Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

<u>A I</u>	or the	2022 calend	dar year, or tax year begin	nning		, 2022, a	and endi	ng		, 20
В	Check if a	applicable:	C Name of organization CO	UNCIL FOR A	LIVABLE WORLD				D Empl	oyer identification number
	Address o	change	Doing business as							52-0746112
一	Name cha	-	Number and street (or P.O. bo	ox if mail is not delivered	to street address)		Room/sui	te	E Telepi	hone number
一	nitial retu	•	820 1ST ST NE		10 011 001 1111 1111 1111			LL 180	(202) 543-4100	
二		rn/terminated	City or town, state or province	country and ZIP or fore	oign postal code			<u> </u>	G Gross	s receipts
声					eigii postai code					·
一	Amended		Washington, DC		m:			11/)	\$	393,366 for subordinates? Yes X No
ш <i>′</i>	Applicatio	n pending	F Name and address of principa		Tierney					- F - F
			Same as C abov		$\overline{}$					es included? Yes No
		pt status:	501(c)(3) X 501(c) (4) (insert no.)	4947(a)(1) or	527				st. See instructions
<u>J</u> /	Vebsite:		W.LIVABLEWORLD.ORG	- -				H(c) Group 6	exemption	number
		_		sociation Other		L Year of formati	on: 196	2 M S	State of leg	al domicile: DC
Pa		Summar	•							
	1	Briefly descr	ribe the organization's miss	sion or most signific	ant activities: <u>NON-</u>	-PROFIT,	NON-P	ARTISAN	ADVO	CACY ORGANIZATION
9		THAT IS	DEDICATED TO REDU	CING THE DAN	IGER OF NUCLEAR	WEAPONS	AND 1	NCREAS 1	ING NA	ATIONAL SECURITY
Governance		WHILE HE	ELPING ELECT CONGR	RESSIONAL CAN	IDIDATES WHO SU	PPORT SU	CH POI	ICIES.		
err										
Š	2		oox if the organization d	•	•				1 1	
ૹ	3		oting members of the gove						3	18
Activities &	4		ndependent voting member						4	18
ξ	5	Total numbe	er of individuals employed ir	n calendar year 202	22 (Part V, line 2a) •				5	0
Ç	6	Total numbe	er of volunteers (estimate if	necessary)					6	50
•			ted business revenue from		, ·				7a	0
	b	Net unrelate	ed business taxable income	from Form 990-T,	Part I, line 11				7b	0
								Prior Year		Current Year
ine	8	Contribution	ns and grants (Part VIII, line	:1h)				553	,155	392,509
	9	Program ser	rvice revenue (Part VIII, line	e 2g)						0
Revenue	10	Investment i	income (Part VIII, column (A	A), lines 3, 4, and 7	'd)				6	857
æ	11	Other revenue	ue (Part VIII, column (A), lir	4	,200	0				
	12	Total revenu	ue - add lines 8 through 11 (557	,361	393,366				
	13	Grants and s	similar amounts paid (Part l	IX, column (A), line	s 1-3)					0
	14	Benefits paid	d to or for members (Part I)			0				
	15	Salaries, oth	ner compensation, employe	540	,606	471,710				
Expenses	16a	Professional	l fundraising fees (Part IX,	column (A), line 11	e)					0
en	b	Total fundrai	ising expenses (Part IX, col	lumn (D), line 25)		113,901				
X	17	Other expen	nses (Part IX, column (A), li	nes 11a-11d, 11f-2				145	,158	79,171
			ses. Add lines 13-17 (must						,764	550,881
	19	•	ss expenses. Subtract line	•	. ,				,403)	(157,515)
			· ·				Begir	nning of Curre		End of Year
ets c	20	Total assets	(Part X, line 16)						,589	196,145
Asse	21		es (Part X, line 26)						,338	165,409
Net Assets or	22		or fund balances. Subtract						,251	30,736
	rt II	Signatu	ıre Block						,	
Unde	er penaltie		eclare that I have examined this retu					wledge and be	elief, it is	
true,	correct, a	and complete. De	eclaration of preparer (other than of	fficer) is based on all info	rmation of which preparer ha	s any knowledge.				
		John	n Tierney							
Sig	n į	Signature of office							Da	te
Her	e	John	n Tierney, Executi	ve Director						
	Ī	Type or print na		70 21100001						
		Print/Type pre	reparer's name	Preparer's signature		Date		Check	☐ if	PTIN
Pai	d	John Mu	ulling	John Mullins	•	11-08-20	23	self-em	nloved	P01429307
	- parer			•	•	<u> </u>		irm's EIN	pioyou	101423301
	Only			sconsin Avenu	10			hone no.		
)	, i illis addres		a MD 20814	4 C			HOHE HU.	202.	770-6371
Mav	the IRS	I S discuss this	return with the preparer sh		nstructions				202-	X Yes No

