

# Return of Organization Exempt From Income Tax

**2015**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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.
- Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**A** For the 2015 calendar year, or tax year beginning 10/1/2015, and ending 9/30/2016

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization INTERNATIONAL RESCUE COMMITTEE, INC  
 Doing business as \_\_\_\_\_  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
122 EAST 42ND STREET  
 City or town State ZIP code  
NEW YORK NY 10168  
 Foreign country name Foreign province/state/county Foreign postal code

**D** Employer identification number 13-5660870

**E** Telephone number 212-551-3000

**F** Name and address of principal officer:  
David Miliband 122 42nd Steet, New York, NY 101681289

**G** Gross receipts \$ 767,560,803

**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list. (see instructions)

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: WWW.RESCUE.ORG

**K** Form of organization:  Corporation  Trust  Association  Other ▶

**L** Year of formation: 1933 **M** State of legal domicile: NY

**H(c)** Group exemption number ▶

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>The IRC helps people whose lives and livelihoods are shattered by conflict and disaster to survive, recover and gain control of their future.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>32</b>
	4 Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>31</b>
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	<b>5</b>	<b>1,764</b>
	6 Total number of volunteers (estimate if necessary)	<b>6</b>	<b>5,205</b>
	7a Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0</b>
b Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0</b>	
Revenue	8 Contributions and grants (Part VIII, line 1h)	682,277,233	730,809,685
	9 Program service revenue (Part VIII, line 2g)	376	0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,928,023	3,654,303
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,715,288	2,339,420
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	688,920,920	736,803,408
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	298,523,443	327,160,781
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	256,251,979	278,209,881
	16a Professional fundraising fees (Part IX, column (A), line 11e)	443,563	493,634
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>17,782,989</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	118,720,929	120,363,768
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	673,939,914	726,228,064	
19 Revenue less expenses. Subtract line 18 from line 12	14,981,006	10,575,344	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 270,142,599	End of Year 286,756,903
	21 Total liabilities (Part X, line 26)	108,369,057	110,922,393
	22 Net assets or fund balances. Subtract line 21 from line 20	161,773,542	175,834,510

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**  
 Signature of officer: David Johnson Date: 5/15/2017  
 Type or print name and title: CFO

**Paid Preparer Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶	Firm's EIN ▶			
Firm's address ▶	Phone no.			

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: The IRC helps people whose lives and livelihoods are shattered by conflict and disaster to survive, recover and gain control of their future.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 303,894,265 including grants of \$ 75,970,652 ) (Revenue \$ 303,894,265 ) IRC is operational in 19 countries throughout Africa providing relief, rehabilitation and post conflict support to communities in the midst of, or recently recovering from, conflict, violence, and natural disasters. Throughout West Africa, in Nigeria, Ivory Coast, Liberia, and Sierra Leone, IRC works in close cooperation with government and local communities to provide post-conflict assistance that rebuilds communities and institutions devastated by decades of civil war. Following Ebola crisis response, IRC supports civil society strengthening, recovery and prevention. In Burundi, Uganda, Tanzania, & Zimbabwe, IRC works with refugees, returnees & host communities to ensure that critical support reaches those most in need. IRC programs in Libya, Cameroon, South Sudan, CAR and DR Congo help communities recover from conflict, chronic poverty, and government instability. IRC provides relief and post conflict development in Kenya, Somalia & Ethiopia. IRC programming in Mali, Niger and Chad provides lifesaving assistance during drought emergencies as well as periods of political instability.

4b (Code: ) (Expenses \$ 120,481,770 including grants of \$ 11,050,206 ) (Revenue \$ 120,481,770 ) In the Middle East, IRC is calling attention to the plight of those uprooted by turmoil in Syria and doing our part to support thousands of Syrian refugees in Iraq, Jordan, Lebanon, and Turkey. Additionally IRC implements programs in Iraq for internally displaced individuals. IRC provides medical aid, helps women and girls who have been victims of violence, and ensures that refugees have access to their legal rights. IRC is present in Yemen to provide support for those whose lives and families have been disrupted by the ongoing political tumult and ensuing violence in the country, particularly with respect to sanitation and child nutrition.

4c (Code: ) (Expenses \$ 90,784,350 including grants of \$ 40,512,169 ) (Revenue \$ 90,784,350 ) In Afghanistan, IRC focuses on providing returning refugees and internally displaced Afghans with shelter, water and sanitation, and restoring the nation health, infrastructure and economy. In Myanmar, IRC provides humanitarian assistance to communities focusing on health, water and sanitation, livelihoods and social development. IRC aids over 140,000 refugees in camps along the Thailand-Myanmar border, providing drinking water and food as well as services like health care, sanitation, legal assistance and resettlement processing, and protection for children and women. IRC also provides support for displaced individuals and families that will be resettling in the US, provided in IRC centers throughout Thailand and Malaysia. In Pakistan, IRC is rebuilding homes, schools, roads and other infrastructure, in addition to providing educational programming for 1.3 million students through the Pakistan Reading Project. In the Philippines, IRC works through partners with local organizations to provide economic and reconstruction assistance to people affected by devastating typhoons.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 150,857,178 including grants of \$ 4,994,688 ) (Revenue \$ 150,857,178 )

4e Total program service expenses 666,017,563

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>		X
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? <i>If "Yes," complete Schedule D, Part I.</i>		X
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>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i>	X	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	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? <i>If "Yes," complete Schedule D, Part VII.</i>	X	
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? <i>If "Yes," complete Schedule D, Part VIII.</i>		X
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? <i>If "Yes," complete Schedule D, Part IX.</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	X	
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? <i>If "Yes," complete Schedule F, Parts II and IV.</i>	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions).	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		X

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II.</i>	X	
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III.</i>	X	
<b>23</b> 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? <i>If "Yes," complete Schedule J.</i>	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		X
<b>b</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? <i>If "Yes," complete Schedule L, Part I.</i>		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	X	
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	X	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .		
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . .	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .		X
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i> . . . . .		
<b>4a</b>	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)? . . . . .	X	
<b>b</b>	If "Yes," enter the name of the foreign country: <b>See Attached Statement</b> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .		X
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .		X
<b>5c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? . . . . .		
<b>6a</b>	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? . . . . .		X
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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? . . . . .		
<b>7a</b>			
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .		
<b>7b</b>			
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .		
<b>7c</b>			
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .		
<b>7d</b>			
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .		X
<b>7e</b>			
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		X
<b>7f</b>			
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .		
<b>7g</b>			
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	X	
<b>7h</b>			
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .		X
<b>8</b>			
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966? . . . . .		X
<b>9a</b>			
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .		X
<b>9b</b>			
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders . . . . .	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? . . . . .	<b>13a</b>	
<b>Note.</b>	See the instructions for additional information the organization must report on Schedule O.		
<b>b</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 . . . . .	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand . . . . .	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year? . . . . .		X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i> . . . . .	<b>14b</b>	

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI.

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	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 in Schedule O.		
	<b>1a</b> 32		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent . . . . .		
	<b>1b</b> 31		
<b>2</b>	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? . . . . .		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . . .		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .		X
<b>6</b>	Did the organization have members or stockholders? . . . . .		X
<b>7a</b>	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? . . . . .		X
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body? . . . . .	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .		X

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates? . . . . .	X	
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . .	X	
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	X	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	X	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .	X	
<b>13</b>	Did the organization have a written whistleblower policy? . . . . .	X	
<b>14</b>	Did the organization have a written document retention and destruction policy? . . . . .	X	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official. . . . .	X	
<b>b</b>	Other officers or key employees of the organization . . . . .	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .		X
<b>b</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 organization's exempt status with respect to such arrangements? . . . . .		

**Section C. Disclosure**

<b>17</b>	List the states with which a copy of this Form 990 is required to be filed	▶ See Attached Statement
<b>18</b>	Section 6104 requires an organization to make its Forms 1023 (or 1024 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. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
<b>19</b>	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.	
<b>20</b>	State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ Danusia Dzierzbinski    212-551-2914 122 East 42nd Street, New York, NY 10168	

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and 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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(1) Clifford S. Asness Trustee/Director	1.00 0.00	X							
(2) George Biddle Trustee/Director	1.00 0.00	X							
(3) Mary Boies Trustee/Director	1.00 0.00	X							
(4) Florence A. Davis Trustee/Director	1.00 0.00	X							
(5) Susan Dentzer Trustee/Director	1.00 0.00	X							
(6) Katherine Farley Trustee/Director	1.00 0.00	X							
(7) Timothy F. Geithner Trustee/Director	1.00 0.00	X							
(8) Corydon J. Gilchrist Trustee/Director	1.00 0.00	X							
(9) John Holmes Trustee/Director	1.00 0.00	X							
(10) Steven Klinsky Trustee/Director	1.00 0.00	X							
(11) David Levine Trustee/Director	1.00 0.00	X							
(12) Francois-Xavier De Mallmann Trustee/Director	1.00 0.00	X							
(13) Eduardo G. Mestre Trustee/Director	1.00 0.00	X							
(14) Thomas Nides Trustee/Director	1.00 0.00	X							

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Michael J. ONeill Trustee/Director	1.00 0.00	X								
(16) Anjali Pant Trustee/Director	1.00 0.00	X								
(17) Dr. Kathleen M. Pike, Ph.D. Trustee/Director	1.00 0.00	X								
(18) Queen Rania Al-Abdullah Trustee/Director	1.00 0.00	X								
(19) Omar Saeed Trustee/Director	1.00 0.00	X								
(20) Pamela Saunders-Albin Trustee/Director	1.00 0.00	X								
(21) Dr. Rajiv Shah Trustee/Director	1.00 0.00	X								
(22) Gordon Smith Trustee/Director	1.00 0.00	X								
(23) Gillian Sorensen Trustee/Director	1.00 0.00	X								
(24) Sally Susman Trustee/Director	1.00 0.00	X								
(25) Mona Sutphen Trustee/Director	1.00 0.00	X								
<b>1b Sub-total</b>							0	0	0	
<b>c Total from continuation sheets to Part VII, Section A</b>							3,566,359	0	0	
<b>d Total (add lines 1b and 1c)</b>							3,566,359	0	0	

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **123**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual.</i>		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual.</i>	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person.</i>		X

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
DAY PITNEY LLP One International Place Boston, MA 02110	Consulting	1,179,326
BAO SYSTEMS LLC 2900 K Street NW, Suite 406 Washington, DC 20007	Consulting	910,561
MINTZ GROUP LLC 110 5th Ave New York, NY 10011	Consulting	676,676
FIGLIULO AND PARTNERS LLC 628 Broadway New York, NY 10012	Consulting and Advertising	610,775
KPMG 345 Park Avenue New York, NY 10154	Financial Audit Service	605,400

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **35**

**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line in this 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	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b> 476,674				
	<b>b</b>	Membership dues . . . . .	<b>1b</b> 0				
	<b>c</b>	Fundraising events . . . . .	<b>1c</b> 4,028,526				
	<b>d</b>	Related organizations . . . . .	<b>1d</b> 0				
	<b>e</b>	Government grants (contributions) . . . . .	<b>1e</b> 493,570,089				
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above . . . . .	<b>1f</b> 232,734,396				
	<b>g</b>	Noncash contributions included in lines 1a-1f: \$	6,827,342				
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . .	730,809,685				
	Program Service Revenue	<b>2a</b>	Business Code				
		<b>b</b>		0			
<b>c</b>			0				
<b>d</b>			0				
<b>e</b>			0				
<b>f</b>		All other program service revenue . . . . .	0				
<b>g</b>		<b>Total.</b> Add lines 2a-2f . . . . .	0				
Other Revenue	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) . . . . .	1,843,425			1,843,425	
	<b>4</b>	Income from investment of tax-exempt bond proceeds . . . . .	0				
	<b>5</b>	Royalties . . . . .	0				
	<b>6a</b>	Gross rents . . . . .	(i) Real	272,717			
			(ii) Personal				
			<b>b</b> Less: rental expenses . . . . .	666,931			
			<b>c</b> Rental income or (loss) . . . . .	-394,214	0		
	<b>d</b>	Net rental income or (loss) . . . . .	-394,214			394,214	
	<b>7a</b>	Gross amount from sales of assets other than inventory . . . . .	(i) Securities	31,014,465	0		
			(ii) Other				
			<b>b</b> Less: cost or other basis and sales expenses . . . . .	29,203,587	0		
			<b>c</b> Gain or (loss) . . . . .	1,810,878	0		
	<b>d</b>	Net gain or (loss) . . . . .	1,810,878			1,810,878	
	<b>8a</b>	Gross income from fundraising events (not including \$ 4,028,526 of contributions reported on line 1c). See Part IV, line 18 . . . . .	a 196,378				
	<b>b</b>	Less: direct expenses . . . . .	b 886,877				
	<b>c</b>	Net income or (loss) from fundraising events . . . . .	-690,499			-690,499	
	<b>9a</b>	Gross income from gaming activities. See Part IV, line 19 . . . . .	a	0			
<b>b</b> Less: direct expenses . . . . .			b 0				
<b>c</b> Net income or (loss) from gaming activities . . . . .			0				
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .	a	0				
		<b>b</b> Less: cost of goods sold . . . . .	b 0				
		<b>c</b> Net income or (loss) from sales of inventory . . . . .	0				
Miscellaneous Revenue		Business Code					
<b>11a</b>	IOM Loan Collection Fees	900099	1,564,279	1,564,279			
<b>b</b>	Immigration Processing Fees	900099	1,379,087	1,379,087			
<b>c</b>	Miscellaneous Revenue	900099	480,767	498,925			
<b>d</b>	All other revenue . . . . .		0				
<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . .		3,424,133				
<b>12</b>	<b>Total revenue.</b> See instructions . . . . .		736,803,408	3,442,291	0	3,358,018	

**Part IX 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.

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations domestic governments. See Part IV, line 21 . . . . .	1,041,824	1,041,824		
2	Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .	30,057,002	30,057,002		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .	296,061,955	296,061,955		
4	Benefits paid to or for members . . . . .	0	0		
5	Compensation of current officers, directors, trustees, and key employees . . . . .	3,832,103	642,457	2,916,182	273,464
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0	0	0	0
7	Other salaries and wages . . . . .	243,537,876	216,816,298	19,037,114	7,684,464
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	4,837,628	3,799,550	666,735	371,343
9	Other employee benefits . . . . .	19,520,338	15,674,847	2,768,819	1,076,672
10	Payroll taxes . . . . .	6,481,936	4,929,017	1,068,265	484,654
11	Fees for services (non-employees):				
a	Management . . . . .	0			
b	Legal . . . . .	2,644,649	612,141	1,978,660	53,848
c	Accounting . . . . .	1,006,050	379,489	625,269	1,292
d	Lobbying . . . . .	0			
e	Professional fundraising services. See Part IV, line 17 . . . . .	493,634			493,634
f	Investment management fees . . . . .	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	14,723,481	8,211,380	5,485,956	1,026,145
12	Advertising and promotion . . . . .	3,773,376	1,020,358	890,104	1,862,914
13	Office expenses . . . . .	20,380,568	17,703,018	785,370	1,892,180
14	Information technology . . . . .	6,063,037	4,259,826	1,498,321	304,890
15	Royalties . . . . .	0	0	0	0
16	Occupancy . . . . .	21,288,983	18,217,920	1,957,458	1,113,605
17	Travel . . . . .	36,348,222	35,076,524	865,032	406,666
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0	0	0	0
19	Conferences, conventions, and meetings . . . . .	4,198,133	3,719,375	278,762	199,996
20	Interest . . . . .	0	0	0	0
21	Payments to affiliates . . . . .	0			
22	Depreciation, depletion, and amortization . . . . .	1,262,687	665,382	488,199	109,106
23	Insurance . . . . .	2,278,593	2,081,429	138,498	58,666
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	Recruitment	1,129,678	715,718	341,814	72,146
b	Exchange Loss ( Gain)	897,942	903,770	-5,828	0
c		0			
d		0			
e	All other expenses	4,368,369	3,428,283	642,782	297,304
25	<b>Total functional expenses.</b> Add lines 1 through 24e . . . . .	726,228,064	666,017,563	42,427,512	17,782,989
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .				

