

EXTENDED TO JULY 15, 2022



Form

Department of the Treasury

Go to [irs.gov/Form990](https://www.irs.gov/Form990) for and the latest information.

**A** For the 2020 calendar or tax SEP 1 2020 and AUG 31 2021

**B** Check if applicable: **C** Name of organization **D** Employer identification number

[Redacted content]

Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite **E** Telephone number

[Redacted content]

City or town, state or province, country, and ZIP or foreign postal code  
ATLANTA, GA 30307

Gross 123,319,750.

**F** Name and address of principal officer: PAIGE ALEXANDER  
453 JOHN LEWIS FREEDOM PARKWAY ATLANTA GA

**H(a)** Is this a group return for subordinates? Yes  No

**H(b)** Are all subordinates included? Yes No

X 1 insert no or 527 If "No," attach a list. See instructions number  
WWW.CARTERCENTER.ORG  
Co Trust Association Other 1981 GA

**\*\*PUBLIC INSPECTION COPY\*\***

8868

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

Department of the Treasury  
Internal Revenue Service

| File a separate application for each return.  
| Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.

Electronic filing (e-file).

[www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits).

Only submit original (no copies needed).

Type or print	THE CARTER CENTER, INC	58-1454716
File by the due date for filing your return. See instructions.	453 JOHN LEWIS FREEDOM PARKWAY	
	ATLANTA, GA 30307	

Application Is For	Return Code	Application Is For	Return Code

CHRISTOPHER D. BROWN

404-420-5100

1 JULY 15, 2022

X

2

3a	3a	\$	Q
b	3b	\$	Q
c Balance due.	3c	\$	Q

Caution:

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

8868

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THE CARTER CENTER, INC.

58-1454716

1 SEE SCHEDULE O

2 Yes  No

3 Yes  No

4

4a Code: \_\_\_\_\_ Expenses \$ 64,712,365 including grants of \$ 1,591,856 Revenue \$ \_\_\_\_\_

THE CARTER CENTER HEALTH PROGRAMS FIGHT SIX PREVENTABLE DISEASES -  
GUINEA WORM, TRACHOMA, RIVER BLINDNESS, LYMPHATIC FILARIASIS,  
SCHISTOSOMIASIS, AND MALARIA - BY USING HEALTH EDUCATION AND SIMPLE,  
LOWCOST METHODS. THE CENTER ALSO STRIVES TO IMPROVE ACCESS TO MENTAL  
HEALTH CARE. THESE EFFORTS HAVE BROUGHT TO RESOURCE-LIMITED COUNTRIES UN M M  
IN THESE EFFORTS, THE CENTER O

X

4b Code: \_\_\_\_\_ Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_ Revenue \$ \_\_\_\_\_ X

4c Code: \_\_\_\_\_ Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_ Revenue \$ \_\_\_\_\_

4d Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_ Revenue \$ \_\_\_\_\_

4e

		Yes	No
1	If "Yes," complete Schedule A	X	
2	Schedule B, Schedule of Contributors	X	
3	If "Yes," complete Schedule C, Part I		X
4	Section 501(c)(3) organizations. If "Yes," complete Schedule C, Part II		X
5	If "Yes," complete Schedule C, Part III		X
6	If "Yes," complete Schedule D, Part I		X
7	If "Yes," complete Schedule D, Part II		X
8	Schedule D, Part III	X	
9	If "Yes," complete Schedule D, Part IV		X
10	If "Yes," complete Schedule D, Part V	X	
11			
a			
	Part VI	X	
b	If "Yes," complete Schedule D, Part VII	X	
c	If "Yes," complete Schedule D, Part VIII		X
d	If "Yes," complete Schedule D, Part IX		X
e	If "Yes," complete Schedule D, Part X	X	
f	If "Yes," complete Schedule D, Part X	X	
12a	Schedule D, Parts XI and XII		X
b	If "Yes," complete Schedule D, Part XIII		X
13		X	
14a		X	
b		X	
15		X	
16			X
17		X	
18		X	
19			X
20a			X
b			
21		X	

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THE CARTER CENTER, INC

58-1454716

			Yes	No
22		RTER CENTER, INC		
	If "Yes," complete Schedule I, Parts I and III	22		
23	7			
	7G	X		
24a				
	b			
	c			
	d	X		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.			
	b			
26		M		
27				
28				
	a			X
	b		X	
	c			X
29			X	
30			X	
31				X
32				X
33				X
34			X	
35a			X	
	b			
36	Section 501(c)(3) organizations.			X
37				X
38				
	Note:			

			Yes	No
1a				
b				
c				
		1c		

(continued)

		Yes	No
2a	2a 249		
b		X	
Note:	e-file		
3a			X
b	If "No" to line 3b, provide an explanation on Schedule O		
4a		X	
b	<u>SEE SCHEDULE O</u>		
5a			X
b			X
c			
6a			X
b			
7	Organizations that may receive deductible contributions under section 170(c).		
a	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?	X	
b		X	
c			X
d	7d		
e			X
f			X
g			
h			
8	Sponsoring organizations maintaining donor advised funds.		
9	Sponsoring organizations maintaining donor advised funds.		
a			
b			
10	Section 501(c)(7) organizations.		
a	10a		
b	10b		
11	Section 501(c)(12) organizations.		
a	11a		
b	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts.		
b	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a			
Note:			
b	13b		
c	13c		
14a			X
b	If "No," provide an explanation on Schedule O		
15			X
16			X

Form (2020)

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THE CARTER CENTER, INC

58-1454716

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

X

		Yes	No
1a	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			
2		X	
3			X
4			X
5			X
6			X
7a		X	
b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a		X	
b		X	
9	If "Yes," provide the names and addresses on Schedule O		X

(This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a		X	
b			
11a		X	
b			
12a	If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? If "Yes," describe	X	
c	in Schedule O how this was done	X	
13		X	
14		X	
15			
a		X	
b		X	
16a			X
b			
16b			

SEE SCHEDULE O

17  
18

X

(explain on Schedule O)