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

(Expenses \$ including grants of \$) (Revenue \$)

371,805

2) COUNCIL FOR A LIVABLE WORLD Checklist of Required Schedules Part IV

			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		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_		
_	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		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? <i>If "Yes," complete Schedule D, Part II</i>	7		Х
8	complete Schedule D, Part III	8		v
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	-		X
3	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	<u> </u>		
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			- 25
	VII, VIII, IX, or X as applicable.			
а				
	complete Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
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				
	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	446		
15	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		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	13		X
10	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
••	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<u> </u>		
-	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
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	The state of the s	20a		x
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
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	х	
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		х
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		х
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		х
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 the 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 line 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	251		
20	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	20		
27	related organization?If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37		.,
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	31		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note : All Form 990 filers are required to complete Schedule O	38	v	
Par		J0	Х	Щ
rai	Check if Schedule O contains a response or note to any line in this Part V			
	22 22 2 Contains a respense of note to any mile in the fact of the first first first		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		. 55	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	x	

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		100	140
	Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
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?	5b		х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	x	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	х	
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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	9a		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
b 10	Section 501(c)(7) organizations. Enter:	90		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter:	-		
 а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
_	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
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?	14a		Х
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 the 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		х
4-	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	n res complete com 0009			

COUNCIL FOR A LIVABLE WORLD

Pail VI	Governance, management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"									
	esponse 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								
Section A.	Governing Body and Management									

