>						
		1c). See Part IV, line 18			8a					
		Less: direct expenses			8b					
		Net income or (loss) from 1								
	1	Gross income from gamin		aloing overne						
		activities, See Part IV, line			9a					
		Less: direct expenses			9b					
		Net income or (loss) from				🕨				
			-	ng activities	<u> </u>					
		Gross sales of inventory, le returns and allowances			10a					
		Less: cost of goods sold			10a					
		Net income or (loss) from s	sales	s or inventory	••					
n	44		_			Business Code	0.005	0.000		
e e		Administrative fe				900099	8,000	8,000		+
ent										+
Revenue										+
		All other revenue				L	.			
		Total. Add lines 11a-11d					8,000		-	
	1∠ I	Total revenue. See instrue	ution	5		🏴 🛛	514,898	8,000	0	82,052

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Form 990 (2020) Center for Arms Control and Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All

Control	and	04-269
es		
te all colum	ns. All other organizations must complete column (A).	

0000	Check if Schedule O contains a response or note to a	•	•		
<u></u>	·		(B)	(C)	(D)
	ot include amounts reported on lines 6b, 7b,	Total expenses	Program service	Management and	Fundraising
	b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	150,000	150,000		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	177,975	139,403	30,282	8,290
6	Compensation not included above, to disqualified	111,513	133,403	30,202	0,290
Ū	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	000 850	000.001	40.000	10.000
7	Other salaries and wages	293,756	230,091	49,982	13,683
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	17,292	13,544	2,942	806
9	Other employee benefits	36,610	28,676	6,229	1,705
10	Payroll taxes	33,349	26,121	5,675	1,553
11	Fees for services (nonemployees):				
а	Management				
b	Legal · · · · · · · · · · · · · · · · · · ·	2,741		2,741	
С	Accounting	19,561		19,561	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 •				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	27,315	7,397	5,522	14,396
14	Information technology	50,758	24,704	15,022	11,032
15	Royalties	,	,	,	
16	Occupancy	98,813	56,521	25,494	16,798
17	Travel	17,145	17,145		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	10,641	10,346	178	117
20		10,041	10,540		
20	Payments to affiliates				
21	Depreciation, depletion, and amortization	26 600	20 422	4 070	0.000
22 23		36,509	29,428	4,278	2,803
23 24	Other expenses. Itemize expenses not covered	4,130	2,803	675	652
24	above (List miscellaneous expenses on line 24e. If				
	, , , , , , , , , , , , , , , , , , ,				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)		_		
a	Dues and subscriptions	13,335	7,774	5,561	
b	Miscellaneous	428		428	
C					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	990,358	743,953	174,570	71,835
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here 🕨 🗌 if				
	following SOP 98-2 (ASC 958-720)				

Form 990			for	Arms	Control	and
Dart X	Balanco Sh	oot				

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Par	t X	Balance Sheet			<u> </u>
		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	3,086,934	2	3,144,740
	3	Pledges and grants receivable, net	870,000	3	410,000
	4	Accounts receivable, net	46,560	4	80,266
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) \cdots		6	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	41,722	9	31,166
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 382,903			
	b	Less: accumulated depreciation 10b 216,272	184,439	10c	166,631
	11	Investments - publicly traded securities	1,425,319	11	1,633,375
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11 • • • • • • • • • • • • • • • • • •		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	5,654,974	16	5,466,178
	17	Accounts payable and accrued expenses	41,277	17	33,803
	18	Grants payable		18	
	19		203,180	19	185,908
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director,			
billi		trustee, key employee, creator or founder, substantial contributor, or 35%			
Lia		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	20.067	25	26 017
	26	Total liabilities. Add lines 17 through 25	38,967	25 26	36,017
	20	Organizations that follow FASB ASC 958, check here	283,424	20	255,728
S		and complete lines 27, 28, 32, and 33.			
nce	27	Net assets without donor restrictions	732,338	27	2 027 250
ala	28	Net assets with donor restrictions	4,639,212	28	<u>3,837,358</u> 1,373,092
а р	20	Organizations that do not follow FASB ASC 958, check here	4,039,212	20	1,373,092
<u>n</u>		and complete lines 29 through 33.			
or F	29	Capital stock or trust principal, or current funds		29	
its (30	Paid-in or capital surplus, or land, building, or equipment fund		30	
sse	31	Retained earnings, endowment, accumulated income, or other funds		31	· · · ·
Net Assets or Fund Balances	32	Total net assets or fund balances	5,371,550	32	5,210,450
Ň	33	Total liabilities and net assets/fund balances	5,654,974	33	5,466,178
			5,054,774		Form 990 (2020)

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Form 990 (2020)

Form	990 (2020) Center for Arms Control and 0	4-2693322	2	Pa	age 12
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. 🗌
1	Total revenue (must equal Part VIII, column (A), line 12)	1		514,	898
2	Total expenses (must equal Part IX, column (A), line 25)	2		990,	358
3	Revenue less expenses. Subtract line 2 from line 1	3	(475,	460)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,	371,	550
5	Net unrealized gains (losses) on investments	5		314,	360
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	5,	210,	450
Pai	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. </u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Single Audit Act and OMB Circular A-133?		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
				000 (20201

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Form 990 (2020)

SCHEDULE A	
(Form 990 or 990-EZ	2)