**Part X Balance Sheet**

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

		(A)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	69,454,140	<b>1</b>	44,765,873
	<b>2</b> Savings and temporary cash investments . . . . .	379,987	<b>2</b>	25,929,892
	<b>3</b> Pledges and grants receivable, net . . . . .	57,483,471	<b>3</b>	72,452,855
	<b>4</b> Accounts receivable, net . . . . .	0	<b>4</b>	0
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .	0	<b>5</b>	0
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . .	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net . . . . .	619,954	<b>7</b>	720,776
	<b>8</b> Inventories for sale or use . . . . .	12,902,863	<b>8</b>	12,120,187
	<b>9</b> Prepaid expenses and deferred charges . . . . .	3,759,906	<b>9</b>	4,650,560
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 15,253,306		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b> 9,952,587	5,246,993	<b>10c</b> 5,300,719
	<b>11</b> Investments—publicly traded securities . . . . .	67,813,098	<b>11</b>	72,838,763
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .	47,607,703	<b>12</b>	43,919,547
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .	0	<b>13</b>	0
	<b>14</b> Intangible assets . . . . .	0	<b>14</b>	0
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	4,874,484	<b>15</b>	4,057,731
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	270,142,599	<b>16</b>	286,756,903	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	39,702,393	<b>17</b>	46,519,718
	<b>18</b> Grants payable . . . . .	54,424,214	<b>18</b>	48,236,027
	<b>19</b> Deferred revenue . . . . .	1,593,454	<b>19</b>	2,705,854
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .	470,145	<b>21</b>	549,098
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	0	<b>23</b>	0
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .	0	<b>24</b>	0
	<b>25</b> 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 . . . . .	12,178,851	<b>25</b>	12,911,696
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	108,369,057	<b>26</b>	110,922,393
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	78,370,923	<b>27</b>	79,285,995
	<b>28</b> Temporarily restricted net assets . . . . .	28,500,903	<b>28</b>	41,644,743
	<b>29</b> Permanently restricted net assets . . . . .	54,901,716	<b>29</b>	54,903,772
	<b>Organizations that do not follow SFAS 117 (ASC958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .	161,773,542	<b>33</b>	175,834,510	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	270,142,599	<b>34</b>	286,756,903	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	<b>1</b>	736,803,408
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25) . . . . .	<b>2</b>	726,228,064
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1 . . . . .	<b>3</b>	10,575,344
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	<b>4</b>	161,773,542
<b>5</b>	Net unrealized gains (losses) on investments . . . . .	<b>5</b>	5,109,390
<b>6</b>	Donated services and use of facilities . . . . .	<b>6</b>	
<b>7</b>	Investment expenses . . . . .	<b>7</b>	
<b>8</b>	Prior period adjustments . . . . .	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	<b>9</b>	-1,623,766
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) . . . . .	<b>10</b>	175,834,510

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . . If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>b</b>	Were the organization's financial statements audited by an independent accountant? . . . . . If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . . . If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .	X	
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . . . .	X	



**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2015**

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.

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization INTERNATIONAL RESCUE COMMITTEE, INC	Employer identification number 13-5660870
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**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations . . . . .
  - g Provide the following information about the supported organization(s).

	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 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		
(A)							
(B)							
(C)							
(D)							
(E)							
<b>Total</b>						0	0

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	380,496,906	451,017,146	556,423,123	682,076,363	730,809,683	2,800,823,221
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						0
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						0
<b>4 Total.</b> Add lines 1 through 3 . . . . .	380,496,906	451,017,146	556,423,123	682,076,363	730,809,683	2,800,823,221
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . .						
<b>6 Public support.</b> Subtract line 5 from line 4.						2,800,823,221

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>7</b> Amounts from line 4 . . . . .	380,496,906	451,017,146	556,423,123	682,076,363	730,809,683	2,800,823,221
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	1,515,190	1,585,738	1,505,164	1,796,887	1,843,426	8,246,405
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						0
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .	2,936,058	2,876,902	3,063,651	3,693,295	3,424,134	15,994,040
<b>11 Total support.</b> Add lines 7 through 10 . . . . .						2,825,063,666
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	99.14%
<b>15</b> Public support percentage from 2014 Schedule A, Part II, line 14 . . . . .	<b>15</b>	99.05%
<b>16a 33 1/3% support test—2015.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . ▶ <input checked="" type="checkbox"/>		
<b>b 33 1/3% support test—2014.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test—2015.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here</b> . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2014.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here</b> . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.  
If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . . .						0
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						0
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						0
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						0
<b>6 Total.</b> Add lines 1 through 5 . . . . .	0	0	0	0	0	0
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						0
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . . .						0
<b>c</b> Add lines 7a and 7b . . . . .	0	0	0	0	0	0
<b>8 Public support</b> (Subtract line 7c from line 6.) . . . . .						0

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>9</b> Amounts from line 6 . . . . .	0	0	0	0	0	0
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						0
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						0
<b>c</b> Add lines 10a and 10b . . . . .	0	0	0	0	0	0
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						0
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						0
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .	0	0	0	0	0	0

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . .

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	0.00%
<b>16</b> Public support percentage from 2014 Schedule A, Part III, line 15 . . . . .	<b>16</b>	0.00%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2015</b> (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	0.00%
<b>18</b> Investment income percentage from <b>2014</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	0.00%

**19a 33 1/3% support tests—2015.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . . .

**b 33 1/3% support tests—2014.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . . .

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . .

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Rows 11, 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2.

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1.

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2, 3.

Section E. Type III Functionally-Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2, 3, 3a, 3b.

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain		
2	Recoveries of prior-year distributions		
3	Other gross income (see instructions)		
4	Add lines 1 through 3	0	0
5	Depreciation and depletion		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)		
7	Other expenses (see instructions)		
8	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	0
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	0
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0
6	Multiply line 5 by .035	6	0
7	Recoveries of prior-year distributions	7	0
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	0
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	0
2	Enter 85% of line 1	2	0
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	0
4	Enter greater of line 2 or line 3	4	0
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	0
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	0
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	0
10 Line 8 amount divided by Line 9 amount	0.000

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			0
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013 . . . . .			
e From 2014. . . . .			
f <b>Total</b> of lines 3a through e	0		
g Applied to underdistributions of prior years		0	
h Applied to 2015 distributable amount			0
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.	0		
4 Distributions for 2015 from Section D, line 7: \$ 0			
a Applied to underdistributions of prior years		0	
b Applied to 2015 distributable amount			0
c Remainder. Subtract lines 4a and 4b from 4.	0		
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).		0	
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			0
7 <b>Excess distributions carryover to 2016.</b> Add lines 3j and 4c.	0		
8 Breakdown of line 7:			
a			
b			
c Excess from 2013 . . . . .	0		
d Excess from 2014 . . . . .	0		
e Excess from 2015 . . . . .	0		



**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

OMB No. 1545-0047

**2015**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

<b>Name of the organization</b> INTERNATIONAL RESCUE COMMITTEE, INC	<b>Employer identification number</b> 13-5660870
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**Organization type** (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ .....

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> INTERNATIONAL RESCUE COMMITTEE, INC	<b>Employer identification number</b> 13-5660870
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Department for International Development (DFID) 1 Palace Street SW 1E-5HE Foreign State or Province: London Foreign Country: United Kingdom (England, Northern Ire	\$ 134,176,993	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	Office of Foreign Disaster Assistance (OFDA) 1300 Pennsylvania Avenue, NW Washington DC 20523-1000 Foreign State or Province: Foreign Country:	\$ 86,951,920	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	Bureau of Population Refugees & Migration (BPRM) 2201 C Street NW Washington DC 20520 Foreign State or Province: Foreign Country:	\$ 80,386,354	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	US Agency for International Development (USAID) 1300 Pennsylvania Avenue, NW Washington DC 20523-1000 Foreign State or Province: Foreign Country:	\$ 73,503,636	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	European Union Humanitarian Department (ECHO) 200 Rule de la Loi B-1049 Brussels 1000 Foreign State or Province: Brussels Foreign Country: Belgium	\$ 43,245,494	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	UN High Commissioner on Refugees (UNHCR) Case Postale 2500 Geneva CH-1211 Foreign State or Province: Geneva Foreign Country: Switzerland	\$ 40,547,872	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

<b>Name of organization</b> INTERNATIONAL RESCUE COMMITTEE, INC	<b>Employer identification number</b> 13-5660870
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Department of Health & Human Services (HHS) 200 Independence Avenue SW Washington DC 20201 Foreign State or Province: _____ Foreign Country: _____	\$ 34,610,268	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	United Nations Children's Fund (UNICEF) 3 United Nations Plaza New York NY 10017 Foreign State or Province: _____ Foreign Country: _____	\$ 23,458,863	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
-----	_____ _____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	_____ _____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	_____ _____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	_____ _____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

<b>Name of organization</b> INTERNATIONAL RESCUE COMMITTEE, INC	<b>Employer identification number</b> 13-5660870
--	---

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	Emergency program materials Education Supplies	\$ 52,131	9/30/2016
6	Fuel and Spare parts Emergency program materials vehicle	\$ 1,365,777	9/30/2016
8	Emergency program materials	\$ 1,282,955	9/30/2016
	----- ----- -----	\$ -----	-----
	----- ----- -----	\$ -----	-----
	----- ----- -----	\$ -----	-----

<b>Name of organization</b> INTERNATIONAL RESCUE COMMITTEE, INC	<b>Employer identification number</b> 13-5660870
--	---

**Part III** *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. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ ..... 0  
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- ----- For. Prov.                      Country	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- ----- For. Prov.                      Country	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- ----- For. Prov.                      Country	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- ----- For. Prov.                      Country	----- ----- -----

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2015**

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

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

**Open to Public Inspection**

**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**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization INTERNATIONAL RESCUE COMMITTEE, INC	Employer identification number 13-5660870
---	--

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures . . . . . ▶ \$ \_\_\_\_\_
- 3 Volunteer hours . . . . . \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . . . ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . . . ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . .  Yes  No
- 4a Was a correction made? . . . . .  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b . . . . . ▶ \$ \_\_\_\_\_ 0
- 4 Did the filing organization file **Form 1120-POL** for this year? . . . . .  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grass roots lobbying) . . . . .	0	0												
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	0	0												
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) . . . . .	0	0												
<b>d</b>	Other exempt purpose expenditures . . . . .		0												
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) . . . . .	0	0												
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	0	0												
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) . . . . .	0	0												
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .	0	0												
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .	0	0												
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No													

**4-Year Averaging Period Under section 501(h)**  
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  
 See the separate instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
<b>2a</b> Lobbying nontaxable amount				0	0
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					0
<b>c</b> Total lobbying expenditures				0	0
<b>d</b> Grassroots nontaxable amount				0	0
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					0
<b>f</b> Grassroots lobbying expenditures				0	0

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
<b>1</b> 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:			
<b>a</b> Volunteers? . . . . .		X	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
<b>c</b> Media advertisements? . . . . .		X	
<b>d</b> Mailings to members, legislators, or the public? . . . . .		X	
<b>e</b> Publications, or published or broadcast statements? . . . . .		X	
<b>f</b> Grants to other organizations for lobbying purposes? . . . . .		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? . . . . .	X		26,792
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? . . . . .		X	
<b>i</b> Other activities? . . . . .		X	
<b>j</b> Total. Add lines 1c through 1i . . . . .			26,792
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 . . . . .			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 . . . . .			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? . . . . .			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? . . . . .	1	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? . . . . .	2	
<b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year? . . . . .	3	

**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."**

<b>1</b> Dues, assessments and similar amounts from members . . . . .	1	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year . . . . .	2a	
<b>b</b> Carryover from last year . . . . .	2b	
<b>c</b> Total . . . . .	2c	0
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . . . . .	3	
<b>4</b> 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 and political expenditure next year? . . . . .	4	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions) . . . . .	5	0

**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.

Part II-B Line 1g IRC tracks any time spent on lobbying by our Advocacy team in DC, members of other  
 -----  
 HQ staff that may contact legislators or other officials. Time spent by staff was tracked on the  
 -----  
 specific basis of meetings held and the topics of discussion in those meetings.  
 -----  
 -----  
 -----

**SCHEDULE D  
(Form 990)**

**Supplemental Financial Statements**

OMB No. 1545-0047

**2015**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **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.**

▶ **Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

Name of the organization <b>INTERNATIONAL RESCUE COMMITTEE, INC</b>	Employer identification number <b>13-5660870</b>
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**Part I 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 Total number at end of year . . . . .		
2 Aggregate value of contributions to (during year) . . . . .		
3 Aggregate value of grants from (during year) . . . . .		
4 Aggregate value at end of year . . . . .		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 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 conferring impermissible private benefit? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Part II Conservation Easements.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 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
a Total number of conservation easements . . . . .	<b>2a</b>
b Total acreage restricted by conservation easements . . . . .	<b>2b</b>
c Number of conservation easements on a certified historic structure included in (a) . . . . .	<b>2c</b>
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register . . . . .	<b>2d</b>

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . .  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 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) and section 170(h)(4)(B)(ii)? . . . . .  Yes  No

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.