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
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			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	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	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
500	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		<u> </u>
	The 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	163	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100		
	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	х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	404		
Sec	organization's exempt status with respect to such arrangements?	16b		
3 e c 17				
	List the states with which a convict this Form QU() is required to be tiled			
	List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (section 501(c))			
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
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.			
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 X Upon request Other (explain on Schedule O)			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website			
	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 X Upon request Other (explain on Schedule O)			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- · List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - · List all of the organization's current key employees, if any. See the instructions for definition of "key employees."
- · List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- · List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- · List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) (B) Name and little Name a	Officer this box if ficitive the organization flor any feet	T organiza	I	про			arry ou		t omoor, un ootor, o	truotoo.	-
Controller 20.00											
Name and title	(A)	(B)	/4	not al-			han		(D)	(E)	(F)
Comparison Com	Name and title	Average	,						Reportable	Reportable	Estimated amount
Comparison Com									'	'	
1099-MEC 1099											•
Controller		, ,	악등	l ng	Off	e	en Hi	Fo			
Controller			direc	Ë	icer	y en	ghes iploy	rmei	1099-NEC)	1099-NEC)	related organizations
(1) John Tierney			tor to	ona		oldt	t cor	·			
(1) John Tierney		below	ruste	trus		/ee	npe				
(1) John Tierney		dotted line)	ď	tee			nsat				
Executive Director							be				
Executive Director											
[2] Cain Farmer	(1) John Tierney	20.00									
Controller					х				0	150,732	6,540
Columbda		20.00									
Board Member				х	х				0	44,948	8,622
(4) Hank Naughton 1.00 Board Member 1.00 (5) Al Franken 1.00 Board Member X (6) Mariah Sixkiller 1.00 Board Member X (7) Dan Wirls 1.00 Board Member X (8) Joe Cirincione 1.00 Board Member X (9) Mark Udall 1.00 Board Member X (10)Meghan Oneill 1.00 CC Assistant - Ann Liston X Coard Member X (12)Scott Allen 1.00 Board Member X (13)Ben Chang 1.00 Board Member X (14)Ann Liston 1.00	(3) Phil Schrag	1.00									
Board Member	Board Member		х						0	0	0
Solution	(4) Hank Naughton	1.00									
Board Member	Board Member		х						0	0	0
(6) Mariah Sixkiller	(5) Al Franken	1.00									
Board Member	Board Member		х						0	0	0
The content of the	(6) Mariah Sixkiller	1.00									
Board Member	Board Member		х						0	0	0
Source 1.00 Board Member 1.00 X 0 0 0 0 Source Mark Udall 1.00	(7) Dan Wirls	1.00									
Board Member	Board Member		х						0	0	0
9 Mark Udall	(8) Joe Cirincione	1.00									
Board Member	Board Member		х						0	0	0
(10)Meghan Oneill 1.00 CC Assistant - Ann Liston X (11)Robert Barber 1.00 Board Member X (12)Scott Allen 1.00 Board Member X (13)Ben Chang 1.00 Board Member X (14)Ann Liston 1.00	(9) Mark Udall	1.00									
CC Assistant - Ann Liston X 0 0 0 (11)Robert Barber 1.00 0 0 0 Board Member X 0 0 0 (12)Scott Allen 1.00 0 0 0 Board Member X 0 0 0 (13)Ben Chang 1.00 0 0 0 Board Member X 0 0 0 (14)Ann Liston 1.00 0 0	Board Member		х						0	0	0
CC Assistant - Ann Liston X 0 0 0 (11)Robert Barber 1.00 0 0 0 Board Member X 0 0 0 (12)Scott Allen 1.00 0 0 0 Board Member X 0 0 0 (13)Ben Chang 1.00 0 0 0 Board Member X 0 0 0 (14)Ann Liston 1.00 0 0	(10)Meghan Oneill	1.00									
Board Member X 0 0 0 (12)Scott Allen 1.00 0			х						0	0	0
Board Member X 0 0 0 (12)Scott Allen 1.00 0	(11)Robert Barber	1.00									
Board Member X 0 0 0 (13)Ben Chang 1.00 0 0 0 Board Member X 0 0 0 (14)Ann Liston 1.00 0 0 0			х						0	0	0
Board Member X 0 0 0 (13)Ben Chang 1.00 0<	(12)Scott Allen	1.00									
Board Member X 0 0 0 (14)Ann Liston 1.00 0 0 0			х						0	0	0
Board Member X 0 0 0 (14)Ann Liston 1.00 0 0 0	(13)Ben Chang	1.00									
			х						0	0	0
	(14)Ann Liston	1.00									
			х						0	0	0

Form **990** (2022)

COUNCIL FOR A LIV	ABLE WOR	LD		52-0746	6112 Page 8
. Officers, Directors, T	rustees,	Key Employees, and I	Highest Comp	ensated Emp	loyees (continued)
		(C)			
(A)	(B)	Position (do not check more than one	(D)	(E)	(F)