Public Charity Status and Public Support

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

OMB No. 1545-0047

Depai	tment	of the Treasury		Attac	ch to Form 990 or Form	990-EZ.	(4)(1)		Open to Public			
		enue Service	Go t	to www.irs.gov/Fo	rm990 for instructions	and the la	test inforr	nation.	Inspection			
Name	of the	e organization						Employer identifica	tion number			
			Control and					04-26933				
	rt I			-	rganizations must o			t.) See instructio	ns.			
The	orga		•		s 1 through 12, check on	•	,					
1	Ц				ches described in section		l)(A)(i).					
2	Ц		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)									
3	Ц	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii) .										
4			• ·	rated in conjunction	with a hospital describe	d in sectio	n 170(b)(1)(A)(iii). Enter the				
		hospital's name, city, and state:										
5	Ш	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
			(1)(A)(iv). (Complete I	,								
6			-	-	nit described in section 1							
7	х	•	•		t of its support from a gov	vernmenta	l unit or fro	m the general public				
•			ection 170(b)(1)(A)(vi)									
8	Н	-	ust described in section		,	ted in early	unation wi	the land grant calles	_			
9		-	-		on 170(b)(1)(A)(ix) opera see instructions). Enter th			• •	3			
		university:	a non-land-grant colle	ge of agriculture (s	ee instructions). Enter ti	ie name, c	ity, and sta	te of the college of				
10			n that normally receive	s: (1) more than 33	3 1/3% of its support from	contributi	ons memb	ershin fees and gros	S			
		-	-		subject to certain exception							
		•			isiness taxable income (I	•	,					
					ection 509(a)(2). (Compl		,					
11	Π		-		est for public safety. See		,					
12	П	•	•	•	the benefit of, to perform			o carry out the purpos	es			
		•		•	ed in section 509(a)(1) o			• • •				
					ne type of supporting org							
	а		-		sed, or controlled by its s		•		•			
		the suppor	ted organization(s) the	power to regularly	appoint or elect a major	ity of the di	irectors or	trustees of the	-			
		supporting	organization. You mu	st complete Part I	V, Sections A and B.	-						
	b	Type II. A	supporting organization	n supervised or cor	ntrolled in connection with	n its suppo	rted organi	zation(s), by having				
		control or r	management of the su	pporting organization	on vested in the same pe	ersons that	control or	manage the supporte	d			
		organizatio	on(s). You must comp	lete Part IV, Secti	ons A and C.							
	С	Type III fu	nctionally integrated.	. A supporting orga	nization operated in conr	nection with	n, and func	tionally integrated wit	h,			
		its support	ed organization(s) (see	e instructions). You	must complete Part IV	, Sections	A, D, and	Е.				
	d	Type III no	on-functionally integr	ated. A supporting	organization operated in	connection	า with its รเ	upported organization	(s)			
		that is not	functionally integrated.	The organization g	generally must satisfy a d	listribution	requireme	nt and an attentivene	SS			
					Part IV, Sections A and							
	е	_	•		determination from the I		s a Type I,	Type II, Type III				
	_			-	tegrated supporting orga							
	f		11 0									
	g		lowing information abo			1						
	(i) Name of supported	organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the o listed in you		(v) Amount of monetary support (see	(vi) Amount of other support (see			
					above (see instructions))	docum		instructions)	instructions)			
						Vee	No					
						Yes	No					
(A)												
(B)												
					<u> </u>							
(C)												
									1			
(D)												
(E)												

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. $_{\rm EEA}$

Total

-	dule A (Form 990 or 990-EZ) 2020 Center fo:	r Arms Cont	rol and			04-269332	2 Page 2
Pa	rt II Support Schedule for Organiz						
	(Complete only if you checked the						lify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	ted below, pl	ease comple	te Part III.)	
See	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	678,904	1,416,484	684,395	1,507,867	424,846	4,712,496
2	Tax revenues levied for the				, ,		
	organization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	678,904	1,416,484	684,395	1,507,867	424,846	4,712,496
5	The portion of total contributions by		, , , ,		, ,	,	, ,
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						816,806
6	Public support. Subtract line 5 from line 4						3,895,690
	ction B. Total Support		L				_ , ,
Cal	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	678,904	1,416,484	684,395	1,507,867	424,846	4,712,496
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources	102,884	106,036	126,151	128,381	53,379	516,831
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)					8,000	8,000
11	Total support. Add lines 7 through 10						5,237,327
12	Gross receipts from related activities, etc. (s	ee instructions)			12	
13	First five years. If the Form 990 is for the or	rganization's fir	st, second, thir	d, fourth, or fif	th tax year as	a section 501(c)(3)
	organization, check this box and stop here						· · · · ▶ 🗌
	ction C. Computation of Public Suppo						
	Public support percentage for 2020 (line 6, c					14	74.38 %
	Public support percentage from 2019 Sched					15	55.78 %
16a	33 1/3% support test - 2020. If the organization						_
	box and stop here. The organization qualified						
k	33 1/3% support test - 2019. If the organiza						
	this box and stop here. The organization qu		• • • •	-			_
17a	10%-facts-and-circumstances test - 2020.	•					
	10% or more, and if the organization meets				•		
	Part VI how the organization meets the facts			-			
	organization						
k	0 10%-facts-and-circumstances test - 2019.	-					
	15 is 10% or more, and if the organization m						
	in Part VI how the organization meets the fa						
10	organization Private foundation. If the organization did r						···· ► 🛛
10	Ū.						▶ □
	instructions						····

04-2693322

Schedule A (Form 990 or 990-EZ) 2020	
, or 19b, check this box and see instructions 📖 🕨 🗌	
ization qualifies as a publicly supported organization	
ne 14 or line 19a, and line 16 is more than 33 1/3%, and	

Se	ction A. Public Support				•		
Cal	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 .						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
_	line 6.)						
	ction B. Total Support		1		i		
	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
40	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
12	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
11	and 12.)	nization's first	 t accord third	fourth or fifth	tax year as a r	contion 501(a)(2)
14	,				2		,
50	organization, check this box and stop here ction C. Computation of Public Suppo	rt Porconta	· · · · · · · · · · ·				· · · · · ► 🗋
	Public support percentage for 2020 (line 8, c			column (f))		15	%
	Public support percentage from 2019 Sched					16	%
	ction D. Computation of Investment In					10	/0
17	Investment income percentage for 2020 (line			line 13 colum	n (f))	17	%
18	Investment income percentage for 2020 (inc					18	%
-	33 1/3% support tests - 2020. If the organiz						
130	17 is not more than 33 1/3%, check this box						
h	33 1/3% support tests - 2019. If the organiz						
5	line 18 is not more than 33 1/3%, check this						
20	Private foundation. If the organization did r	-	-	-		• • •	- =
<u> </u>				,, one			···· · · · ·

Schedule A (Form 990 or 990-EZ) 2020

 Open or 990-EZ) 2020
 Center for Arms Control and

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

If the organization fails to qualify under the tests listed below, please complete Part II.)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

Schedule	A (Form 990 or 990-EZ) 2020 Center for Arms Control and 04-26933	22	F	Page 4
Part				
	(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete			
	and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Par			е
	Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete	Part ∖	/.)	
Section	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
:	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes,"</i>			
	answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
	Type I or Type II only. Was any added or substituted supported organization part of a class already	- Ou		
	designated in the organization's organizing document?	5b		
	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	00		
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	-		
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
	Was the organization controlled directly or indirectly at any time during the tax year by one or more	-		
	disqualified persons, as defined in section 4946 (other than foundation managers and organizations			
	described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	9c		
	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	10a		
	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	IJa		
	determine whether the organization had excess business holdings in the tax year? (Use Schedule C, 1 0ml 4720, to	10b		

detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the 1 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated. supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 1 or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year. (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described in line 2, above, did the organization's supported organizations have 3