19  
20

CHRISTOPHER D. BROWN - 404-420-5100  
453 JOHN LEWIS FREEDOM PARKWAY, ATLANTA, GA 30307

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

1a

- current
- current
- former
- former directors or trustees

(A)	(B)	(C)						(D)	(E)	(F)
		(do not check more than one box, unless person is both an officer and a director/trustee)								
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARY ANN PETERS CEO (UNTIL 6/2020)										
(2) CRAIG WITHERS										
(3) PHILLIP J. WISE JR										
(4) CHRISTOPHER BROWN										
(5) NICOLE KRUSE										
(6) PAIGE ALEXANDER										
(7) DAVID CARROLL										
(8) DEANNA CONG LEO										
(9) SEEMA SHAMS										
(10) PATTI BUNKER										
(11) LAUREN GAY										
(12) SYDNEY BOGGESS										
(13) TERRENCE B ADAMSON										
(14) ARTHUR M BLANK										



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Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)	(C) (do not check more than one box, unless person is both an officer and a director/trustee)						(D)	(E)	(F)
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JASON CARTER TRUSTEE	4.00	X		X				Q	Q	Q
(19) JIMMY CARTER TRUSTEE	5.00	X						Q	Q	Q
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2

	Yes	No
3 former If "Yes," complete Schedule J for such individual	3	
4 If "Yes," complete Schedule J for such individual	4	
5 If "Yes," complete Schedule J for such person	5	

Section B. Independent Contractors		
(A)	(B)	(C)
2		

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)	(C)						(D)	(E)	(F)
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) SHERRY LANSING TRUSTEE	1.00 0.00	X						Q	Q	Q
(28) DOUGLAS W NELSON TRUSTEE	2.00 1.00	X						Q	Q	Q
(29) SUSAN D. PAGE TRUSTEE	1.00 0.00	X						Q	Q	Q
(30) WENDELL REILLY TRUSTEE	2.00 1.00	X						Q	Q	Q
(31) MARJORIE SCARDINO TRUSTEE	1.00 0.00	X						Q	Q	Q
(32) LEAH WARD SEARS TRUSTEE	2.00 1.00	X						Q	Q	Q
(33) DOUG SHIPMAN TRUSTEE	1.00 0.00	X						Q	Q	Q
(34) HUGO SHONG TRUSTEE	1.00 0.00	X						Q	Q	Q
(35) GREGORY J. VAUGHN TRUSTEE	2.00 1.00	X						Q	Q	Q
(36) ELLEN H. YANKELLOW TRUSTEE	1.00 0.00	X						Q	Q	Q

				(A)	(B)	(C)	(D)
Contributions, Gifts, Grants and Other Similar Amounts	1 a	1a	63,868				
	b	1b					
	c	1c	1,607,617.				
	d	1d					
	e	1e	20,324,907.				
	f	1f	65,571,319.				
	g	1g	2,005,930.				
	g	Noncash contributions included in lines 1a-1f					
h	Total		87,567,711.				
Program Service Revenue	2 a	Business Code					
	b						
	c						
	d						
	e						
	f						
	g	Total					
3			35,083,103.			35,083,103.	
4							
5							
6 a	6a						
	b	6b					
	c	6c					
7 a	7a						
	b	7b					
	c	7c					
8 a	1,607,617.						
	b		553,539.				
b			553,539.				
9 c				0			
b							
b							
	Revenue						
c	FACILITIES USE FEES		Business Code				
			532000	115,397.			115,397.
				115,397.			
				122,766,211.	0	0	35,198,500

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THE CARTER CENTER, INC.

58-1454716

				X
	447,162	447,162		
	80,000	80,000		
	4,207,027.	4,207,027.		
	2,407,300	885,377.	1,357,260	164,663
	158,664.			158,664.
	33,570,403	26,099,622	3,929,129.	3,541,652
	9,606,858.	7,590,868	1,069,341.	946,649.
	387,001.	24,063	362,938.	
	570,671.	263,965.	306,706.	
	95,940			95,940
	14,866,336.	12,042,024.	1,190,917.	1,633,395.
	1,094,186.	1,071,471.	18,803.	3,912
	7,140,198.	4,245,060	437,848.	2,457,290
	1,102,368.	255,249.	732,895.	114,224.
	1,952,208.	1,811,850	89,354.	51,004.
	15,817,484.	15,775,763	15,117.	26,604.
	1,009,881.	969,595.	6,661.	33,625.
	666,631.	291,584.	233,721.	141,326
	681,086.	344,420.	326,177.	10,489.
INTERVENTIONS	6,468,589.	6,468,589.		
VEHICLES	4,991,735.	4,988,121.	2,352	1,262
OTHER	1,412,220.	694,043	696,823.	21,354.
	108,733,948.	88,555,853	10,776,042	9,402,053

Check here

		(A)		(B)	
Assets	1	51,231,197.	1	66,284,099.	
	2		2		
	3	1,650,019.	3	287,519.	
	4	8,649,579.	4	6,216,667.	
	5				
			5		
	6		6		
	7		7		
	8		8		
	9		320,045.	9	214,191.
	10a				
		10a	22,770,748		
	b	10b	18,303,039.	10c	4,467,709.
	11		4,218,509.	11	13,837,566
	12		10,970,114.	12	
	13			13	
14			14		
15		2,428,615.	15	2,435,365	
16	Total assets.	945,608,133.	16	1,258,534,879.	
Liabilities	17	7,774,144.	17	8,044,561.	
	18		18		
	19	7,424,532	19	4,790,884.	
	20		20		
	21		21		
	22				
			22		
	23		23		
	24		24		
	25		5,269,965.	25	5,624,221.
26	Total liabilities.	20,468,641.	26	18,459,666	
Net Assets or Fund Balances	27	Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. <span style="float: right;">X</span>			
			335,162,115.	27	454,689,287.
	28		589,977,377.	28	785,385,926
	29	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
	30			29	
				30	
31			31		
32		925,139,492	32	1,240,075,213	
33		945,608,133.	33	1,258,534,879.	

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THE CARTER CENTER, INC

58-1454716



1	1	122, 766, 211.
2	2	108, 733, 948
3	3	14, 032, 263
4	4	925, 139, 492
5	5	
6	6	
7	7	
8	8	
9	9	
10	10	



		Yes	No
1			
2a			
b			
c	X		
3a			
b			

**\*\*PUBLIC INSPECTION COPY\*\***

OMB No. 1545-0047

(Form 990 or 990-EZ)

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
 Attach to Form 990 or Form 990-EZ.  
 Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Open to Public Inspection

Name of the organization <b>THE CARTER CENTER, INC.</b>	Employer identification number <b>58-1454716</b>
--	---

1 section 170(b)(1)(A)(i).