1a If the organization elected, as permitted under SFAS 116 (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.

b If the organization elected, as permitted under SFAS 116 (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 . . . . . ▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_

2 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 SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 . . . . . ▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other .....
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- |  | Amount      |
|--|-------------|
| <b>c</b> Beginning balance . . . . .             | <b>1c</b>   |
| <b>d</b> Additions during the year . . . . .     | <b>1d</b>   |
| <b>e</b> Distributions during the year . . . . . | <b>1e</b>   |
| <b>f</b> Ending balance . . . . .                | <b>1f</b> 0 |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .	103,804,000	112,162,000	106,512,000	93,806,000	83,782,000
<b>b</b> Contributions . . . . .	584,000	685,000	3,178,000	4,132,000	2,084,000
<b>c</b> Net investment earnings, gains, and losses . . . . .	7,543,000	-4,085,000	7,919,000	13,623,000	12,635,000
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .	4,954,000	4,958,000	5,447,000	5,049,000	4,695,000
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .	106,977,000	103,804,000	112,162,000	106,512,000	93,806,000

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 45%
  - b** Permanent endowment ▶ 51%
  - c** Temporarily restricted endowment ▶ 4%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes           | No |
|---|---------------|----|
| <b>(i)</b> unrelated organizations . . . . .  | <b>3a(i)</b>  | X  |
| <b>(ii)</b> related organizations . . . . .   | <b>3a(ii)</b> | X  |
| <b>b</b> If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? . . . . . | <b>3b</b>     |    |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .	0	0	0	0
<b>b</b> Buildings . . . . .	0	0	0	0
<b>c</b> Leasehold improvements . . . . .	0	8,410,243	4,971,090	3,439,153
<b>d</b> Equipment . . . . .	0	3,432,641	1,980,167	1,452,474
<b>e</b> Other . . . . .	0	3,410,422	3,001,330	409,092

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶ 5,300,719

**Part VII Investments—Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 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
(1) Financial derivatives . . . . .	0	
(2) Closely-held equity interests . . . . .	0	
(3) Other Closed End Micro Fund	4,322,160	F
(A) Direct Lending Fund	6,628,393	F
(B) Limited Partnership	32,968,994	F
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	43,919,547	

**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)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶	0	

**Part IX Other Assets.**

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)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	0

**Part X Other Liabilities.**

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	0
(2) Annuity Liability related to Split interest agreem	6,426,493
(3) Deferred Rent	5,026,531
(4) Revolving Loan Program Liability	1,458,672
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	12,911,696

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	741,912,797
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b> 5,109,389		
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b> 0		
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b> 0		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b> 0		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	5,109,389
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	736,803,408
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b> 0		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b> 0		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	0
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .		<b>5</b>	736,803,408

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	726,228,064
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b> 0		
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b> 0		
<b>c</b>	Other losses . . . . .	<b>2c</b> 0		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b> 0		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	0
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	726,228,064
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b> 0		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b> 0		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	0
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .		<b>5</b>	726,228,064

**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; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part IV Line 2b Custodial accounts at IRC represent funds held on behalf of refugee participants related to economic empowerment programs (Assets for Financial Independence (AFI) and Individual Development Accounts (IDA)) in compliance with program requirements as stipulated by the donors. Funds will be released as refugees complete the program requirements.

Part IV Line 4 IRC board of directors has established a fund to provide for the long-term financial stability of IRC and to enhance its ability to respond to extraordinary emergency needs. The purpose of this fund is to provide a mechanism for the board of directors to set aside and invest certain funds. Accordingly, the board of directors has designated the Leo Cherne Emergency Fund, certain unrestricted bequests, extraordinary gifts (as determined by the board of directors), and portions of unrestricted surpluses in operating funds for this purpose. IRC permanently restricted donor endowment and emergency funds further support the long term financial stability of the organization. Included in

**Part XIII Supplemental Information** *(continued)*

this category are endowment specific donations and emergency funds that allow IRC to use principal on a temporary basis for emergency response situations and to preposition itself with commonly used emergency response inventory. Principal used by IRC must be subsequently returned to the fund. IRC maintains a spending rate policy on the endowment invest assets. The spending rate policy was designed to preserve the value of the investment portfolio in real terms and to reduce the impact of market fluctuations on operations. The spending rate used for operations is set at 4.5% of the previous three-year rolling fair value average.

Part X Line 2 During 2010, IRC adopted ASU No. 2009 06, Implementation Guidance on Accounting For Uncertainty in Income Taxes and Disclosure Amendments for Nonpublic Entities, in conjunction with the adoption of FASB interpretation No. 48, Accounting for Uncertainty in Income Taxes. FASB Interpretation No.48 addresses the accounting for uncertainties in an organization financial statements and prescribes a threshold of more than likely not for recognition and derecognition of tax positions taken or to be taken in a tax return. FASB Interpretation No. 48 also provides related guidance on measurements, classification, interest and penalties and disclosures. The adoption of FASB Interpretation No. 48 and ASU No. 2009 06 did not have a significant impact on the IRC financial Statements.

**Schedule F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990.
- ▶ Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

**Open to Public  
Inspection**

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number

13-5660870

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) Europe (Including Iceland and Greenland)	4	534	Program Services		16,191,289
(2) Europe (Including Iceland and Greenland)			Grants to recipient		1,193,481
(3) Russia and the Neighboring States	1	0	Program Services		333,905
(4) Russia and the Neighboring States			Grants to recipient		28,929
(5) Central America and the Caribbean	1	0	Program Services		501,384
(6) Central America and the Caribbean			Grants to recipient		
(7) Middle East and North Africa	5	1,138	Program Services		109,431,564
(8) Middle East and North Africa			Grants to recipient		11,050,206
(9) Sub-Saharan Africa	19	5,013	Program Services		227,923,613
(10) Sub-Saharan Africa			Grants to recipient		75,970,652
(11) East Asia and the Pacific	2	655	Program Services		18,404,609
(12) East Asia and the Pacific			Grants to recipient		23,409,338
(13) South Asia	2	1,162	Program Services		31,867,572
(14) South Asia			Grants to recipient		17,102,831
(15)					
(16)					
(17)					
<b>3a</b> Sub-total . . . . .	34	8,502			533,409,373
<b>b</b> Total from continuation sheets to Part I . . . . .	0	0			0
<b>c</b> Totals (add lines 3a and 3b)	34	8,502			533,409,373

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			East Asia and the Pacific	Community Development	4,622	Bank Transfer			
(2)			East Asia and the Pacific	Community Development	5,175	Bank Transfer			
(3)			East Asia and the Pacific	Community Development	7,014	Bank Transfer			
(4)			East Asia and the Pacific	GBV Programs	12,759	Bank Transfer			
(5)			East Asia and the Pacific	Health	21,370	Bank Transfer			
(6)			East Asia and the Pacific	Health	24,731	Bank Transfer			
(7)			East Asia and the Pacific	Health	46,489	Bank Transfer			
(8)			East Asia and the Pacific	GBV Programs	52,853	Bank Transfer			
(9)			East Asia and the Pacific	Health	68,781	Bank Transfer			
(10)			East Asia and the Pacific	Health	74,235	Bank Transfer			
(11)			East Asia and the Pacific	Water and Sanitation	79,913	Bank Transfer			
(12)			East Asia and the Pacific	Health	82,618	Bank Transfer			
(13)			East Asia and the Pacific	Community Development	93,850	Bank Transfer			
(14)			East Asia and the Pacific	Community Development	118,971	Bank Transfer			
(15)			East Asia and the Pacific	Governance	141,144	Bank Transfer			
(16)			East Asia and the Pacific	Health	562,788	Bank Transfer			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ ----- 154

3 Enter total number of other organizations or entities . . . . . ▶ ----- 476

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) PROGRAM SUPPLIES & MATERIALS	Central America and the Caribbean		79,972	Bank Transfer	225	Program Materials	FMV
(2) CASH ASSISTANCE	East Asia and the Pacific		647,012	Bank Transfer			
(3) HEALTH CARE	East Asia and the Pacific		759,972	Bank Transfer			
(4) OTHER ASSISTANCE	East Asia and the Pacific		259,104	Bank Transfer			
(5) OTHER EDUCATION	East Asia and the Pacific		351,763	Bank Transfer			
(6) PROGRAM SUPPLIES & MATERIALS	East Asia and the Pacific		2,826,853	Bank Transfer	43,699	Program Materials	FMV
(7) CASH ASSISTANCE	Europe (Including Iceland and Greenland)		2,354,533	Bank Transfer			
(8) HEALTH CARE	Europe (Including Iceland and Greenland)		1,511,727	Bank Transfer			
(9) OTHER ASSISTANCE	Europe (Including Iceland and Greenland)		4,085,115	Bank Transfer			
(10) OTHER EDUCATION	Europe (Including Iceland and Greenland)		61,526	Bank Transfer			
(11) PROGRAM SUPPLIES & MATERIALS	Europe (Including Iceland and Greenland)		5,901,998	Bank Transfer	814,850	Program Materials	FMV
(12) SERVICE CONTRACTS	Europe (Including Iceland and Greenland)		2,793,016	Bank Transfer			
(13) TRANSPORTATION	Europe (Including Iceland and Greenland)		132,104	Bank Transfer			
(14) CASH ASSISTANCE	Middle East and North Africa		1,894,273	Bank Transfer			
(15) HEALTH CARE	Middle East and North Africa		8,067,204	Bank Transfer			
(16) OTHER ASSISTANCE	Middle East and North Africa		461,543	Bank Transfer			
(17) OTHER EDUCATION	Middle East and North Africa		500,259	Bank Transfer			
(18) PROGRAM SUPPLIES & MATERIALS	Middle East and North Africa		21,784,856	Bank Transfer	26,257	Program Materials	FMV

**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *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  No
  
- 2 Did the organization have an interest in a foreign trust during the tax year? *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; do not file with Form 990)* . . . . .  Yes  No
  
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *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  No
  
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *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  No
  
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *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  No
  
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)* . . . . .  Yes  No

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Part I Line 1 IRC maintains records of all grants made from the pre-award / due diligence

phase which determines the selection of the subgrantee, the signing of the grant agreement

and throughout the activity with the submission of periodic financial and programmatic

reports as required per the grant agreement.

Part II Line 2 IRC has detailed required procedures for monitoring the use of funds

outside of the US which vary based on the type of award granted, the dollar size of the

award and the organization (US, Local NGO, Community Based Organization (CBO) Local

Government, etc.) the funds have been granted to. All reports are reviewed, on-site

periodic review visits occur routinely and capacity building is performed as required.

Part III Line Column C In 2016, 26 million people in more than 40 countries and 29 U.S.

cities benefited from IRC programs that help restore health, safety, education and

economic well-being to those devastated by conflict and disaster. Our doctors, nurses and

community health workers provided 24 million people with primary and reproductive health

care. We gave 2.6 million people access to clean drinking water and sanitation. 1.3M

children provided with schooling and educational opportunities. We vaccinated over 173,000

children under age of one against measles. IRC supported 2,507 clinics and health

facilities that helped more than 171,000 women deliver healthy babies. We supported more

than 21,000 community health workers to treat communicable diseases in children under age

5 and treated 186,000 children under age 5 for acute malnutrition. We gave 3.8M people

access to clean drinking water or sanitation. We provided schooling and educational

opportunities to more than 1.5 million children; trained more than 33,000 educators and

supported 11,000 schools. We provided counseling, care and support to more than 42,000

vulnerable children and trained more than 2,200 child protection workers. We created 2,000

village savings and loan associations that benefited more than 58,000 members who saved a

total of nearly \$2.4 million. We helped more than 4000 people access financial services.

We trained more than 15,000 farmers in agriculture and agribusiness, and provided more

than 40,000 farmers with access to markets and farm resources including seeds and

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

fertilizers. IRC provided Job related skill training to more than 53,000 people and helped  
create or support 40,000 businesses. IRC provided cash and asset transfers to more than  
227,000 individuals and displaced households, 46 percent of whom were women. We provided  
counseling and health, social and legal services to more than 14,400 survivors of gender  
based violence (GBV) and reached some 1.8M people with community based violence prevention  
efforts. IRC offered legal assistance to more than 37,000 people; trained 27,394 people in  
the principles of human rights and protection; offered information on preventing and  
responding to human rights abuses to more than 267,000 people. IRC trained over 31,300  
people in the principles of governance (improving government accountability) and provided  
information on governance to 156,400 people.