Schedule A (Form 990 or 990-EZ) 2020 Center for Arms Control and Part IV Supporting Organizations (continued)

- **11** Has the organization accepted a gift or contribution from any of the following persons?
 - a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?
 - A family member of a person described in line 11a above?
 - c A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide

- - a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- The organization satisfied the Activities Test. *Complete line 2 below.* а
- The organization is the parent of each of its supported organizations. Complete line 3 below. b
- c The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions). Yes No
- Activities Test. Answer lines 2a and 2b below. 2
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a

2b

3a

3

11a

11b

Yes

No

Pai				
1	Check here if the organization satisfied the Integral Part Test as a qualifying			,
	instructions. All other Type III non-functionally integrated supporting organ	izatio	ns must complete Section	
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	y integ	grated Type III supporting	g organization
	(see instructions).			

Center for Arms Control and

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

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	lle A (Form 990 or 990-EZ) 2020 Center for Arms Control a				3322 Page 7
Par	t V Type III Non-Functionally Integrated 509(a)(3	b) Supporting Organi	zations (continue	ed)	
Sec	tion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	npt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt	purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	s of supported organization	tions	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required) - p	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is respon	sive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ns	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
С	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from				
	Section D, line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2016				
b	Excess from 2017				
C	Excess from 2018				
d	Excess from 2019				
е	Excess from 2020				
EEA				Sahar	ulo A (Form 990 or 990 EZ) 2020

EEA

Schedule A (Form 990 or 990-EZ) 2020

Supplemental Information. Provide the explanations required by Part II, line 10; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 8a, 9b, 9c, 1a, 11, 11b, and 11c; Part IV, Section B, lines 1, 2a, 3b, 7a, 4b, 4c, 5a, 6b, 9a, 9b, 9c, 1a, 11b, and 11c; Part IV, Section B, lines 1, 2a, 3b, 7a, 4b, 7b, and 11c; Part IV, Section B, lines 1, 2a, 3b, 7a, 4b, 7b, 2b, 7b, 7b, 7b, 7b, 7b, 7b, 7b, 7b, 7b, 7		n 990 or 990-EZ) 2020 Pa
III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Sect B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Sect	Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part
B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Sect		
3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Sect		
Ines 2, 5, and 5. Also complete this part for any additional information. (See instructions.)		
		lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D	
(Form 990)	

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

OMB No. 1545-0047

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Open to Public Inspection

Go to www.irs.gov/Form990 for instr	ructions and the	latest informa	tion.

Name	of the organization		Employer identification number
Cen	ter for Arms Control and		04-2693322
Pa			ccounts.
	Complete if the organization answered "Yes" on	Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year • • • • • • • • • • • • • • • • • • •		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	iting that the assets held in donor advise	ed
	funds are the organization's property, subject to the organization	on's exclusive legal control?	· · · · · · · · · · · · · · · · · · ·
6	Did the organization inform all grantees, donors, and donor adv	visors in writing that grant funds can be	used
	only for charitable purposes and not for the benefit of the dono	r or donor advisor, or for any other purpo	ose
_	conferring impermissible private benefit?		Yes 🗌 No
Pa	rt II Conservation Easements.		
	Complete if the organization answered "Yes" or		
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
	Preservation of land for public use (e.g., recreation or educ		on of a historically important land area
	Protection of natural habitat		on of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form of	f a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
b	······································		
С	Number of conservation easements on a certified historic struct		2c
d	Number of conservation easements included in (c) acquired af		
_	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, release	ased, extinguished, or terminated by the	e organization during the
	tax year		
4	Number of states where property subject to conservation ease		
5	Does the organization have a written policy regarding the peric	• • •	
~	violations, and enforcement of the conservation easements it h		
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	indling of violations, and enforcing conse	ervation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handlir	a of violations, and enforcing concernation	ion accomente during the year
7	Amount of expenses incurred in monitoring, inspecting, handlin	ig of violations, and enforcing conservat	ion easements during the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170	(b)(4)(B)(i)
0			
9	In Part XIII, describe how the organization reports conservation		
Ŭ	balance sheet, and include, if applicable, the text of the footnot	•	
	organization's accounting for conservation easements.		
Pa	rt III Organizations Maintaining Collections	of Art, Historical Treasures, o	or Other Similar Assets.
	Complete if the organization answered "Yes" of	n Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958,	not to report in its revenue statement a	nd balance sheet works
	of art, historical treasures, or other similar assets held for publi	c exhibition, education, or research in fu	rtherance of public
	service, provide, in Part XIII the text of the footnote to its finance	ial statements that describes these item	IS.
b	If the organization elected, as permitted under FASB ASC 958,	to report in its revenue statement and b	palance sheet works of
	art, historical treasures, or other similar assets held for public e	xhibition, education, or research in furth	erance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treas		
	following amounts required to be reported under FASB ASC 95		
а	Revenue included on Form 990, Part VIII, line 1		· · · · · · · * \$
b	Assets included in Form 990, Part X		•••••