(A) Name and title	(B) Average hours per week (C) Position (do not check more than one box, unless person is both ar officer and a director/trustee)					s both a	n	(D) Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/		(F) Estimated amour of other compensation		
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations 1099-MIS(1099-NEC	Ċ/	orga	rom the nization I organiz	
(15)Rob Goldston Board Member	1.00	х						0		0			0
(16)Neta_CrawfordBoard Member	1.00	х						0		0			0
(17)Jules Zacher Chair	<u> 1 .00</u>	x		х				0		0			0
(18)Tim Brennan Vice Chair	1.00			x				0		0			0
(19)Bob Musil	1.00							-					
Treasurer (20)Lorin Walker	1.00	Х		х				0		0			0
Secretary		х		х				0		0			0
<u>(21)</u>													
<u>(22)</u>													
(23)													
(24)													
<u>(25)</u>													
1b Subtotal				'									
c Total from continuation sheets to Part VII, Sec d Total (add lines 1b and 1c)				• •			•	0	105	600		15 1	
d Total (add lines 1b and 1c)								ore than \$100,000	195 ,	680		15,1	162
reportable compensation from the organization													0
3 Did the organization list any former officer, director	or. trustee. ke	ev emi	olove	e. o	r hic	ihest c	omp	ensated				Yes	No
employee on line 1a? If "Yes," complete Schedule	J for such in	ndividu	ıal .								3		х
4 For any individual listed on line 1a, is the sum of r													
organization and related organizations greater tha individual			,	•							4	х	
5 Did any person listed on line 1a receive or accrue													
for services rendered to the organization? If "Yes, Section B. Independent Contractors	" complete S	Schedu	ıle J f	for s	uch	perso	n				5		х
1 Complete this table for your five highest compens	ated indeper	ndent o	contra	acto	rs th	nat rec	eive	d more than \$100.	000 of				
compensation from the organization. Report comp										x year.			
(A) Name and business address	ss							(B) Description of service	es		(C) Compens	ation	
Total number of independent contractors (including)	a but not lim	ited to	thos	e lie	ted	ahove) wh	0					
received more than \$100,000 of compensation fro	-			J 113		450 V G	, ****	-					

Form 990 (2022)
Part VIII COUNCIL FOR A LIVABLE WORLD Statement of Revenue

		Check if Schedule O co	ntains a respons	e or n	ote to any line in thi	s Part VIII			
			·		,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contraction) All other contributions, gift and similar amounts not in Noncash contributions inclines 1a-1f	ributions) · · ts, grants, ncluded above	1a 1b 1c 1d 1e 1f					
Program Service Revenue			evenue		Business Code	392,509			
Other Revenue	4 5 6a b c d 7a b c d 8a b c c 9a	Investment income (included other similar amounts). Income from investment of Royalties	f tax-exempt bond (i) Real 6a 6b 6c (i) Securitie 7a 7b 7c sising In line fundraising event gaming activities ess	8a 8b 8 9a 9b	eeds	857			857
Miscellanous Revenue	11a b c d	All other revenue Total. Add lines 11a-11d	sales of inventory	<u> </u>	Business Code				
	12	Total revenue. See instruc	ctions			393,366	0	0	857

Part IX

52-0746112

Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to	any line in this Part IX		<u>.</u>	<u>x</u>
Do n	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	9b, and 10b of Part VIII.	iotal expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
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	195,680	137,838	16,104	41,738
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	195,943	138,023	16,126	41,794
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	16,433	9,526	3,923	2,984
9	Other employee benefits	31,763	19,429	11,106	1,228
10	Payroll taxes	31,891	16,395	7,209	8,287
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	1,250		1,250	
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.)	26,351	8,500		17,851
12	Advertising and promotion				
13	Office expenses	13,514	4,038	9,457	19
14	Information technology				
15	Royalties				
16	Occupancy	28,673	28,673		
17	Travel	1,195	1,195		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,197	1,197		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	Dues and subscriptions	6,991	6,991		
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	550,881	371,805	65,175	113,901
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)		I		

Form 990 (2022) Part X

balance Sneet										
 Check if Schedule O contains a response or note to any line in this Part X			[_						
	(A)		(B)							
	Beginning of year		End of year							