2 section 170(b)(1)(A)(ii).

3 section 170(b)(1)(A)(iii).

4 section 170(b)(1)(A)(ii).

---

5 section 170(b)(1)(A)(iv).

6 section 170(b)(1)(A)(v).

7  section 170(b)(1)(A)(vi).

8 section 170(b)(1)(A)(vi).

9 section 170(b)(1)(A)(ix).

---

10

11 section 509(a)(2).

12 section 509(a)(4).

section 509(a)(1) section 509(a)(2) section 509(a)(3).

a Type I.  
You must complete Part IV, Sections A and B.

b Type II.  
You must complete Part IV, Sections A and C.

c Type III functionally integrated.  
You must complete Part IV, Sections A, D, and E.

d Type III non-functionally integrated.  
You must complete Part IV, Sections A and D, and Part V.

e

f

g

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						



Rp(t)sp{Stpf7-fux,rp{Stpfqtvx}}xv}8	(a)	(b)	(c)	(d)	(e)	(f)
1						
2	87,606,279.	98,666,603.	94,351,390.	95,496,141.	87,567,711.	463,688,124.
3						
4 Total.	87,606,279.	98,666,603.	94,351,390.	95,496,141.	87,567,711.	463,688,124.
5						
6 Public support. Subtract line 5 from line 4.						64,300,229.
						399,387,895.

Rp(t)sp{Stpf7-fux,rp{Stpfqtvx}}xv}8'	(a)	(b)	(c)	(d)	(e)	(f)
7	87,606,279.	98,666,603.	94,351,390.	95,496,141.	87,567,711.	463,688,124.
8						
9	29,726,897.	31,236,881.	33,284,111.	34,383,356.	35,083,103.	163,714,348.
10						
11 Total support. Add lines 7 through 10	461,918.	381,359.	354,675.	236,315.	115,397.	1,549,664.
12						628,952,136.

13 First 5 years. 12  
stop here

14	14
15	15

16a 33 1/3% support test - 2020.  
 stop here.

b 33 1/3% support test - 2019.  
 stop here.

17a 10% -facts-and-circumstances test - 2020.  
stop here.

b 10% -facts-and-circumstances test - 2019.  
stop here.

**18 Private foundation.**







**\*\*PUBLIC INSPECTION COPY\*\***

		Yes	No
11			
a			
	11a		
b			
c			
	11c		

If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.

		Yes	No
1			
	1		
2			
	2		

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 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.

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.

		Yes	No
1			
	1		

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).

		Yes	No
1			
	1		
2			
	2		
3			
	3		

If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).

If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

		Yes	No
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	Complete line 2 below.		
b	Complete line 3 below.		
c	Describe in Part VI how you supported a governmental entity (see instructions).		
2	Answer lines 2a and 2b below.		
a			
	2a		
b			
	2b		
3	Answer lines 3a and 3b below.		
a			
	3a		
b			
	3b		

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.

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.

If "Yes" or "No" provide details in Part VI.

If "Yes," describe in Part VI the role played by the organization in this regard.

--	--	--	--

1 Part VI See instructions.

Section A - Adjusted Net Income			
1	1	1	6
2	2		
3	3	K	
4	4		
5	5	y	6
6	6	7	1 E
7	7		
8 Adjusted Net Income	8		
Section B - Minimum Asset Amount		55f	
1			
a	1a		
b	1b	2h	
c	1c		
d Total	1d	i8	
e Discount		6	
Part VI			
2	2		
3	3	7	
4	4	8	
5	5		
6	6	9	
7	7		
8 Minimum Asset Amount	8		
Section C - Distributable Amount		9	
1	1		
2	2		
3	3		
4	4		
5	5		
6 Distributable Amount.	6	2	
7			

Schedule A (Form 990 or 990-EZ) 2020

2h

i i 99 6 E

Eh!

Section D - Distributions		Current Year
1		1
2		2
3		3
4		4
5	provide details in Part VI	5
6	describe in Part VI	6
7	Total annual distributions.	7
8		8
9	provide details in Part VI	8
10		10

Section E - Distribution Allocations	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1			
2			
3			
a			
b			
c			
d			
e			
f Total			
g			
h			
i			
j			
4			
a			
b			
c			
5			
6			
7			
8			
a			
b			
c			
d			
e			

Schedule A (Form 990 or 990-EZ) 2020

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

FACILITIES USE FEES

**\*\*PUBLIC INSPECTION COPY\*\***

(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service

| Attach to Form 990, Form 990-EZ, or Form 990-PF.  
| Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

THE CARTER CENTER, I NC

Employer identification number

58-1454716

Organization type

Filers of:

Section:

X 3

not

General Rule Special Rule.

Note:

General Rule

Special Rules

X

(1)

(2)

exclusively

exclusively

General Rule

nonexclusively

Caution:

must

**\*\*PUBLIC INSPECTION COPY\*\***

THE CARTER CENTER, INC.	Employer identification number 58-1454716
-------------------------	--

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		<u>17,129,605.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash
<u>2</u>		<u>7,257,839.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash
<u>3</u>		<u>4,516,287.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash
<u>4</u>		<u>3,633,375.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash
<u>5</u>		<u>2,088,703.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash
<u>6</u>		<u>1,877,375.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash



**\*\*PUBLIC INSPECTION COPY\*\***

Employer identification number

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

**\*\*PUBLIC INSPECTION COPY\*\***

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. (a) (e) and completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.)


**\*\*PUBLIC INSPECTION COPY\*\***

OMB No. 1545-0047

(Form 990)

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](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Open to Public  
Inspection

Name of the organization

Employer identification number

[Redacted]

	(a)	(b)
1		
2		
3		
4		
5		

Yes No

6

Yes No

[Redacted]

1

2

- a
- b
- c
- d

2a	
2b	
2c	
2d	

3

4

5

Yes No

6

7

8

Yes No

9

[Redacted]

1a

b

- (i)
- (ii)

6,750  
 2,435,365

2

a

b

**\*\*PUBLIC INSPECTION COPY\*\***

THE CARTER CENTER, INC.