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) a Using the organizations exceeding, accession, and other records, check any of the following that make significant use of its collection tens (check all that apply):		ule D (Form 990) 2020 Center for Arms			_	04-269				
collection terms (check all that apply): d Loan or exchange programs a Provide a deshibition e Other c Preservation for future generations e Other x11. Stotarity research ivelocities ivelocities ivelocities a built by yest, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be acid to rate finant to be maintained ap part of the organization's exempt purpose in Part X. It. Ives No Barr.IV Exercem vand Custofial Arrangements. Complete if the organization answered "Ves" on Form 990, Part V, line 9, or reported an amount on Form 990, Part X, line 21. Ives No It he organization include an amount on Form 990, Part X, line 21. Ives Ives No b lift Vest, "optiain the arrangement in Part XII and complete the following table: Ivest, "optiain the arrangement in Part XII. Check here if the expansion has been provided on Part XIII Ivest, "optiain the arrangement in Part XII. Check here if the expansion has been provided on Part XIII Ivest, "optiain the arrangement in Part XII. Check here if the expansion has been provided on Part XIII It be forganization include an amount on Form 990, Part X, line 21, for exerce with a stotak (of for years back (of for	Pa	rt III Organizations Maintaining	Collections of	Art, Historical	Treasures, or (Other Similar A	Assets (continued)			
a Public schiction b Schizity resarch b Schizity resarch c Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. c Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. c Provide a description of the organization solicit or reserve donations of art, historical treasures, or other similar assets to be off a rate frame to be minimized as part of the organization's collection?	3	Using the organization's acquisition, accessio	n, and other records,	check any of the fol	lowing that make si	gnificant use of its				
b Scholarly research e Other c Preaced of of future generations e Other 3 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part Xill. Implementation is fund a raher than to be maintained as part of the organization's collection? Implementation is fund a raher than to be maintained as part of the organization's collection? Implementation is fund a raher than to be maintained as part of the organization's collection? Implementation is fund a raher than to be maintained as part of the organization's collection? Implementation is fund a raher than to be maintained as part of the organization's collection? Implementation is fund a raher than to be maintained as part of the organization's collection? Implementation is fund a raher than to be maintained as part of the organization is collection? Implementation is fund a raher than to be maintained as part of the organization is collection? Implementation is fund a raher than to be maintained as part of the organization is collection? Implementation is fund a raher than to be maintained as part of the organization is collection? Implementation is fund as part of the organization is collection? Implementation is fund as part of the organization is collection? Implementation is collection? Implementation? Implementation is collection? Implementation? Implementation?		collection items (check all that apply):								
c Preservation for flutre generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part Xill. 5 During the year, did the organization solidi or receive donations of art, historical treasures, or other similar assets to be odd to raise tunds rather than to be maintained as part of the organization's collection?. Yee □ No Part IV Escrew and Custodial Arrangements. Complete if the organization an environmental of the organizations or other assets not induced on form 900, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not induced on form 900, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not induced on form 900, Part X, line 21. Is the organization an agent, trustee, custodian or other 900, Part X, line 21. Yes □ No b If "ves," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XII. Yes □ No Intervent the Part XII. Check here if the explanation has been provided on Part XII. Intervent text. Intervent text. Intervent text. 2a Old the organization include an amount on Form 990, Part IV, line 10. Intervent text. Intervent text. Intervent text. Intervent text. 4atlones Intervent text. Intervent text. Intervent text. Intervent text. Intervent text. Inte	а	Public exhibition		d 🗌 Loan	or exchange progra	ms				
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XI. During the year: did the organization solicit or receive donations of art. historical treasures, or other similar assets to be add to rake traine them to be maintained as part of the organization's collection?	b	Scholarly research		e 🗌 Other						
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XI. During the year: did the organization solicit or receive donations of art. historical treasures, or other similar assets to be add to rake traine them to be maintained as part of the organization's collection?	с	Preservation for future generations								
XII. Suring the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to use funds rather than to be maintained as part of the organization's collection?	4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part								
assets to be solt to raise funds rather than to be maintained as part of the organization's collection? ↓ Yes ↓ No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. ↓ Yes ↓ No 18 the organization an answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X? ↓ Yes ↓ No 16 the organization an agent, the state organization include an amount on Form 990, Part X? ↓ Yes No b if "Yes," explain the arrangement in Part XIII and complete the following table: ↓ Amount ↓ Amount 12 Ending balance ↓ 14 ↓ ↓ ↓ No 20 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account lability? ↓ Yes No b if "Yme," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ↓ Yes No b if Order organization answered "Yes" on Form 990, Part IV, line 10. ↓ ↓ ↓ 14 Beginning of year balance ↓ 1, 233, 375 ↓ 281, 034 ↓ 463, 928 ↓ 273, 172 ↓ 244, 664 0 Orther expenditures or fracititites and programs ↓ 0					-					
assets to be solt to raise funds rather than to be maintained as part of the organization's collection? ↓ Yes ↓ No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. ↓ Yes ↓ No 18 the organization an answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X? ↓ Yes ↓ No 16 the organization an agent, the state organization include an amount on Form 990, Part X? ↓ Yes No b if "Yes," explain the arrangement in Part XIII and complete the following table: ↓ Amount ↓ Amount 12 Ending balance ↓ 14 ↓ ↓ ↓ No 20 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account lability? ↓ Yes No b if "Yme," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ↓ Yes No b if Order organization answered "Yes" on Form 990, Part IV, line 10. ↓ ↓ ↓ 14 Beginning of year balance ↓ 1, 233, 375 ↓ 281, 034 ↓ 463, 928 ↓ 273, 172 ↓ 244, 664 0 Orther expenditures or fracititites and programs ↓ 0	5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar								
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X (IIII) IV b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance Amount Id d Additions during the year Id Amount 1d Amount Id 1d Amount 1d Amount 1d Amount 1d 1d 1d				-			. ∏Yes ∏No			
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Image: Control of Contrecon of Control of Control of Control of Contre	Pa			0						
990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ives No b If "Yes," explain the arrangement in Part XII and complete the following table:		Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form								
Included on Form 1990, Part X?		· •								
Included on Form 1990, Part X?	1a	Is the organization an agent, trustee, custodia	an or other intermedia	arv for contributions of	or other assets not					
b If "Yes," explain the arrangement in Part XIII and complete the following table:							∏Yes ∏No			
c Beginning balance Amount 1c 1d 1d 20 Distributions during the year 1d 21 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ivestige 22 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ivestige 23 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ivestige 24 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? Ivestige 26 Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Ivestige 27 Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Ivestige 27 Complete if the organization account is and programs 1,525,982 1,281,034 1,463,928 1,273,172 2 Administrative expenses 1,633,375 1,525,982 1,281,034 1,463,928 1,273,172 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment b % % <	b	,								