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	135,927	1	27,125
	2	Savings and temporary cash investments	56,197	2	58,060
	3	Pledges and grants receivable, net		3	75,000
	4	Accounts receivable, net	20,245	4	27,775
	5	Loans and other receivables from any current or former officer, director,	,		,
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
"	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ass	9	Prepaid expenses and deferred charges	19,548	9	8,185
	10a	Land, buildings, and equipment: cost or other	,		<u>, </u>
		basis. Complete Part VI of Schedule D 10a 17,625			
	b	Less: accumulated depreciation 10b 17,625		10c	
	11	Investments - publicly traded securities		11	
	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	2,672	15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	234,589	16	196,145
	17	Accounts payable and accrued expenses	45,226	17	60,826
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
jab		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	1,112	25	104,583
	26	Total liabilities. Add lines 17 through 25	46,338	26	165,409
		Organizations that follow FASB ASC 958, check here			
sec		and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions	129,937	27	(14,127)
Ва	28	Net assets with donor restrictions	58,314	28	44,863
pu		Organizations that do not follow FASB ASC 958, check here			
Net Assets or Fund Balances		and complete lines 29 through 33.			
9 0	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Vet	32	Total net assets or fund balances	188,251	32	30,736
	33	Total liabilities and net assets/fund balances	234,589	33	196,145
					Form 990 (2022)

EEA

Form **990** (2022)

2c

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Х

Х

the audit, review, or compilation of its financial statements and selection of an independent accountant?

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of

If the organization changed either its oversight process or selection process during the tax year, explain on

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

Schedule O.

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

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

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- · Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

 Sec 	ction 501(c)(4), (5), or (6) orga	ınizations: Complete Part III.			
Name of	of organization			Employer iden	tification number
COUNC	CIL FOR A LIVABLE WO			52-0746112	
Part	I-A Complete if the	e organization is exempt und	der section 501	(c) or is a section 527	organization.
1	Provide a description of the o	organization's direct and indirect politica	l campaign activities	in Part IV. See instructions for	or
	definition of "political campaig				
2	Political campaign activity ex	penditures. See instructions		\$	
3	·	campaign activities. See instructions			
Part	I-B Complete if th	e organization is exempt und	der section 501	(c)(3).	
1	•	se tax incurred by the organization und			
2	-	se tax incurred by organization manage			
3		section 4955 tax, did it file Form 4720 f	-		
4a	Was a correction made?				· · · · ∐ Yes ∐ No
b	If "Yes," describe in Part IV.				47. \(\(\) \(\)
Part		e organization is exempt und		•	1(c)(3).
1	, ,	pended by the filing organization for sec	•		
				·	
2	ŭ	organization's funds contributed to other	ŭ		
_	•	S		·	
3	·	ditures. Add lines 1 and 2. Enter here ar		•	
4		Form 1120-POL for this year?			
5	·	and employer identification number (Ell	,		· ·
	. ,	s. For each organization listed, enter the	•	0 0	
	·	outions received that were promptly and	•	•	
	as a separate segregated fur	nd or a political action committee (PAC). I	. It additional space i	s needed, provide information	n in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
					delivered to a separate
					political organization. If none, enter -0
	INCTI FOD A ITMADIF	820 1st Street NE,LL 180			,
(1)	ONCIL FOR A LIVABLE	Washington DC 20002	16-1669931		
		washington be 20002	10-1009931		
(2)			1		
(3)			-		
(4)			1		
(5)			1		
(6)			1		

	Lobbying Expenditures During 4-Year Averaging Period						
	Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total	
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column (e))						
С	Total lobbying expenditures						
d	Grassroots nontaxable amount						
е	Grassroots ceiling amount (150% of line 2d, column (e))						
f	Grassroots lobbying expenditures						

EEA Schedule C (Form 990) 2022

Schedule C (Form 990) 2022 COUNCIL FOR A LIVABLE WORLD 52-0746112 Page 3 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 Part II-B (election under section 501(h)). (a) (b) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. Yes No **Amount** During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? h **d** Mailings to members, legislators, or the public? е Publications, or published or broadcast statements? f Direct contact with legislators, their staffs, government officials, or a legislative body? a Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? h Other activities? Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No 1 1 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2h 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying Part IV **Supplemental Information** Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information. 01. Direct and indirect political campaign activities (Part I-A, line 1) The Council has a related Political Action Committee, as listed on schedule R, Part II, through which it indirectly engages in political activities. The Council will provide administrative support for the PAC as allowed by Federal Election Law.