58-1454716

(continued)

3

a X  
b  
c X

d  
e

4  
5

X Yes No

1a

Yes No

b

1c	
1d	
1e	
1f	

2a

Yes No

b

	(a)	(b)	(c) Two years back	(d) Three years back	(e) Four years back
1a	873,077,121.	802,389,359.	771,888,921.	719,623,084.	649,707,059.
b	790,088	463,555	251,444.	5,149,178	2,031,113
c	335,875,453.	103,622,651.	53,028,477.	58,541,625.	69,363,768
d					
e	35,465,322	33,398,444.	22,779,483.	11,424,966	1,478,856
f					
g	1,174,277,340	873,077,121.	802,389,359.	771,888,921.	719,623,084.

2

a  
b  
c

35,8100  
14,0400  
50,1500

3a

(i)  
(ii)

b

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

4

	(a)	(b)	(c)	(d)
1a		636,732		636,732
b		17,580,413	16,057,338	1,523,075
c		2,909,116	1,371,672	1,537,444
d		1,644,487.	874,029.	770,458
e				
Total				4,467,709.

(Column (d) must equal Form 990, Part X, column (B), line 10c.)

Schedule D (Form 990) 2020

[Redacted]

(a) Description of security or category (including name of security)	(b)	(c)
(1)		
(2)		
(3)		
POOLED INVESTMENT FUND	1,164,791,763	END-OF-YEAR MARKET VALUE
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

[Redacted]

(a)	(b)	(c)
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

[Redacted]

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

[Redacted]

1. (a)	(b)
ANNUITY OBLIGATIONS	5,624,221.
Total (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2.

X









PART III, LINE 4:

ARTWORK

THE CENTER MAINTAINS A BROAD COLLECTION OF ART TO INCLUDE PAINTINGS, SCULPTURES, STATUES, AND AWARDS THAT REPRESENT THE LIFE AND WORK OF ITS FOUNDERS, JIMMY AND ROSALYNN CARTER. SOME OF THE PIECES HAVE BEEN DONATED TO THE CENTER BY THE CARTERS WHILE OTHERS HAVE BEEN DONATED TO THE CENTER IN RECOGNITION OF THE WORK OF THE CENTER AND THE CARTERS.

PART V, LINE 4:

ENDOWMENT

THE CENTER HAS ESTABLISHED AN ENDOWMENT FUND IN ORDER TO SUSTAIN THE SUCCESS OF ITS MISSION AND PROGRAMS INTO THE FUTURE.

(continued)

PART X, LINE 2

THE CENTER HAS RECEIVED A DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE (IRS) DATED DECEMBER 16, 1991, INDICATING RECOGNITION AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE) WHEREBY ONLY UNRELATED BUSINESS INCOME, AS DEFINED BY SECTION 512(A) OF THE CODE, IS SUBJECT TO FEDERAL INCOME TAX.

THE CENTER APPLIES FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC 740, INCOME TAXES (ASC 740), WHICH ADDRESSES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAX POSITIONS. IT ALSO PROVIDES GUIDANCE ON WHEN TAX POSITIONS ARE RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND HOW THE VALUES OF THESE POSITIONS ARE DETERMINED.

THERE IS CURRENTLY NO IMPACT ON THE CONSOLIDATED FINANCIAL STATEMENTS AS A RESULT OF ASC 740.

**\*\*PUBLIC INSPECTION COPY\*\***

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Open to Public  
Inspection

Employer identification number

THE CARTER CENTER, INC.

58-1454716

1 For grantmakers.

Yes     No

2 For grantmakers.

3

(a)	(b)	(c)	(d)	(e)	(f)
SUB-SAHARAN AFRI CA	50	2151	PROGRAMSERM CES	PEACE & HEALTH PROG	58,685,418
CENTRAL AMERI CA/CARI BB.	3	22	PROGRAMSERM CES	PEACE & HEALTH PROG	2,772,797.
EAST ASI A/PACI FI C	0	7	PROGRAMSERM CES	PEACE PROGRAM\$	2,245,663
MIDDLE EAST/N AFRI CA	2	9	PROGRAMSERM CES	PEACE PROGRAM\$	1,613,519.
SOUTH AMERI CA	0	0	PROGRAMSERM CES	PEACE & HEALTH PROG	263,565
SOUTH ASI A	1	10	PROGRAMSERM CES	PEACE PROGRAM\$	2,111.
SUB-SAHARAN AFRI CA	0	0	GRANTMAKI NG	PEACE & HEALTH PROG	2,925,414.
CENTRAL AMERI CA/CARI BB.	0	0	GRANTMAKI NG	PEACE & HEALTH PROG	22,320
3 a	56	2199			68,530,807.
b	0	0			1,259,293
c Totals	56	2199			69,790,100

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

Schedule F (Form 990) 2020





**\*\*PUBLIC INSPECTION COPY\*\***

THE CARTER CENTER, INC

58-1454716

SCOUTH AMERI CA	RI VER BLI NDNESS ELI MINATI ON I N VENEZUELA/BRAZI L.	910, 070. W/RE	0
SUB-SAHARAN AFRI CA	LI BERI A CI TI ZEN ELECTORAL OBSERVATI ON PROGRAM	373, 710. W/RE	0
SUB-SAHARAN AFRI CA	SUPPORT FOR RULE OF LAW AND COMMUNI TY JUSTI CE I N LI BERI A.	216, 500. W/RE	0
SUB-SAHARAN AFRI CA	MINI NG SECTOR REFORMS I N THE DRC.	200, 000. W/RE	0
SCOUTH AMERI CA	RI VER BLI NDNESS ELI MINATI ON I N VENEZUELA/BRAZI L.	161, 857. G	0
SUB-SAHARAN AFRI CA	GUI NEA WORM ERADI CATI ON EFFORTS.	130, 000. W/RE	0
SUB-SAHARAN AFRI CA	PROMOTI ON OF WOMEN S RI GHTS I N DRC.	121, 350. W/RE	0
SUB-SAHARAN AFRI CA	COMMUNI TY JUSTI CE ADM I SCORS PROGRAMMING I N LI BERI A.	120, 965.	0