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e Distributions during the year 10 11 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? No Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No Part V Endowment Funds. (0) Three years back (0) Four year (0) Three years back (0) Three										
f Ending balance 11 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? No No b If "ves," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. No No Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back. (e) Four years back. b Contributions										
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Yes No Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (d) Three years back. (e) Four year back. (f) Three years back. (f) Three years back. (f) Four year back. (f) Three years back. (f) Four year back. (f) Three years back. (f) Three years back. (f) Three years back. (f) Four year back. (f) Three years back. f		5,								
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (d) Current year (e) Pror year (e) Three years back. (d) Four years back. (e) Four years back. (f) Four year years back. (f) Four		-								
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Proryear (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance 1,525,982 1,281,034 1,463,928 1,273,172 1,244,664 b Contributions 1,525,982 1,281,034 1,463,928 1,273,172 1,244,664 c Net investment earnings, gains, and losses 172,393 309,948 (114,294) 254,426 95,722 d Grants or scholarships 172,393 309,948 (114,294) 254,426 95,722 d Grants or scholarships 1,633,375 1,525,982 1,281,034 1,463,928 1,273,172 g End of year balance 1,633,375 1,525,982 1,281,034 1,463,928 1,273,172 2 Provide the estimated percentage of the current year end balance (line 1g, column (ai) held as: a a bacard designated or quasi-endowment ▶		0								
Complete if the organization answered "Yes" on Form 990, Part IV, line 10. a Beginning of year balance b Contributions c Net investment earnings, gains, and losses c sectors c of the expenditures for facilities and programs c of the expenditure of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	-			nariation has been pi			····· ⊔			
1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Twree years back (e) Four years back four years b	I U		answered "Yes"	on Form 990 P	art IV line 10					
1a Beginning of year balance 1,525,982 1,281,034 1,463,928 1,273,172 1,244,664 b Contributions 1 1,525,982 1,281,034 1,463,928 1,273,172 1,244,664 b Contributions 1 1,223,93 309,948 (114,294) 254,426 95,722 d Grants or scholarships 1 1 1,233,375 1,221,034 1,463,928 1,273,172 e Other expenditures for facilities and programs 65,000 65,000 68,600 63,670 67,214 f Administrative expenses 1,633,375 1,525,982 1,281,034 1,463,928 1,273,172 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment		Complete in the organization								
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c Net investment earnings, gains, and losses 172,393 309,948 (114,294) 254,426 95,722 d Grants or scholarships	-		1,525,982	1,281,034	1,463,928	1,273,172	2 1,244,664			
Iosses 172,393 309,948 (114,294) 254,426 95,722 d Grants or scholarships										
d Grants or scholarships Image: Construction of programs I	С									
e Other expenditures for facilities and programs 65,000 65,000 68,600 63,670 67,214 f Administrative expenses 1,633,375 1,525,982 1,281,034 1,463,928 1,273,172 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a a a a a Board designated or quasi-endowment (line 1g, column (a)) held as: a b a a a a a a a a a a a a a a a b a a b a a b a b a b a b a a b a	_		172,393	309,948	(114,294)	254,420	<u>5</u> 95,722			
programs 65,000 65,000 68,600 63,670 67,214 f Administrative expenses 1,633,375 1,525,982 1,281,034 1,463,928 1,273,172 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	d	·								
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2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶% b Permanent endowment ▶% memory c Term endowment ▶% 3a Are there endowment ▶% (i) Unrelated organizations yes (i) Unrelated organizations 3a(i) x 3a(ii) x (ii) Related organizations 3a(ii) x 3a(ii) x 3a(ii) x 3a(ii) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation 1a Land	f	·								
a Board designated or quasi-endowment ▶% b Permanent endowment ▶% c Term endowment ▶% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:	g	,		, ,	, ,	1,463,928	3 1,273,172			
b Permanent endowment ▶% c Term endowment ▶% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (ii) Related organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organizations (i) Unrelated organizations (ii) Related organizations (iii) Related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value (a) Cost or other basis (c) Accumulated (d) Book value 	2	. –	-	(line 1g, column (a))	held as:					
c Term endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (i) Unrelated organizations (iii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organizations isted as required on Schedule R? (iii) Related regeneration (iii) Related regeneration (iii) Related regeneration (iii) Related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value (other) (d) Book value (d) Book value (d) Book value	а	Board designated or quasi-endowment	%							
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations isted as required on Schedule R?. 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land Leasehold improvements 200, 394 66, 798 133, 596 d Equipment 200, 675 30, 893	b		6							
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (ii) Related organizations (iii) Related organizations (ii) Related organizations (iii) Related organizations (iiii) Related organizations (iiii) Related organizations (iiii) Related organizations (iiii) Related organizations (iiiiiiiiii) Related organizations (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	С									
organization by: Yes No (i) Unrelated organizations 3a(i) x (ii) Related organizations 3a(ii) x b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b 3b 3b Part VI Land, Buildings, and Equipment. (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 200,394 66,798 133,596 d Equipment 41,941 39,799 2,142 e Other 140,568 109,675 30,893		The percentages on lines 2a, 2b, and 2c shou	uld equal 100%.							
(i) Unrelated organizations 3a(i) x (ii) Related organizations 3a(ii) x 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (c) Accumulated depreciation (d) Book value 1a Land	3a	Are there endowment funds not in the posses	sion of the organizati	on that are held and	administered for th	е	·			
(ii) Related organizations 3a(ii) x b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other basis (investment) (c) Accumulated depreciation (d) Book value 1a Land 200,394 66,798 133,596 d Equipment 41,941 39,799 2,142 e Other 140,568 109,675 30,893		organization by:					Yes No			
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?		(i) Unrelated organizations					. 3a(i) X			
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (c) Accumulated depreciation (d) Book value 1a Land		(ii) Related organizations					. 3a(ii) <u>x</u>			
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land Land </td <td>b</td> <td>If "Yes" on line 3a(ii), are the related organiza</td> <td>tions listed as require</td> <td>ed on Schedule R?.</td> <td></td> <td></td> <td>. 3b</td>	b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?.			. 3b			
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land (d) Book value b Buildings <td>4</td> <td>Describe in Part XIII the intended uses of the</td> <td>organization's endow</td> <td>/ment funds.</td> <td></td> <td></td> <td></td>	4	Describe in Part XIII the intended uses of the	organization's endow	/ment funds.						
Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1aLand	Pa	rt VI Land, Buildings, and Equip	oment.							
Image: Non-Structure (investment) (other) depreciation 1a Land		Complete if the organization	answered "Yes"	on Form 990, Pa	art IV, line 11a.	See Form 990,	Part X, line 10.			
1a Land		Description of property	(a) Cost or othe	er basis (b) Cost o	r other basis (c) Accumulated	(d) Book value			
b Buildings Image: Color of the col		-	(investme	ent) (e	other)	depreciation				
c Leasehold improvements 200,394 66,798 133,596 d Equipment 41,941 39,799 2,142 e Other 140,568 109,675 30,893	1a	Land								
c Leasehold improvements 200,394 66,798 133,596 d Equipment 41,941 39,799 2,142 e Other 140,568 109,675 30,893	b	Buildings								
d Equipment 41,941 39,799 2,142 e Other 140,568 109,675 30,893		·			200,394	66,798	133,596			
e Other	-									