EEA Schedule C (Form 990) 2022

EEA Schedule C (Form 990) 2022

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Inspection

Open to Public

Name of the organization Employer identification number COUNCIL FOR A LIVABLE WORLD 52-0746112 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) . . . Aggregate value of grants from (during year) 3 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after July 25, 2006, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

	e D (Form 990) 2022 COUNCIL FOR A						52-074		Page 2
Par	t III Organizations Maintaining	Collections of	Art, Histo	orical T	reasures,	or Ot	her Similar <i>i</i>	Assets (co	ontinued)
3	Using the organization's acquisition, access	sion, and other record	ds, check an	y of the fo	ollowing that r	make si	gnificant use of it	s	
	collection items (check all that apply):								
а	Public exhibition		d	Loan or	exchange pr	ogram			
b	Scholarly research		e	Other					
С	c Preservation for future generations								
4	Provide a description of the organization's	collections and expla	in how they f	urther the	e organizatior	n's exem	npt purpose in Pa	art	
	XIII.								
5	During the year, did the organization solicit							_	_
	assets to be sold to raise funds rather than		part of the or	ganizatio	n's collection	?		· · Yes	☐ No
Par		•	_			_			_
	Complete if the organization	answered "Yes'	on Form	990, P	art IV, line	9, or r	eported an a	mount on	Form
	990, Part X, line 21.								
1a	Is the organization an agent, trustee, custo								
	included on Form 990, Part X?							U Yes	∐ No
b	If "Yes," explain the arrangement in Part XI	II and complete the fo	ollowing table) :					
							A	mount	
С	Beginning balance								
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance								
2a	Did the organization include an amount on						-		=
b	If "Yes," explain the arrangement in Part XI	II. Check here if the e	explanation h	as been	provided on F	Part XIII			
Part			–	000 B	4 IV / III	40			
	Complete if the organization	answered "Yes"	on Form	990, P	art IV, Ilne	10.			
		(a) Current year	(b) Prior	year	(c) Two years	back	(d) Three years bac	k (e) Four	years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and								
_	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
_	programs								
f	Administrative expenses								
g	End of year balance		(1): 4		\\				
2	Provide the estimated percentage of the cu	-	ce (line 1g, c	olumn (a)) held as:				
a	Board designated or quasi-endowment	%							
b	Permanent endowment%)							
С	Term endowment%								
0-	The percentages on lines 2a, 2b, and 2c sh	·	4: 4 4	- 1- 1-1	al - aluationi a 4 a u a		_		
3a	Are there endowment funds not in the poss	ession of the organiz	alion that are	e neia an	u auministere	u ior th	e	Г	Voc. No.
	organization by:								Yes No
	(i) Unrelated organizations(ii) Related organizations							3a(i)	$\overline{}$
L								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organi	•						3b	
Pari	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equi		owinent iuno	15.					
ı aı	Complete if the organization	-	on Form	990 P	art IV line	112 9	See Form 000) Part X I	ine 10
	· •								
	Description of property	(a) Cost or oth (investme	I .		other basis ther)		Accumulated epreciation	(d) Book	value
	Land	,	,	(0					
1a h									
b	Buildings								
۲ C	Leasehold improvements				+				
d	Equipment				17 605		17 605		
E Total	Other		V solumn /F		17,625		17,625		
ı otal.	Add lines 1a through 1e. (Column (d) must e	quai Forni 990, Part.	л, соштп (В	y, iirie 10	<i>v.)</i> • • • • •				

Schedule D (For	m 990) 2022 COUNCIL FOR A LIVABLE WORI	-D	52-0746112	Page
Part VII	Investments - Other Securities.			
	Complete if the organization answered "Yes" on F	Form 990, Part IV, lin	ne 11b. See Form 990, Part X, l	ine 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	

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

Part VIII Investments - Program Related.