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States								
1 (a)	(b) IRS code section and EIN (if applicable)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
		SUB-SAHARAN AFRI CA	PROMOTI ON OF WOMEN S RI GHTS I N DRC.	82,079.	W/RE	0		
		SUB-SAHARAN AFRI CA	COMMUNI TY JUSTI CE ADVI SORS PROGRAMMING I N LI BERI A.	81,200.	W/RE	0		
		SUB-SAHARAN AFRI CA	PROMOTI ON OF WOMEN S RI GHTS I N DRC.	79,000.	W/RE	0		
		SUB-SAHARAN AFRI CA	LI BERI A CI TI ZEN ELECTORAL OBSERVATI ON PROGRAM	72,621.	W/RE	0		
		SUB-SAHARAN AFRI CA	PROMOTI ON OF WOMEN S RI GHTS I N DRC.	67,360.	W/RE	0		
		SUB-SAHARAN AFRI CA	COMMUNI TY JUSTI CE ADVI SORS PROGRAMMING I N LI BERI A.	65,500.	W/RE	0		
		SUB-SAHARAN AFRI CA	PROMOTI ON OF WOMEN S RI GHTS I N DRC.	64,000.	W/RE	0		
		SUB-SAHARAN AFRI CA	PROMOTI ON OF WOMEN S RI GHTS I N DRC.	64,000.	W/RE	0		
		SUB-SAHARAN AFRI CA	PROMOTI ON OF WOMEN S RI GHTS I N DRC.	63,452.	W/RE	0		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.								
1 (a)	(b) IRS code section and EIN (if applicable)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
		SUB-SAHARAN AFRI CA	COMMUN TY JUSTI CE ADVI SORS PROGRAMMING I N LI BERI A	62,900.	W/RE		0	
		SUB-SAHARAN AFRI CA	PROMOTI ON OF WOMEN S RI GHTS I N DRC.	60,061.	W/RE		0	
		SUB-SAHARAN AFRI CA	COMMUN TY JUSTI CE ADVI SORS PROGRAMMING I N LI BERI A	55,300.	W/RE		0	
		SUB-SAHARAN AFRI CA	PROMOTI ON OF WOMEN S RI GHTS I N DRC.	54,950.	W/RE		0	
		SUB-SAHARAN AFRI CA	TO ENGAGE WOMEN AND YOUTH I N THE ZAMBI AN ELECTI ON PROCESS	50,778.	W/RE		0	
		SUB-SAHARAN AFRI CA	MENTAL HEALTH PROMOTI ON I N LI BERI A	47,641.	CHECK		0	
		SUB-SAHARAN AFRI CA	WOMEN AND ACCESS TO I NFORMATI ON I N LI BERI A	47,266.	CHECK		0	
		EAST ASI A/PACI FI C	DI GI TAL THREATS TO ELECTI ONS I N MYANMAR	47,215.	W/RE		0	
		SUB-SAHARAN AFRI CA	TO ENGAGE WOMEN AND YOUTH I N THE ZAMBI AN ELECTI ON PROCESS.	47,113.	W/RE		0	

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.								
1 (a)	(b) IRS code section and EIN (if applicable)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
		SUB-SAHARAN AFRI CA	RESEARCH ON WOMEN S PARTI CI PATI ON I N THE ZAMB I AN ELECTORAL PROCESS.	46, 419.	W/RE		0	
		SUB-SAHARAN AFRI CA	TO ENGAGE WOMEN AND YOUTH I N THE ZAMB I AN ELECTI ON PROCESS.	44, 916.	W/RE		0	
		SUB-SAHARAN AFRI CA	TO ENGAGE WOMEN AND YOUTH I N THE ZAMB I AN ELECTI ON PROCESS.	40, 947.	W/RE		0	
		SUB-SAHARAN AFRI CA	PROMOTI ON OF WOMEN S RI GHTS I N DRC.	38, 013.	W/RE		0	
		SUB-SAHARAN AFRI CA	PROMOTI ON OF WOMEN S RI GHTS I N DRC.	38, 000.	W/RE		0	
		EAST ASI A/PACI FI C	DI GI TAL THREATS TO ELECTI ONS I N MYANMAR.	34, 636.	CHECK		0	
		SUB-SAHARAN AFRI CA	RESEARCH ON WOMEN S PARTI CI PATI ON I N THE ZAMB I AN ELECTORAL PROCESS.	33, 699.	W/RE		0	
		SUB-SAHARAN AFRI CA	TO ENGAGE WOMEN AND YOUTH I N THE ZAMB I AN ELECTI ON PROCESS.	30, 328.	W/RE		0	
		SUB-SAHARAN AFRI CA	WOMEN S VOI CE AND LEADERSHI P I N THE DRC	30, 150.	W/RE		0	

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States								
1 (a)	(b) IRS code section and EIN (if applicable)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
		SUB-SAHARAN AFRICA	SOCIAL MEDIA MONITORING IN ADVANCE OF THE ETHIOPIAN NATIONAL ELECTIONS	29,856	W/RE		0	
		EAST ASIA/PACIFIC	WOMEN'S ACCESS TO INFORMATION SUPPORT IN BANGLADESH	28,875	W/RE		0	
		SUB-SAHARAN AFRICA	MENTAL HEALTH PROMOTION IN LIBERIA	28,593	CHECK		0	
		EAST ASIA/PACIFIC	WOMEN'S ACCESS TO INFORMATION SUPPORT IN BANGLADESH	26,252	W/RE		0	
		EAST ASIA/PACIFIC	WOMEN'S ACCESS TO INFORMATION SUPPORT IN BANGLADESH	20,642	W/RE		0	
		SOUTH AMERICA	SUPPORT FOR WOMEN'S LEADERSHIP	18,974	W/RE		0	
		CENT AMER/CARIB	WOMEN AND ACCESS TO INFORMATION STUDY IN GUATEMALA	17,114	W/RE		0	
		SUB-SAHARAN AFRICA	WOMEN'S VOICE AND LEADERSHIP IN THE DRC	16,000	W/RE		0	
		SUB-SAHARAN AFRICA	WOMEN'S VOICE AND LEADERSHIP IN THE DRC	16,000	W/RE		0	