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(17)			East Asia and the Pacific	Community Development	1,086,642	Bank Transfer			
(18)			East Asia and the Pacific	Health	1,150,478	Bank Transfer			
(19)			East Asia and the Pacific	Community Development	1,829,359	Bank Transfer			
(20)			East Asia and the Pacific	Shelter	-41,601	Return			
(21)			East Asia and the Pacific	Shelter	703	Bank Transfer			
(22)			East Asia and the Pacific	Shelter	1,287	Bank Transfer			
(23)			East Asia and the Pacific	Shelter	1,467	Bank Transfer			
(24)			East Asia and the Pacific	Shelter	275,610	Bank Transfer			
(25)			East Asia and the Pacific	Health	2,356	Bank Transfer			
(26)			East Asia and the Pacific	Protection	3,030	Bank Transfer			
(27)			East Asia and the Pacific	Health	3,916	Bank Transfer			
(28)			East Asia and the Pacific	GBV Programs	4,638	Bank Transfer			
(29)			East Asia and the Pacific	Health	8,492	Bank Transfer			
(30)			East Asia and the Pacific	Health	10,804	Bank Transfer			
(31)			East Asia and the Pacific	Protection	14,305	Bank Transfer			
(32)			East Asia and the Pacific	Health	22,998	Bank Transfer			
(33)			East Asia and the Pacific	Health	31,420	Bank Transfer			
(34)			East Asia and the Pacific	Health	36,754	Bank Transfer			
(35)			East Asia and the Pacific	GBV Programs	39,116	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(36)			East Asia and the Pacific	Protection	41,172	Bank Transfer			
(37)			East Asia and the Pacific	Protection	42,016	Bank Transfer			
(38)			East Asia and the Pacific	GBV Programs	43,612	Bank Transfer			
(39)			East Asia and the Pacific	GBV Programs	43,644	Bank Transfer			
(40)			East Asia and the Pacific	Health	44,045	Bank Transfer			
(41)			East Asia and the Pacific	Protection	54,516	Bank Transfer			
(42)			East Asia and the Pacific	Health	65,827	Bank Transfer			
(43)			East Asia and the Pacific	Health	68,597	Bank Transfer			
(44)			East Asia and the Pacific	Health	70,980	Bank Transfer			
(45)			East Asia and the Pacific	Health	73,088	Bank Transfer			
(46)			East Asia and the Pacific	Health	74,402	Bank Transfer			
(47)			East Asia and the Pacific	Health	97,995	Bank Transfer			
(48)			East Asia and the Pacific	Health	114,730	Bank Transfer			
(49)			East Asia and the Pacific	Health	133,753	Bank Transfer			
(50)			East Asia and the Pacific	Health	139,188	Bank Transfer			
(51)			East Asia and the Pacific	Health	173,663	Bank Transfer			
(52)			East Asia and the Pacific	Health	186,175	Bank Transfer			
(53)			East Asia and the Pacific	Education	187,778	Bank Transfer			
(54)			East Asia and the Pacific	Distribution	372,732	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(55)			East Asia and the Pacific	Health	1,091,342	Bank Transfer			
(56)			East Asia and the Pacific	Education	1,467,615	Bank Transfer			
(57)			East Asia and the Pacific	Distribution	1,549,268	Bank Transfer			
(58)			East Asia and the Pacific	Distribution	1,892,018	Bank Transfer			
(59)			East Asia and the Pacific	Distribution	3,793,818	Bank Transfer			
(60)			East Asia and the Pacific	Distribution	5,570,291	Bank Transfer			
(61)			Europe (Including Iceland and	Protection	-5,675	Return			
(62)			Europe (Including Iceland and	Protection	2,365	Bank Transfer			
(63)			Europe (Including Iceland and	Protection	5,397	Bank Transfer			
(64)			Europe (Including Iceland and	Protection	5,675	Bank Transfer			
(65)			Europe (Including Iceland and	Protection	10,185	Bank Transfer			
(66)			Europe (Including Iceland and	Protection	20,500	Bank Transfer			
(67)			Europe (Including Iceland and	Protection	25,053	Bank Transfer			
(68)			Europe (Including Iceland and	Protection	50,909	Bank Transfer			
(69)			Europe (Including Iceland and	Protection	53,933	Bank Transfer			
(70)			Europe (Including Iceland and	GBV Programs	55,614	Bank Transfer			
(71)			Europe (Including Iceland and	Protection	62,945	Bank Transfer			
(72)			Europe (Including Iceland and	Protection	91,661	Bank Transfer			
(73)			Middle East and North Africa	GBV Programs	40,565	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(74)			Middle East and North Africa	GBV Programs	60,479	Bank Transfer			
(75)			Middle East and North Africa	Protection	78,518	Bank Transfer			
(76)			Middle East and North Africa	Protection	113,160	Bank Transfer			
(77)			Middle East and North Africa	Protection	114,579	Bank Transfer			
(78)			Middle East and North Africa	GBV Programs	121,222	Bank Transfer			
(79)			Middle East and North Africa	Protection	224,588	Bank Transfer			
(80)			Middle East and North Africa	Health	-11,500	Return			
(81)			Middle East and North Africa	Health	-2	Return			
(82)			Middle East and North Africa	Community Development	132	Bank Transfer			
(83)			Middle East and North Africa	Health	6,374	Bank Transfer			
(84)			Middle East and North Africa	Health	11,500	Bank Transfer			
(85)			Middle East and North Africa	GBV Programs	14,066	Bank Transfer			
(86)			Middle East and North Africa	Protection	20,437	Bank Transfer			
(87)			Middle East and North Africa	GBV Programs	31,941	Bank Transfer			
(88)			Middle East and North Africa	Health	71,998	Bank Transfer			
(89)			Middle East and North Africa	Protection	73,844	Bank Transfer			
(90)			Middle East and North Africa	Protection	84,489	Bank Transfer			
(91)			Middle East and North Africa	GBV Programs	91,837	Bank Transfer			
(92)			Middle East and North Africa	Protection	101,292	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(93)			Middle East and North Africa	Health	108,932	Bank Transfer			
(94)			Middle East and North Africa	Health	230,547	Bank Transfer			
(95)			Middle East and North Africa	Health	407,124	Bank Transfer			
(96)			Middle East and North Africa	Health	421,017	Bank Transfer			
(97)			Middle East and North Africa	Health	466,056	Bank Transfer			
(98)			Middle East and North Africa	Health	829,834	Bank Transfer			
(99)			Middle East and North Africa	Health	965,882	Bank Transfer			
(100)			Middle East and North Africa	GBV Programs	-36,554	Return			
(101)			Middle East and North Africa	Community Development	-25,987	Return			
(102)			Middle East and North Africa	Community Development	-17,396	Return			
(103)			Middle East and North Africa	GBV Programs	13,341	Bank Transfer			
(104)			Middle East and North Africa	GBV Programs	30,000	Bank Transfer			
(105)			Middle East and North Africa	GBV Programs	31,533	Bank Transfer			
(106)			Middle East and North Africa	Community Development	34,210	Bank Transfer			
(107)			Middle East and North Africa	GBV Programs	39,725	Bank Transfer			
(108)			Middle East and North Africa	Children & Youth Programs	50,000	Bank Transfer			
(109)			Middle East and North Africa	GBV Programs	50,293	Bank Transfer			
(110)			Middle East and North Africa	Community Development	146,099	Bank Transfer			
(111)			Middle East and North Africa	Community Development	173,556	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(112)			Middle East and North Africa	GBV Programs	231,571	Bank Transfer			
(113)			Middle East and North Africa	Children & Youth Programs	240,064	Bank Transfer			
(114)			Middle East and North Africa	Community Development	1,935	Bank Transfer			
(115)			Middle East and North Africa	Health	121,863	Bank Transfer			
(116)			Middle East and North Africa	Health	177,754	Bank Transfer			
(117)			Middle East and North Africa	Health	243,140	Bank Transfer			
(118)			Middle East and North Africa	Health	249,340	Bank Transfer			
(119)			Middle East and North Africa	Health	477,644	Bank Transfer			
(120)			Middle East and North Africa	Health	479,760	Bank Transfer			
(121)			Middle East and North Africa	Health	1,019,692	Bank Transfer			
(122)			Middle East and North Africa	Health	1,313,568	Bank Transfer			
(123)			Middle East and North Africa	Health	1,326,143	Bank Transfer			
(124)			Russia and the Neighboring States	Distribution	-1,500	Return			
(125)			Russia and the Neighboring States	GBV Programs	270	Bank Transfer			
(126)			Russia and the Neighboring States	GBV Programs	6,024	Bank Transfer			
(127)			Russia and the Neighboring States	GBV Programs	9,213	Bank Transfer			
(128)			Russia and the Neighboring States	GBV Programs	14,921	Bank Transfer			
(129)			South Asia	Education	-3	Return			
(130)			South Asia	Community Development	104,444	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(131)			South Asia	Education	126,183	Bank Transfer			
(132)			South Asia	Education	386,556	Bank Transfer			
(133)			South Asia	Education	17,935	Bank Transfer			
(134)			South Asia	Education	21,289	Bank Transfer			
(135)			South Asia	Water and Sanitation	69,532	Bank Transfer			
(136)			South Asia	Protection	90,965	Bank Transfer			
(137)			South Asia	GBV Programs	109,650	Bank Transfer			
(138)			South Asia	Protection	116,916	Bank Transfer			
(139)			South Asia	Children & Youth Programs	131,339	Bank Transfer			
(140)			South Asia	GBV Programs	132,881	Bank Transfer			
(141)			South Asia	Water and Sanitation	138,665	Bank Transfer			
(142)			South Asia	Protection	145,532	Bank Transfer			
(143)			South Asia	Education	147,875	Bank Transfer			
(144)			South Asia	GBV Programs	185,981	Bank Transfer			
(145)			South Asia	Education	196,447	Bank Transfer			
(146)			South Asia	Education	283,067	Bank Transfer			
(147)			South Asia	Children & Youth Programs	1,236,625	Bank Transfer			
(148)			South Asia	Education	2,909,418	Bank Transfer			
(149)			South Asia	Education	4,604,138	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(150)			South Asia	Education	5,947,396	Bank Transfer			
(151)			Sub-Saharan Africa	GBV Programs	120	Bank Transfer			
(152)			Sub-Saharan Africa	Children & Youth Programs	1,248	Bank Transfer			
(153)			Sub-Saharan Africa	Children & Youth Programs	2,227	Bank Transfer			
(154)			Sub-Saharan Africa	GOVERNANCE	3,171	Bank Transfer			
(155)			Sub-Saharan Africa	GBV Programs	5,921	Bank Transfer			
(156)			Sub-Saharan Africa	Children & Youth Programs	6,800	Bank Transfer			
(157)			Sub-Saharan Africa	Children & Youth Programs	7,451	Bank Transfer			
(158)			Sub-Saharan Africa	GOVERNANCE	25,757	Bank Transfer			
(159)			Sub-Saharan Africa	GOVERNANCE	36,535	Bank Transfer			
(160)			Sub-Saharan Africa	Children & Youth Programs	70,347	Bank Transfer			
(161)			Sub-Saharan Africa	Children & Youth Programs	322,712	Bank Transfer			
(162)			Sub-Saharan Africa	GBV Programs	-516	Return			
(163)			Sub-Saharan Africa	Community Development	107,610	Bank Transfer			
(164)			Sub-Saharan Africa	Community Development	143,238	Bank Transfer			
(165)			Sub-Saharan Africa	Health	9,055	Bank Transfer			
(166)			Sub-Saharan Africa	Health	18,609	Bank Transfer			
(167)			Sub-Saharan Africa	Health	25,279	Bank Transfer			
(168)			Sub-Saharan Africa	Health	29,981	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(169)			Sub-Saharan Africa	Health	32,336	Bank Transfer			
(170)			Sub-Saharan Africa	Health	36,881	Bank Transfer			
(171)			Sub-Saharan Africa	Health	40,851	Bank Transfer			
(172)			Sub-Saharan Africa	Children & Youth Programs	42,179	Bank Transfer			
(173)			Sub-Saharan Africa	Health	45,801	Bank Transfer			
(174)			Sub-Saharan Africa	Health	51,654	Bank Transfer			
(175)			Sub-Saharan Africa	Health	56,006	Bank Transfer			
(176)			Sub-Saharan Africa	Children & Youth Programs	74,347	Bank Transfer			
(177)			Sub-Saharan Africa	Health	76,736	Bank Transfer			
(178)			Sub-Saharan Africa	Health	93,329	Bank Transfer			
(179)			Sub-Saharan Africa	Health	113,783	Bank Transfer			
(180)			Sub-Saharan Africa	Health	127,850	Bank Transfer			
(181)			Sub-Saharan Africa	Health	136,210	Bank Transfer			
(182)			Sub-Saharan Africa	Health	190,158	Bank Transfer			
(183)			Sub-Saharan Africa	WATER AND SANITATION	303,726	Bank Transfer			
(184)			Sub-Saharan Africa	WATER AND SANITATION	-12,944	Return			
(185)			Sub-Saharan Africa	WATER AND SANITATION	-11,209	Return			
(186)			Sub-Saharan Africa	GBV Programs	11,266	Bank Transfer			
(187)			Sub-Saharan Africa	WATER AND SANITATION	61,000	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(188)			Sub-Saharan Africa	Health	72,461	Bank Transfer			
(189)			Sub-Saharan Africa	Health	73,999	Bank Transfer			
(190)			Sub-Saharan Africa	Water and Sanitation	132,929	Bank Transfer			
(191)			Sub-Saharan Africa	Water and Sanitation	135,813	Bank Transfer			
(192)			Sub-Saharan Africa	Water and Sanitation	173,751	Bank Transfer			
(193)			Sub-Saharan Africa	Water and Sanitation	183,795	Bank Transfer			
(194)			Sub-Saharan Africa	Health	184,009	Bank Transfer			
(195)			Sub-Saharan Africa	Water and Sanitation	189,771	Bank Transfer			
(196)			Sub-Saharan Africa	Water and Sanitation	196,939	Bank Transfer			
(197)			Sub-Saharan Africa	Water and Sanitation	198,840	Bank Transfer			
(198)			Sub-Saharan Africa	Water and Sanitation	205,805	Bank Transfer			
(199)			Sub-Saharan Africa	Water and Sanitation	220,915	Bank Transfer			
(200)			Sub-Saharan Africa	Water and Sanitation	221,031	Bank Transfer			
(201)			Sub-Saharan Africa	Water and Sanitation	224,619	Bank Transfer			
(202)			Sub-Saharan Africa	Water and Sanitation	231,698	Bank Transfer			
(203)			Sub-Saharan Africa	Water and Sanitation	239,805	Bank Transfer			
(204)			Sub-Saharan Africa	Water and Sanitation	239,860	Bank Transfer			
(205)			Sub-Saharan Africa	Water and Sanitation	243,001	Bank Transfer			
(206)			Sub-Saharan Africa	Water and Sanitation	248,241	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(207)			Sub-Saharan Africa	Water and Sanitation	248,385	Bank Transfer			
(208)			Sub-Saharan Africa	Water and Sanitation	248,571	Bank Transfer			
(209)			Sub-Saharan Africa	Water and Sanitation	250,000	Bank Transfer			
(210)			Sub-Saharan Africa	Water and Sanitation	256,749	Bank Transfer			
(211)			Sub-Saharan Africa	Water and Sanitation	268,194	Bank Transfer			
(212)			Sub-Saharan Africa	Water and Sanitation	279,075	Bank Transfer			
(213)			Sub-Saharan Africa	Health	689,294	Bank Transfer			
(214)			Sub-Saharan Africa	Water and Sanitation	1,393,726	Bank Transfer			
(215)			Sub-Saharan Africa	Health	-14,357	Return			
(216)			Sub-Saharan Africa	Protection	6,882	Bank Transfer			
(217)			Sub-Saharan Africa	Health	7,916	Bank Transfer			
(218)			Sub-Saharan Africa	Protection	15,213	Bank Transfer			
(219)			Sub-Saharan Africa	Protection	16,764	Bank Transfer			
(220)			Sub-Saharan Africa	Protection	17,219	Bank Transfer			
(221)			Sub-Saharan Africa	Protection	24,688	Bank Transfer			
(222)			Sub-Saharan Africa	Protection	25,525	Bank Transfer			
(223)			Sub-Saharan Africa	Protection	38,278	Bank Transfer			
(224)			Sub-Saharan Africa	Protection	115,660	Bank Transfer			
(225)			Sub-Saharan Africa	Health	270,001	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(226)			Sub-Saharan Africa	Health	404,646	Bank Transfer			
(227)			Sub-Saharan Africa	Health	677,356	Bank Transfer			
(228)			Sub-Saharan Africa	Health	1,177,623	Bank Transfer			
(229)			Sub-Saharan Africa	Community Development	-10,096	Return			
(230)			Sub-Saharan Africa	GBV Programs	-4,844	Return			
(231)			Sub-Saharan Africa	Health	-4,285	Return			
(232)			Sub-Saharan Africa	Community Development	-307	Return			
(233)			Sub-Saharan Africa	Community Development	-23	Return			
(234)			Sub-Saharan Africa	Community Development	4	Cash			
(235)			Sub-Saharan Africa	Community Development	7	Cash			
(236)			Sub-Saharan Africa	Community Development	15	Cash			
(237)			Sub-Saharan Africa	Community Development	15	Cash			
(238)			Sub-Saharan Africa	Community Development	15	Cash			
(239)			Sub-Saharan Africa	Community Development	15	Cash			
(240)			Sub-Saharan Africa	Health	80	Cash			
(241)			Sub-Saharan Africa	Community Development	282	Bank Transfer			
(242)			Sub-Saharan Africa	Community Development	413	Bank Transfer			
(243)			Sub-Saharan Africa	Community Development	417	Bank Transfer			
(244)			Sub-Saharan Africa	Health	586	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(245)			Sub-Saharan Africa	Health	940	Bank Transfer			
(246)			Sub-Saharan Africa	Health	960	Bank Transfer			
(247)			Sub-Saharan Africa	Community Development	995	Bank Transfer			
(248)			Sub-Saharan Africa	Health	1,164	Bank Transfer			
(249)			Sub-Saharan Africa	Health	1,178	Bank Transfer			
(250)			Sub-Saharan Africa	Education	1,276	Bank Transfer			
(251)			Sub-Saharan Africa	Health	1,410	Bank Transfer			
(252)			Sub-Saharan Africa	GBV Programs	1,570	Bank Transfer			
(253)			Sub-Saharan Africa	Community Development	1,852	Bank Transfer			
(254)			Sub-Saharan Africa	Community Development	1,857	Bank Transfer			
(255)			Sub-Saharan Africa	Community Development	2,106	Bank Transfer			
(256)			Sub-Saharan Africa	Health	2,321	Bank Transfer			
(257)			Sub-Saharan Africa	Education	2,420	Bank Transfer			
(258)			Sub-Saharan Africa	Health	3,235	Bank Transfer			
(259)			Sub-Saharan Africa	Health	3,517	Bank Transfer			
(260)			Sub-Saharan Africa	Health	3,594	Bank Transfer			
(261)			Sub-Saharan Africa	Community Development	3,675	Bank Transfer			
(262)			Sub-Saharan Africa	Community Development	3,679	Bank Transfer			
(263)			Sub-Saharan Africa	Health	3,944	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(264)			Sub-Saharan Africa	Community Development	4,166	Bank Transfer			
(265)			Sub-Saharan Africa	Community Development	4,166	Bank Transfer			
(266)			Sub-Saharan Africa	Community Development	4,166	Bank Transfer			
(267)			Sub-Saharan Africa	Community Development	4,166	Bank Transfer			
(268)			Sub-Saharan Africa	Health	4,200	Bank Transfer			
(269)			Sub-Saharan Africa	GBV Programs	4,574	Bank Transfer			
(270)			Sub-Saharan Africa	GBV Programs	4,844	Bank Transfer			
(271)			Sub-Saharan Africa	Health	5,015	Bank Transfer			
(272)			Sub-Saharan Africa	Health	5,100	Bank Transfer			
(273)			Sub-Saharan Africa	Community Development	5,120	Bank Transfer			
(274)			Sub-Saharan Africa	Community Development	5,413	Bank Transfer			
(275)			Sub-Saharan Africa	Health	5,560	Bank Transfer			
(276)			Sub-Saharan Africa	Health	5,568	Bank Transfer			
(277)			Sub-Saharan Africa	Health	5,756	Bank Transfer			
(278)			Sub-Saharan Africa	Health	6,108	Bank Transfer			
(279)			Sub-Saharan Africa	Community Development	6,385	Bank Transfer			
(280)			Sub-Saharan Africa	Health	6,500	Bank Transfer			
(281)			Sub-Saharan Africa	Health	6,746	Bank Transfer			
(282)			Sub-Saharan Africa	Community Development	7,327	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(283)			Sub-Saharan Africa	Community Development	7,690	Bank Transfer			
(284)			Sub-Saharan Africa	Community Development	7,760	Bank Transfer			
(285)			Sub-Saharan Africa	Community Development	7,762	Bank Transfer			
(286)			Sub-Saharan Africa	Health	7,878	Bank Transfer			
(287)			Sub-Saharan Africa	Community Development	7,915	Bank Transfer			
(288)			Sub-Saharan Africa	Community Development	7,983	Bank Transfer			
(289)			Sub-Saharan Africa	Community Development	8,124	Bank Transfer			
(290)			Sub-Saharan Africa	Community Development	8,208	Bank Transfer			
(291)			Sub-Saharan Africa	Community Development	8,436	Bank Transfer			
(292)			Sub-Saharan Africa	Community Development	8,575	Bank Transfer			
(293)			Sub-Saharan Africa	Community Development	8,732	Bank Transfer			
(294)			Sub-Saharan Africa	Health	8,770	Bank Transfer			
(295)			Sub-Saharan Africa	Community Development	8,877	Bank Transfer			
(296)			Sub-Saharan Africa	Community Development	9,043	Bank Transfer			
(297)			Sub-Saharan Africa	Health	9,500	Bank Transfer			
(298)			Sub-Saharan Africa	Community Development	9,797	Bank Transfer			
(299)			Sub-Saharan Africa	Health	9,853	Bank Transfer			
(300)			Sub-Saharan Africa	Community Development	10,152	Bank Transfer			
(301)			Sub-Saharan Africa	GBV Programs	10,362	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(302)			Sub-Saharan Africa	GBV Programs	10,855	Bank Transfer			
(303)			Sub-Saharan Africa	Health	11,914	Bank Transfer			
(304)			Sub-Saharan Africa	Community Development	13,124	Bank Transfer			
(305)			Sub-Saharan Africa	GBV Programs	16,000	Bank Transfer			
(306)			Sub-Saharan Africa	GBV Programs	16,900	Bank Transfer			
(307)			Sub-Saharan Africa	GBV Programs	19,101	Bank Transfer			
(308)			Sub-Saharan Africa	Health	20,227	Bank Transfer			
(309)			Sub-Saharan Africa	GBV Programs	20,646	Bank Transfer			
(310)			Sub-Saharan Africa	GBV Programs	23,595	Bank Transfer			
(311)			Sub-Saharan Africa	Health	24,750	Bank Transfer			
(312)			Sub-Saharan Africa	Health	24,822	Bank Transfer			
(313)			Sub-Saharan Africa	Health	25,867	Bank Transfer			
(314)			Sub-Saharan Africa	Health	28,035	Bank Transfer			
(315)			Sub-Saharan Africa	Health	30,200	Bank Transfer			
(316)			Sub-Saharan Africa	Health	39,225	Bank Transfer			
(317)			Sub-Saharan Africa	Education	61,377	Bank Transfer			
(318)			Sub-Saharan Africa	Community Development	217,411	Bank Transfer			
(319)			Sub-Saharan Africa	Community Development	1,581,143	Bank Transfer			