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

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

Other Assets. Part IX

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Other Liabilities. Part X

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)Due to PAC	76,403
(3)Due to Center	28,180
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) • •	104,583

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

Part			•	Return.	
	Complete if the organization answered "Yes" on Form 990,				
1	Total revenue, gains, and other support per audited financial statements • • • • • •			1	448,645
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	55,279		
е	Add lines 2a through 2d			2e	55,279
3	Subtract line 2e from line 1			3	393,366
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			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	393,366
Part	·			er Retur	'n.
	Complete if the organization answered "Yes" on Form 990,	Part IV,	line 12a.		
1	Total expenses and losses per audited financial statements			1	638,423
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	87,542		
е	Add lines 2a through 2d			2e	87,542
3	Subtract line 2e from line 1			3	550,881
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			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) .			5	550,881
Part	XIII Supplemental Information.				
Provide	the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV	lines 1b	and 2b; Part V, line 4; F	Part X, line	
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	ny additio	onal information.		
<u>01. c</u>	ther revenues not included on Form 990 (Part XI, line	2d)			
Rever	ue related to PAC's activities.				
-					

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 EEA

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

COUNCIL FOR A LIVABLE WORLD 52-0746112 Questions Regarding Compensation Part I Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (such as maid, chauffeur, chef) If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No." complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 2 Indicate which, if any, of the following the organization used to establish the compensation of the 3 organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☐ Written employment contract Compensation committee Compensation survey or study ☐ Independent compensation consultant Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Receive a severance payment or change-of-control payment? 4a Participate in or receive payment from a supplemental nonqualified retirement plan? 4b 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a х х If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 6 compensation contingent on the net earnings of: 6a х 6b X If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8 in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in 9

Regulations section 53.4958-6(c)?

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

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

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

110101 1110 0am of obtaining (2)(i) (iii) 101	00.011 11010	· ·)	1	1
(A) Name and Title		(i) Base compensation	d/or 1099-MISC and/or (ii) Bonus & incentive compensation	1099-NEC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
John Tierney	(i)	0	0	0	0	0	0	0
1 Executive Director	(ii)	150,732	0	0	6,029	511	157,272	0
	(i)							
2	(ii)							
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
_11	(ii)							
	(i)							
_12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

52-0746112

Department of the Treasury Internal Revenue Service Name of the organization

COUNCIL FOR A LIVABLE WORLD

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

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)
THE ORGANIZATION CONDUCTS A RE-AFFIRMATION OF THE CONFLICT OF INTEREST POLICY ANNUALLY.
03. CEO, executive director, top management comp (Part VI, line 15a)
THE EXECUTIVE DIRECTOR'S COMPENSATION IS SET BY THE BOARD OF DIRECTORS. THE BOARD
CONSIDERS THE PAY LEVELS OF SIMILAR ORGANIZATIONS WHEN DETERMINING THE EXECUTIVE
DIRECTOR'S COMPENSATION. THE EXECUTIVE DIRECTOR SETS COMPENSATION FOR THE OTHER EMPLOYEES
IN ACCORDANCE WITH THE COUNCIL'S FINANCIAL BUDGET.
04. Governing documents, etc, available to public (Part VI, line 19)
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE UPON
REQUEST.
05. List of other fees for services expenses (Part IX, line 11g)
Program consultants \$8,500
Fundraising professional fees \$17,851
06. Part VII, response or note to any other line in Part VII
Council's salaries are paid by an unrelated organization, Center for Arms Control and
Non-Proliferation, under a common paymaster arrangement whereby the pays and W2s are
issued under Center's name and FEIN, and Council reimburses Center for its allocated share

EEA

Name of the organization COUNCIL FOR A LIVABLE WORLD	Employer identification number 52-0746112
	, sa svasaa
NCIL FOR A LIVABLE WORLD S2-0746112 Salaries. Thus, there are no W2s issued by Council.	