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States								
1 (a)	(b) IRS code section and EIN (if applicable)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
		SUB-SAHARAN AFRI CA	SUPPORT FOR YOUTH I N THE DRC.	15, 223.	CHECK		0	
		SUB-SAHARAN AFRI CA	WOMEN S VOI CE AND LEADERSH I P I N THE DRC.	15, 000.	W/RE		0	
		SUB-SAHARAN AFRI CA	WOMEN S VOI CE AND LEADERSH I P I N THE DRC.	15, 000.	W/RE		0	
		SUB-SAHARAN AFRI CA	WOMEN S VOI CE AND LEADERSH I P I N THE DRC.	14, 843.	W/RE		0	
		SUB-SAHARAN AFRI CA	WOMEN FOR PEACE AND HUMAN RI GHTS I N THE DRC.	14, 000.	W/RE		0	
		SUB-SAHARAN AFRI CA	WOMEN FOR PEACE AND HUMAN RI GHTS I N THE DRC.	14, 000.	W/RE		0	
		SUB-SAHARAN AFRI CA	WOMEN S VOI CE AND LEADERSH I P I N THE DRC.	14, 000.	W/RE		0	
		SUB-SAHARAN AFRI CA	MENTAL HEALTH PROMOTI ON I N LI BERI A.	10, 900.	CHECK		0	
		SUB-SAHARAN AFRI CA	SUPPORT FOR YOUTH I N THE DRC.	10, 223.	CHECK		0	

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.								
1 (a)	(b) IRS code section and EIN (if applicable)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
		SUB-SAHARAN AFRI CA	ACCESS TO I NFORMATI ON I N LI BERI A	9, 800.	W/RE		0	
		SUB-SAHARAN AFRI CA	ACCESS TO I NFORMATI ON I N LI BERI A	8, 750.	W/RE		0	
		SUB-SAHARAN AFRI CA	ACCESS TO I NFORMATI ON I N LI BERI A	8, 400.	W/RE		0	
		SUB-SAHARAN AFRI CA	HUMAN RI GHTS DEFENDERS PROTECTI ON NETVORK I N THE DRC.	8, 271.	CHECK		0	
		SUB-SAHARAN AFRI CA	ACCESS TO I NFORMATI ON I N LI BERI A	7, 530.	W/RE		0	
		SUB-SAHARAN AFRI CA	WOMEN S VOI CE AND LEADERSHI P I N THE DRC.	7, 490.	W/RE		0	
		SUB-SAHARAN AFRI CA	ACCESS TO I NFORMATI ON I N LI BERI A	7, 300.	W/RE		0	
		MIDEAST/N AFRI CA	DI GI TAL THREATS TO ELECTI ONS I N TUN SI A.	6, 000.	W/RE		0	
		CENT AMER/CARI B	WOMEN AND ACCESS TO I NFORMATI ON STUDY I N GUATEMALA.	5, 205.	W/RE		0	



Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.								
1 (a)	(b) IRS code section and EIN (if applicable)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
		SUB-SAHARAN AFRI CA	ENGAGE WOMEN AND YOUTH I N THE ETHI OPI AN ELECTORAL PROCESS.	5,000.	W/RE	0		

Part III Grants and Other Assistance to Individuals Outside the United States.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)

1	If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<input checked="" type="checkbox"/>	No
2	If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	<input checked="" type="checkbox"/>	No
3	If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	<input checked="" type="checkbox"/>	No
4	If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	<input checked="" type="checkbox"/>	No
5	If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	<input checked="" type="checkbox"/>	No
6	If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	<input checked="" type="checkbox"/>	Yes	No

PART 1, LINE 2

PROCEDURES FOR MONITORING GRANT FUNDS

THE CENTER REQUIRES GRANT RECIPIENTS TO SUBMIT INTERIM AND/OR FINAL

NARRATIVE AND FINANCIAL REPORTS THAT SET FORTH THE RESULTS OF THE WORK

PERFORMED AS FUNDED BY THE CENTER. WRITTEN AGREEMENTS AND THE SPECIFIC

REQUIREMENTS OF THE GRANTEE VARY BASED ON THE NATURE OF THE WORK PRODUCT

AND LENGTH OF TIME FOR THE SERVICES TO BE PROVIDED.

PART 1, LINE 3

ACCOUNTING METHOD

THE METHOD USED TO ACCOUNT FOR EXPENDITURES ON CCI'S FINANCIAL STATEMENTS

IS THE ACCRUAL METHOD



**\*\*PUBLIC INSPECTION COPY\*\***

THE CARTER CENTER, I NC.

58-1454716

AUCTION	NONE
2,161,156	2,161,156
<u>1,607,617.</u>	<u>1,607,617.</u>
553,539	553,539

<u>553,539</u>	<u>553,539</u>
	<u>553,539</u>
	Q

**\*\*PUBLIC INSPECTION COPY\*\***

THE CARTER CENTER, INC.

58-1454716

3

11 Yes No

12 Yes No

13

13a	
13b	

14

15a Yes No

b

c

16

17

a Yes No

b

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(1) NAME OF FUNDRAISER: FORRESTER FUNDRAISING

(1) ADDRESS OF FUNDRAISER: 2234 WESTERLY WAY, NE, ATLANTA, GA 30317

(1) NAME OF FUNDRAISER: BLACKBAUD, INC.

(1) ADDRESS OF FUNDRAISER: 65 FAIRCHILD ST, CHARLESTON, SC 29492

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**\*\*PUBLIC INSPECTION COPY\*\***

SCHEDULE I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

7 bQ^d0^T0 dXUd ccYcd^SUd 0 bW^Y QdY ^cfI  
7\_fUb^] U^d f0^T0 TYTeO c0^XU0 ^YU T0 d0Jc  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
| Attach to Form 990.  
| Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

THE CARTER CENTER, I NC

Employer identification number  
58-1454716

**Part I** General Information on Grants and Assistance

1

Yes  No

**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1 (a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
BOYS & GIRLS CLUB OF ALBANY 527 W 3RD AVE ALBANY, GA 31702	58-6046393	501(C)(3)	250,000	0			COMMUNITY DEVELOPMENT
GEORGE A APPLESEED, INC. 1600 PARKWOOD CIR ATLANTA, GA 30307	20-4036923	501(C)(3)	60,000	0			BEHAVIORAL HEALTH
VOLICES FOR GEORGE A'S CHILDREN 75 MARIETTA ST NW ATLANTA, GA 30303	02-0678823	501(C)(3)	60,000	0			BEHAVIORAL HEALTH
EMORY UNIVERSITY 1599 CLIFTON RD ATLANTA, GA 30307	44-0553234	501(C)(3)	47,162	0			BEHAVIORAL HEALTH
ACLED ANALYSIS, INC. 361 FALLS RD, STE 501 GRAFTON, WV 53024	47-0972683	501(C)(3)	30,000	0			CONFLICT DATA ANALYSIS

2

5

3

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

Schedule I (Form 990) 2020

Part III Grants and Other Assistance to Domestic Individuals.