Schedule D (Form 990) 2020

chedule D (Form			04-	2693322	Page
art VII	Investments - Other Securities.		141 O. F.		- Kar 40
	Complete if the organization answered "Yes" on For	m 990, Part IV, II	ne 11b. See Forn	n 990, Part X	., line 12
	(a) Description of security or category (including name of security)	(b) Book value		c) Method of valuation r end-of-year market	
Financial	derivatives				
Closely-h	eld equity interests				
Other					
4)					
3)					
C)					
D)					
Ξ)					
F)					
G)					
H)					
	n (b) must equal Form 990, Part X, col. (B) line 12.)				
art VIII	Investments - Program Related.		44. 0. 5		1
	Complete if the organization answered "Yes" on For	m 990, Part IV, II	ne 11c. See Form	n 990, Part X	, line 13
	(a) Description of investment	(b) Book value		c) Method of valuation r end-of-year market	
I)					
2)					
8)					
4)					
5)					
5)					
7)					
3)					
9)					
	n (b) must equal Form 990, Part X, col. (B) line 13.)				
art IX	Other Assets.		na 11d Saa Farm	000 Dort V	line 1
	Complete if the organization answered "Yes" on For	111 990, Fait IV, II	ne mu. See Fom		
	(a) Description			(b) Bo	ook value
1)					
2)					
3)					
4) = \					
5) 2)					
6) 7)					
7) 8)					
8) 9)					
-	n (b) must equal Form 000 Part X col. (P) line 15)				
art X	n (b) must equal Form 990, Part X, col. (B) line 15.) • • • • • • • • • • • • • • • • • • •	<u></u>			
	Complete if the organization answered "Yes" on For	m 990 Part IV li	ne 11e or 11f Se	e Form 990	Part X
	line 25			e : enn 000,	. u / . ,

line	25.	

1.	(a) Description of liability	(b) Book value
(1) Federal ir	ncome taxes	
(2¢apital	lease	3,137
(3Annuiti	es payable	32,880
_(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (l	b) must equal Form 990, Part X, col. (B) line 25.) 🔹 🕨	36,017

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

Sched	ule D (Form 990) 2020 Center for Arms Control and			4-2693322	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial State		-	er Return.	
	Complete if the organization answered "Yes" on Form 990,	Part	IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements \ldots \ldots \ldots			1	829,258
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		I		
а	Net unrealized gains (losses) on investments	2a	314,360	_	
b	Donated services and use of facilities	2b		4	
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	314,360
3	Subtract line 2e from line 1			3	514,898
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		4	
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>).			5	514,898
Pa	t XII Reconciliation of Expenses per Audited Financial Stat			s per Returr	1.
	Complete if the organization answered "Yes" on Form 990), Par	t IV, line 12a.		
1	Total expenses and losses per audited financial statements	•••		1	990,358
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		I		
а	Donated services and use of facilities	2a		4	
b	Prior year adjustments	2b		4	
С	Other losses	2c		4	
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	990,358
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b • • • • • • • •	4a		4	
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>)			5	990,358
-	rt XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV,			Part X, line	
2; Pa	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	ny add	itional information.		
01.	Footnote for uncertain tax position under FIN 48 (Part	X)			
The	Center is exempt from Federal income taxes under Sectio	n 50	1(c)(3) of the 1	Internal Re	evenue Code
(IR	C). Accordingly, no provision for income taxes has been	mad	e in the accompa	anying cons	olidated
fina	ancial statements. The provisions included in accountin	g pr	inciples general	lly accepte	d in the
Uni	ted States of America provide consistent guidance for th	e ac	counting for und	certainty i	n income
tax	es recognized in an entity's financial statements and pr	escr	ibe a threshold	of "more]	ikely than
not	" for recognition of tax positions taken or expected to	be t	aken in a tax re	eturn.	
The	Center performed an evaluation of uncertain tax positio	ns a	t year end, and	determined	<u>l that ther</u> e
wer	e no matters that would require recognition in the conso	lida	ted financial st	tatements o	or, which
may	have any effect on its tax-exempt status. At year end,	the	statute of limi	itations fo	or the three
pri	or tax years remains open with the U.S. Federal jurisd	icti	on.		