(320)			Sub-Saharan Africa	Education	3,684,448	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(321)			Sub-Saharan Africa	Education	4,857,756	Bank Transfer			
(322)			Sub-Saharan Africa	Health	-14,312	Return			
(323)			Sub-Saharan Africa	Health	1,647	Bank Transfer			
(324)			Sub-Saharan Africa	GBV Programs	9,138	Bank Transfer			
(325)			Sub-Saharan Africa	Health	10,077	Bank Transfer			
(326)			Sub-Saharan Africa	GBV Programs	10,965	Bank Transfer			
(327)			Sub-Saharan Africa	GBV Programs	13,224	Bank Transfer			
(328)			Sub-Saharan Africa	Health	50,000	Bank Transfer			
(329)			Sub-Saharan Africa	Health	74,832	Bank Transfer			
(330)			Sub-Saharan Africa	Health	98,934	Bank Transfer			
(331)			Sub-Saharan Africa	Health	131,085	Bank Transfer			
(332)			Sub-Saharan Africa	Health	152,309	Bank Transfer			
(333)			Sub-Saharan Africa	Health	157,269	Bank Transfer			
(334)			Sub-Saharan Africa	Health	269,960	Bank Transfer			
(335)			Sub-Saharan Africa	Health	321,429	Bank Transfer			
(336)			Sub-Saharan Africa	Health	459,663	Bank Transfer			
(337)			Sub-Saharan Africa	Health	474,419	Bank Transfer			
(338)			Sub-Saharan Africa	Health	530,087	Bank Transfer			
(339)			Sub-Saharan Africa	Health	634,531	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(340)			Sub-Saharan Africa	Health	1,083,290	Bank Transfer			
(341)			Sub-Saharan Africa	Health	1,386,502	Bank Transfer			
(342)			Sub-Saharan Africa	Health	1,653,247	Bank Transfer			
(343)			Sub-Saharan Africa	Health	2,034,077	Bank Transfer			
(344)			Sub-Saharan Africa	Children & Youth Programs	12,645	Bank Transfer			
(345)			Sub-Saharan Africa	Health	13,840	Bank Transfer			
(346)			Sub-Saharan Africa	Community Development	28,566	Bank Transfer			
(347)			Sub-Saharan Africa	Education	33,575	Bank Transfer			
(348)			Sub-Saharan Africa	Education	33,576	Bank Transfer			
(349)			Sub-Saharan Africa	Education	92,617	Bank Transfer			
(350)			Sub-Saharan Africa	Education	294,206	Bank Transfer			
(351)			Sub-Saharan Africa	Water and Sanitation	392,779	Bank Transfer			
(352)			Sub-Saharan Africa	Health	8,489	Bank Transfer			
(353)			Sub-Saharan Africa	Protection	40,705	Bank Transfer			
(354)			Sub-Saharan Africa	Protection	64,164	Bank Transfer			
(355)			Sub-Saharan Africa	Protection	-11,663	Return			
(356)			Sub-Saharan Africa	Protection	-7,000	Return			
(357)			Sub-Saharan Africa	GBV Programs	1,852	Bank Transfer			
(358)			Sub-Saharan Africa	DISTRIBUTION	1,976	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(359)			Sub-Saharan Africa	GBV Programs	4,339	Bank Transfer			
(360)			Sub-Saharan Africa	Health	5,090	Bank Transfer			
(361)			Sub-Saharan Africa	Protection	5,137	Bank Transfer			
(362)			Sub-Saharan Africa	Health	6,335	Bank Transfer			
(363)			Sub-Saharan Africa	Protection	6,460	Bank Transfer			
(364)			Sub-Saharan Africa	Health	7,000	Bank Transfer			
(365)			Sub-Saharan Africa	GBV Programs	10,473	Bank Transfer			
(366)			Sub-Saharan Africa	Water and Sanitation	10,584	Bank Transfer			
(367)			Sub-Saharan Africa	Protection	11,663	Bank Transfer			
(368)			Sub-Saharan Africa	Health	13,605	Bank Transfer			
(369)			Sub-Saharan Africa	Health	19,998	Bank Transfer			
(370)			Sub-Saharan Africa	Protection	21,940	Bank Transfer			
(371)			Sub-Saharan Africa	DISTRIBUTION	24,197	Bank Transfer			
(372)			Sub-Saharan Africa	Water and Sanitation	24,999	Bank Transfer			
(373)			Sub-Saharan Africa	GBV Programs	30,730	Bank Transfer			
(374)			Sub-Saharan Africa	Protection	45,710	Bank Transfer			
(375)			Sub-Saharan Africa	Protection	56,765	Bank Transfer			
(376)			Sub-Saharan Africa	DISTRIBUTION	57,039	Bank Transfer			
(377)			Sub-Saharan Africa	Health	122,673	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(378)			Sub-Saharan Africa	Governance	4,625	Bank Transfer			
(379)			Sub-Saharan Africa	Governance	27,173	Bank Transfer			
(380)			Sub-Saharan Africa	Governance	28,914	Bank Transfer			
(381)			Sub-Saharan Africa	Health	-113,808	Return			
(382)			Sub-Saharan Africa	Health	-7,878	Return			
(383)			Sub-Saharan Africa	Health	818	Bank Transfer			
(384)			Sub-Saharan Africa	Health	6,203	Bank Transfer			
(385)			Sub-Saharan Africa	Health	9,449	Bank Transfer			
(386)			Sub-Saharan Africa	Education	10,571	Bank Transfer			
(387)			Sub-Saharan Africa	GBV Programs	12,282	Bank Transfer			
(388)			Sub-Saharan Africa	Health	15,345	Bank Transfer			
(389)			Sub-Saharan Africa	GBV Programs	20,093	Bank Transfer			
(390)			Sub-Saharan Africa	GBV Programs	20,958	Bank Transfer			
(391)			Sub-Saharan Africa	Health	25,806	Bank Transfer			
(392)			Sub-Saharan Africa	GBV Programs	33,198	Bank Transfer			
(393)			Sub-Saharan Africa	Health	34,281	Bank Transfer			
(394)			Sub-Saharan Africa	GBV Programs	48,350	Bank Transfer			
(395)			Sub-Saharan Africa	Health	50,407	Bank Transfer			
(396)			Sub-Saharan Africa	Health	54,337	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(397)			Sub-Saharan Africa	GBV Programs	55,219	Bank Transfer			
(398)			Sub-Saharan Africa	Health	58,953	Bank Transfer			
(399)			Sub-Saharan Africa	Health	68,344	Bank Transfer			
(400)			Sub-Saharan Africa	Health	70,012	Bank Transfer			
(401)			Sub-Saharan Africa	Health	70,998	Bank Transfer			
(402)			Sub-Saharan Africa	GBV Programs	80,640	Bank Transfer			
(403)			Sub-Saharan Africa	Health	91,615	Bank Transfer			
(404)			Sub-Saharan Africa	Health	96,790	Bank Transfer			
(405)			Sub-Saharan Africa	Health	104,405	Bank Transfer			
(406)			Sub-Saharan Africa	Health	104,839	Bank Transfer			
(407)			Sub-Saharan Africa	Education	116,418	Bank Transfer			
(408)			Sub-Saharan Africa	Health	117,424	Bank Transfer			
(409)			Sub-Saharan Africa	Health	137,781	Bank Transfer			
(410)			Sub-Saharan Africa	Health	184,041	Bank Transfer			
(411)			Sub-Saharan Africa	Health	186,012	Bank Transfer			
(412)			Sub-Saharan Africa	Health	195,103	Bank Transfer			
(413)			Sub-Saharan Africa	Health	202,718	Bank Transfer			
(414)			Sub-Saharan Africa	Health	208,211	Bank Transfer			
(415)			Sub-Saharan Africa	Health	210,272	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(416)			Sub-Saharan Africa	Health	210,644	Bank Transfer			
(417)			Sub-Saharan Africa	Health	216,322	Bank Transfer			
(418)			Sub-Saharan Africa	Health	224,210	Bank Transfer			
(419)			Sub-Saharan Africa	Health	231,883	Bank Transfer			
(420)			Sub-Saharan Africa	Health	246,963	Bank Transfer			
(421)			Sub-Saharan Africa	Education	248,235	Bank Transfer			
(422)			Sub-Saharan Africa	Health	264,545	Bank Transfer			
(423)			Sub-Saharan Africa	Health	266,807	Bank Transfer			
(424)			Sub-Saharan Africa	Education	274,354	Bank Transfer			
(425)			Sub-Saharan Africa	Health	279,495	Bank Transfer			
(426)			Sub-Saharan Africa	Health	286,655	Bank Transfer			
(427)			Sub-Saharan Africa	Health	297,689	Bank Transfer			
(428)			Sub-Saharan Africa	Health	327,784	Bank Transfer			
(429)			Sub-Saharan Africa	Health	329,625	Bank Transfer			
(430)			Sub-Saharan Africa	Health	346,278	Bank Transfer			
(431)			Sub-Saharan Africa	Health	356,022	Bank Transfer			
(432)			Sub-Saharan Africa	Health	358,922	Bank Transfer			
(433)			Sub-Saharan Africa	Health	392,722	Bank Transfer			
(434)			Sub-Saharan Africa	Education	413,892	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(435)			Sub-Saharan Africa	Health	414,344	Bank Transfer			
(436)			Sub-Saharan Africa	Health	441,455	Bank Transfer			
(437)			Sub-Saharan Africa	Education	446,581	Bank Transfer			
(438)			Sub-Saharan Africa	Health	455,273	Bank Transfer			
(439)			Sub-Saharan Africa	Health	455,863	Bank Transfer			
(440)			Sub-Saharan Africa	Health	458,557	Bank Transfer			
(441)			Sub-Saharan Africa	Health	477,921	Bank Transfer			
(442)			Sub-Saharan Africa	Health	479,552	Bank Transfer			
(443)			Sub-Saharan Africa	Health	490,131	Bank Transfer			
(444)			Sub-Saharan Africa	Health	518,663	Bank Transfer			
(445)			Sub-Saharan Africa	Health	558,295	Bank Transfer			
(446)			Sub-Saharan Africa	Health	565,379	Bank Transfer			
(447)			Sub-Saharan Africa	Health	576,558	Bank Transfer			
(448)			Sub-Saharan Africa	Health	607,587	Bank Transfer			
(449)			Sub-Saharan Africa	Health	614,792	Bank Transfer			
(450)			Sub-Saharan Africa	Health	627,385	Bank Transfer			
(451)			Sub-Saharan Africa	Education	669,885	Bank Transfer			
(452)			Sub-Saharan Africa	Health	756,223	Bank Transfer			
(453)			Sub-Saharan Africa	Health	783,996	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(454)			Sub-Saharan Africa	Health	804,811	Bank Transfer			
(455)			Sub-Saharan Africa	Health	817,058	Bank Transfer			
(456)			Sub-Saharan Africa	Health	833,130	Bank Transfer			
(457)			Sub-Saharan Africa	Education	869,231	Bank Transfer			
(458)			Sub-Saharan Africa	Health	903,443	Bank Transfer			
(459)			Sub-Saharan Africa	Health	940,868	Bank Transfer			
(460)			Sub-Saharan Africa	Health	990,920	Bank Transfer			
(461)			Sub-Saharan Africa	Health	1,099,864	Bank Transfer			
(462)			Sub-Saharan Africa	Health	1,102,329	Bank Transfer			
(463)			Sub-Saharan Africa	Health	1,103,943	Bank Transfer			
(464)			Sub-Saharan Africa	Health	1,334,662	Bank Transfer			
(465)			Sub-Saharan Africa	Health	2,144,356	Bank Transfer			
(466)			Sub-Saharan Africa	Health	2,937,661	Bank Transfer			
(467)			Sub-Saharan Africa	Health	4,413,066	Bank Transfer			
(468)			Sub-Saharan Africa	Health	-7,100	Return			
(469)			Sub-Saharan Africa	GBV Programs	-594	Return			
(470)			Sub-Saharan Africa	GBV Programs	220	Bank Transfer			
(471)			Sub-Saharan Africa	Health	2,100	Bank Transfer			
(472)			Sub-Saharan Africa	GBV Programs	5,864	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(473)			Sub-Saharan Africa	GBV Programs	10,004	Bank Transfer			
(474)			Sub-Saharan Africa	GBV Programs	14,410	Bank Transfer			
(475)			Sub-Saharan Africa	Health	15,865	Bank Transfer			
(476)			Sub-Saharan Africa	GBV Programs	29,985	Bank Transfer			
(477)			Sub-Saharan Africa	Community Development	105,472	Bank Transfer			
(478)			Sub-Saharan Africa	Health	406	Bank Transfer			
(479)			Sub-Saharan Africa	Children & Youth Programs	14	Cash			
(480)			Sub-Saharan Africa	Children & Youth Programs	2,732	Bank Transfer			
(481)			Sub-Saharan Africa	Children & Youth Programs	3,284	Bank Transfer			
(482)			Sub-Saharan Africa	Children & Youth Programs	9,087	Bank Transfer			
(483)			Sub-Saharan Africa	Children & Youth Programs	24,022	Bank Transfer			
(484)			Sub-Saharan Africa	Children & Youth Programs	28,310	Bank Transfer			
(485)			Sub-Saharan Africa	Children & Youth Programs	37,231	Bank Transfer			
(486)			Sub-Saharan Africa	Children & Youth Programs	55,481	Bank Transfer			
(487)			Sub-Saharan Africa	Children & Youth Programs	76,698	Bank Transfer			
(488)			Sub-Saharan Africa	Children & Youth Programs	1,142,187	Bank Transfer			
(489)			Sub-Saharan Africa	GBV Programs	4,468	Bank Transfer			
(490)			Sub-Saharan Africa	GBV Programs	13,813	Bank Transfer			
(491)			Sub-Saharan Africa	Health	318,912	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(492)			Sub-Saharan Africa	Health	699,731	Bank Transfer			
(493)			Sub-Saharan Africa	Community Development	14,000	Bank Transfer			
(494)			Sub-Saharan Africa	Community Development	22,542	Bank Transfer			
(495)			Sub-Saharan Africa	Community Development	57,950	Bank Transfer			
(496)			Sub-Saharan Africa	GBV Programs	35,361	Bank Transfer			
(497)			Sub-Saharan Africa	GBV Programs	51,933	Bank Transfer			
(498)			Sub-Saharan Africa	GBV Programs	58,040	Bank Transfer			
(499)			Sub-Saharan Africa	GBV Programs	115,700	Bank Transfer			
(500)			Sub-Saharan Africa	Education	183,370	Bank Transfer			
(501)			Sub-Saharan Africa	Distribution	56,500	Bank Transfer			
(502)			Sub-Saharan Africa	Distribution	62,240	Bank Transfer			
(503)			Sub-Saharan Africa	Distribution	75,830	Bank Transfer			
(504)			Sub-Saharan Africa	Distribution	179,692	Bank Transfer			
(505)			Sub-Saharan Africa	GBV Programs	-25,514	Return			
(506)			Sub-Saharan Africa	GBV Programs	-134	Return			
(507)			Sub-Saharan Africa	GBV Programs	25,514	Bank Transfer			
(508)			Sub-Saharan Africa	Governance	-58,205	Return			
(509)			Sub-Saharan Africa	Governance	-4,232	Return			
(510)			Sub-Saharan Africa	Governance	2,251	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(511)			Sub-Saharan Africa	Governance	2,558	Bank Transfer			
(512)			Sub-Saharan Africa	Governance	4,232	Bank Transfer			
(513)			Sub-Saharan Africa	Governance	10,036	Bank Transfer			
(514)			Sub-Saharan Africa	Governance	10,346	Bank Transfer			
(515)			Sub-Saharan Africa	Governance	12,020	Bank Transfer			
(516)			Sub-Saharan Africa	Governance	12,398	Bank Transfer			
(517)			Sub-Saharan Africa	Governance	12,508	Bank Transfer			
(518)			Sub-Saharan Africa	Governance	18,720	Bank Transfer			
(519)			Sub-Saharan Africa	Governance	20,598	Bank Transfer			
(520)			Sub-Saharan Africa	Governance	21,870	Bank Transfer			
(521)			Sub-Saharan Africa	Governance	24,940	Bank Transfer			
(522)			Sub-Saharan Africa	Governance	27,866	Bank Transfer			
(523)			Sub-Saharan Africa	Governance	27,917	Bank Transfer			
(524)			Sub-Saharan Africa	Governance	36,543	Bank Transfer			
(525)			Sub-Saharan Africa	Governance	43,806	Bank Transfer			
(526)			Sub-Saharan Africa	Governance	58,205	Bank Transfer			
(527)			Sub-Saharan Africa	Governance	58,205	Bank Transfer			
(528)			Sub-Saharan Africa	Governance	63,950	Bank Transfer			
(529)			Sub-Saharan Africa	Governance	107,084	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(530)			Sub-Saharan Africa	Health	506	Bank Transfer			
(531)			Sub-Saharan Africa	Health	945	Bank Transfer			
(532)			Sub-Saharan Africa	Health	1,426	Bank Transfer			
(533)			Sub-Saharan Africa	Health	2,359	Bank Transfer			
(534)			Sub-Saharan Africa	Health	3,265	Bank Transfer			
(535)			Sub-Saharan Africa	Health	3,890	Bank Transfer			
(536)			Sub-Saharan Africa	Health	3,890	Bank Transfer			
(537)			Sub-Saharan Africa	Health	4,988	Bank Transfer			
(538)			Sub-Saharan Africa	Health	5,577	Bank Transfer			
(539)			Sub-Saharan Africa	Health	7,497	Bank Transfer			
(540)			Sub-Saharan Africa	Health	10,582	Bank Transfer			
(541)			Sub-Saharan Africa	Health	10,629	Bank Transfer			
(542)			Sub-Saharan Africa	Health	11,691	Bank Transfer			
(543)			Sub-Saharan Africa	Health	13,201	Bank Transfer			
(544)			Sub-Saharan Africa	Health	14,965	Bank Transfer			
(545)			Sub-Saharan Africa	Health	32,499	Bank Transfer			
(546)			Sub-Saharan Africa	Health	33,013	Bank Transfer			
(547)			Sub-Saharan Africa	Health	37,281	Bank Transfer			
(548)			Sub-Saharan Africa	Health	66,139	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(549)			Sub-Saharan Africa	Health	83,744	Bank Transfer			
(550)			Sub-Saharan Africa	GBV Programs	-7,378	Return			
(551)			Sub-Saharan Africa	GBV Programs	-694	Return			
(552)			Sub-Saharan Africa	GBV Programs	8,125	Bank Transfer			
(553)			Sub-Saharan Africa	GBV Programs	10,118	Bank Transfer			
(554)			Sub-Saharan Africa	GBV Programs	10,156	Bank Transfer			
(555)			Sub-Saharan Africa	GBV Programs	10,287	Bank Transfer			
(556)			Sub-Saharan Africa	GBV Programs	14,022	Bank Transfer			
(557)			Sub-Saharan Africa	GBV Programs	14,143	Bank Transfer			
(558)			Sub-Saharan Africa	GBV Programs	14,635	Bank Transfer			
(559)			Sub-Saharan Africa	GBV Programs	15,280	Bank Transfer			
(560)			Sub-Saharan Africa	GBV Programs	16,231	Bank Transfer			
(561)			Sub-Saharan Africa	GBV Programs	24,346	Bank Transfer			
(562)			Sub-Saharan Africa	GBV Programs	26,121	Bank Transfer			
(563)			Sub-Saharan Africa	GBV Programs	26,383	Bank Transfer			
(564)			Sub-Saharan Africa	GBV Programs	29,898	Bank Transfer			
(565)			Sub-Saharan Africa	GBV Programs	32,276	Bank Transfer			
(566)			Sub-Saharan Africa	GBV Programs	36,480	Bank Transfer			
(567)			Sub-Saharan Africa	GBV Programs	39,570	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(568)			Sub-Saharan Africa	GBV Programs	46,265	Bank Transfer			
(569)			Sub-Saharan Africa	GBV Programs	70,614	Bank Transfer			
(570)			Sub-Saharan Africa	GBV Programs	104,311	Bank Transfer			
(571)			Sub-Saharan Africa	GBV Programs	109,558	Bank Transfer			
(572)			Sub-Saharan Africa	GBV Programs	170,629	Bank Transfer			
(573)			Sub-Saharan Africa	GBV Programs	171,340	Bank Transfer			
(574)			Europe (Including Iceland and	Community Development	1,586	Bank Transfer			
(575)			Europe (Including Iceland and	Community Development	27,515	Bank Transfer			
(576)			Europe (Including Iceland and	Community Development	9,991	Bank Transfer			
(577)			Europe (Including Iceland and	Community Development	104,884	Bank Transfer			
(578)			Europe (Including Iceland and	Community Development	31,354	Bank Transfer			
(579)			Europe (Including Iceland and	Community Development	93,173	Bank Transfer			
(580)			Europe (Including Iceland and	Community Development	71,826	Bank Transfer			
(581)			Europe (Including Iceland and	Community Development	9,648	Bank Transfer			
(582)			Europe (Including Iceland and	Community Development	70,712	Bank Transfer			
(583)			Europe (Including Iceland and	Community Development	37,408	Bank Transfer			
(584)			Europe (Including Iceland and	Community Development	128,117	Bank Transfer			
(585)			Europe (Including Iceland and	Community Development	6,700	Bank Transfer			
(586)			Europe (Including Iceland and	Community Development	152,801	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(587)			Europe (Including Iceland and	Community Development	15,000	Bank Transfer			
(588)			Europe (Including Iceland and	Community Development	15,000	Bank Transfer			
(589)			Europe (Including Iceland and	Community Development	20,065	Bank Transfer			
(590)			Europe (Including Iceland and	Protection	-11,159	Return			
(591)			Europe (Including Iceland and	Protection	18,969	Bank Transfer			
(592)			Europe (Including Iceland and	Protection	7,717	Bank Transfer			
(593)			Europe (Including Iceland and	Protection	7,456	Bank Transfer			
(594)			Europe (Including Iceland and	Protection	314,750	Bank Transfer			
(595)			Europe (Including Iceland and	Protection	15,000	Bank Transfer			
(596)			Europe (Including Iceland and	Protection	11,159	Bank Transfer			
(597)			Sub-Saharan Africa	GBV Programs	3,000	Bank Transfer			
(598)			Sub-Saharan Africa	Community Development	7,500	Bank Transfer			
(599)			East Asia and the Pacific	Community Development	135,000	Bank Transfer			
(600)			East Asia and the Pacific	Community Development	346	Bank Transfer			
(601)			East Asia and the Pacific	Community Development	997	Bank Transfer			
(602)			East Asia and the Pacific	Community Development	372	Bank Transfer			
(603)			East Asia and the Pacific	Community Development	224	Bank Transfer			
(604)			East Asia and the Pacific	Community Development	554	Bank Transfer			
(605)			East Asia and the Pacific	Community Development	493	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(606)			Sub-Saharan Africa	Community Development	1,000	Bank Transfer			
(607)			Europe (Including Iceland and	Protection	5,200	Bank Transfer			
(608)			Europe (Including Iceland and	Protection	2,700	Bank Transfer			
(609)			Europe (Including Iceland and	Protection	2,600	Bank Transfer			
(610)			Europe (Including Iceland and	Protection	7,800	Bank Transfer			
(611)			Europe (Including Iceland and	Protection	2,600	Bank Transfer			
(612)			Europe (Including Iceland and	Protection	2,600	Bank Transfer			
(613)			Europe (Including Iceland and	Protection	2,700	Bank Transfer			
(614)			Europe (Including Iceland and	Protection	2,600	Bank Transfer			
(615)			Europe (Including Iceland and	Protection	2,600	Bank Transfer			
(616)			Europe (Including Iceland and	Protection	2,600	Bank Transfer			
(617)			Europe (Including Iceland and	Protection	2,600	Bank Transfer			
(618)			Europe (Including Iceland and	Protection	2,600	Bank Transfer			
(619)			Europe (Including Iceland and	Protection	2,600	Bank Transfer			
(620)			Europe (Including Iceland and	Protection	2,600	Bank Transfer			
(621)			Europe (Including Iceland and	Protection	2,600	Bank Transfer			
(622)			Europe (Including Iceland and	Protection	5,200	Bank Transfer			
(623)			Europe (Including Iceland and	Protection	2,600	Bank Transfer			
(624)			Europe (Including Iceland and	Protection	2,600	Bank Transfer			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(625)		Europe (Including Iceland and	Protection	2,600	Bank Transfer			
(626)		Europe (Including Iceland and	Protection	2,000	Bank Transfer			
(627)		Europe (Including Iceland and	Protection	2,000	Bank Transfer			
(628)		Europe (Including Iceland and	Protection	2,000	Bank Transfer			
(629)		Sub-Saharan Africa	Community Development	1,000	Bank Transfer			
(630)		Sub-Saharan Africa	Community Development	15,000	Bank Transfer			
(631)								
(632)								
(633)								
(634)								
(635)								
(636)								
(637)								
(638)								
(639)								
(640)								
(641)								
(642)								
(643)								