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047 2022

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

COUNCIL FOR A LIVABLE WORLD

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

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

Employer identification number 52-0746112

(a) Name, address, and EIN (if applicable) of disregarded entity		Prim	(b) nary activity	Leg or	(c) gal domicile (state r foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct con ent	trolling ty
(1)									
(2)									
(3)									
(4)									
(5)									
Identification of Related Tax-Exempt Organiz	ations. Co	omplete if th	ne organization	ans	wered "Yes" or	n Form 990. Pa	rt IV. line 34 bec	ause it ha	ad
one or more related tax-exempt organizations du	uring the ta	ax year.							
(a) Name, address, and EIN of related organization	Prima	(b) ary activity	(c) Legal domicile (stat or foreign country)		(d) Exempt Code section	(e) Public charity status (if section 501(c)(3)		Sec. 51 controll	g) 2(b)(13) ed entity?
(1) COUNCIL FOR A LIVABLE WORLD CANDID, 16-1669931	-						COUNCIL FOR		110
•	POLITICA COMMITTE	L ACTION	DC	5	27		A LIVABLE WORLD	x	
(2)									
(3)									
(4)									
(5)									

52-0746112

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

					J							
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)		(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of- year assets	Disprop alloca		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti	ging	Percentage ownership
		country)		sections 512-514)			Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	Section 5 contr enti	olled
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									

Yes

No

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

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

Dart V	Transactions with Related Organizations.	Complete if the organization answered	"Vos" on Form 000	Part IV/ line 3/1 35h or 36
rait v	mansactions with Related Organizations.	Complete if the organization answered	163 0111 01111 990	raitiv, iiile 34, 330, 01 30.

а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		х			
b	Gift, grant, or capital contribution to related organization(s)				1b		х			
С	Gift, grant, or capital contribution from related organization(s)				1c					
d	Loans or loan guarantees to or for related organization(s)				1d		x			
е	Loans or loan guarantees by related organization(s)				1e		х			
f	Dividends from related organization(s)				1f		x			
g	Sale of assets to related organization(s)				1g		х			
h	Purchase of assets from related organization(s)				1h		х			
i	Exchange of assets with related organization(s)				1i		х			
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		х			
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		x			
1	Performance of services or membership or fundraising solicitations for related organization(s)				11		х			
n	Performance of services or membership or fundraising solicitations by related organization(s)				1m		х			
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		х			
0	Sharing of paid employees with related organization(s)				10	x				
	Reimbursement paid to related organization(s) for expenses				1p		х			
q	Reimbursement paid by related organization(s) for expenses				1q		х			
r	Other transfer of cash or property to related organization(s)				1r		х			
s	Other transfer of cash or property from related organization(s)				1s		х			
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, includi	ling covered relations	hips and transaction thre	esholds.						
	(a)	(b)	(c)	(d)						
	Name of related organization	Transaction	Amount involved	Method of determining	amount i	nvolved				
		type (a-s)								
(1)	CENTER FOR ARMS CONTROL & NONPROLIF	0	555,710	Cost						
(2)										
(3)										
(4)										
(5)										
(6)	·									
EEA				Cohod	ule R (Fo		1) 2022			

Part VI

52-0746112 Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a)	(b)	(c)	(d)	(е		(f)	(g)	(h)	(i)	(j)		(k)																
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	organizations?		section 501(c)(3) organizations?		section 501(c)(3) organizations?		section 501(c)(3)		section 501(c)(3)		section 501(c)(3)		section 501(c)(3)		section 501(c)(3)		section 501(c)(3)		total income	Share of end-of-year assets		ortionate itions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	man	eral or aging tner?	Percentage ownership
			Sections 312-314)	Yes	No			Yes	No		Yes	No																	
(1)																													
(2)																													
(3)																													
(4)																													
(5)																													
(6)																													
(7)																													
(8)																													
(9)																													
(10)																													
(11)																													
(12)																													
													000\ 201																