Complete if the organization answered "Yes" on Form 590, Part M, line 21 or 22. A tank the form 500. A tank	SCHEDULE I Grants and Other Assistance to Organizations, (Form 990) Governments, and Individuals in the United States					ates	OMB No. 1545-0047		
Image: Second bases Image: Second bases <thimage: bases<="" second="" th=""> Image: Second bases <thimage: bases<="" second="" th=""> Image: Second bases</thimage:></thimage:>	. ,		Complet						
Contract Cork trans Control and Contract and Assistance 04-2633322 Part II Contract Information control to substantiate the amount of the grants or assistance, the granteer' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Ives Information 2 Describe of grant and available to amount of the grants or assistance? Ives Information Ives Information 2 Enter the Information procedures of the corganizations and Domestic Governments. Complete if the organization answered "Ves" on Form 980, Part IV the organization answered "Ves" on Form 980, Part IV the organization answered "Ves" on Form 980, Part IV the organization answered "Ves" on Form 980, Part IV the organization answered "Ves" on Form 980, Part IV the organization of organization of organization answered "Ves" on Form 980, Part IV the organization answered "Ves" on Form 980, Part IV the organization of organization of cash eligibility of the dramational space is needed. 1 (a) Nome and addees of organization and Domestic Governments. Complete if additional space is needed. (b) Purpose of grant and the selection of appleteristic on the selection of assistance in organization. 1 (b) Nome and addees of organization and the selection of appleteristic on the selection of appleteristic on the selection of the part IV the organization and the selection of the part IV the organization is an organization in the line selection of the part IV the organization is an organization in the line selection of the part IV the organization is an organization in the line selection of the part IV the organization in the line selection of the part IV the organization is an organiza								_	-
Part light General information on Grants and Assistance 1 Does the organization maintains the maximum of the grants or assistance, and the selection criteria used to avard the grants or assistance and maximum code to subtance to Grant and other Assistance to Domestic Organization and Domestic Governments. Completel if the organization and answered Yees" on Form 1990. 2 Describe in Part V the organization and Domestic Governments. Completel if the organization and severed Yees" on Form 1990. (b) Purpose of grant and assistance to Domestic Organizations and Domestic Governments. Completel if the organization answered Yees" on Form 1990. 1 (a) them said advects of information (b) EIN (c) RG estimation (c) RG estimat	Name of the organization							Employer identificatio	n number
1 Does the organization maintain records to substantate the amount of the grants or assistance, the grants or assistance, and the station of the organization answered 'Yes" on Form 190, Partial on the fully the organization answered 'Yes" on Form 190, Partial and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes" on Form 190, Partial and address of organization 1 (b) Partial and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes" on Form 190, Partial and address of organization 1 (b) Nume and address of organization (b) EIN (c) RC section (d) Amount of rom- cash assistance, if the organization (g) Overription of one- cash assistance if the organization (g) Overription of (g) Overription of one- cash assistance if the organization (g) Overription of (g) Overription of one- cash assistance if the organization of organization of the organization is the United States. 20 Last State, State L.1.80 S2-0746112 501(c) (4) 150,000 Image: State L.1.80 Image: State L.1.80 (a) S2-0746112 501(c) (4) 150,000 Image: State L.1.80 Image: State L.1.80 Image: State L.1.80 (a) S2-0746112 501(c) (4) 150,000 Image: State L.1.80	Center for Arms	Control and	Grants and Assi	stanco				04-2693322	
The solucitor criteria used to award the grants or assistance? Image: Complete in the constraints of produced to the monitoring be used of grant funds in the United States. Part IV Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization aspace is needed. (e) Description of grants or assistance (f) Purpose of grant or assistance (f) Description of grant or assistance (f) Description of grant or government (f) Description of grant or government (f) Description of grant or government (f) Description of grant or assistance (f) Descrip						Part Phase and a survey of			
2 Describe in Part IV be organization's procedures for monitoring the use of grant funds in the United States. Part IV, line 21, for any recipient that received more than \$5,000, Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization organization and underse of organization and underse of organization and underse of organization and underse of organization (if applicable) (a) Name and address of organization organization answered "Ves" on Form 990, Interse of organization (if applicable) (a) Name and address of organization organization answered "Ves" on Form 990, Interse of organization (if applicable) 2 (a) Name and address of organization (if concretion bit in the Unit in the Unin Unin Unit in the Unit in the Unin Unit in the	•			•	•				
Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Convernments. Complete if the organization answered "Vest" on Form 990. Part IV, line 21, for any receipent that received more than \$5,000. Part II can be duplicated if additional space is needed. (b) Purpose of grant or generic that received more than \$5,000. Part II can be duplicated if additional space is needed. (b) Purpose of grant or generic that received more than \$5,000. Part II can be duplicated if additional space is needed. (b) Purpose of grant or generic that received more than \$5,000. Part II can be duplicated if additional space is needed. (b) Purpose of grant or generic that received more than \$5,000. Part II can be duplicated if additional space is needed. (b) Purpose of grant or generic that received more than \$5,000. Part II can be duplicated if additional space is needed. (b) Purpose of grant or generic that received more than \$5,000. Part II can be duplicated if additional space is needed. (b) Purpose of grant or generic that received more than \$5,000. Part II can be duplicated if additional space is needed. (b) Purpose of grant or generic that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) Purpose of grant or generic that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) Purpose of generic that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) Purpose of generic that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) Purpose of generic that received more that receive		•							. <u>X</u> res _ No
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1 (a) lame and address of cognization government (b) EIN (c) RC section (if applicable) (d) Amount of cash grant (d) Amount of cash assistance (f) Method of Valuation cash assistance (g) Amount of cash assistance									90,
or government (if applicable) grant cash assistance (ioon, Hw, apprash, onecah assistance onecah assistance or assistance 10/000011 Sort 1 Livable World Sort 1 Livable World Sort 1 Livable Lobbying Lobbying 820 1 st st NE, Suite LI-180 Sort 0 Livable Sort 0 Livable Sort 0 Livable Lobbying (2) Sort 0 Livable Sort 0 Livable Sort 0 Livable Lobbying (3) Income 1 Livable Income 1 Livable Income 1 Livable Income 1 Livable (4) Income 1 Livable (6) Income 1 Livable (9) Income 1 Livable (10) Income 1 Livable 2 Enter total number of section 501(b(x)(3) and government organizations listed in the line 1 Livable Income 1 Livable	· · · · · · · · · · · · · · · · · · ·		1			· ·	(f) Method of valuation	(g) Description of	(h) Purpose of grant
(1)Council for a Livable World S20 lat St Ne, Suite LI-180 Washington DC 20002 52-0746112 501 (c) (4) 150,000 Jobbying grant (2)	or gove	rnment		(if applicable)	grant	cash assistance			or assistance
washington DC 20002 52-0746112 501 (c) (4) 150,000 grant (2)	(1)Council for a	a Livable World							
(2) (3) (4) (4) (5) (7) (820 1st St NE,	Suite LL-180							Lobbying
Image: Section SD1(c)(3) and government organizations listed in the line 1 table Image: Section SD1(c)(3) and government organizations listed in the line 1 table Image: Section SD1(c)(3) and government organizations listed in the line 1 table Image: Section SD1(c)(3) and government organizations listed in the line 1 table Image: Section SD1(c)(3) and government organizations listed in the line 1 table Image: Section SD1(c)(3) and government organizations listed in the line 1 table Image: Section SD1(c)(3) and government organizations listed in the line 1 table Image: Section SD1(c)(3) and government organizations listed in the line 1 table Image: Section SD1(c)(3) and government organizations listed in the line 1 table Image: Section SD1(c)(3) and government organizations listed in the line 1 table	Washington DC 2	0002	52-0746112	501(c)(4)	150,000				grant
	(2)								
	(0)								
(6)	(3)								
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Image: section 501(c)(3) and government organizations listed in the line 1 table Image: section 501(c)(3) and government organizations listed in the line 1 table Image: section 501(c)(3) and government organizations listed in the line 1 table									
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(9) (10) 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(7)								
(9) (10) 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table									
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2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(9)								
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	(10)								1
	O Fatas fatalass		 	- Alexan Brand Strategy II	4 40 410			<u> </u>	<u> </u>
								-	

 Schedule I (Form 990) (2020)
 Center for Arms Control and
 04-2693322

 Part III
 Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

	Part III can be duplicated if additional space is needed.						
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance	
1							
2							
3							
4							
5							
6							
7							

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

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047
2020
Open to Public
Inspection
Employer identification number

Center for Arms Control and

04-2693322

01. Form 990 governing body review (Part VI, line 11)

THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT.