**Part III Continuation of Grants and Other Assistance to Individuals Outside the United States.** (Schedule F (Form 990), Part III)

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(19) SERVICE CONTRACTS	Middle East and North Africa		16,492	Bank Transfer			
(20) TRANSPORTATION	Middle East and North Africa		9,917	Bank Transfer			
(21) OTHER ASSISTANCE	Russia and the Neighboring States		56,888	Bank Transfer			
(22) CASH ASSISTANCE	South Asia		641,540	Bank Transfer			
(23) OTHER EDUCATION	South Asia		9,610,883	Bank Transfer			
(24) PROGRAM SUPPLIES & MATERIALS	South Asia		3,497,296	Bank Transfer			
(25) SERVICE CONTRACTS	South America		113,202	Bank Transfer			
(26) CASH ASSISTANCE	Sub-Saharan Africa		4,237,689	Bank Transfer			
(27) HEALTH CARE	Sub-Saharan Africa		1,549,381	Bank Transfer			
(28) OTHER ASSISTANCE	Sub-Saharan Africa		6,102	Bank Transfer			
(29) OTHER EDUCATION	Sub-Saharan Africa		4,518,080	Bank Transfer			
(30) PROGRAM SUPPLIES & MATERIALS	Sub-Saharan Africa		75,404,753	Bank Transfer	3,367,819	Program Materials	FMV
(31) SERVICE CONTRACTS	Sub-Saharan Africa		706,088	Bank Transfer			
(32) TRANSPORTATION	Sub-Saharan Africa		89,484	Bank Transfer			
(33)							
(34)							
(35)							
(36)							
(37)							