(a)	(b)			(e)	
JOURNALISM FELLOWSHIPS	8	80,000	0		

PART I, LINE 2

PROCEDURES USED TO MONITOR THE USE OF GRANT FUNDS IN THE UNITED STATES

THE CENTER REQUIRES GRANT RECIPIENTS TO SUBMIT INTERIM AND FINAL NARRATIVE

AND/OR FINANCIAL REPORTS THAT SET FORTH THE RESULTS OF THE WORK PERFORMED

A S M

THE CARTER CENTER, INC.

58-1454716

X

X  
X

X  
X  
X

X  
X

X  
X

X

X

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.

Note:

(A)		(B)			(C)	(D)	(E)	(F)
		(i)	(ii)	(iii)				
(1) MARY ANN PETERS CEO (UNTIL 6/2020)	(i)	387,641.	0	0	25,650	804	414,095.	0
	(ii)	0	0	0	0	0	0	0
(2) CRAIG WITHERS VP - OVERSEAS OPERATIONS	(i)	230,180	14,800	0	19,516	32,309	296,805.	0
	(ii)	0	0	0	0	0	0	0
(3) PHILLIP J. WISE JR SECRETARY, VP-OPERATIONS	(i)	251,027.	5,075.	0	22,836	2,700	281,638.	0
	(ii)	0	0	0	0	0	0	0
(4) CHRISTOPHER BROWN TREASURER, VP-FINANCE	(i)	216,658	4,482	0	20,171.	25,394.	266,705.	0
	(ii)	0	0	0	0	0	0	0
(5) NICOLE KRUSE CHIEF DEVELOPMENT OFFICER	(i)	198,893	4,075.	0	18,339.	17,517.	238,824.	0
	(ii)	0	0	0	0	0	0	0
(6) PAIGE ALEXANDER CEO	(i)	215,233	0	0	0	12,848	228,081.	0
	(ii)	0	0	0	0	0	0	0
(7) DAVID CARROLL DIRECTOR, DEMOCRACY PROGRAM	(i)	176,931.	3,681.	0	16,563	28,681.	225,856.	0
	(ii)	0	0	0	0	0	0	0
(8) DEANNA CONG LEO DIRECTOR, COMMUNICATIONS	(i)	193,340	3,898	0	17,542	8,513	223,293.	0
	(ii)	0	0	0	0	0	0	0
(9) SEEMA SHAMS CHIEF DEVELOPMENT OFFICER	(i)	158,256	3,165.	35,000	17,393	0	213,814.	0
	(ii)	0	0	0	0	0	0	0
(10) PATTI BUNKER CHIEF IT OFFICER	(i)	191,471.	3,829.	0	17,231.	0	212,531.	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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(Form 990 or 990-EZ)

### Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

# 2020

Open To Public Inspection

Department of the Treasury  
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

THE CARTER CENTER, INC.

Employer identification number  
58-1454716

1	(a)	(b)	(c)	(d)	
				Yes	No

2

3

(a)	(b) Relationship with organization	(c)	(d) Loan to or from the organization?		(e)	(f)	(g)		(h) Approved by board or committee?		(i) Written agreement?	
			Yes	No			Yes	No	Yes	No		

Total

(a)	(b)	(c)	(d)	(e)

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



(a)	(b)	(c)	(d)	(e)	
				Yes	No
REBECCA CARTER	SPOUSE OF CHILD OF	146,672	COMPENSATION		X



SCHEDULE L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: REBECCA CARTER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION

SPOUSE OF CHILD OF BOARD MEMBER

(D) DESCRIPTION OF TRANSACTION: COMPENSATION AS EMPLOYEE

Multiple horizontal lines for additional information.

THE CARTER CENTER, I NC.

58-1454716

	X	4	6,750	APPRAI SAL
	X	160	1,514,459	MARKET VALUE
OTHER	X	10,840	168,562	RETAI L
FACE MASKS	X	44,000	160,474	RETAI L
PIPE & CLOTH	X	390,500	145,685	RETAI L
SOFTWARE CRED	X	10,000	10,000	RETAI L

		X
	X	
	X	



SCHEDULE M LINE 32B:

USE OF THIRD PARTIES OR RELATED ORGANIZATIONS

THE CARTER CENTER UTILIZES EXTERNAL BROKERS TO SELL DONATED SECURITIES.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION

THE CARTER CENTER IS COMMITTED TO ADVANCING HUMAN RIGHTS AND ALLEVIATING UNNECESSARY HUMAN SUFFERING

FORM 990, PART III, LINE 1

MISSION DESCRIPTION

THE CARTER CENTER IS GUIDED BY THE PRINCIPLES OF OUR FOUNDERS, JIMMY AND ROSALYNN CARTER. FOUNDED IN PARTNERSHIP WITH EMORY UNIVERSITY, ON

A FUNDAMENTAL COMMITMENT TO HUMAN RIGHTS AND THE ALLEVIATION OF HUMAN

SUFFERING. WE PURSUE OUR MISSIONS TO PREVENT AND RESOLVE CONFLICTS, ENHANCE

DEMOCRACY, AND IMPROVE PEOPLE'S LIVES.

THE CENTER RELIEVES THE MOST VULNERABLE PEOPLE WHO ARE ABLE TO LIVE WHEN

PROVIDED WITH THE NECESSARY SKILLS, EDUCATION, AND ACCESS TO RESOURCES

TO IMPROVE THEIR SITUATION AND INSURE DIGNITY AND WELL-BEING IN THE LIVES OF

THE PEOPLE WHO NEED OUR HELP.

THE CENTER VALUES ETHICAL CONDUCT, INTEGRITY, AND TRANSPARENCY AND

ACTS WITH INTEGRITY AND HONOR.

SUPPORT, ANALYSIS, AND RESEARCH.