02. Conflict of interest policy compliance (Part VI, line 12c)

EXPLANATION: EACH RESPONSIBLE PERSON ANNUALLY COMPLETES A DISCLOSURE FORM IDENTIFYING ANY RELATIONSHIPS, POSITIONS OR CIRCUMSTANCES IN WHICH THE RESPONSIBLE PERSON IS INVOLVED THAT HE OR SHE BELIEVES COULD CONTRIBUTE TO A CONFLICT OF INTEREST ARISING. A. PRIOR TO BOARD OR COMMITTEE ACTION ON A CONTRACT OR TRANSACTION INVOLVING A CONFLICT OF INTEREST, Α DIRECTOR OR COMMITTEE MEMBER HAVING A CONFLICT OF INTEREST AND WHO IS IN ATTENDANCE AT THE MEETING DISCLOSES ALL FACTS MATERIAL TO THE CONFLICT OF INTEREST. SUCH DISCLOSURE IS REFLECTED IN THE MINUTES OF THE MEETING. B. A DIRECTOR OR COMMITTEE MEMBER WHO PLANS NOT TO ATTEND A MEETING AT WHICH HE OR SHE HAS REASON TO BELIEVE THAT THE BOARD OR COMMITTEE WILL ACT ON A MATTER IN WHICH THE PERSON HAS A CONFLICT OF INTEREST DISCLOSES TO THE CHAIR OF THE MEETING ALL FACTS MATERIAL TO THE CONFLICT OF INTEREST. THE CHAIR REPORTS THE DISCLOSURE AT THE MEETING AND THE DISCLOSURES REFLECTED IN THE MINUTES OF THE MEETING. A PERSON WHO HAS A CONFLICT OF INTEREST IS UNABLE TO PARTICIPATE IN OR BE PERMITTED TO HEAR THE BOARD'S OR COMMITTEE'S DISCUSSION OF THE MATTER EXCEPT TO DISCLOSE MATERIAL FACTS AND TO RESPOND TO QUESTIONS. SUCH PERSON IS UNABLE TO EXERT HIS OR HER PERSONAL INFLUENCE WITH RESPECT TO THE MATTER, EITHER AT OR OUTSIDE THE MEETING. A PERSON WHO HAS A CONFLICT OF INTEREST WITH RESPECT TO A CONTRACT OR TRANSACTION THAT WILL BE VOTED ON AT A MEETING IS NOT COUNTED IN DETERMINING THE PRESENCE OF A QUORUM FOR PURPOSES OF THE VOTE. THE PERSON HAVING A CONFLICT OF INTEREST MAY NOT VOTE ON THE CONTRACT OR TRANSACTION AND MAY NOT BE PRESENT IN THE MEETING ROOM WHEN THE VOTE IS TAKEN, UNLESS THE VOTE IS BY SECRET BALLOT. SUCH PERSON'S INELIGIBILITY TO VOTE IS REFLECTED IN THE MINUTES

chedule O (Form 990 or 990-EZ) (2020) ame of the organization	Page Employer identification number
enter for Arms Control and	04-2693322
F THE MEETING. FOR PURPOSES OF THIS PARAGRAPH, A MEMBER OF THE BOAN	RD OF DIRECTORS OF
ACNP HAS A CONFLICT OF INTEREST WHEN HE OR SHE STANDS FOR ELECTION	AS AN OFFICER OR FOR
EELECTION	
S A MEMBER OF THE BOARD OF DIRECTORS. E. RESPONSIBLE PERSONS WHO AN	RE NOT MEMBERS OF THE
OARD OF DIRECTORS OF CACNP,	
R WHO HAVE A CONFLICT OF INTEREST WITH RESPECT TO A CONTRACT OR TRA	ANSACTION THAT IS NOT
HE SUBJECT OF BOARD OR COMMITTEE ACTION, DISCLOSES TO THE CHAIR OR	THE CHAIR'S DESIGNEE
NY CONFLICT OF INTEREST THAT SUCH RESPONSIBLE PERSON HAS WITH RESPI	ECT TO A CONTRACT OR
RANSACTION. SUCH DISCLOSURE ARE MADE AS SOON AS THE CONFLICT OF IN	TEREST IS KNOWN TO THE
ESPONSIBLE PERSON. THE RESPONSIBLE PERSON REFRAINS FROM ANY ACTION	THAT MAY AFFECT
ACNP'S PARTICIPATION IN SUCH CONTRACT OR TRANSACTION. IN THE EVENT	IT IS NOT ENTIRELY
LEAR THAT A CONFLICT OF INTEREST EXISTS, THE INDIVIDUAL WITH THE PO	OTENTIAL CONFLICT
ISCLOSES THE CIRCUMSTANCES TO THE CHAIR OR THE CHAIR'S DESIGNEE, W	HO DETERMINES WHETHER A
ONFLICT OF INTEREST EXISTS THAT IS SUBJECT TO THIS POLICY.	

03. CEO, executive director, top management comp (Part VI, line 15a)

THE COMPENSATION OF THE EXECUTIVE DIRECTOR IS SET BY THE BOARD. THE BOARD CONSIDERS THE COMPENSATION OF SIMILAR ORGANIZATIONS WHEN MAKING THIS DETERMINATION. THE EXECUTIVE DIRECTOR SETS THE COMPENSATION OF THE STAFF AFTER CONSIDERING THE BOARD'S GUIDANCE AND THE CENTER'S FINANCIAL BUDGET.

04. Governing documents, etc, available to public (Part VI, line 19)

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL

STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

05. Part VII, response or note to any other line in Part VII

Under a common paymaster arrangement with Council for a Livable World, Center for Arms

Schedule O (Form 990 or 990-EZ) (2020)	Page
Name of the organization	Employer identification number
Center for Arms Control and	04-2693322
	04 2055522
Control and NP pays Council employees and issues W2s	inder Center's name and FEIN.