**SCHEDULE G  
(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number

13-5660870

**Part I**

**Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a  Mail solicitations
  - b  Internet and email solicitations
  - c  Phone solicitations
  - d  In-person solicitations
  - e  Solicitation of non-government grants
  - f  Solicitation of government grants
  - g  Special fundraising events
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 EIDOLON COMMUNICATION 15 MAIDEN LANE, SUITE 1401 New York	Advise marketing		X	0	319,800	0
2 C MADDEN PRODUCTIONS 10 PARK AVENUE SUITE 2E New York N	Project Planning For		X	0	84,658	0
3 DONOR SERVICES GROUP 6715 SUNSET BLVD. Los Angeles CA 900	Professional Fund Raising		X	0	39,782	0
4 PUBLIC INTEREST COMMUNICATION 7700 LEESBURG PIKE Falls Church VA 22	Professional Fund Raising		X	0	13,079	0
5 TELEFUND INC 186 Lincoln st. Suit 100 Boston MA 02111	Professional Fund Raising		X	0	36,315	0
6				0	0	0
7				0	0	0
8				0	0	0
9				0	0	0
10				0	0	0
<b>Total</b>				0	493,634	0

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, MT, NC, ND, NH, NJ  
NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		Freedom Award Dinner (event type)	Seattle Dinner (event type)	2 (total number)	(add col. (a) through col. (c))	
1	Gross receipts . . . . .	3,912,614	55,832	256,458	4,224,904	
2	Less: Contributions . . . . .	3,794,834	47,782	185,910	4,028,526	
3	Gross income (line 1 minus line 2) . . . . .	117,780	8,050	70,548	196,378	
Direct Expenses	4	Cash prizes . . . . .		0	0	
	5	Noncash prizes . . . . .		0	0	
	6	Rent/facility costs . . . . .	436,698	0	76,121	512,819
	7	Food and beverages . . . . .			0	0
	8	Entertainment . . . . .			0	0
	9	Other direct expenses . . . . .	170,087	75,381	128,590	374,058
	10	Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				( 886,877)
11	Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶				-690,499	

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
		1	Gross revenue . . . . .			
Direct Expenses	2	Cash prizes . . . . .				0
	3	Noncash prizes . . . . .				0
	4	Rent/facility costs . . . . .				0
	5	Other direct expenses . . . . .				0
	6	Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶				( 0)	
8	Net gaming income summary. Subtract line 7 from line 1, column (d) . . . . . ▶				0	

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states? . . . . .  Yes  No

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .  Yes  No

b If "Yes," explain: \_\_\_\_\_



**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

OMB No. 1545-0047

**2015**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number

13-5660870

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

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Lao Family 2325 East 12th Street Oakland, CA 94	94-3115164	501 (C) (3)	192,031	0			Youth Programs
(2) Ethiopian Community Dev. Council 901 South Highland Street Arlington, VA	52-1308986	501 (C) (3)	95,340	0			Refugee Programs
(3) Lutheran Social Services of the Na 4406 Georgia Avenue, NW Washington, DC	53-0207407	501 (C) (3)	77,121	0			Refugee Programs
(4) English Center 66 Franklin Street, Suite 220 Oakland, CA	94-2416184	501 (C) (3)	94,227	0			Youth Programs
(5) Hayward Adult School 22100 Princeton Street Hayward, CA 94	94-1693499		88,078	0			Youth Programs
(6) API Chaya P.O. Box 14047 Seattle, WA 98114	91-1674016	501 (C) (3)	71,797	0			Anti-Trafficking
(7) Youth Care 2500 NE 54th Street Seattle, WA 9810	91-0917079	501 (C) (3)	15,325	0			Anti-Trafficking
(8) Assoc. for Supportive Childcare 3910 S. Rural Road, Suite E Tempe, AZ	86-0332919	501 (C) (3)	47,059	0			Children and Youth Services
(9) World Relief 102 Sixth Avenue, NE, Suit A Glen Burien, WA	07-7078194	501 (C) (3)	74,439	0			Refugee Programs
(10) Refugee Transitions 870 Market Street, Suite 718 San Francisco, CA	94-3112099	501 (C) (3)	20,598	0			Youth Programs
(11) Arizona Board of Regents for Univer 888 N Euclid Avenue Room 510 Tucson, AZ	74-2652689		40,000	0			Refugee Programs
(12) NW JUSTICE PROJECT 510 Larson Building, 6 South 2nd st. Vancouver, WA	96-2316279	501 (C) (3)	30,000	0			Refugee Programs

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 18
- 3** Enter total number of other organizations listed in the line 1 table ▶ 6

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

Schedule I (Form 990) (2015)

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Community Integration	0	80,980	0		
2 Economic Empowerment	0	2,957,919	10,458	FMV	Materials
3 Education Programs	0	37,353	0		
4 Health programming	0	303,164	32,892	FMV	Health Supplies
5 Matching Grant Programs	0	5,159,950	1,565,930	FMV	Clothing , household items
6 Resettlement Programs	0	19,492,458	37,218	FMV	Clothing , household items
7 Youth Programs	0	154,124	0		

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

Part I Line 1 IRC maintains records of all grants made from the pre-award / due diligence phase which determines the selection of the subgrantee, the signing of the grant agreement and throughout the activity with the submission of periodic financial and programmatic reports as required per the grant agreement.

Part II Line 2 IRC has detailed required procedures for monitoring the use of funds within the US including but not limited to reviewing programmatic and financial reports, on-site monitoring, visits, phones contacts as well as capacity building as required

Part III Line Col. B Number of recipients is noted in total for the year. During 2016, in the United States, the IRC helped resettle some 13,402 newly arrived refugees and provided services to promote self-reliance and integration to many refugees, asylees and victims of human trafficking and other immigrants

# Continuation Sheet for Schedule I (Form 990)

Name of the organization <b>INTERNATIONAL RESCUE COMMITTEE, INC</b>	Employer identification number <b>13-5660870</b>
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**Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States**

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(13) <u>DODGE City Community College</u> 2501 N14th Ave. Dodge City, KS 67801	48-1164712		10,861				Refugee Programs
(14) <u>Lutheran Social Services of the SW</u> 3443 N. Central Ave. North Rotunda Phoenix,	86-0252302	501 (C) (3)	20,000				Children and Youth Services
(15) <u>Capital Area Asset Builders</u> 3516 Eastern Ave. Baltimore, MD 21224	52-2002672	501 (C) (3)	7,200				Children and Youth Services
(16) <u>Theatre of the Oppressed NYC</u> 68 Jay Street, Suite 220, Brooklyn, NY 11202	45-4815944	501 (C) (3)	14,250				Youth Programs
(17) <u>US Conf of Catholic Bishops</u> 3211 4TH STREET NE WASHINGTON, DC 20017	53-0196617	501 (C) (3)	7,500				Refugee Programs
(18) <u>Somali Family Services of San Diego</u> 6035 University Ave, Suite 6 San Diego, CA 92121	91-2065038	501 (C) (3)	7,000				Refugee Programs
(19) <u>YMCA of San Diego County</u> 3708 Ruffin Rd San Diego, CA 92123	95-2039198	501 (C) (3)	6,000				Youth Programs
(20) <u>New America Construction Inc.</u> 3144 Ingelow Street San Diego, CA 92106	41-2222088		10,193				Refugee Programs
(21) <u>WEAVE</u> 2020 Hurley Way Sacramento, CA 95811	94-2493158	501 (C) (3)	26,262				Anti-Trafficking
(22) <u>Manpower</u> 1855 1st Ave Suite 300 San Diego, CA 92101	95-3109779		13,500				Employment Programs
(23) <u>Peralta Colleges Foundation/Alameda Office</u> 333 East 8th Street Oakland, CA 94606	23-7091547	501 (C) (3)	31,281				Youth Programs
(24) <u>Public Consulting Group</u> 148 State Street Boston, MA 02109	04-2942913		14,525				Refugee Programs
(25) _____							
(26) _____							
(27) _____							
(28) _____							
(29) _____							

# Continuation Sheet for Schedule I (Form 990)

Name of the organization INTERNATIONAL RESCUE COMMITTEE, INC	Employer identification number 13-5660870
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**Part III** Continuation of Grants and Other Assistance to Individuals in the United States

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
immigration Service	0	18,198	0		
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2015**

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.

Department of the Treasury  
Internal Revenue Service

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**Open to Public  
Inspection**

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number

13-5660870

**Part I Questions Regarding Compensation**

		Yes	No
<b>1a</b>	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.		
<input type="checkbox"/>	First-class or charter travel		
<input type="checkbox"/>	Travel for companions		
<input type="checkbox"/>	Tax indemnification and gross-up payments		
<input type="checkbox"/>	Discretionary spending account		
<input type="checkbox"/>	Housing allowance or residence for personal use		
<input type="checkbox"/>	Payments for business use of personal residence		
<input type="checkbox"/>	Health or social club dues or initiation fees		
<input type="checkbox"/>	Personal services (e.g., maid, chauffeur, chef)		
<b>b</b>	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 explain . . . . .		
<b>2</b>	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 in line 1a? . . . . .		
<b>3</b>	Indicate which, if any, of the following the filing organization used to establish the compensation of the 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.		
<input checked="" type="checkbox"/>	Compensation committee		
<input type="checkbox"/>	Independent compensation consultant		
<input type="checkbox"/>	Form 990 of other organizations		
<input type="checkbox"/>	Written employment contract		
<input checked="" type="checkbox"/>	Compensation survey or study		
<input checked="" type="checkbox"/>	Approval by the board or compensation committee		
<b>4</b>	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:		
<b>a</b>	Receive a severance payment or change-of-control payment? . . . . .	X	
<b>b</b>	Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . .	X	
<b>c</b>	Participate in, or receive payment from, an equity-based compensation arrangement? . . . . .		X
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.		
<b>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.</b>			
<b>5</b>	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:		
<b>a</b>	The organization? . . . . .		X
<b>b</b>	Any related organization? . . . . .		X
	If "Yes" to line 5a or 5b, describe in Part III.		
<b>6</b>	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
<b>a</b>	The organization? . . . . .		X
<b>b</b>	Any related organization? . . . . .		X
	If "Yes" on line 6a or 6b, describe in Part III.		
<b>7</b>	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III		X
<b>8</b>	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 in Part III . . . . .		X
<b>9</b>	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in 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 are not 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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC 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
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 David Miliband Dir/CEO/Pres	(i)	671,749			41,925	21,657	735,331	
	(ii)						0	
2 Carrie Simon General Counsel	(i)	237,635			25,999	8,202	271,836	
	(ii)						0	
3 Ciaran Donnelly SVP International Programs	(i)	282,934			24,968	8,404	316,306	
	(ii)						0	
4 Jennifer Sime SVP US Programs	(i)	239,369			13,835	8,291	261,495	
	(ii)						0	
5 Amanda Seller Senior Vice President, Revenue	(i)	260,347			13,118	6,501	279,966	
	(ii)						0	
6 Madlin Sadler Senior Vice President, Operations &	(i)	325,641			18,633	21,203	365,477	
	(ii)						0	
7 Waxman, Sharon Vice President, Public Policy	(i)	307,534			18,665	1,882	328,081	
	(ii)						0	
8 Jodi Nelson Senior Vice President Policy & Practi	(i)	294,611			21,647	1,842	318,100	
	(ii)						0	
9 Mania Boyder Vice President Development	(i)	284,485			23,293	21,220	328,998	
	(ii)						0	
10 Colleen Ryan Vice President Strategic Communica	(i)	263,647			23,997	8,313	295,957	
	(ii)						0	
11 Mary Jane Jamar Chief Human Resources Officer	(i)	256,814			25,829	8,334	290,977	
	(ii)						0	
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

**Part III Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Part I Line 3 The IRC Board of Directors established a Board Compensation Committee in Nov. 2004. Pursuant to IRC Bylaws and Board Governance Guidelines, Committee members are nominated by the Nominating and Governance Committee and presented to the full Board for approval at the Annual Meetings. All Compensation Committee members are independent, uncompensated members of the Board. The Compensation Committee meets annually to review the performance of and determine compensation for the President & CEO. In addition, the Committee reviews compensation for the Senior executive team (which includes Officers and Key Employees). An experienced, independent consultant is engaged to compile comparative compensation data, compensation ranges and related matters. The consultant also presents to the Committee a review of Intermediate Sanctions rules, any changes in those rules in the preceding year and the manner in which the Compensation Committee needs to proceed in order to be compliant. The consultant makes his presentation verbally, in person, to the Committee, as well as in the form of a written report. The Compensation Committee maintains a record of its review and determinations.