WE ARE COMMITTED TO IMPROVING THE LIVES OF PEOPLE WHO ARE ABLE TO LIVE WHEN

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**\*\*PUBLIC INSPECTION COPY\*\***

Employer identification number

Employer identification number

PRESIDENT OF EMORY UNIVERSITY, GREGORY FENNES, SERVES ON THE BOARD OF TRUSTEES FOR THE CENTER. LEAH WARD SEARS, CRYSTAL EDMONSON, AND GREGORY VAUGHN TRUSTEES, ON THE CENTER'S BOARD, ALSO SERVE ON THE BOARD OF TRUSTEES FOR EMORY UNIVERSITY. RICHARD BLUM AND SHERRY LANSING, TRUSTEES ON THE CENTER'S BOARD, ALSO SERVE ON THE UNIVERSITY OF CALIFORNIA BOARD OF REGENTS.

FORM 990, PART VI, SECTION A, LINE 7A:

ELECTION OF MEMBERS OF THE GOVERNING BODY

THE BOARD OF TRUSTEES OF THE CARTER CENTER, INC. CONSISTS OF PRESIDENT CARTER AND MRS. CARTER, THE PRESIDENT OF EMORY UNIVERSITY, 10 MEMBERS

APPOINTED BY EMORY UNIVERSITY'S BOARD OF TRUSTEES, AND 11 MEMBERS APPOINTED

BY PRESIDENT T BM

THE CARTER CENTER, INC.

Employer identification number  
58-1454716

RETURNS ARE FILED BY EMORY UNIVERSITY, THE CARTER CENTER'S U.S.

EMPLOYEE COUNT OF 249 WAS INCLUDED IN THE EMORY UNIVERSITY FORM W-3 FOR  
CALENDAR YEAR 2020.

FORM 990, PART VI, SECTION B, LINE 12C:

MONITORING CONFLICT OF INTEREST POLICY

THE CARTER CENTER'S CONFLICT OF INTEREST POLICY IS PROVIDED TO ALL

EMPLOYEES UPON HIRING AND UPDATES TO SUCH POLICY ARE COMMUNICATED AS

APPROVED. ALL EMPLOYEES ARE EXPECTED TO ADHERE TO THIS POLICY AS PROVIDED.

ANNUALLY, THE CENTER REQUESTS THAT EACH TRUSTEE, OFFICER, AND KEY EMPLOYEE

PROVIDE INFORMATION REGARDING ALL BUSINESS AND FAMILY RELATIONSHIPS AND AN

ATTESTATION OF THEIR UNDERSTANDING AND ADHERENCE TO THE CONFLICT OF

INTEREST POLICY, AS PROVIDED.

FORM 990, PART VI, SECTION B, LINE 15:

PROCESS USED IN DETERMINING COMPENSATION

THE CENTER UTILIZES THE PAYROLL SERVICES OF A COMMON PAYMASTER, EMORY

UNIVERSITY. EMORY HAS DEVELOPED AND MAINTAINED SIGNIFICANT RESOURCES WITH

REGARD TO COMPENSATION AND PERFORMANCE REVIEW POLICIES AND PROCEDURES.

THESE POLICIES COVER ALL OF THE CENTER'S EMPLOYEES, INCLUDING THE CEO AND

ALL OFFICERS AND KEY EMPLOYEES. COMPENSATION RANGES FOR ALL JOB GRADES ARE

ESTABLISHED BY EMORY UTILIZING A NUMBER OF BEST PRACTICE STANDARDS AND ARE

ADHERED TO BY THE CENTER. THE PERFORMANCE OF EVERY EMORY EMPLOYEE IS

REVIEWED BY THEIR SUPERVISOR AND THE CARTER CENTER, INC. MERIT RAISES MAY

BE EARNED WITHIN GUIDELINES PUBLISHED BY THE CENTER'S HUMAN RESOURCES

DEPARTMENT ANNUALLY. THE CEO'S PERFORMANCE IS REVIEWED AND COMPENSATION IS

THE CARTER CENTER, INC.

Employer identification number  
58-1454716

THE PRESIDENT OF EMORY UNIVERSITY, AND THE CHAIR OF THE CARTER  
CENTER BOARD, AS WELL AS THE FULL BOARD OF THE CARTER CENTER

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990.

AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NV, NH, NM, NY, NC, OR, PA, RI, SC, TN, UT  
VA, VT, WV

FORM 990, PART VI, SECTION C, LINE 19.

MAKING GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC  
DOCUMENTS AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTING

PROGRAM SERVICE EXPENSES	11,113,987.
MANAGEMENT AND GENERAL EXPENSES	853,818.
FUNDRAISING EXPENSES	504,350.
TOTAL EXPENSES	12,472,155.

OTHER SERVICES:

PROGRAM SERVICE EXPENSES	928,037.
MANAGEMENT AND GENERAL EXPENSES	337,099.
FUNDRAISING EXPENSES	1,129,045.
TOTAL EXPENSES	2,394,181.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 14,866,336.

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public  
Inspection

THE CARTER CENTER, INC.

Employer identification number  
58-1454716

**Part I** Identification of Disregarded Entities.

(a)	(b)	(c)	(d)	(e)	(f)

**Part II** Identification of Related Tax-Exempt Organizations.

(a)	(b)	(c)	(d)	(e)	(f)	(g) Section 512(b)(13) controlled entity?	
						Yes	No
THE CARTER CENTER COLLABORATIVE, INC. - 20-5704991, 453 JOHN LEWIS FREEDOM PKW, ATLANTA, GA 30307	SUPPORT CO	GEORGIA	501(C)(3)	12-1	CARTER CENTER	X	

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		Legal domicile (state or foreign country)					Disproportionate allocations?			General or managing partner?	

█

		Legal domicile (state or foreign country)									Section 512(b)(13) controlled entity?



**Part V** Transactions With Related Organizations.

Note:

1  
 a (i) (ii) (iii) (iv)  
 b  
 c  
 d  
 e  
 f  
 g  
 h  
 i  
 j  
 k  
 l  
 m  
 n  
 o  
 p  
 q  
 r  
 s

	Yes	No
1a		X
1b		X
1c		X
1d		X
1e		X
1f		X
1g		X
1h		X
1i		X
1j		X
1k		X
1l		X
1m		X
1n	X	
1o		X
1p		X
1q		X
1r		X
1s		X

2	(a)	(b)	(c)	(d)
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

**Part VI** Unrelated Organizations Taxable as a Partnership.

(a)	(b)	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f)	(g)	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k)
				Yes	No			Yes	No		Yes	No	