Part I Line 4a \$123,735 severance was paid to Sharon Waxman

Part II Line 4b During the reporting period IRC made 457f contribution of \$49,985 for David Miliband

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2015**

**Open To Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization <b>INTERNATIONAL RESCUE COMMITTEE, INC</b>	Employer identification number <b>13-5660870</b>
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**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .	X		1,499,166	FMV, RECEIPTS
6 Cars and other vehicles . . . . .	X	18	54,000	FMV
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .				
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .	X		3,331,312	FMV, Pre-forma invoices
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( Fuel and Parts ) . . . . .	X		680,849	FMV , Performa Invoices
26 Other ▶ ( Emergency Progra ) . . . . .	X		1,102,735	FMV , Performa Invoices
27 Other ▶ ( Education Material ) . . . . .	X		151,680	FMV , Performa Invoices
28 Other ▶ ( Water and Sanitatio ) . . . . .	X		7,600	FMV , Performa Invoices

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .	<b>29</b>
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		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .	<b>30a</b>		X
b If "Yes," describe the arrangement in Part II.			
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .	<b>31</b>	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .	<b>32a</b>		X
b If "Yes," describe in Part II.			
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

**Part II Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Part I Line 5, 20, 25-28 The number of contributions is difficult to confirm as the same donor will make various contributions throughout the project in tranches as needed to support their grant funded program implementation and the individual contributions are received at the field level in our various country offices. The detailed documentation is held at the different office locations throughout the 34+ countries we work in including our US program offices. The number of individual contributions of goods would easily number in the 100s of thousands of items. HQ does not track to that level of detail but has all of the supporting documentation and invoices utilized for valuation and recording in the US and country locations.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Employer identification number

INTERNATIONAL RESCUE COMMITTEE, INC

13-5660870

Form 990, Part III, Line 4d: Program Service Expenses: 86,251,514, Grants and allocations:

1,029,074, Revenue: 86,251,514 Through a network of 28 offices across the country, the IRCs

US Programs (USP) department creates opportunities for refugees and other vulnerable

immigrants to survive and thrive in America. USP serves more than 40,000 individuals each year

through a diverse portfolio of programs aimed at five core outcomes: Health, Safety, Economic

Wellbeing, Education, and Power. Staff and volunteers work together to resettle newly arrived

refugees, facilitating food, shelter, and other basic needs during the pivotal first months in

the US. To promote self-reliance over the long term, the IRC also offers English language

classes, vocational training, and job placement activities, as well as specialized services

for survivors of torture, human trafficking, and other forms of trauma. The IRC provides

comprehensive legal services to help refugees and other immigrants become permanent residents

and US citizens, and supports a variety of programs designed to help new arrivals integrate

into their adopted communities.

Form 990, Part III, Line 4d: Program Service Expenses: 46,356,675, Grants and allocations:

2,743,204, Revenue: 46,356,675 IRC employs technical advisors and expert staff in the

following sectors: Economic Recovery and Development; Health Program; Measurement, Governance;

Education; Violence Prevention and Response, and Research, Evaluation and Learning. In

addition to the technical units, IRC maintains regional units to provide logistical and

administrative support to country programs. In FY 2016, these regions were West Africa, East

Africa, Great lakes, Asia, Middle East and Europe.

IRC also employs an Emergency Response Team that is always on standby to deploy to a crisis

within 72 hours, whether they are launching new relief efforts or lending support to IRC teams

already on the ground.

Form 990, Part III, Line 4d: Program Service Expenses: 18,248,989, Grants and allocations:

1,222,410, Revenue: 18,248,989 In FY16, IRC also worked in Europe. IRC is supporting

thousands Syrian refugees through our program in Greece. In the Balkans, IRC leads

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

Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization INTERNATIONAL RESCUE COMMITTEE, INC	Employer identification number 13-5660870
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partnerships to assist refugees in transit to safety.

Form 990, Part I, Line 5: IRC's global workforce is approximately 10,000 employees. The 1,769 only represents staff on the NY Headquarters payroll covering HQ, US office locations and international expatriate employees. The remaining approximate 8,200 staff are national staff paid in-country via local payroll systems and pay into local tax systems of their respective country locations.

Form 990, Part V, Line 2A: IRC's global workforce is approximately 10,000 employees. The 1,769 only represents staff on the NY Headquarters payroll covering HQ, US office locations and international expatriate employees. The remaining approximate 8,200 staff are national staff paid in-country via local payroll systems and pay into local tax systems of their respective country locations.

Form 990, Part VI, Section B, Line 11b: The form 990 and all related schedules are prepared by Associate Controller. The legal team is consulted for relevant disclosures and the 990 is reviewed with the CFO and CEO. The Form 990 is distributed electronically to all members of the Board of Directors prior to filing electronically by the due date.

Form 990, Part VI, Section B, Line 12c: In accordance with IRCs Conflict of Interest Policy, any director, officer, member of a committee or employee who is in a position to approve or influence IRC policies or actions has a duty to disclose any actual or possible conflict of interest to IRCs General Counsel. All other employees have a duty to report any actual or possible conflict of interest to their supervisor. After the actual or possible conflict is disclosed, an interested person would have the opportunity to make a presentation at a Board or appropriate Committee meeting so that they, the Board, or the Committee may consider the facts of the situation and determine whether IRC can obtain a more advantageous transaction or arrangement with reasonable efforts from a person or entity that would not give rise to a conflict of interest. If a more advantageous transaction or arrangement is not reasonably attainable, the Board or Committee shall determine by majority vote of disinterested directors whether the transaction or arrangement is in IRCs best interest and for its own benefit and whether the transaction is fair and reasonable to the IRC, and shall make its decision as to

Name of the organization INTERNATIONAL RESCUE COMMITTEE, INC	Employer identification number 13-5660870
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whether to enter into the transaction or arrangement in conformity with such determination.

All other employees have a duty to report any actual or possible conflict of interest to their

supervisor. After the actual or possible conflict is disclosed, an interested person would

have the opportunity to make a presentation at a Board or appropriate Committee meeting so

that they, the Board, or the Committee may consider the facts of the situation and determine

whether IRC can obtain or more advantageous transaction or arrangement with reasonable efforts

from a person or entity that would not give rise to a conflict of interest. If a more

advantageous transaction or arrangement is not reasonably attainable, the Board or Committee

shall determine by majority vote of disinterested directors whether the transaction or

arrangement is in IRCs best interest and for its own benefit and whether the transaction is

fair and reasonable to the IRC, and shall make its decision as to whether to enter into the

transaction or arrangement in conformity with such determination.

Form 990, Part VI, Section B, Line 15: The IRC Board of Directors established a Board

Compensation Committee in Nov. 2004. Pursuant to IRC Bylaws and Board Governance Guidelines,

Committee members are nominated by the Nominating and Governance Committee and presented to

the full Board for approval at the Annual Meetings. All Compensation Committee members are

independent, uncompensated members of the Board. The Compensation Committee meets annually to

review the performance of and determine compensation for the President & CEO. In addition, the

Committee reviews compensation for the Senior executive team (which includes Officers and Key

Employees). An experienced, independent consultant is engaged to compile comparative

compensation data, compensation ranges and related matters. The consultant also presents to

the Committee a review of Intermediate Sanctions rules, any changes in those rules in the

preceding year and the manner in which the Compensation Committee needs to proceed in order to

be compliant. The consultant makes his presentation verbally, in person, to the Committee, as

well as in the form of a written report. The Compensation Committee maintains a record of its

review and determinations.

Form 990, Part VI, Section C, Line 19: A copy of IRCs latest financial statements are

available to the public on its website, [www.rescue.org](http://www.rescue.org). In addition, IRCs governing documents,

Name of the organization

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INTERNATIONAL RESCUE COMMITTEE, INC

13-5660870

conflict of interest policy and financial statements may be obtained by contacting IRC

directly in writing at International Rescue Committee, Inc. 122 East 42nd Street, NY, NY

10168, or by phone at 1-877-REFUGEE. In addition, IRCs financial reports are available by

contacting any of the state agencies that collect copies of our financial statements with our

charitable solicitation registrations.

Form 990, Part XI, Line 5: In the Reconciliation of Net Assets, the amount on Line 5 Other

changes represents net unrealized gains on investments related to our endowment portfolio not

captured in the required reporting for the 990 as well as the change in value of split

interest agreements.

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2015**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- ▶ Attach to Form 990.
- ▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number

13-5660870

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) -----					
(2) -----					
(3) -----					
(4) -----					
(5) -----					
(6) -----					

**Part II Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) IRC's Center For Economic Opportunity inc 45-3686069 122E 42nd Street New York, NY 10168	Humanitarian Aid	NY	501(c)3	7	N/A		X
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							

**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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) -----												
(2) -----												
(3) -----												
(4) -----												
(5) -----												
(6) -----												
(7) -----												

**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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) -----									
(2) -----									
(3) -----									
(4) -----									
(5) -----									
(6) -----									
(7) -----									

**Part V Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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

	Yes	No
<b>1</b> 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?		
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity . . . . .		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	X	
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .		X
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .		X
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .		X
<b>f</b> Dividends from related organization(s) . . . . .		X
<b>g</b> Sale of assets to related organization(s) . . . . .		X
<b>h</b> Purchase of assets from related organization(s) . . . . .		X
<b>i</b> Exchange of assets with related organization(s) . . . . .		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .		X
<b>o</b> Sharing of paid employees with related organization(s) . . . . .		X
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .		X
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	X	
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .		X
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .		X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) IRC's Center For Economic Opportunity Inc	b	42,920	CASH
(2) IRC's Center For Economic Opportunity Inc	q	47,383	INVOICE
(3) IRC's Center For Economic Opportunity Inc	d	300,000	CASH
(4)			
(5)			
(6)			

**Part VI 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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) .....													
(2) .....													
(3) .....													
(4) .....													
(5) .....													
(6) .....													
(7) .....													
(8) .....													
(9) .....													
(10) .....													
(11) .....													
(12) .....													
(13) .....													
(14) .....													
(15) .....													
(16) .....													

**Part V, Line 4b (990) - Authority over a Financial Account in a Foreign Country**

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)? If "Yes," enter the name of the foreign country:	
<b>1</b>	Afghanistan
<b>2</b>	Central African Republic
<b>3</b>	Cameroon
<b>4</b>	Chad
<b>5</b>	Congo (Kinshasa)
<b>6</b>	Ethiopia
<b>7</b>	Haiti
<b>8</b>	Iraq
<b>9</b>	Pakistan
<b>10</b>	Rwanda
<b>11</b>	Tanzania
<b>12</b>	Thailand
<b>13</b>	Kenya
<b>14</b>	Turkey
<b>15</b>	Uganda
<b>16</b>	Zimbabwe
<b>17</b>	Niger
<b>18</b>	Burundi
<b>19</b>	Burma
<b>20</b>	Cote D'Ivoire (Ivory Coast)
<b>21</b>	Greece
<b>22</b>	Sierra Leone
<b>23</b>	South Sudan
<b>24</b>	Yemen (Aden)
<b>25</b>	Jordan
<b>26</b>	Lebanon
<b>27</b>	Liberia
<b>28</b>	Mali
<b>29</b>	Nigeria
<b>30</b>	Switzerland
<b>31</b>	Malaysia
<b>32</b>	Russia
<b>33</b>	Serbia
<b>34</b>	
<b>35</b>	

**Part VI, Line 17 (990) - States with Which a Copy of this Form 990 is Required to be Filed**

<input type="checkbox"/>	Armed Forces the Americas	<input checked="" type="checkbox"/>	Louisiana	<input type="checkbox"/>	Palau
<input type="checkbox"/>	Armed Forces Europe	<input checked="" type="checkbox"/>	Massachusetts	<input checked="" type="checkbox"/>	Rhode Island
<input checked="" type="checkbox"/>	Alaska	<input checked="" type="checkbox"/>	Maryland	<input checked="" type="checkbox"/>	South Carolina
<input checked="" type="checkbox"/>	Alabama	<input checked="" type="checkbox"/>	Maine	<input checked="" type="checkbox"/>	South Dakota
<input type="checkbox"/>	Armed Forces Pacific	<input type="checkbox"/>	Marshall Islands	<input checked="" type="checkbox"/>	Tennessee
<input checked="" type="checkbox"/>	Arkansas	<input checked="" type="checkbox"/>	Michigan	<input type="checkbox"/>	Texas
<input type="checkbox"/>	American Samoa	<input checked="" type="checkbox"/>	Minnesota	<input checked="" type="checkbox"/>	Utah
<input type="checkbox"/>	Arizona	<input checked="" type="checkbox"/>	Missouri	<input checked="" type="checkbox"/>	Virginia
<input checked="" type="checkbox"/>	California	<input type="checkbox"/>	Commonwealth of the Northern Mariana Islands	<input type="checkbox"/>	U.S. Virgin Islands
<input checked="" type="checkbox"/>	Colorado	<input checked="" type="checkbox"/>	Mississippi	<input type="checkbox"/>	Vermont
<input checked="" type="checkbox"/>	Connecticut	<input type="checkbox"/>	Montana	<input checked="" type="checkbox"/>	Washington
<input checked="" type="checkbox"/>	District of Columbia	<input checked="" type="checkbox"/>	North Carolina	<input checked="" type="checkbox"/>	Wisconsin
<input type="checkbox"/>	Delaware	<input checked="" type="checkbox"/>	North Dakota	<input checked="" type="checkbox"/>	West Virginia
<input checked="" type="checkbox"/>	Florida	<input type="checkbox"/>	Nebraska	<input type="checkbox"/>	Wyoming
<input type="checkbox"/>	Federated States of Micronesia	<input checked="" type="checkbox"/>	New Hampshire		
<input checked="" type="checkbox"/>	Georgia	<input checked="" type="checkbox"/>	New Jersey		
<input type="checkbox"/>	Guam	<input checked="" type="checkbox"/>	New Mexico		
<input checked="" type="checkbox"/>	Hawaii	<input type="checkbox"/>	Nevada		
<input type="checkbox"/>	Iowa	<input checked="" type="checkbox"/>	New York		
<input type="checkbox"/>	Idaho	<input checked="" type="checkbox"/>	Ohio		
<input checked="" type="checkbox"/>	Illinois	<input checked="" type="checkbox"/>	Oklahoma		
<input type="checkbox"/>	Indiana	<input checked="" type="checkbox"/>	Oregon		
<input checked="" type="checkbox"/>	Kansas	<input checked="" type="checkbox"/>	Pennsylvania		
<input checked="" type="checkbox"/>	Kentucky	<input type="checkbox"/>	Puerto Rico		